



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

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

Learning and Legacy from COVID-19

April 2021



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Introduction

The Cardiff and Vale Regional Partnership Board (RPB) conducted an evaluation to identify learning from the COVID-19 pandemic from organisations working in partnership. Its purpose is to inform the development of partnership services across Cardiff and Vale University Health Board, Cardiff Council, Vale of Glamorgan Council, primary care, the third and independent sectors.

The evaluation aims were to achieve:

- An understanding of the impact of partnership working during COVID-19 on individuals' and staff experience and wellbeing
- An understanding of the partnership working environment during COVID-19 and secure it for future delivery models
- The development of an evidence base to inform a sustainable partnership strategy post-COVID-19, with a focus on delivery

Adopting the *Most Significant Change* methodology, three research methods were applied across three distinct fieldwork stages to collect data on these subjects:

- A survey responded to by 42 individuals and families in receipt of partnership services during the COVID-19 pandemic to understand their experiences of the support received during this time.
- A survey completed by 101 members of the partnership workforce to understand the changes to have come about in the context of partnership working since the start of the pandemic, and which should continue or cease.
- 10 semi-structured 'face to face' interviews using online methods with the partnership workforce. Using the eight RPB regional outcomes as a guiding framework, the key purpose was to delve further into some of the examples of good practice identified from the workforce survey and understand the drivers behind these positive experiences.

The RPB conducted fieldwork throughout November 2020 to February 2021. Once each fieldwork stage was completed, data was transferred to Welsh Institute for Health and Social Care for analysis.



Key Findings

Key Themes Raised by Individuals and Family Members

Support worker accessibility

One of the main themes to come out of the data was the accessibility of support workers. During COVID-19 many respondents noted the importance of being able to contact their support worker, in many cases using remote or online methods. This consistent contact was integral to the positive experiences that individuals had with support during the pandemic.

Assistance with benefits

Another key theme was the importance of assisting with benefits during COVID-19, whether that be Personal Independence Payments, Housing Benefits or Job Seekers Allowance. This practical assistance was key in keeping people safe and supported during COVID-19.

Assistance with accommodation

Many people noted that assistance with accommodation, rent arrears and crisis support to avoid homelessness had been a key part of the support received.

Assistance with dealing with organisations

Many respondents discussed the importance of the support they received during COVID-19 in dealing with other organisations, such as the Department of Work and Pensions and local authorities, especially for those with literacy or communication difficulties.

Feeling safe

Many respondents noted that they felt safer because of the support they received from partnership services during COVID-19.

Gratitude

Many respondents expressed gratitude for the support they received from partnership services during the pandemic. The importance of the support for them, in many cases, could not be overstated.

Key Themes Raised by the Partnership Workforce

Online and Remote Working

One of the main findings from this phase of the fieldwork was the impact of the move to online and remote working during COVID-19. Many respondents noted that the move enabled continued access to services from a citizen/patient perspective, and staff efficiencies and greater opportunities to build relationships with partner organisations.

Improved Partnership Working Environment

Significant changes to partnership working during COVID-19 were reported. Many respondents reflected on the fact that partnership working became easier during COVID-19, with partners pulling together to adapt to the demands of the pandemic. There was a positive step change in working culture and relationships between partners. Some respondents described feeling trusted to make decisions they had not previously

had the authority to make. As a result, this enabled them to work more quickly and effectively. Also noted was how working with partners became easier due to the move to online working and that this increased awareness of partners' services and any demand and capacity issues.

Positives and Enablers

Another theme was that of positives and enablers as a result of COVID-19. These include: improved partnership working cultures, improved outreach, increased awareness between organisations and improved networking via online systems.

Negatives and Barriers

In contrast, the theme of barriers and negatives also arose from the data. These mostly related to the enforced lockdown regulations and its effect on service delivery, particularly for organisations whose primary work is face-to-face and doesn't easily translate to online or remote settings.

COVID-19 Adaptations

Unsurprisingly, the theme of adaptations to deal with the COVID-19 pandemic and lockdown restrictions also arose from the data. These include:

- increased use of technology to improve communications
- reduction in bureaucracy
- improved relationships across partnership working
- a clearer focus on highest priorities
- embracing innovation early on in the pandemic.

Engagement with Welsh Government and Statutory Services

Under this theme, respondents remarked that engagement had improved in the form of increased communication. Local authorities were particularly identified as taking a more proactive approach to engagement and providing more support and funding.



