



ADSS Cymru

Leading Social Services in Wales

Yn arwain Gwasanaethau
Cymdeithasol yng Nghymru

Welsh Government Delivering Transformation Grant (DTG)

Consultation on Innovative Funding Models to meet Social Care Needs SUMMARY AND ANALYSIS

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1. Document version

No.	Description
0.1	Initial draft
0.2	Updated following additional submissions

2. Document description

- A summary and analysis of the responses received to the ‘Consultation on innovative funding models to meet social care needs’
- **IMPORTANT: This document names organisation (but not the individuals responding) and relates some comments to the organisations where this is helpful in understanding the response. Responses are not anonymous in this summary document.**

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4. Executive Summary

Responses were received from 14 organisations

- 6 Local Authorities
- 2 Regions
- 2 Third sector
- 2 Central public organisations
- 1 Academic
- 1 Provider umbrella organisation

Question 1

Responses identified an increase in demand for social care services from

- An ageing population
- Increasing care and support needs for children
- More specialist support is needed and needs are becoming more complex
- Increased demand for services from carers
- Legislation resulting in increased demand for Information, Advice and Assistance
- Income and poverty issues
- Welfare benefit changes

Responses identified the following pressures and challenges for the future

- Budgets are not growing in line with demand
- Managing the public's expectations for care and support
- The availability of services
- Recruiting and retaining a quality and qualified workforce

Question 2

The main trends in service requirements and changes in types of provision anticipated are

- More early help & intervention and preventative services
- More services that encourage self-care and responsibility
- More services that de-escalate needs
- More short-term care
- More services for people with complex needs
- Reductions in residential services and development of alternative housing services
- More technology-based services
- Services to be commissioned and delivered in a different way
- Changes in services for children

Question 3

There was uncertainty over the purpose of the levy and the way it would operate

- Is the levy designed to replace or supplement existing sources of funding for social care?
- Local Authorities were clear that the levy should be used to fill the funding gap predicted for future years and this needed to be clear to the public
- In contrast, third sector organisations and providers stated explicitly that the levy should not be used to fund existing service but to provide additional benefits
- Some respondents assumed the levy would be run centrally, others assumed it would be run by Local Authorities or the Regional Partnership Board
- It was not clear whether charging would continue if a levy was introduced, some people would end up paying twice
- Respondents wanted to ensure that the system was set up correctly and seen to be fair for all

Respondents identified services and areas that required priority investment if a levy was introduced. These were closely related to the main demands identified in question 1 and the main trends identified in question 2.

Question 4

Ideas and proposals for the practical content of a “social care promise” were

- Link to statutory requirements
- Be based on a set of strong principles
- Set out what individuals can expect
- Set out what the community can expect
- Describe the services that will be delivered
- Describe the characteristics of the services that will be delivered
- Set out responsibilities
- Describe the funding model
- Be based on a quality workforce

5. Introduction

- The Association of Directors of Social Services Cymru (ADSS Cymru) has been commissioned by the Welsh Government to lead on a programme of work around Delivering Transformation, which includes three areas of work during 2018-19.
 - Innovative funding models to meet social care needs
 - Innovative Care Delivery Models in the Community
 - The opportunities of pooled funds
- The project carried out a consultation on innovative models to meet social care needs.
- The consultation opened on 12 October 2018 and closed on 3 November 2018. The consultation deadline was extended to 9 November 2018 to encourage further submissions.
- The consultation asked 5 questions
 - Question 1: What do you see as the main demands and pressures on all Social Care services in Wales over the next 5, 10 and 15 year-period?
 - Question 2: Over the next 5, 10 and 15 year-period what are the main trends in service requirements you anticipate and how do you think the types of provision may change?
 - Question 3: Over the next 5, 10 and 15 year-period what do you see as the priorities for any additional funding that may result from a social care levy in Wales?
 - Question 4 What are your ideas and proposals for the practical content of any “social care promise” in Wales?
 - Question 5: Do you have any other comments to inform this Work Programme?
- This report summarises the responses received and draws out the key messages and themes from the responses. This analysis will be used by the project to inform further development within the three main areas of work.

