



Cardiff & Vale of Glamorgan
**INTEGRATED HEALTH
& SOCIAL CARE PARTNERSHIP**

**PARTNERIAETH IECHYD
& GOFAL CYMDEITHASOL INTEGREDIG**
Caerdydd & Bro Morgannwg

Cardiff and the Vale of Glamorgan
Population Needs Assessment 2022
for the Social Services and Well-being (Wales) Act 2014



Introduction



Background

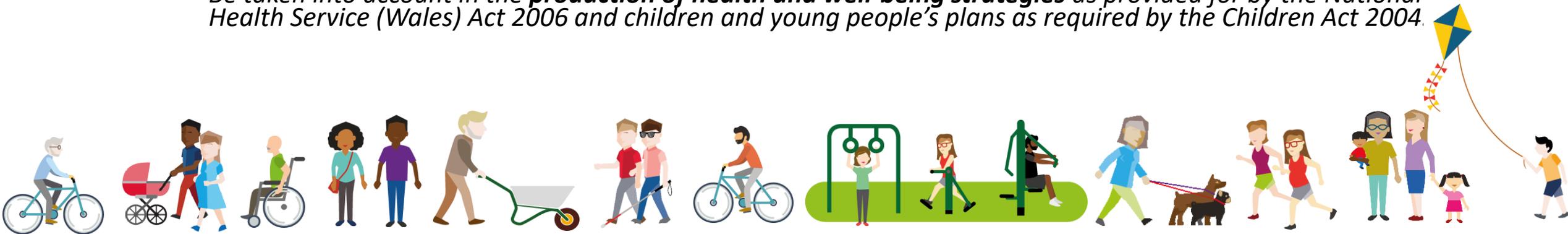
- Social Services and Well-being (Wales) Act 2014:
 1. Assessment of the care and support needs of the population, including carers who need support
 2. Assessment of the range and level of services required to meet those needs, including preventative services
- Align with the Well-being of Future Generations (Wales) Act 2015
 - Well-being at the core of the PNA
 - Incorporate the principles of WFGA: long term, integration, involvement, collaboration, prevention
 - Align with the Well-being Assessments, which investigate social, economic, environmental and cultural well-being of an area, which provides a detailed overview of the wider determinants of health
- Developed in partnership
 - *“All local authorities in a Local Health Board area must form a **partnership arrangement** with that Health Board to undertake the population assessment and should produce a combined population assessment report”*



Background

Purpose

- The population needs assessment will:
 - *Ensure that local authorities and Local Health Boards jointly produce a **clear and specific evidence base** in relation to care and support needs and carers' needs to **underpin the delivery of their statutory functions and inform planning and operational decisions...**[to] ensure services are planned and developed in an **efficient and effective way** by public sector partners to **promote the well-being of people with care and support needs***
 - ***Drive change...**[through a] focus on preventative approaches*
 - *Provide the information required to **support resource and budgetary decisions**; ensuring services and outcomes are **targeted, sustainable, effective and efficient***
 - ***Promote social enterprises, co-operatives, user led services and the third sector***
 - *Be taken into account in the **production of health and well-being strategies** as provided for by the National Health Service (Wales) Act 2006 and children and young people's plans as required by the Children Act 2004.*

