

Meeting of:	<b>Healthy Living and Social Care Scrutiny Committee</b>
Date of Meeting:	<b>Tuesday, 13 June 2023</b>
Relevant Scrutiny Committee:	Healthy Living and Social Care
Report Title:	Joint Area Plan
Purpose of Report:	This report seeks the Committee's views of the Joint Area Plan
Report Owner:	Lance Carver, Director of Social Services
Responsible Officer:	Cath Doman, Director, Integrated Health and Social Care
Elected Member and Officer Consultation:	The Cabinet Member for Social Care and Health and the Cabinet Member for Public Sector Housing and Tenant Engagement have both been involved in the development of the Joint Area Plan.
Policy Framework:	Social Services and Well-being (Wales) Act 1998.
<p>Executive Summary:</p> <ul style="list-style-type: none"> <li>The Cardiff and Vale of Glamorgan Regional Partnership Board (RPB) has a statutory obligation via the Social Services and Well-being (Wales) Act 2014 to prepare a Joint Area Plan (JAP) (attached at Appendix 1) in response to requirements identified within the region's Population Needs Assessment. The JAP must provide a description of the range and level of services proposed to be provided or arranged in response to the care and support needs, including the support needs of carers. As a lead statutory partner, the Vale of Glamorgan Local Authority is statutorily required to collaborate with the Health Board and other local authority partners within the region to prepare, develop and assure the JAP before final approval by the RPB.</li> </ul>	

## **Recommendations**

1. That Scrutiny Committee consider the Joint Area Plan commitments.
2. That Scrutiny Committee provides feedback regarding the content of the plan prior to its approval by Cabinet.

## **Reasons for Recommendations**

1. To ensure that members are aware of the development of this regional plan.
2. To ensure that Scrutiny Committee members have the opportunity to propose any amendments or improvements to the plan prior to formal approval.

## **1. Background**

- 1.1 The Joint Area Plan (JAP) must focus on the integrated services planned in response to each core theme identified in the population assessment. As part of this, JAPs must include:
  - The actions partners will take in relation to the priority areas of integration for Regional Partnership Boards;
  - The instances and details of pooled funds to be established in response to the population assessment;
  - How services will be procured or arranged to be delivered, including by alternative delivery models;
  - Details of the preventative services that will be provided or arranged;
  - Actions being taken in relation to the provision of information, advice and assistance services; and
  - Actions required to deliver services through the medium of Welsh.
- 1.2 Each population assessment report must include specific core themes dealing with:
  - Children and young people
  - Older people
  - Health/physical disabilities
  - Mental Health
  - Sensory Impairment
  - Carers who need support
  - Violence against women, domestic abuse and sexual violence
- 1.3 The JAP should set out the services planned by local authorities and local health boards in response to the core themes above. Services planned in respect of the violence against women, domestic abuse and sexual violence core theme will be

included within joint local strategies required by the Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015. That strategy can be referenced within the Joint Area Plan.

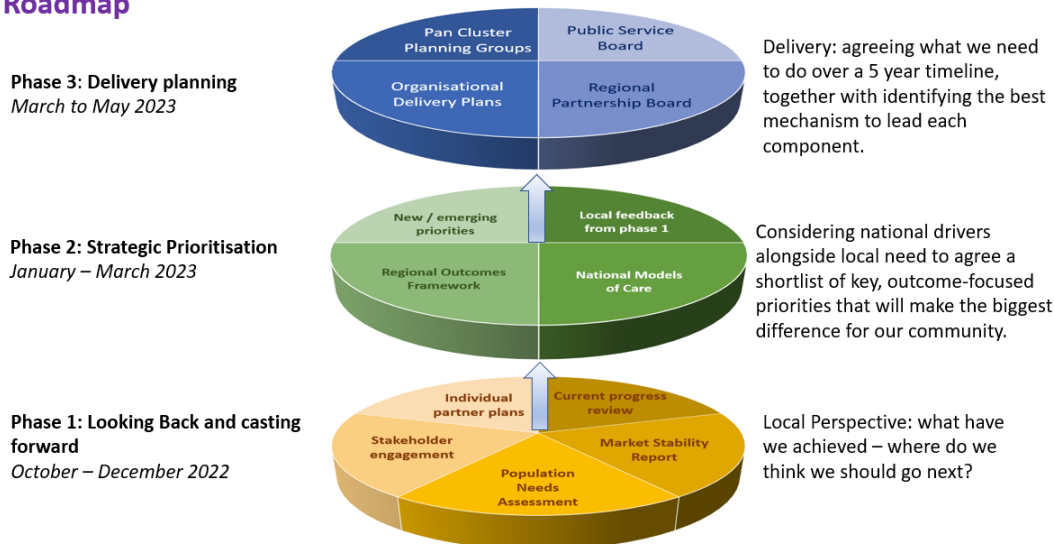
**1.4** The final draft of the Joint Area Plan is being shared with the following groups for consideration and assurance before final approval is sought at the next meeting of the Regional Partnership Board in July 2023:

- Vale of Glamorgan Public Service Board
- Cardiff Public Service Board
- Vale of Glamorgan Local Authority Social Care and Health Scrutiny Committee
- Cardiff Council Scrutiny Committees
- Cardiff Pan Cluster Planning Group
- Vale of Glamorgan Pan Cluster Planning Group
- Cardiff and Vale UHB Board Meeting

## 2. Key Issues for Consideration

**2.1** The Joint Area Plan for 2023 to 2028 has been developed through a three phased programme of engagement with a wide range of over 500 stakeholders including c.40 from the Vale of Glamorgan Local Authority at operational, strategic and cabinet level.

### Area Plan 2023 – 2028 Roadmap



**2.2** This has culminated in the identification of the following key commitments where partners consider that combined, focused effort might make the biggest impact for our priority population groups.

## Making a Difference – Our Commitments for 2028

### We will:

- Work together to keep our babies, children and young people healthy, well and safe from harm
- Deliver a Nurturing, Empowering, Safe and Trusted approach to emotional wellbeing and mental health
- Improve the support offer for babies, children and young people with complex needs.

People with **Learning Disabilities** will have the ability to live as independently as possible in their local community.

We will support all people in our region to have the opportunity to live positive, independent lives without being affected by **violence and abuse**.

**Unpaid Carers** will be recognised for the vital contribution they make to the community and the people they care for and enabled to do the things they want to alongside caring.

We will build a co-produced plan with stakeholders and people with **mental health needs** that enables people to do the things that matter most to them.

With people with **physical and sensory disabilities** we will find out more about their needs, experiences and priorities, developing and delivering changes that enable people to live as independently as possible.

**Neurodiversity services** will have strengthened provision with a focus on providing the right support at the right time.

People will be able to **age well** at home with more opportunities for wellbeing and independence. Services will reflect the diversity of people as they age well.