6. Responses received

Number and types of organisations

A total of 14 responses were received from the following organisations

Organisation type	No responding	Names of responding organisation
Local Authority & Regional Partnership Board	8	Torfaen County Borough Council Anglesey Social Services Merthyr Bridgend County Borough Council Denbighshire County Council Conwy CBC Western Bay Cardiff and the Vale Regional Partnership Board
Third sector	2	Age Cymru British Red Cross
Central public	2	Social Care Wales The National Adoption Service for Wales (NAS) & Adopt Cymru joint response
Academic	1	Welsh Institute of Health and Social Care, University of South Wales
Provider umbrella organisation	1	United Kingdom Homecare Association
Total responding	14	

Identification of organisations from the summary

- This document summarises the main themes and issues provided in the individual responses from organisations. Sometimes there are patterns in the responses where, for example, a particular type of organisation provides the same response. In this case the response is identified as relating to the group. Sometimes a response has been considered unique to an organisation, because of its role, in this case the organisation is named as it is relevant to the interpretation of the response.
- This document therefore names organisation (but not the individuals responding) and relates some comments to the organisations where this helps to understand the response. Responses are not anonymous in this summary document.

Question 1

What do you see as the main demands and pressures on all Social Care services in Wales over the next 5, 10 and 15 year-period?

Summary

Responses identified an increase in demand from

- An ageing population
- Increasing care and support needs for children
- More specialist support is needed and needs are becoming more complex
- Increased demand for services from carers
- Legislation resulting in increased demand for Information, Advice and Assistance
- Income and poverty issues
- Welfare benefit changes

Responses identified the following pressures and challenges

- Budgets are not growing in line with demand
- Managing the public's expectations for care and support
- The availability of services
- Recruiting and retaining a quality and qualified workforce

Main demands

An ageing population

The population is ageing, people are living longer, the numbers of younger adults are decreasing whilst the number of older adults is increasing. This growth is larger in Wales than the rest of UK.

- Major increases in need for care and support
- Years spent living with poor health is increasing
- Dementia increasing (one response called it a dementia time-bomb)
- Increase in people with complex needs
- People with learning disabilities are living longer, older people with learning disabilities have increasingly complex needs
- We do not fully understand the scale of increase in need as people get much older
"Numbers of people in their 90s and 100s are set to grow and understanding of care and support demands for this group are uncharted territory"

Increasing care and support needs for children

- Looked After Children and children on the Child Protection Register are increasing
- More children with increasingly complex needs
- Issues from sexting and online bullying

- More children with mental health, emotional and behavioural issues, for example self-harm, eating disorders and attachment issues
- The number of children who are victims of crime are increasing, particularly cyber-crime
- More demand from children who's needs can no longer be met in the community. Services previously provided by Youth or Leisure Services have been cut and there are restrictions on charging parents for similar services.
- Increased demand to support looked after children and children with additional needs until older, up to 25
- Growth in other agencies identifying children who need care and support
- Likely continued growth in need for intensive service responses such as looked after services
- Increased legislation and work with the courts
- Increased demands from Judiciary and CAFCASS on Local Authority resources
- Local Authority funding remand placements for young people

More specialist support is needed and needs are becoming more complex

- There is increased demand for specialist support services in adults and children's services
- Increased demands from people with complex needs resulting from changes in eligibility criteria. As those most in need are prioritised others who would have previously received services are no longer eligible (data shows service provision is falling). These people appear later with more complex needs.

Increased demand for services for carers

- Carers are ageing and they themselves are more likely to need care and support
- We think there is an unmet need for support for carers in the community
- Informal caring may reduce due to new family structures and geographical dispersion increasing demand for social care

Other demands

- The SSWA Social Services and Well-being (Wales) Act 2014 increase demand for Information, Advice and Assistance to prevent or delay need. There is increased demand for specialist information, e.g retirement, bereavement etc
- Income and poverty issues will cause greater demand
- Welfare benefit changes may expose more vulnerable people to risk of homelessness, Universal Credit could lead to greater arrears and tenancy breakdowns

Main pressures and challenges

Budgets not growing in line with demand

- A funding gap is predicted if change does not take place, continuing as-is is not an option
- Evidence of future funding gap for older people and children

- Also a predicted future funding gap for child and adolescent mental health, mental health and learning disabilities & Autism
- Impact of the Welsh Government's introduction of the £80 cap and increase in capital allowance

Managing the public expectation of care and support

- The public has high expectations of care and support in relation to the amount provided, nature of care and quality. Availability may not match this expectation.
- Helping the most in need may mean some people do not receive services. There is already evidence that decreased spend and service provision may be due to more rigorous eligibility criteria. Whilst there is the expectation that social care can provide more services, the reality under the current financial situation is that services are being cut
- As a result of the Social Services and Well-being (Wales) Act people have changing expectations around choice and involvement in decisions