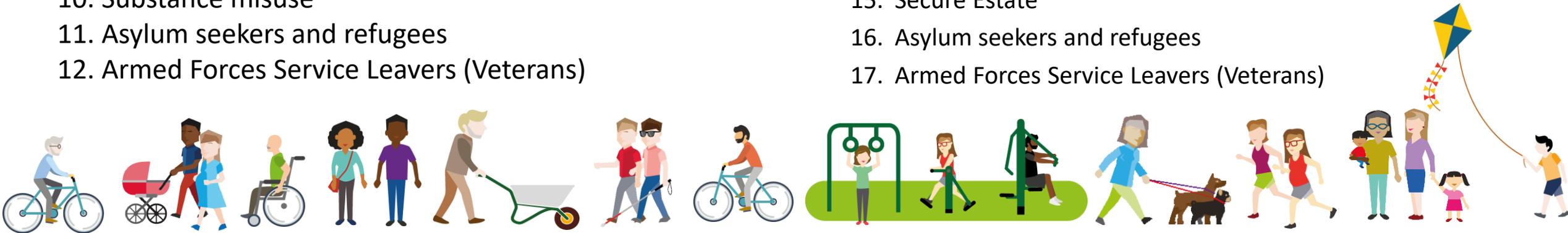


Themes



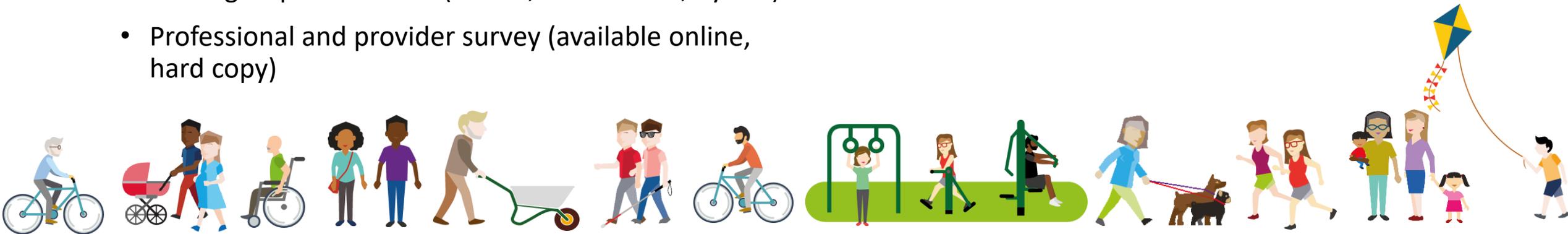
1. Children and young people
2. Older people
3. Health / physical disabilities
4. Learning disability / autism
5. Mental health and cognitive impairment, including dementia
6. Adult unpaid carers
7. Sensory loss and impairment
8. Violence against women, domestic abuse and sexual violence
9. Secure estate
10. Substance misuse
11. Asylum seekers and refugees
12. Armed Forces Service Leavers (Veterans)

1. Children and Young People – General Findings
2. Children and Young People with complex needs
3. Children Looked After
4. Older People
5. Healthy Lifestyles and Long Term Conditions
6. Physical Disability
7. Learning Disability
8. Autism
9. Adult Mental Health
10. Adult Cognitive Impairment including Dementia
11. Adult unpaid carers
12. Sensory loss
13. Violence against women, domestic abuse, and sexual violence
14. Substance misuse
15. Secure Estate
16. Asylum seekers and refugees
17. Armed Forces Service Leavers (Veterans)



Methods

- Population and service data
- Existing reports and assessments
- Public surveys:
 - Adults in the general public (available online, hard copy, and Easy Read)
 - Children and young people (available online, hard copy, and Easy Read)
 - Adults in HMP Cardiff (available online, and hard copy)
- Focus group discussions (virtual, face to face, hybrid)
- Professional and provider survey (available online, hard copy)
- Theme groups with professional leads
 - Understand the context of each theme included in the PNA
 - Help guide the data collection and interpretation
- Alignment
 - Well-being Assessment
 - National Outcomes Framework statements in engagement work



Care and Support Needs

Individual

- **People's independence** must be maintained and facilitated within decisions for care and support, employment and accommodation. Any such decisions should be based on **consultation and co-production** with the person they affect

Community

- **Social isolation** was identified in the 2017 PNA and has been exacerbated for many due to COVID-19, with far-reaching consequences for physical and mental health and well-being
- **Holistic approach to physical and mental health**, which includes improved access to services including **reduction in waiting lists**
- **Information provision**; many people were unaware of support available to them and would benefit from increased signposting