Examples of Good Practice Partnership Working During COVID-19

RPB Regional Outcome: Decreased avoidable harm or mortality

Example 1 – Cardiff Council Support for Rough Sleepers

Which organisations/groups feature in your most significant change story?

Cardiff Council Homeless Multi-Disciplinary Team (MDT); Cardiff and Vale Health Board; Cardiff and Vale Area Planning Board; housing support providers such as Pobl, Huggard, Wallich, Salvation Army; substance misuse support services such as Taith, G4S, Kaleidoscope; Police and Probation.

What was it like before?

Rough sleeping and homelessness were seen as a housing issue and harm reduction services didn't go to those in need of support. Whilst not all people who sleep rough use drugs, for some who are dependent on using heroin every day it is an enduring problem which has felt insurmountable. To access a drug treatment programme, people had to go to a separate building for appointments, with rigid appointment regimes.

What's changed?

At the start of the pandemic, Cardiff Council offered temporary accommodation to rough sleepers at two hotels. Overnight the numbers of people sleeping rough fell to less than a handful. With its partners, the Council Homeless Multi-Disciplinary Team (MDT) took substance misuse services to the individual, in a persistent and compassionate way. For example, in-reach and nurse-led clinics are held in hotels. Needle exchange and harm reduction services are provided on site and via outreach.

What's the impact?

People have witnessed the difference it has made to people who are rough sleeping. Some individuals have told staff that this is the "best they have ever felt" and it's been "life changing". This work has contributed to ensuring that vulnerable people affected by homelessness had a safe place to stay and access to support. More people have taken up the offer of accommodation and support as a result of services going to where the individuals are.



Examples of Good Practice Partnership Working During COVID-19

RPB Regional Outcome: Reduced wasted system resource



Example 2 - Food & Anchor Response Task Groups

Which organisations/groups feature in your most significant change story?

Food Cardiff, foodbanks, Public Health Wales, Cardiff Council, Cardiff Third Sector Council, a range of third sector groups, such as ACE Foundation, South Riverside Community Development Centre, Women Connect First and FAN Groups.

What was it like before?

When COVID-19 started the community's unmet needs were not clearly visible or identified. New gaps and issues were created by the pandemic.

What's changed?

The Food Response Task Group and the Anchor Organisations Group were formed to co-ordinate a response for supporting the most vulnerable people in our communities. Both groups focused on responding to gaps and coordinating responses with the resources available. They mapped the services responding to COVID-19 related needs and found solutions to gaps in services.

What was the impact?

There were two main cohorts of people needing support: people unable to access food, and people unable to afford food. A wide range of support was provided to people in need. Some examples include the provision of culturally appropriate food parcels, making free school meals accessible while schools were closed, the distribution of foodbank vouchers and parcels, and help with shopping.



Examples of Good Practice Partnership Working During COVID-19

RPB Regional Outcome: People get a safe response when in urgent need

Example 3 - Peer Support for People with Substance Use Issues

Which organisations/groups feature in your most significant change story?

NHS volunteers, Recovery Cymru, Cardiff and Vale University Health Board, the Bevan Commission, the Billions Institute.

What was it like before?

Before the development of the First Steps service, there were two NHS volunteers who offered a limited service to hospital inpatients needing after care recovery and support for substance misuse, having successfully applied for, and completed, the Spread and Scale Academy in 2019. The service was cited as in need of development.

What's changed?

The COVID-19 pandemic prompted the acceleration of development. Working in partnership with Recovery Cymru, Footsteps to Recovery has broadened to involve other peer volunteers. The volunteers also focused their efforts on reconfiguring the peer service they were providing within University Hospital of Wales and by working with a local charity developed a new telephone/SMS service. The process of referral to the First Steps service has also been simplified.

What's the impact?

Providing quality peer support to patients with addiction issues is an incredibly important part of treatment. The volunteers provide useful support, encouragement, hope and mentorship to others facing similar situations. Having this ability to engage individuals, who have become either physically unwell or injured as a result of their substance misuse, is seen as the first steps in achieving recovery. By also providing further roles for those in recovery we are including them in shaping 'A Healthier Wales' and bringing purpose into people's lives, thus re-enforcing their own recovery. The peer telephone support service complements the service that the nursing team provides in hospital. The refined referral process means that the nursing team spend more time with patients and less time doing paperwork. At the centre of this incredible adaptation are the fantastic volunteers. Their dynamism has been incredible.