The availability of services

- Rising costs for providers due to National Living Wage, National Minimum Wage, pensions contributions, legislation around sleep ins and increases to Council Tax
- Domiciliary care market is fragile and dependent on the social care sector
- Many providers feel they are already paid low prices for their care services and are unable to invest in their future, making the services unsustainable
- Statutory services rely more and more on the third sector whilst their budgets are being stretched or cut. The future of funding for the third sector is often uncertain so there is no guarantee of future services
- There are a lack of looked after children placements. It is difficult to find placements for children with complex needs, lack of secure welfare placements across UK for children, placement costs can be high
- Partners in the statutory, independent and 3rd sector need to work together
- Health and Social Services need to work together to understand overlaps and boundaries

Recruiting and retaining a quality and qualified workforce

- It is difficult to recruit and retain quality and qualified workforce (social workers and social care workers)
- Staff turnover and vacancy rates are high
- Uncertainty remains over the long-term effect of Brexit on the social care workforce in Wales
- Managing the gap between health and social care pay
- Care work is generally low paid and care service providers compete with other low-wage industries, such as the retail sector. Service providers are not in a position to offer wages that reflects the challenging nature of the role
- Support workers and managers need to use professional judgement to support individuals in positive risk taking and able to challenge risk averse cultures which offer continuous safeguarding (Social Care Wales)

- Whilst registration of the care workforce is generally supported it may cause pressures. If existing or new workers do not want to sit formal examinations they may prefer to be employed in another industry. It is possible that care providers may end up bearing the financial burden of registration (UKHCA)
- Future reduction in working age adults and greater competition in the workforce

IAA challenges

- Many older people are still not able to access Information, Advice and Assistance (IAA) electronically
- IAA relies on the availability of third sector organisations. Some third sector organisations have lost their service contracts and do not get funding from IAA

Other pressures and challenges

- Assessments at the point of discharge from hospital are inconsistent and people go home without adequate support packages (British Red Cross)
- Increase in the Age Dependency Ratio has potential economic implications for the Welsh economy
- Challenges from the Deprivation of Liberty Safeguards continues to increase

Question 2

Over the next 5, 10 and 15 year-period what are the main trends in service requirements you anticipate and how do you think the types of provision may change?

Summary

- More early help & intervention and preventative services
- More services that encourage self-care and responsibility
- More services that de-escalate needs
- More short-term care
- More services for people with complex needs
- Reductions in residential services and development of alternative housing services
- More technology-based services
- Services to be commissioned and delivered in a different way
- Changes in services for children

Main trends in service requirements and changes in types of provision

More early help & intervention and preventative services

- Prevention is the only way to manage the demographic changes expected and shift resources
- More community and preventative services and activities are needed, although it is difficult to develop these within the current budget
- More services to reduce loneliness and isolation for older people and young adults, for example befriending
- Services to tackle poverty, provide financial support and advice
- More social prescribing
- More signposting of services and ways of ensuring people know about community based services
- More services that support access to community based services like transport, shared spaces and public toilets
- Links with employers and therapeutic services to promote the development of resilience

More services that encourage self-care and responsibility

- More services to promote positive mental health and well-being
- Encourage the public in self-care, placing responsibility on individuals, families and communities to support people to remain at home
- Reverse trend of overdependence on government funded health and social care
- Co-operative models of support that help people increase their own well-being and build resilience to cope with challenges
- Services that support positive behaviours around smoking, obesity, substance misuse, alcohol use and physical activity
- Services that promote the health of expectant mothers to improve the health of babies

More services that de-escalate needs

- More support services for people leaving hospital, assisted discharge
- More mobility equipment and aids, including wheelchairs
- Closer links between community-based services / service providers and statutory support services to provide targeted support to de-escalate needs
- More reablement services to delay need for residential care and readmission to hospital

More short-term care

- Need more shorter-term care – respite, step up, step down beds
- More short-term interventions to support people to be more independent
- Develop crisis intervention services
- More and improved transition services as people move from one care service to another

More services for people with complex needs

- Services for people who are living longer with multiple conditions and diminishing mobility
- More specialist care home services for people with complex needs / elderly mentally infirm / nursing care
- More services that provide assistance with medication
- More services that require the assistance of Health e.g. district nurses