Care and Support Needs

Wider determinants

- **Employment (paid or voluntary)** was desired by many – to improve personal finances, as well as to provide a **sense of purpose, reduce isolation**, and to help **protect people's mental health and well-being**
- **Housing and accommodation** needs to be available, accessible, safe, and supportive of what matters most to the individual, for example, an enabling employment. Prevention and early help for homeless people needs to be enhanced
- **Inequalities** were discussed in all chapters, especially in terms of socio-economic deprivation, access to services, and health outcomes. **COVID-19 has had a disproportionate impact** across the population, in part due to pre-existing inequalities in the social determinants of health that have been exacerbated by COVID-19 and restrictions



Range and level of services required

Prevention

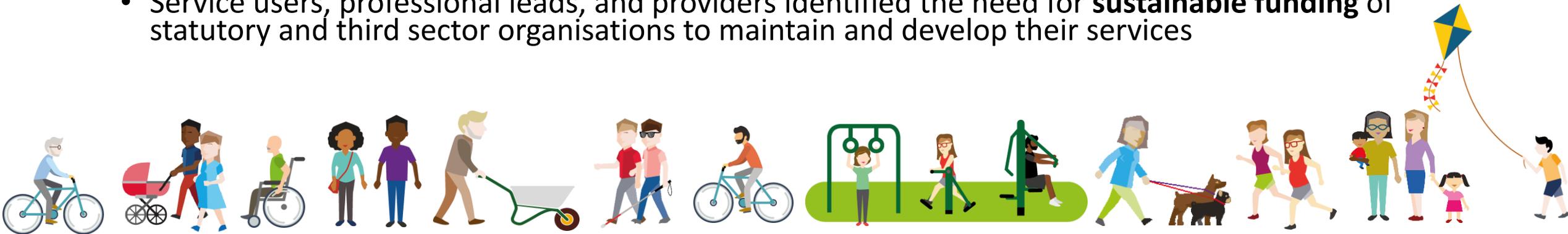
- The following were identified as being able to prevent needs arising or escalating, and may facilitate improved outcomes for people:
 - **Healthy behaviours** such as physical activity to improve mental well-being and prevent falls
 - **Early identification, diagnosis, and intervention** to support people at the right time, and promote better outcomes
 - **Social support**, including maintenance of a social role, and digital inclusion
 - **Advocacy** to enable people to express their views and wishes
 - Care focussed on **delivering services as close to people's homes** as possible



Range and level of services required

Assets to support well-being

- Individual sources of support across all groups included friends, families, and hobbies
- Local community support like community groups, neighbours, and community-based organisations including religious places of worship, choirs, and places to exercise
- Local authority, NHS, and third sector services (both on a national and local footprint) were praised throughout engagement work
- **People with lived experience** providing peer support (face to face or online) or as service providers were identified as important assets; and supported the need for inclusive recruitment across all sectors
- Service users, professional leads, and providers identified the need for **sustainable funding** of statutory and third sector organisations to maintain and develop their services



Range and level of services required

Community services

A whole system approach to care and support provision should prioritise:

- **Continuity of care:** for example, in transition from children's to adult services; between NHS services; between prison services and health and local authority services following release; leaving military service; and joined up services between public, private and third sector providers for a "seamless" experience for service users
- **Equitable, accessible, and inclusive services,** where **access is tailored to the individual.** For example, through interpreter provision; letters provided in large print; offering choice of face to face, telephone, or online services; and culturally sensitive services
- **Timely** access to high quality care and support services
- **Respite care** provision which is flexible and accessible to those who need it
- **Increased awareness of services available** and the scope of their practice **amongst service providers** so that they can signpost
- The **social model of disability** should underpin services; and language used should be respectful
- **Co-production** at the heart of decisions



Range and level of services required

Partnership approach

- Many respondents to engagement work did not ask for traditional care and support services, but identified that their needs could be met through:
 - **Supportive employers and access to education**, through provision of reasonable adjustments and inclusive recruitment, for example
 - **Accommodation** provision which gives individuals choice, including over location, and supports independence
 - A **welcoming community and an enabling wider environment**. People considered their communities as assets, but improvements remain to be made to increase awareness of the needs of others. For example, considerate use of public spaces for disabled people; bystander awareness of violence against women and domestic abuse; and accessible transport options