Examples of Good Practice Partnership Working During COVID-19

RPB Regional Outcome: Increasing living well in their own homes and communities

Example 4 - Cardiff & Vale Carers Gateway

Which organisations/groups feature in your most significant change story?

Carers Trust South East Wales, Vale of Glamorgan Council, all referral partners.

What was it like before?

At the start of the pandemic social services staff were reassigned to COVID-19 related duties and were unable to undertake carer's needs assessments. Without this, carers were unable to record the impact caring had on their lives and what support or services they needed.

What's changed?

The launch of the Cardiff & Vale Carers Gateway coincided with the start of the pandemic, and was in place to assist the statutory agencies when COVID-19 began. They provided vital practical and emotional support to unpaid carers when the local authority was unable to deliver. Referral pathways have since been developed for the Carers Gateway to continue to assist the Vale of Glamorgan Council. Before the pandemic, assessments were mostly undertaken face-to-face. All support since has been provided on-line.

What was the impact?

Carers didn't have to wait unnecessarily for support. It also provided the Carers Gateway with an opportunity to build relationships with carers and provide ongoing support. As the Carers Gateway was unable to deliver outreach work as planned, it ensured that public money was utilised in the best way possible by still supporting carers during the crisis.



Examples of Good Practice Partnership Working During COVID-19

RPB Regional Outcome: More empowered workforce

Example 5 - Improved relationships across the statutory and independent care sector

Which organisations/groups feature in your most significant change story?
Vale of Glamorgan Council, independent domiciliary care providers.

What was it like before?
Independent domiciliary care providers rarely collaborated. This is because in many respects they had to compete for the same packages of care across the Cardiff and Vale region.

What's changed?
As a direct result of the unprecedented circumstances facing the care sector and the clear need to support one another for the good of the communities they all worked in, both people who receive services and staff, the local authority prompted the initiation of weekly Zoom meetings with local domiciliary care providers.

What was the impact?
The meetings have been of great significance and served as an excellent vehicle for peer support and information sharing, including best practice, lessons learned, challenges and solutions. There is now a feeling of support amongst peers and a shared understanding and experience that unites them. The service managers involved feel much less isolated as a result of the calls. Seeing each other virtually and sharing experiences significantly reduced the group's anxiety. The openness and sharing amongst the group had a significant impact on operational management. Immediate delivery meant continued delivery of domiciliary care to vulnerable people, whilst keeping staff and individuals in receipt of services safe. The sharing of resources and best practice has brought the group together. The partnership working between providers is the best it has ever been.
There is now also an efficient option for care providers to do direct referrals to occupational therapists and physiotherapists. This significantly reduces the time for individuals to access solutions and support.



Examples of Good Practice Partnership Working During COVID-19

RPB Regional Outcome: Better start for children and young people

Example 6 - Supporting Children with Complex Needs and their Families

Which organisations/groups feature in your most significant change story?

Ysgol Y Deri School, Ty Gwyn, Western Learning Federation, Cardiff Council, Vale of Glamorgan Council, Cardiff and Vale University Health Board.

What was it like before?

It was difficult to get representatives from all the key support services based in different areas in the room at the same time.

What's changed?

The lockdown forced all schools to close. There were particular concerns on the impact this situation would have on children with complex needs, their families and their ability to cope. Managers from across a range of key support services, including education, physiotherapists, occupational therapists, nurses, doctors and social services, came together virtually to identify how best to support these children and their families.

What was the impact?

The team introduced a RAG (red, amber, green) rating process to categorise the needs of the different children and ensure the child and their family were adequately supported during the pandemic. It also provided an opportunity for specialist equipment to reduce potential postural harms normally available at the school to be rapidly delivered to children in their homes for use during lockdown.



Examples of Good Practice Partnership Working During COVID-19

RPB Regional Outcome: Improved environment that enables people's choices

Example 7 - Co-producing learning disability services

Which organisations/groups feature in your most significant change story?

Cardiff Third Sector Council, Cardiff Council, Vale of Glamorgan Council, Cardiff and Vale University Health Board, Public Health Wales (regional team), Cardiff People First.

What was it like before?