**People with Dementia** will be supported to live well and do the things they need to and enjoy in their communities.

- 2.3** Detailed delivery plans are being established to ensure progression towards these commitments, identifying the key enabling support required to achieve stated goals whilst also ensuring that effective links are made with activities already being delivered by the partner organisations.
- 2.4** Outcomes monitoring will be a fundamental part of this work, using a Regional Outcomes Framework to demonstrate progress towards the priorities that the Health Board has agreed previously with partners. Together, these plans will form a fundamental building block within the array of Health Board strategic plans with a focus upon developing home-based, integrated models of care.

### 3. How do proposals evidence the Five Ways of Working and contribute to our Well-being Objectives?

- 3.1** The Joint Area Plan is based upon the same principles as those listed within the Five Ways of Working, specifically:

**Long Term** – focused upon delivery over the next 5 years;

**Prevention** – many commitments are aimed at improving health and wellbeing with the aim of reducing long term demand on health and social care;

**Collaboration and Integration** – agreeing a list of commitments which are shared by partners across the region where greater impact can be achieved by working together;

**Involvement** – the plan is based upon engagement with a range of stakeholders from across the region.

## **4. Climate Change and Nature Implications**

- 4.1** Decarbonisation is a shared commitment for all partners within the RPB and delivery plans will be required to take this into account where appropriate.

## **5. Resources and Legal Considerations**

### **Financial**

- 5.1** Delivery of these commitments will require use of additional funding and / or re-distribution of existing funding streams across the partner organisations within the region. The Regional Integration Fund is already contributing towards delivery of these commitments with annual review to ensure it focuses on the right things. The Regional Integration Fund reduces over the period of the JAP, and will require an increased contribution from partners to continue funding of projects which are assessed as appropriate to move into business-as-usual services and associated funding.
- 5.2** The final outturn figure for the Regional Integration Fund in 22/23 for the Vale of Glamorgan was £3,648,245, which is 18.8% of the fund. The figures for 23/24 will be in the region of the 22/23 funding.
- 5.3** Across the next five years, this Plan can be used to test whether existing core funding is being focused in the most helpful way to achieve these shared commitments.

### **Employment**

- 5.4** The development of our workforce will be fundamental to ensuring delivery of these outcomes. Workforce considerations are being collated as part of the delivery planning process to facilitate the creation of a shared workforce development plan.

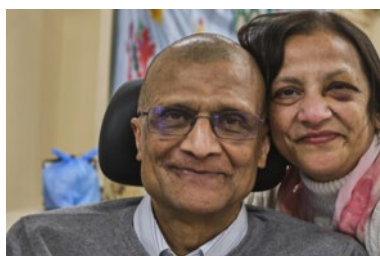
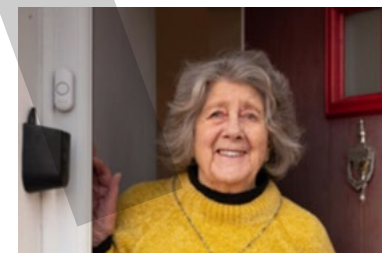
### **Legal (Including Equalities)**

- 5.5** Working to develop the Joint Area Plan with partners is a statutory obligation for the Local Authority. Any legal implications from delivery of specific commitments will be addressed within the delivery plans for each priority area.

## **6. Background Papers**

None

# Cardiff and Vale Regional Partnership Board Joint Area Plan 2023-28



**C3SC**  
Cardiff Third Sector Council  
Cyngor Trydydd Sector Caerdydd

 **GIG Cymru NHS Wales**  
Bwrdd Iechyd Prifysgol Caerdydd a'r Fro  
Cardiff and Vale University Health Board

  
Empowering people. Inspiring excellence. Strengthening communities.  
Grymuso pobl. Ysbrydoli rhagoriaeth. Cryhau cymunedau.

**VALE of GLAMORGAN**  
  
BRO MORGANNWG

 **GIG Cymru NHS Wales**  
Ymddiriedolaeth GIG  
Gwasanaethau Ambiwylans Cymru  
Welsh Ambulance Services  
NHS Trust

 **BWRDD PARTNERIAETH RHANBARTHOL CAERDYDD A'R FRO**  
CARDIFF & VALE REGIONAL PARTNERSHIP BOARD



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# Contents

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<b>1. Summary</b>	<b>3</b>
<i>An overview of our commitments</i>	3
<b>2. Introduction</b>	<b>4</b>
<i>The background to developing our Joint Area Plan</i>	4
<b>3. Our commitments: Starting Well</b>	<b>14</b>
<i>The current context and our new commitments for children and young people</i>	15
<b>4. Living Well. The current context and our new commitments for:</b>	<b>16</b>
<i>People with learning disabilities</i>	17
<i>Unpaid carers</i>	18
<i>Reducing violence against women, domestic abuse and sexual violence</i>	19
<i>People with physical and sensory impairment</i>	20
<i>People with Neurodiversity</i>	21
<i>People with mental health needs</i>	22
<b>5. Ageing Well</b>	<b>23</b>
<i>Ageing Well @Home</i>	24
<i>The current context and our new commitments for ageing well including people with Dementia</i>	25
<b>6. Strategic Enablers</b>	<b>26</b>
<i>An overview of our enabler programmes</i>	26
<b>7. Appendix 1</b>	<b>27</b>
<i>Models of Care: overview of how our commitments fit with the Models of Care defined by Welsh Government in its Regional Integration Fund Guidance</i>	27

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# Making a Difference – Our Commitments for 2028

## We will:

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**People with Dementia** will be supported to live well and do the things they need to and enjoy in their communities.



# Introduction

**The RPB's Joint Area Plan is the place where partners come together to set out their plans to improve the health and wellbeing of the local population. The strategic direction set out in this plan specifically relates to the joint activities we are committing to as a partnership, building on a long history of collaboration.**

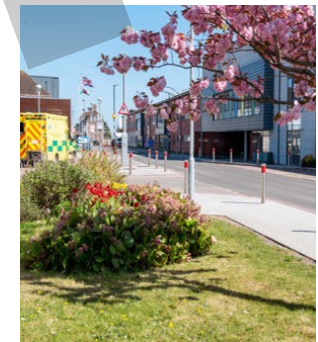
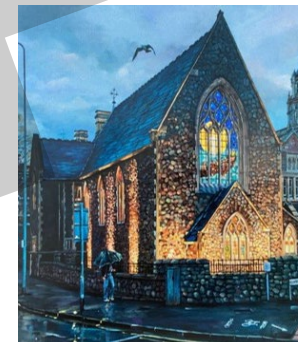
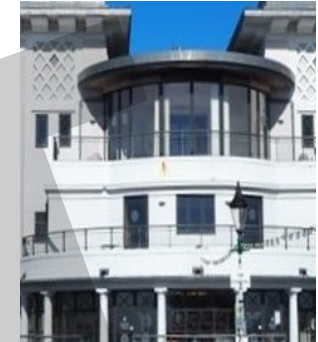
Our plan sits in the context of a vast array of activities being delivered by the partner organisations, from multi-billion pound capital developments to improve housing and communities being delivered by our local authorities, to world-leading medical interventions by the Health Board, to a vast array of services and activities provided by voluntary groups and organisations that support more people to live well within their community. These provide the building blocks and foundations for the additional work we are doing together to develop integrated models of care.