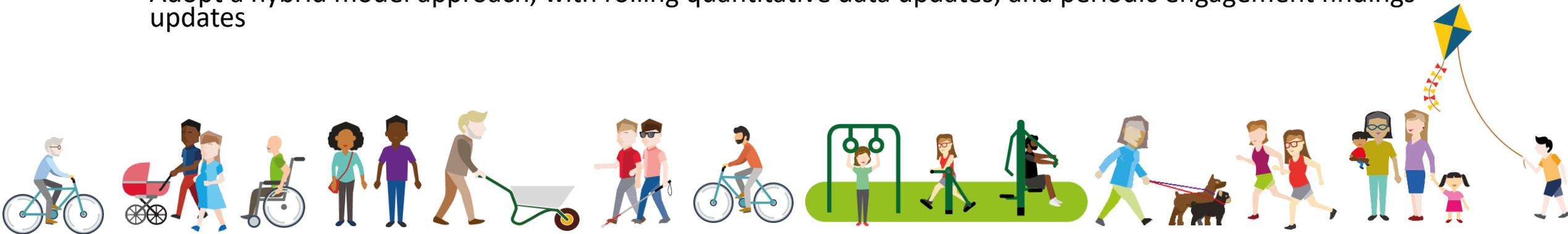
Next steps

This Population Needs Assessment will:

- Be presented at Vale of Glamorgan Cabinet on **28th February 2022**, and Full Council on **7th March 2022**
- Be published **1st April 2022**
- Support:
 - Regional assessments: e.g., Market Stability Report
 - Planning: e.g., Area Plans, IMTP
 - Future RPB engagement work

Future Population Needs Assessments will:

- Adopt a hybrid model approach, with rolling quantitative data updates, and periodic engagement findings updates





“As we emerge from this pandemic, we must utilise every opportunity to improve services for everyone who needs them.” – person with chronic neurological condition, focus group



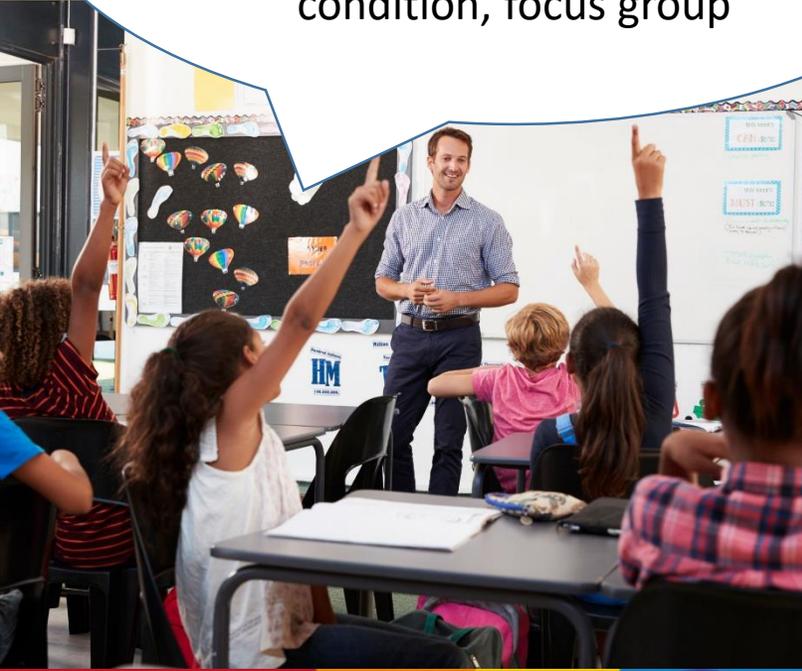
“I just want to be happy, healthy and well” – Child Looked After, focus group



“We need to collectively keep being strong voices for those who are not heard” – adult with chronic condition



“Thank you for helping and giving us a voice today” – Child Looked After, focus group



Thank you for listening