Increased and flexible services for carers

- More respite care, particularly as carers age and need more breaks
- More flexible respite and respite people trust

Reductions in residential services and development of alternative housing services

- There will be a reduction in the requirement for residential services, particularly for older people
- More flexible accommodation options are needed
- More extra care support and other accommodation with care aspects for dementia and other complex needs – accommodation with care, step-down accommodation
- Development of aspirational forms of supportive housing e.g. retirement homes, new models of supported living
- More suitable housing for older people, for example smaller units and bungalows
- A reduction in the use of Bed & Breakfast accommodation for vulnerable groups with more suitable and stable accommodation provided
- Where residential services are provided, these need to be close to home
- Consider shared housing models, where appropriate, for younger people including care leavers
- More housing for young people with complex needs
- Repurposing existing buildings in the community

More suitable domiciliary care and services in the home

- We need to develop a way of delivering complex care in people's homes
- More home-based services for older people and children
- Better quality domiciliary care, outcomes based, with staff supervision; there are concerns over current care at home provision
- More night time domiciliary care, there are substantial differences in provision across Local Authorities
- More services with longer visits and greater number of care workers

More technology-based services

- More assistive technology, reduces increased dependence on traditional forms of domiciliary care
- More services using Smart Phones and Apps
- More telecare and assistive technology
- Ensure social care is at the forefront of technological advances
- Greater use of mainstream technology to access high quality information and advice

Services to be commissioned and delivered in a different way

- Move commissioning of services to an outcomes-based approach
- Develop a whole system approach, shifting services to prevention from acute, needs
- Increased partnership and integrated services (particularly Health and Housing), more pooled budgets
- Move to more in-house provision of services given the fragility of the domiciliary, residential care market and external placements for children
- Services to be delivered closer to the individual's home
- Core services operating over 7 days, less emphasis on 'out of hours' and more on 'business as usual' on all days
- Provide a mixture of very locally based services responding to need and regional and national approaches to commissioning services to achieve improved impact for smaller volume of more specialist services
- Maximise services that listen to and respond to what the population says
- Culture change in staff
- Develop a clear accommodation model linked to positive pathways and de-escalation of need
- Increase awareness and use of Direct Payments
- Support for people to develop cooperatives and social enterprises by combining Direct Payments
- Develop the role and potential of the voluntary sector, closer working with the voluntary sector
- More services provided by social cooperatives and the third sector whilst statutory partners are only in a position to offer the key statutory services (Local Authority)

Changes in services for children

- More services for emotional and behavioural issues for children, investment in psychological services
- More specialist residential provision for children with complex needs
- More preventative services for vulnerable families
- Improved management of exits from the looked after children's system, more adoption services
- Work with landlords to maintain tenancies for those leaving care
- Develop training, employment and independent living skills opportunities with young people
- Integrated approaches with schools, the police, health, the third sector and housing

Question 3

Over the next 5, 10 and 15 year-period what do you see as the priorities for any additional funding that may result from a social care levy in Wales?

Uncertainty about the purpose of the levy

As one response from an Academic stated “It is not clear whether the levy is designed to replace or supplement existing sources of funds for social care”. This was apparent from the different responses received from Local Authorities and other organisations.

Local Authorities were clear that the levy should be used to fill the funding gap predicted for future years and this needed to be clear to the public:

- Investment is needed to sustain current levels (Bridgend County Borough Council)
- In the current context the main priority for additional funding raised by a social care levy should be to plug the funding gap, to suggest otherwise would falsely raise public expectation of future social care provision (Denbighshire County Council)
- We need to manage the population’s expectations of care and support and its availability (Torfaen County Borough Council)

In contrast third sector organisations and providers stated explicitly that the levy should not be used to fund existing service but to provide additional benefits

- The levy should be used to address unmet needs and not pooled in to pay for existing services (UKHCA)
- Under any “new social care promise” people are entitled to expect the basic minimum of care, existing commitments to be met and also additional benefits in return for any new levy (Age Cymru)
- Existing allocation should continue to be used to meet assessment and eligibility in an effective process (Age Cymru)

There needs to be clarity on the way the levy will operate

- Some respondents assumed the levy would be run centrally, others assumed it would be run by Local Authorities or the Regional Partnership Board.
“ There need to be increased resources in local government to manage the levy” (Local Authority)
- One Local Authority suggested scrapping capital limits if a levy is introduced. Others raised capital limits as the main concern of the public, they were concerned that a levy would increase the capital limit
- Local authorities asked for the impact on self-funders to be considered carefully when the levy is set up, one suggested sending everyone through the social care system
- It was not clear whether charging would continue if a levy was introduced, people could end up paying twice
- There needs to be a seamless pathway from health, where you do not get charged, to social care, where you do, particularly as the boundary between them is getting more blurred