Our Joint Area Plan draws on those plans and enhances them in areas that can only be addressed by working together.

The RPB will also produce a Strategic Capital Plan later this year, setting out the long-term plans across each of the partners to ensure there are homes and places in communities that enable people to stay well and independent, and when they need it, receive care and support closer to home.

We are working together in very challenging and uncertain times. There are significant workforce challenges and a highly challenging financial position across all partners. We know that having a sufficient resources, including an appropriately trained and qualified workforce is fundamental to the success of this plan. This is why our focus on what matters to people and the outcomes they value is so important.

This plan is ambitious but realistic and recognises the very real challenges being experienced by local people, our staff and services. We are committed to improving and joining up support and services for healthy lives, wellbeing and independence.



# Working with the Public Services Boards

The RPB's Joint Area Plan sits alongside the Wellbeing Plans from [Cardiff Public Services Board \(PSB\)](#) and [Vale of Glamorgan Public Services Board](#) to provide a whole system approach to improving the health and wellbeing of the population of Cardiff and the Vale of Glamorgan.

The RPB's plan supports the health and wellbeing of the population through improvements to health and care services specifically, PSB plans aim to improve environmental, social, economic and cultural well-being, which have a direct influence on the health and wellbeing of the local population.

This Area Plan and the Wellbeing Plans are dependent on organisations working in partnership towards common ambitions. Joint working on housing solutions, homelessness, substance misuse, immunisations, and addressing violence against women, domestic abuse and sexual violence and safeguarding is led by the PSBs, hence limited reference to these important areas within this plan.

## The Vale of Glamorgan PSB's Wellbeing Plan's priorities include:

- Working with the most deprived communities
- Becoming an age-friendly Vale
- A more active and healthier Vale

## Cardiff PSB's Wellbeing Plan vision aligns to and supports the RPB's ambitions, including:

- A great place to grow up
- A great place to grow older
- Supporting people out of poverty

## In order to achieve this vision, emphasis is placed on:

- Supporting children's health and education, with particular focus on children who live in poverty or are at risk of Adverse Childhood Experiences
- Making provision for new homes, support for people who are homeless, affordable, accessible and suitable housing and jobs, and ensuring people have the skills they need
- Preventing ill health and addressing inequity and inequality and the impact of social factors on health
- Addressing the impact of COVID-19 restrictions, for instance on take up childhood immunisation, screening services as well as physical activity and healthy eating
- Continuing to ensure that services work together and are fully integrated



## What is the Regional Partnership Board?

**Our Regional Partnership Board (RPB) includes representatives from Cardiff Council, Vale of Glamorgan Council, Cardiff and Vale University Health Board, Welsh Ambulance Service NHS Trust, housing, Third & Independent sectors and carer representatives.**

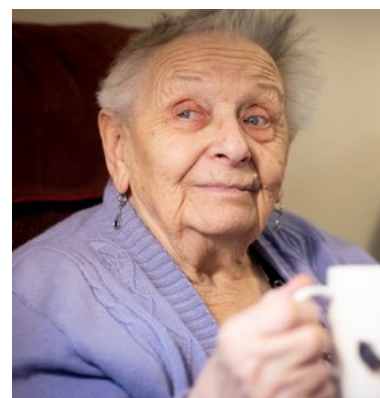
We work with our population, recognising its diversity, and colleagues from across our region to improve the health and wellbeing of everyone living in Cardiff and the Vale of Glamorgan. We share resources, skills and services to ensure people can access the right service, in the right place, at the right time so, you can do the things that matter most to you, at all times of life.

## What is a Joint Area Plan?

**This is the RPB's plan for the next five years. It builds on what is already happening across the partnership and sets out how together, we will address the gaps. The plan has been jointly prepared by Cardiff Council, Vale of Glamorgan Council and Cardiff and Vale University Health Board under the direction of the Regional Partnership Board.**

Every 5 years, we review our plans, partner priorities, emerging innovation and Welsh Government policy. We look in detail at our Population Needs Analysis and Market Stability Report. We share these with as wide a range of people as possible to identify how, by working together, we can make the biggest difference for people in Cardiff and the Vale of Glamorgan.

The RPB is committed to achieving the outcomes for people described within our Regional Outcomes Framework. This plan sets out how we will achieve them.





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# Our priorities

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**As a partnership, we work together to support people when they need it at every stage in their lives. Our Area Plan is organised around three life-stage themes:**

**Starting Well: giving every child the best start in life.**

**Living Well: supporting people to live well and do the things that matter to them.**

**Ageing Well: enabling people to stay independent as they become older.**

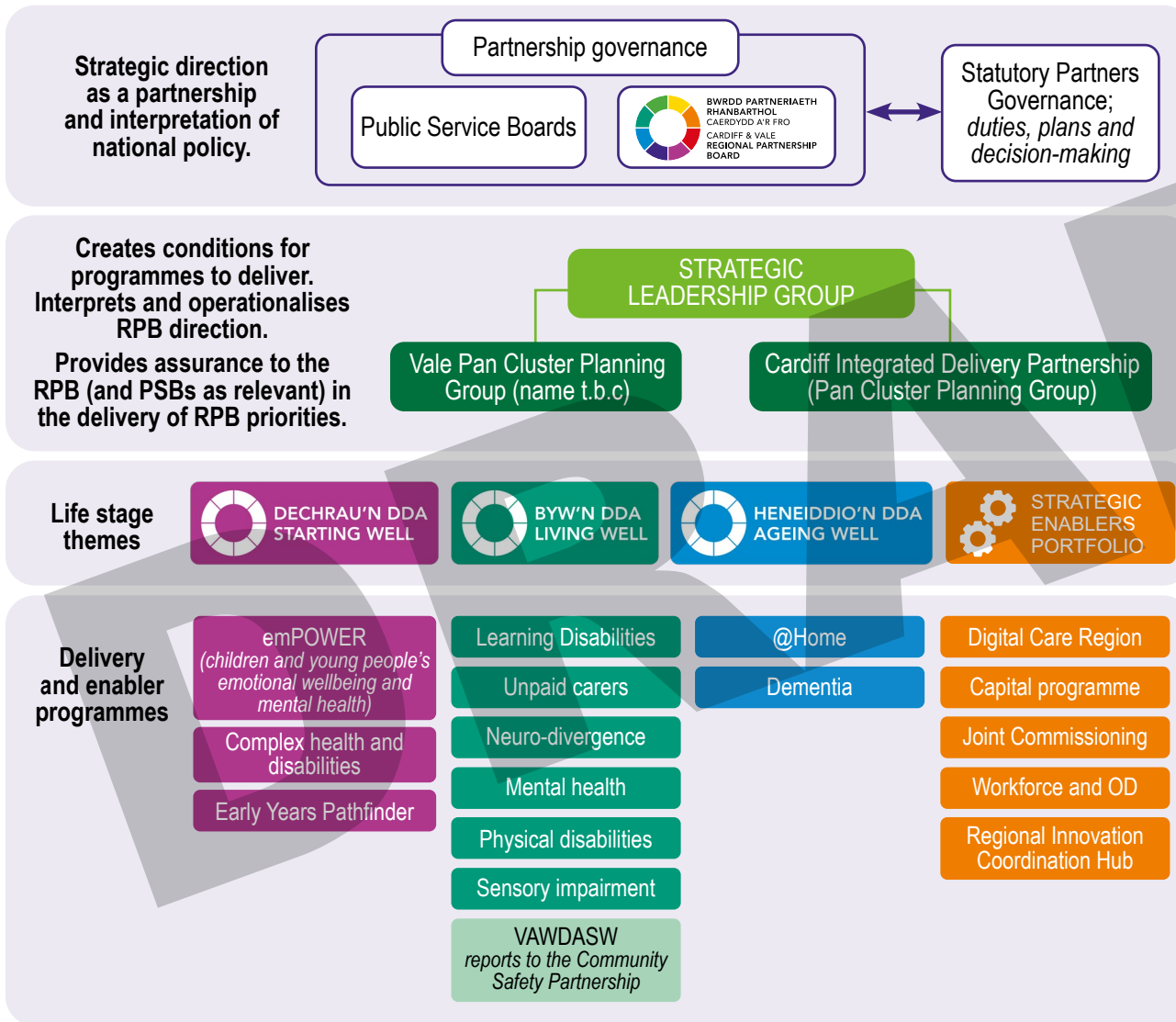
Our delivery programmes are based on achieving better outcomes for people in each life stage.