Opportunities to take part in understanding needs and designing learning disability services were normally undertaken face-to-face. This meant that key people such as carers unable to step away from their caring responsibilities weren't always able to take part.

What's changed?

The availability of the Third Sector Fund: Supporting People with Learning Disabilities and/or their Carers 2020/2021, that utilised the Integrated Care Fund provided an opportunity to run two virtual workshops to co-produce learning disability services. One for those who need and access services, and another for those who provide these services and support. As people could not meet in groups face-to-face, it provided a real opportunity for fresh thinking on solutions.

What was the impact?

The workshops were run in collaboration, including the session notes being jointly written and agreed before circulation. The workshops generated new ideas, one of which was a co-produced full specification for a tendered service which begins shortly. The people who attended said they felt more independent using this method of engagement, as they didn't have the people around them telling them what they need to do step by step. Using an online platform allowed carers who hadn't engaged previously to contribute. It was also helpful for people who did not wish to participate face to face, as there was an opportunity to leave cameras and microphones turned off and participate via the chat bar.



Examples of Good Practice Partnership Working During COVID-19

RPB Regional Outcome: Increasing time for people to live their lives

Example 8 - Virtual Multi-Disciplinary Team Meetings

Which organisations/groups feature in your most significant change story?

Cardiff and Vale University Health Board, Cardiff Council, Vale of Glamorgan Council, independent care agencies.

What was it like before?

The In Reach Multi-Disciplinary Team (MDT) would visit patients in referring hospitals to conduct an assessment. Not all MDT professionals would be able to attend due to time constraints.

What's changed?

Because visiting other hospitals was kept to a minimum during COVID-19, virtual meetings were held as an alternative. One of the consultants would attend in person and the rest of the MDT would attend virtually. This was enabled by an amazing IT Department by providing all the necessary virtual platforms and equipment.

What was the impact?

Due to having the sessions virtually, occupational therapy, physiotherapy and nursing can attend alongside the consultant and liaise with one another at the same time. This means that the patient receives more holistic treatment and support. Family members are also able to join the meetings and offer support.



Recommendations

Many learning points regarding partnership working arose from the data. Some suggestions for future partnership working are as follows:

Online and Remote Working

Continue to implement and enhance hybrid working practises and service delivery models through the use of online and remote working technologies. This new way of working was associated with increased staff efficiencies and greater practitioner and citizen/patient presence following the removal of physical geographical boundaries.

Relationship Building and Communication

Continue to improve communication and build upon existing working relationships between Welsh Government, statutory services and the third and independent sectors. This can be achieved via the above newly introduced or scaled up online and remote working technologies and practices. Contact should be regular and focus on understanding the support partners may need (in the context of current demand and capacity pressures), raising awareness of the organisation's service remit, and identifying ways in which partner organisations can assist each other to deliver effective health and social care support to individuals and their families.

Ethos of Trust, Compassion and Togetherness

Continue to encourage and further develop the ethos of trust, compassion and togetherness that has emerged during the pandemic. This can be in the form of engaging in a more empathic and compassionate way with other partners; increased trust and delegated responsibility between partner organisations, such as by reducing bureaucracy and allowing greater space to make decisions; and increased awareness of what partner organisations do and the demand they are facing derived from the suggested relationship building and communication practises. All of the above was reported as contributing towards effective health and social care support.

Financial Support for Partnership Arrangements

Welsh Government and statutory services to continue to engage directly with health and social care partnerships to ensure sufficient financial support. This includes funding and commissioning opportunities in a co-productive environment to meet the local need, and financial flexibility to respond to changing demand.

Conclusion

Overall, the evaluation identified important findings on the ways in which health and social care partnerships adapted to the COVID-19 pandemic.

These adaptations included a move to remote and online working with partners across the statutory, third and independent sectors to enable continued planning and frontline service delivery. This move also allowed for an improvement in partnership working, with an extension of networks and an

improvement in regular communication and strengthened relationships. A new ethos of compassion, togetherness and trust was noted, with partners pulling together to deal with the crisis brought about by the pandemic. Individuals and family members noted the continued support they received from organisations during COVID-19, and how this enabled them to maintain their independence and wellbeing during this unprecedented time.

Acknowledgements

The RPB would like to formally thank all stakeholders across the partnership for their assistance, contribution and constructive comments to this evaluation.