It is a priority to ensure the system is fair and set up correctly

- The system needs to be seen to be fair in terms of contribution and quality across Wales, it needs to be sold to the public and palatable for all
- Social care needs longer term planning, 12 months is not long enough, particularly if we are working on a spend to save basis where the benefits may not be seen for some time
- There needs to be less bureaucracy around funding, a simpler system with fewer conditions. The levy must not make the system more complex and costly to run
- Levy monies should not be allocated too prescriptively but should be used exclusively for social care and not absorbed into the Local Authority budget
- We need more certainty that funding will continue so successful pilots can be grown and developed. Funding needs to be available long-term, short-term funding does not create sustainable services
- Local Authorities and Regions should not be afraid to say what doesn't work in case funding is removed
- There needs to be a right of appeals against decisions on eligibility, this is not provided under the Social Services and Well-being (Wales) Act (Age UK)

Services and areas that require priority investment

Respondents listed services and areas that they felt were priority areas for investment (in the case of Local Authorities if there was any funding remaining after meeting the funding gap)

Preventative services

- New preventative services within community and funding to enhance existing services in collaboration with third sector / community initiated co-operative schemes
- Respondents felt that the financial benefits of prevention would only be seen over the long term
"As community resilience increases we should see a reduction in demand" (Local Authority)

Services for Carers

- A standard offer for unpaid family and friend carers
- Help for carers to stay in work
- Training in better care techniques for carers (like lifting and manual handling)
- Increased and more flexible respite care so carers can live their own lives
- Processes to ensure carers receive their full entitlements and remove the discrimination that stops them receiving Carer's Allowance once they reach pension age.
"Some carers are unaware of their entitlements, for others the application process is complex or there is or knock on implication for the finances of the person for whom they care" (Age Cymru)

Services for children

- Free legal telephone advice for parents to enable more children to remain within their families and avoid children entering the formal care system (like Family Rights Service in England)
- A framework of community and family support to meet emotional and physical needs of all children in the community and integrated services than meet the complex needs of children with significant emotional and mental health needs
- Services to prevent and support victims of child exploitation
- Support for children to exit the looked after children system safely, minimising chance of re-entry
- Adopter recruitment and adoption support before and after (National Adoption Service & Adopt Cymru)
- Services for children who have complex needs and are likely to stay in the looked after children system for longer
- Services and placements for children with challenging behaviours
- More foster placements

Other specific services suggested as priority areas for investment

- Services to prevent and support victims of domestic violence and substance misuse
- Mental health services
- End of life care
- Sustainable future housing
- Additional community-based accommodation provision for all adults
- Additional services for people with dementia and their carers
- Intensive interventions for individuals with emotional or mental health problems
- Support for people with complex needs – disabilities, life-limiting illness, emotional or mental health problems that significantly impact on their well-being and the well-being of people who are for them

Cross-cutting areas suggested as priority areas for investment

- Modernising working practices
- Investing in technological developments
- Resources to invest in best practice models
- 7 day a week support over extended hours in partnership with Health, independent and third sector
- Provide funding to statutory partners to plug the funding gap
- Local specialist services so people do not need to go out of county for them
- Develop fledgling new services that have developed in the past 5 years that have the potential to make a bigger impact if put in to full operation
- Investment in the workforce
 - Attracting, developing and retaining a confident skilled social care workforce

- Respondents particularly identified the need to invest on a professional domiciliary care workforce where quality is related to dignity
- Competitive wage (Living Wage)
- Diversify workforce, comparable training and enumeration

Question 4

What are your ideas and proposals for the practical content of any “social care promise” in Wales?

Summary

3 out of 13 respondents did not provide a response to this question although all Local Authorities provided a response.