We also work together on the enablers of joint working, such as joined up care records, technology-enabled care, how we use our buildings to enable community-based support.

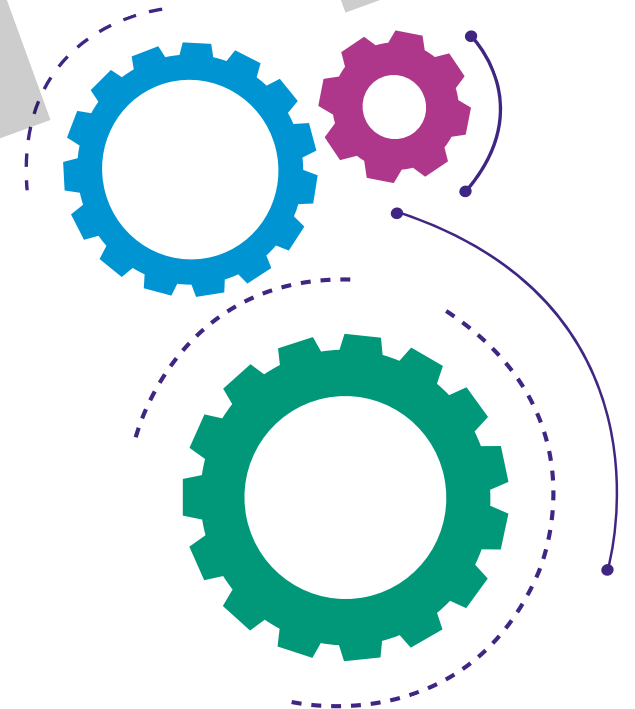
Across the partnership, we are the largest employer across the Region, and it is our people who make these plans a reality. Our aim is that people don't experience gaps between services or professionals, just the right support from the right person at the right time.



# Our structure



Whilst section 169 of the Social Services and Well-being (Wales) Act 2014, places the duty on the 'relevant bodies' (the statutory organisations in the partnership) to produce a Joint Area Plan, the third sector's role is vital and must not be underestimated. Without their reach into our rich and diverse communities, supporting local people and providing person-centred support and advice many of the RPB's ambitions would be unattainable.



# Our policy environment

This plan is supported by and set in the context of a wide range of national legislation and policy:



**DECHRAU'N DDA  
STARTING WELL**

[The NEST Framework - NHS Wales Health Collaborative](#)

[Equality Act 2010](#)

[No Wrong Door: bringing services together to meet children's needs - Children's Commissioner for Wales](#)

[Review of Neurodevelopmental Services Programme Board policy statement: Removing profit from the care of looked after children](#)

[National Trauma Framework for Wales](#)

[Healthy Child Wales programme 2020](#)

[Third Sector Scheme](#)



**BYW'N DDA  
LIVING WELL**

[VAWDASV: Strategy 2022-2026 \(Wales\)](#)

[Learning Disability - Improving Lives Programme \(2018\)](#)

[Equality Act 2010](#)

[Together for Mental Health](#)

[Talk to Me 2](#)

[6 Goals for Urgent and Emergency Care](#)

[National Strategy for Unpaid Carers: Delivery Plan](#)

[Third Sector Scheme](#)

[Autism Code of Practice](#)



**HENEIDDIO'N DDA  
AGEING WELL**

[Age Friendly Wales](#)

[Equality Act 2010](#)

[6 Goals for Urgent and Emergency Care](#)

[Further Faster Integrated Community Care Services for Wales](#)

[National Strategy for Unpaid Carers: Delivery Plan](#)

[Dementia Pathway of Standards](#)

[Third Sector Scheme](#)

[Wellbeing of Future Generations \(Wales\) Act 2015](#)

[Social Services and Well-being \(Wales\) Act 2014](#)

[National Strategic Programme for Primary Care and National Models of Care \(See Appendix 1\)](#)



# Our partnership environment

The RPB operates in the context of the strategies, plans and day-to-day work of all our partners. We add value when we bring partners together to address issues or deliver change which no one organisation can address alone.

These are the **principles** that will guide our work together over the next 5 years:

**Prevention:** promoting early intervention that prolongs good health and well-being for all age groups whilst reducing reliance on long term service provision

**Care closer to home:** providing care and support as close to people's homes as possible;

**Inclusion and diversity:** ensure that people are involved in planned their care, and that we work to reach out to all people from across our diverse communities;

**Sustainability:** ensuring the long-term viability of our environment through carbon reduction is a fundamental necessity and we are committed to ensuring that our plans reflect this need.

**Social value:** ensuring that the things we do have the best possible impact on our well-being.

## Wider Regional Priorities

[Cardiff & Vale Regional Safeguarding Boards: Tackling Exploitation Strategy](#)

[Cardiff and Vale of Glamorgan Joint Commissioning Strategy for Learning Disabilities 2019-2024](#)

[Public Service Board Well-being Plan 2023-2028 \(Cardiff / Vale of Glamorgan\)](#)

[No Wrong Door: Bringing Services together to meet](#)

[Children's Needs – Children's Commissioner for Wales](#)

[6 Goals for Urgent and Emergency Care](#)

[Cardiff and Vale of Glamorgan Regional VAWDASW Strategy 2023-2028](#)

## Cardiff Partnership Environment

[Children's Services Directorate Delivery Plans](#)

[Children's Services Strategy](#)

[Adults Housing and Communities Directorate Delivery Plan](#)

[Equality & Inclusion Strategy 2020-2024](#)

[Wellbeing Report](#)

[Cardiff Ageing Well Strategy](#)

[Social Services Annual Report](#)

[Cardiff Third Sector Council](#)

**Working together for everyone in our region**

## Vale of Glamorgan Partnership Environment

[Delivery Plan for Children's Services](#)

[Children's Services Strategy](#)

[Local Authority Adult Services Plan](#)

[Disability Equality Scheme](#)

[Service Plans](#)

[Social Services Annual Report](#)

[Glamorgan Voluntary Service](#)

## Health Partnership Environment

[Integrated Medium Term Plan](#)

[Strategic Equality Plan: Caring about Inclusion 2020-24](#)

[Shaping Our Future Wellbeing](#)

[Beyond the Call](#)

[Cardiff and Vale Dementia Strategy 2018-28](#)

[Shaping our Future Public Health Plan](#)

[Suicide and Self Harm Prevention Strategy](#)

[Inclusion Strategy](#)

[Healthcare Standards for Wales](#)

[Cardiff and Vale Action for Mental Health](#)

# Engaging to build the plan

Our plan is the outcome of many conversations which have taken place across the region with a range of staff and people who live and work in our region.

## Our Population Needs Assessment included:

661 responses from the general public to our online survey

35 responses from children and young people

96 responses from residents within HMP Cardiff

118 responses from professionals and service providers.

We also held 23 focus groups with a total of 132 people.

Development of our [Market Stability Report](#) involved conversations with c.60 colleagues including private providers from across the region.

In developing the Area Plan we have worked with over 500 people (Councillors, staff and members of the public) and held 700 conversations to develop our Area Plan.

We will continue these conversations throughout the lifetime of this Area Plan to refine and review our commitments regularly and ensure we're progressing in the right direction.

## You can view examples of our Public Ideas Boards here:

[Children and Young People](#)

[People with Dementia](#)



# Our shared outcomes

The RPB is committed to achieving the outcomes for people described within our [Regional Outcomes Framework](#). This plan sets out how we will achieve them.



In this document, the following symbols indicate where each of our commitments relate to these shared outcomes:



Increasing time for people to live their lives



Increased living well in their own home and community



Improved environment that enables people's choices



More empowered workforce



Better start for children and young people



People get a safe response when in urgent need



Decreased avoidable harm or mortality



Reduced wasted system resource

Click [here](#) to view a short film about our [Regional Outcomes Framework](#).





## Section 2: Our Commitments

In this section we set out our commitments to our population linked to our life stage programmes:



These commitments are linked to the shared priorities and direction of all our partners and so we have also provided an overview of the existing partnership activity that is already in place across our region and within local cluster areas for further context.



# Existing work across the partnership



## Cardiff Council with Partners

### Children's Services Strategy '2023-26:

the right support, from the right person at the right time, in the right place and at the lowest safe level of intervention, enabling them to remain with family where it is safe for them to do so.

#### Including:

- Becoming a child-friendly city by Summer '23
- Parenting and Family Support Services
- Early Help and Cardiff Family Advice and Support
- Flying Start (Outreach)
- Support for young carers

#### Place:

- Accommodation Strategy (including the Right Place model)
- Reunification Framework
- In house fostering
- Family Drug and Alcohol Court

#### People:

- Workforce Action Plan
- New Operating Model
- Locality working

#### Practice:

- Safeguarding Adolescents From Exploitation (SAFE) model
- Trauma Informed Practice Interventions Hub
- Safe & Together Model

## Together, as partners

Increasing joined up provision in the region for children and young people with complex needs:

### The EmPower Programme

- Accommodation and psychologically-informed care and support for young people with complex emotional and mental health needs
- Implementing the NEST Framework
- 'No Wrong Door'
- Enfys: therapeutic support for care experienced children

### Strategic developments

- Exploring the feasibility of co-location of various Health Board and LA services at Michaelston.

### The Early Years Programme

- Pathways to support for Neurodiversity
- Perinatal support for Mental Health

## Vale of Glamorgan Council with Partners

### Corporate strategy for children who need care and support '19 - '23

#### 'Delivering our ambitions together'

- Supporting families to stay together
- Manage risk confidently and provide support at the 'edge of care'
- Provide and commission a flexible and affordable mix of high-quality placements
- Develop effective plans in partnership with children and their families.

#### Including:

- Adolescent Resource Centre ARC
- Intake and Family Support Team
- Provider partnerships in accommodation
- Therapeutic support for CLA
- FACT (Team Around Family)
- Vale Parenting Service
- Vale Youth Wellbeing Service
- Vale Family Support Services
- Families First Advice Line
- Flying Start Outreach

## Cardiff and Vale University Health Board with Partners

Sustainable, cluster-based community services; Resilient and high performing unscheduled care system; Continued transformation of mental health and learning disability services focusing on a community, home first model; Continued improvements in delivery of emotional well-being services for young people from Single Point of Access to specialist care & treatment.

# Our commitment to babies, children and young people



## Over the next 5 years we will:

- Work together to keep our babies, children and young people safe from harm
- Deliver a Nurturing, Empowering, Safe and Trusted approach to emotional wellbeing and mental health
- Improve the support offer for babies, children and young people with co-occurring complex needs



## This is important because:

- The first 1000 days are critical to future life chances
- c. 118,000 of our population are between 0 and 19 years old
- The 2011 Census identified 1,579 young carers in Cardiff and the Vale of Glamorgan, but this is known to be an underestimation
- The pandemic had a significant negative impact on mental health and well-being
- We see increased paediatric emergency attendances for mental health disorders and strain on specialist services such as Child and Adolescent Mental Health Services (CAMHS) crisis teams
- The developmental trauma caused by Adverse Childhood Experiences (ACEs) will have an impact on adult mental health. Addressing these issues will reduce likely demand for services in the long term

## We will deliver:

- Preventative approaches in education, health and support
- Service delivery improvements aligned to NEST
- Our plans for No Wrong Door
- Accessible information to children and young people
- Enough provision in our region to meet care and support needs
- A Joint Recovery Service for emotional wellbeing and mental health by Summer '23 including increased accommodation in Cardiff
- Better transition between services
- Integrated care model for co-occurring complex needs
- A joint approach to commissioning and funding complex care and support
- Therapeutic support for care experienced children such as Enfy's and ARC
- A Trauma Informed Approach where appropriate

## With the following results:

### **Children and young people will:**

- Feel involved with service changes
- Receive the support they need at the time they need it
- Have early responses that are needs led and trauma informed, not diagnosis dependent
- Experience a joined-up approach across services
- Early intervention and prevention across a child's journey starting within the first 1000 days and beyond
- Strengthen data and information that supports better partnership planning

### **This will mean**

- Increased involvement of young people in service development
- Reduced waiting times for assessment
- Reduced unscheduled admissions to hospital
- Reduced length of hospital stay
- Increased local placements
- Joint service delivery
- Increased access to community support



# Existing work across the partnership



## Cardiff Council with Partners

- Hubs with a focus on well-being
- Joined up working between Day Centres and Hubs
- Community Engagement and Wellbeing Teams
- First Point of Contact and Independent Living Services
- Community Living Schemes
- Equality and Inclusion Strategy
- Liberty Protection Safeguards
- Carer Assessments and support

## Together, as partners

- A variety of services to support people with learning disabilities to maintain their independence in their local communities, for instance Supported Living Services, Complex Needs Day Services and use of technology to support independent Living
- Charter for Unpaid Carers
- Providing the Carers Gateway
- Integrated Autism Service
- Local delivery of the new Autism Code
- Ensure our work links to, supports and enhances that of the Public Service Boards and their Wellbeing Plans
- Recognise and support Area Planning Board on substance misuse and the ongoing work that is meeting the health needs of particularly vulnerable homeless citizens

## Vale of Glamorgan Council with Partners

- Shared Lives (Adult Placement Service)
- Wellbeing Matters Service
- Day Services and Respite Care
- Community Drug and Alcohol Team
- Adult Advocacy
- Housing solutions and telecare
- Direct payments and 'Your Choice' Scheme
- Carer assessments and support
- 'Smart' Houses for people with learning disabilities

**Cardiff and Vale  
University Health Board  
with Partners**

Sustainable, cluster-based community services; Resilient and high performing unscheduled care system; Continued transformation of mental health and learning disability services focusing on a community, home first model

# Our commitment to people with learning disabilities



## Over the next 5 years we will:

Develop integrated support services enabling people with learning disabilities to live as independently as possible in their local community



## This is important because:

In 2017, an estimated 7,081 adults in Cardiff have a learning disability, of whom 1,175 received support from Learning Disability Services (equal to 78% of people with a moderate or severe learning disability).

For the Vale of Glamorgan and estimated 2,400 adults have a learning disability, of whom 448 received support from Learning Disability Services. This represents 90% of those with a moderate or severe learning disability.

People with learning disability are more likely to have or develop other co-morbidities and experience greater health inequalities.

These people are also more likely to have been dis-advantaged by COVID-19 and the cost-of-living crisis.

## We will deliver:

- Improved access to annual health checks and wider primary health choices
- Smooth transitions between services and support
- Improved access to information on local services
- Improved services for people to live closer to home with the right support and maximise their independence
- Access to work, activities and volunteering (employment opportunities)
- Improved information to young people and carers on moving from child to adult services
- Increased the number of Adult Placement Carers
- Increased the availability of technology to support independent living
- Ensured people with learning disabilities and Down Syndrome have equitable access to dementia screening
- Develop outcome-based commissioning for service delivery

## With the following results:

### **People with learning disabilities will:**

- Be involved in service developments
- Receive the support they need at the time they need it
- Have equitable access to health care and support
- Be able to live independently and have equal access to their community
- Have access to information and technology to support their independence
- Have increased access to work, volunteering and day opportunities
- Have increased access to GP and other health checks

### **This will mean:**

- Increased number of people accessing health check with GP (collected already)
- Increase in access to local offer (complex needs day service data)

# Our commitment to unpaid carers



## Over the next 5 years we will:

Identify and recognise unpaid carers for the vital contribution they make to the community and the people they care for, and in doing so enable unpaid carers to have a life alongside caring.



## This is important because:

Unpaid carers play a vital role in our communities by providing care and support to people who would otherwise require health or social care intervention.

The economic value of the contribution made by unpaid carers in Wales is estimated at £8.1 billion a year. It is estimated that there are over 50,000 unpaid carers across Cardiff and the Vale of Glamorgan.

### **Our Unpaid Carers Partnership exists to:**

- Increase awareness of the role of unpaid carers
- Increase identification of unpaid carers
- Improve services and access to support for unpaid carers
- Improve the wellbeing of unpaid carers and therefore reduce the need for crisis or long-term intervention

### **We support the region to deliver against the priorities of the National Strategy for Unpaid Carers in Wales:**

- Identifying and valuing unpaid carers
- Providing information, advice and assistance
- Supporting life alongside caring
- Supporting unpaid carers in education and the workplace

## We will deliver:

- The Unpaid Carers Charter
- Continued delivery of the Carers Gateway
- Specific support for Young Carers
- Strengthened the role of carers in discharge planning
- Improved carers assessment process
- Inclusion of unpaid carers needs across all our partnership commitments

### **We will also:**

- Build mental health and wellbeing support for unpaid carers
- Improve physical and emotional support for young carers to reduce the risk of adverse childhood experience (ACE)
- Reduce waiting times for specialist services
- Early access to the right advice and support
- Improve flexible planned and emergency respite for unpaid carers including young carers
- Support employment alongside and after caring,
- Support employers to understand the role of unpaid carers and ensure they are supported and maintained in employment
- Update and publicise the carers directory

## With the following results:

### **Carers will:**

- Be recognised for the vital role they play in providing care and support
- Understand their rights
- Have access to support that enables them to carry out their role
- Have access to breaks and respite
- Be supported to have fulfilling lives that work alongside their caring role
- Play a fundamental role in planning care and support for the person they look after

### **This will mean:**

- Increased numbers of carers assessments
- Increased number of recognised unpaid carers
- Increased numbers of unpaid carers accessing information and support

# Our commitment to reducing Violence Against Women, Domestic Abuse and Sexual Violence



## Over the next 5 years we will:

Ensure that people who live, work, study in and visit Cardiff and the Vale of Glamorgan can live positive, independent lives without being affected by violence and abuse.



## This is important because:

Violence against women, domestic abuse and sexual violence (VAWDASV) has far-reaching consequences for families, children, communities and society.

Whilst anyone (women, men, children and young people) can experience VAWDASV, it is women and girls who are disproportionately affected by domestic abuse, rape and sexual violence, sexual exploitation, including through the sex industry, modern day slavery, forced marriage, honour-based abuse, female genital mutilation, child sexual exploitation and abuse, stalking and sexual harassment.

This can happen in any relationship regardless of sex, age, ethnicity, gender, sexuality, disability, religion or belief, income, class, geography or lifestyle.

## We will deliver:

- Improved awareness amongst survivors, bystanders, and service providers of the recognition and management of VAWDASV
- Deliver the required elements of the National Training Framework to all relevant staff
- Improved multi-agency responses by increasing understanding of risk factors & lived experiences
- Monitoring of evolving trends in all forms of abuse & ensure services anticipate changes in demand
- Continued investment in specialist support services and strengthen availability of provision
- Increased practitioner understanding of perpetrator behaviour

## We will build on this by:

- Ensuring the lived experiences of survivors informs ongoing service development and delivery
- Maintaining and extending a range of interventions to target known and potential perpetrators of abuse
- Challenging victim blaming attitudes to restore survivors' confidence & ability to access services
- Prioritising intervention for children & young people to prevent issues from arising or escalating

## With the following results:

- Strong partnership working to deliver timely and effective victim-centred service responses
- Accountability for abusive behaviour remains with the perpetrator(s)
- A range of opportunities to break the cycle of all forms of victimisation are available to perpetrators through education, early intervention and behaviour changing programmes
- Children and young people are informed and understand the importance of consent and healthy relationships
- Communities are supported to understand the nature of VAWDASV and the action(s) that they can take to challenge
- Specialist, high quality, needs-led, strength-based, trauma-informed and person-centred services are available to survivors of VAWDASV in the region
- Survivors can access therapeutic support to rebuild their lives free from abuse

# Our commitment to people with physical and sensory impairment



## Over the next 5 years we will:

Work with people with physical and sensory disabilities to find out more about their needs, experiences and priorities, developing and delivering changes that enable people to do the things that matter most to them.



## This is important because:

Around 1 in 5 people in Cardiff and the Vale of Glamorgan have a disability. We recognise the importance of coproducing our regional plans to ensure they reflect the priorities and experiences of disabled people.

The Welsh Government published its 'Action on Disability: The Right to Independent Living Framework and Action Plan' in 2019 stating their commitment to disabled people fulfilling their potential and achieving their ambitions and dreams in line with the 'Social Model of Disability' and recognises the persistence of poverty and exclusion.

## We will deliver:

- During 23/24 we will co-produce a plan for an integrated delivery model for people with physical and/ or sensory impairment

### We are committed to:

- Services that are integrated and easily accessible if support from more than one agency is needed
- Enabling people to work or engage in day opportunities
- Focusing on 'what matters' to people
- The social model of disability
- Developing peer support and advocacy
- Prevention and early intervention and support
- Therapy, accommodation, assistive technology and support that enables independence
- Ensuring communication, support and services are accessible

By April '24 we will update the Joint Area Plan to include the co-produced delivery plan.

## With the following results:

- A delivery plan co-produced with people with physical and sensory impairment and stakeholders, setting out the changes we are committing to and measures that will demonstrate impact





# Our commitment to people with neurodiversity



## Over the next 5 years we will:

Strengthen provision of neuro-diversity services with a focus on providing the right support at the right time.



## This is important because:

There are over 6,000 people with a diagnosis of Autism in the region. Not all autistic people will have been diagnosed.

The number of people aged 18-64 with an autism spectrum disorder is expected to increase by about 13% (425 people) between 2017 and 2035, with the largest increases being seen in people aged 35-44 those aged 75+.

Across Wales, negative mental health impacts were particularly significant for autistic people during the pandemic, specifically depression and anxiety.

Welsh Government is expanding the RPB's focus from Autism to include all Neurodiversity issues.

## We will deliver:

### **We will build on our existing service provision by:**

- Strengthening support to ensure the right support is available at the right time
- Improving ADHD service provision
- Transitional arrangements which enable a seamless journey for young people into adulthood
- Meeting the new national guidance on neurodiversity requirements
- Improving timeliness and access to assessment and diagnosis
- Implementing the Code of Practice

## With the following results:

### **People with neurodiversity will have:**

- Timely access to assessment, diagnosis, care and support
- Access to a skilled, multi-agency service
- Stronger links with Children and Young People's provision to maximise prevention and early intervention opportunities and promote better transitions into adult life

### **This will mean**

- Reduced waiting times for access to assessment
- Increased access to support
- Increased practitioner awareness
- Increased well-being of adults



# Our commitment to people with mental health needs



## Over the next 5 years we will:

Work with people with mental health needs and other stakeholders to find out more about their experiences and priorities, then develop and deliver services that support people to have good mental health.



## This is important because:

A recent ONS survey recorded that 9% of our regional population had a self-reported mental disorder.

This is likely to have increased in the aftermath of COVID-19.

Welsh Government's cornerstone strategies for mental health – Talk to Me 2 and Together for Mental Health have reached their conclusion and new strategies are under development.

Locally, we recognise specific concerns relating to the impact of increases in the cost of living, homelessness, social isolation along with the needs of a range of people recognised as priority groups within other sections of this Area Plan.

We need to ensure that enabling good mental health is a key priority for all priority groups.

## We will deliver:

During 23/24 we will review previous strategies and action plans, working with people to identify and deliver key priorities for development over the next 5 years.

### *This is likely to include:*

- Identifying new ways of building and retaining our workforce
- Delivery of the psychological support wherever it is required
- Delivering trauma informed care in all our mental health provision
- Making best use of technology and social prescribing
- Pathways for people with emotionally unstable personality disorders
- Development in adult fostering as an alternative to hospital and placement
- Developing effective links with groups across our community with a high prevalence of mental health disorders
- Include needs-based mental health support within integrated cluster-based services
- Effective transition arrangements for young people with a mental health need/serious emotional distress when entering adult services (18+)

## With the following results:

A delivery plan co-produced with people with mental health needs and other stakeholders setting out setting out the changes we are committing to and measures that will demonstrate impact.



# Existing work across the partnership



## Cardiff Council with Partners

### Ageing Well Strategy

- Well-being focused Hubs / Day Centres
- Age and Dementia Friendly City
- Community Engagement and Wellbeing Teams
- Community Occupational Therapy
- First Point of Contact and Independent Living Services
- Community Resource Teams,
- The Pink Army
- Technological solutions, aids and adaptations
- Community Living Schemes
- Trusted assessment across services

## Together, as partners

### @Home Programme

- (supporting delivery of the Six Goals for Urgent and Emergency Care and Strategic Programme for Primary Care and Ageing Well Strategy and national Further Faster mandate)
- Access
- Intermediate Care
- Locality model / cluster-based working
- Health and Well-being Centres

### Dementia Programme

- A series of regional approaches to support learning and development of dementia care services

### Falls prevention

- [Keeping Me Well](#)
- Technology-enabled care and alternative responses to ambulance call outs, that are focused on a proportionate response that keeps people safely at home

## Vale of Glamorgan Council with Partners

### Vale Alliance

- Shared Lives (Adult Placements)
- Vale Community Resource Service
- Wellbeing Matters Service
- Day Services and Respite Care
- Community Drug and Alcohol Team
- Council-run care homes
- Adult Advocacy
- Housing solutions and telecare
- Direct payments and 'Your Choice' Scheme
- Trusted assessment across services

Cardiff and Vale  
University Health Board  
with Partners

Sustainable, cluster-based community services;  
Resilient and high performing unscheduled care system;  
Continued transformation of mental health services focusing on a home first model

# Our commitment to ageing well @Home



## Over the next 5 years we will:

Establish integrated, locality-based, health & care services focused on meeting and improving the health and wellbeing of the local population.



## This is important because:

The number of people aged 65 to 84 years is expected to increase from c. 70,000 people to c. 93,000 people between 2019 and 2039 - a rise from 14% to 16.2% of the total population.

Life expectancy is known to be associated with socio-economic status: in 2017, there was a life expectancy gap of 8.6 years for males and 6.6 years for females, between the most and least disadvantaged areas in Cardiff and the Vale of Glamorgan (PNA 2022).

'A Healthier Wales: our Plan for Health and Social Care' sets out a clear vision for a 'whole system approach to health and social care' focusing on supporting health and wellbeing and preventing illness.

### The @Home programme will deliver:

- a new model of place-based, joined-up care and support across NHS, councils, third sector services and local community networks
- designed around the person and their family/support network
- independence through care and support delivered at home or closer to home

## We will deliver:

**An Integrated Community Care Service including key enablers – an integrated workforce, integrated care records (Digital Care Region) and integrated Business Intelligence to support delivery of:**

- Coordinated access to community services – improve and streamline community referral routes through a single point of access
- Intermediate care – crisis response and step-down reablement
- MDT clusters – roll-out of the learning and development of the Southwest Cardiff Cluster model together with a co-produced new locality operating model
- Health and Wellbeing Centres – delivery of the capital assets which support joined up community services

### We will build on this by supporting:

**Mental Health** with a focus on increased prevention and support for people who may have delirium, dementia and/or depression

**Advance Care and End of life planning** - Improving services to support planning that empowers choice and reduces avoidable, multiple hospital admissions

**Cost of living** - providing effective information and support to help address the impact of rising food, energy and travel costs

**Loneliness and isolation** - increasing identification of those at risk and improving access to services which can support them

**Healthy approach to alcohol consumption** - Reducing harm from substance use, focussing on prevention and early identification of harmful alcohol use

**Falls prevention:** Extending community services to reduce risk of falls

**Tech-enabled care:** extending access to support independent living

## With the following results:

### Ageing Well @home will ensure:

- Access to a range of services which help long term wellbeing and prevent reliance upon long term health and social care
- Opportunities for home-based reablement instead of a hospital stay
- Those at greatest risk of an emergency hospital attendance will have specific plans in place to reduce that need
- Advance care planning is in place
- Access to the right accommodation, assistive technology and support to enable independence
- Safe alternatives to avoidable admissions

### This will mean:

- Reduced unplanned admissions to hospital and long-term care
- Reduced attendances at EU and crisis-led packages of social care
- Reduced hospital length of stay
- More healthy days at home
- Reduced attendances at EU and unplanned admissions because of falls

# Our commitment to people with dementia



## Over the next 5 years we will:

Raise awareness of Dementia and its determinants whilst working to develop community-based services that enable equitable and timely access to diagnosis and person-centred care.



### This is important because:

There are approximately 7,000 people living with dementia assumed to be living in our region. However, 47% of these people are currently undiagnosed.

It is anticipated that these numbers will increase by c.25% over the next 5 years.

One third of this population live in care homes whilst the others live within the community.

The condition brings with it comorbidities and complications including delirium and increased infection risk.

Our local plan is already in place that focuses on bringing dementia management closer to home.

### We will deliver:

- Compassionate communities who are aware of their risk factors through a coordinated campaign of raising awareness and an increased number of 'dementia friendly' communities
- Community-based care and support through increasing advocacy in the design of person-centred care plans and service developments
- Clear community-based pathways for timely assessment and diagnosis
- The Dementia Friendly Hospital Charter
- A regional approach to dementia care learning and development

### We will build on this by:

- Improving accommodation solutions
- Innovating research including 'technology enabled care' to support strength-based approaches in care for all ages and stages
- Building pathways for people with learning disabilities who are at higher risk of developing dementia
- Improving awareness and access to Advance Care Planning
- Hospital-based Liaison Support to create a dementia friendly journey through hospital
- Innovating flexible support for unpaid carers, including responsive respite options for different needs

### With the following results:

#### People experiencing dementia will:

- Know how to actively reduce their risk factors
- Live in local communities who are empowered to be safer places for people with dementia
- Receive an earlier diagnosis, especially in those population groups where dementia is likely to be most prevalent.
- Have specific plans in place to reduce the need for an emergency hospital attendance / admission
- Have plans in place to support their needs when a hospital visit is necessary
- Receive support to develop advance care plans where appropriate
- Receive optimised access to the right accommodation, assistive technology and support to enable independence
- Unpaid carers will have access to a wide range of help and support

#### This will mean:

- Reduced waiting times for assessment and diagnosis
- Increased numbers of dementia friendly businesses and communities
- Reduced attendances at ED
- Reduced unplanned admissions due to lack of support for unpaid carers
- Increased numbers of workforce trained through the Good Work Framework for dementia

## Section 3: Strategic Enablers

The development of new models of care cannot be achieved in isolation of a number of significant enablers; in particular how we support and co-produce with our staff across the partnership, new care models and ways of working that lead to better health and wellbeing outcomes for the population.

The following set out the main strategic enabler themes which have programmes of work directly connected to the delivery of the commitments set out in the Joint Area Plan and the successful operation of the RPB.





# Appendix 1: Models of Care

Strategic Programme	Strategic Project	Models of Care					
		Community Based Care - Prevention & Comm Co-ord	Community Based Care - Complex Care Closer to Home	Emotional Health and Wellbeing	Families Staying Together & Therapeutic Support for CEC	Home from Hospital	Accommodation Based Solutions
At Home	Access - prevention	yes	yes	yes		yes	yes
	Access - Hospital to home (incl. acceleration component)	yes	yes	yes		yes	yes
	Intermediate Care Crisis and home-based response (incl. acceleration component)	yes	yes	yes		yes	yes
	Intermediate Care - Bedded reablement					yes	
	Accelerated Clusters	yes	yes	yes		yes	
Dementia Strategy	Assessment and Diagnosis	yes	yes	yes			
	Community: Prevention and compassionate communities	yes	yes	yes		yes	
	Community: Care and support	yes	yes	yes			
	Hospital Support	yes		yes		yes	
	Dementia training and development	yes	yes	yes		yes	yes
emPower	Early intervention and prevention	yes		yes	yes		
	No wrong door	yes	yes	yes	yes	yes	
	Right Support	yes	yes	yes	yes	yes	yes
	CYP with complexity of needs - Community		yes	yes	yes	yes	yes
	CYP with complexity of need - Hospital		yes	yes	yes	yes	yes
Complex Health and Disabilities	Planning for my future	yes	yes	yes	yes	yes	yes
	Continuing care	yes	yes	yes	yes	yes	yes
	Children's learning disability services	yes	yes	yes	yes	yes	yes
Learning Disabilities	Fit for my future (incl. acceleration)	yes	yes	yes	yes		yes
	Right support, right time (incl. acceleration)	yes	yes	yes	yes		yes
	Having my own home (incl. acceleration)	yes	yes	yes	yes	yes	yes
Carers	Access	yes	yes	yes	yes	yes	
	Young Carers	yes	yes	yes	yes		
	Adult Carers	yes	yes	yes	yes	yes	
Autism	Integrated Autism Service	yes	yes	yes			

This table provides an overview of how our commitments fit with the Models of Care defined by Welsh Government in its Regional Integration Fund Guidance. Red boxes indicate the primary focus of the project whilst amber boxes indicate secondary contributions to other Models of Care. These are underpinned by a focus on prevention and supporting people to stay well in their community and environment.