Ideas and proposals for the practical content of a “social care promise” were

- Link to statutory requirements
- Be based on a set of strong principles
- Set out what individuals can expect
- Set out what the community can expect
- Describe the services that will be delivered
- Describe the characteristics of the services that will be delivered
- Set out responsibilities
- Describe the funding model
- Be based on a quality workforce

Detail of the ideas and proposals for the practical content of a “social care promise”

The promise needs to link to statutory requirements

- It must be consistent with principles contained in the Social Services and Well-being (Wales) Act 2014
- The promise must aim to improve well-being as described in the well-being outcomes statement
- There must be appropriate infrastructure in place to deliver the promise

The promise should be based on the following principles

- Consistently applied across Wales
- Clear national strategic direction for social services and its sector
- Sufficiently resourced for current and future needs of Wales
- Fair and equitable
- Transparent
- Support planning for future care costs
- Services will be co-produced
- Services integrated with health, housing and other services
- Strong enough to convince Welsh citizens that they should contribute

The promise must set out what individuals can expect

- Care and support available as and when people need it, quick and easy access

- To be listened to and have choices (voice and control)
- Continuity of personnel wherever possible
- Support to meet their well-being objectives
- Support to achieve independence and “what matters to them”
- Focused on personal outcomes
- Person-centred care
- People can expect to be supported at home
- Placements and services as close to home as possible
- All needs will be considered equally
- To be involved in developing their services (co-production)

The promise must set out what the community can expect

- Better quality of life for all members of Welsh communities
- Demonstrate added value to the community, wider well-being in social and economic terms
- Safeguarding citizens with the highest need as a priority

The promise needs to describe the services that will be delivered

- Prevention, wide scale, joined up
- Social care services
- Sector partners’ services
- Integrated and intelligent commissioning on a partnership basis
- Offers for specific services and service users to be defined

The promise needs to describe the characteristics of the services that will be delivered

- Stable and sustainable across the sector
- Responsive
- Accessible to all without undue bureaucracy and formality
- Flexible to meet the needs of the individual
- High quality, people can have confidence in the service
- Staffed by skilled individuals who are qualified, sensitive and respectful
- Safe
- Based on improving quality and achieving measurable outcomes
- Provided in collaboration by managing common resources
- Seamless from service to service and between social care to Health and Housing

The promise must clearly set out responsibilities

- There should be clarity of responsibility – social care, police, Health. For example who is responsible for transport to a social care service?

The promise must describe the funding model

- Explain funding model to date and future model
- Describe what is included and what is not included
- Set out the contribution from
 - Local Authority budgets
 - Individuals / charges
 - Top-up fees / co-payments
 - Funding from other services e.g. Health, Housing
- Set out who is entitled to care including free at point of access services, services which must be paid for, services for which there will be co-payments
- Explain the role of means testing and the capital limit
- Set out what self-funders can expect
- The funding model should be transparent and have accountable governance to enable public scrutiny
- Describe opportunities for dedicated communities to take greater responsibility for meeting individual's needs, for example using direct payments and community commissioning models to support local eligible individuals
- It must describe its effect on other payments such as Disability Living Allowance and Personal Independence Payments

The promise must be based on a quality workforce

- A workforce with identity and worth
- An attractive and fairly remunerated workforce
- Learning based training and development

Question 5

Do you have any other comments to inform this Work Programme?

The following comments were provided by organisations (each comment from 1 organisation only)

General

- The consultation paper seemed to be all about adult services and include very little on children's services. Evidence on children's services financial base was missing (Local Authority)
- General themes and priority areas will come from the regional population assessments, area plans and Director of Social Services' Annual Reports
- We need to aim for complete integration of services, this is more advanced in Scotland and Northern Ireland (UKCHA)

Other issues impacting on social care need and provision

- We need to consider the impact of wider cuts on Local Authority services e.g. cuts to youth clubs, and the knock on impact to eligibility criteria
- Impact of Care Inspectorate Wales (CIW) registration. Some children's clubs are closing as they now need to be registered as "Children's Day Care" by CIW. Whilst understandable to safeguard children and promote quality, the 'real world' impact would appear to be at odds to our duty to promote social enterprises, co-operatives, community-based user-led services and the third sector.

Prevention

- There is an expectation to create more preventative services when we still need to provide services for current clients with no additional funding to do this. Savings from prevention will not be seen until the long term, prevention will not save us money in the short term (Local Authority)
- Evidence on the effective of preventative services is poor, likely effectiveness is unsure so policy makers are reluctant to shift resources from care to prevention service. Preventative services do not necessarily result in financial savings even if they do result in better outcomes and well-being (Academic)

Examples of relevant work

- Age Cymru has established a Task and Finish Group to develop a more detailed Age Cymru policy position on Paying for Care. The Task and Finish Group are aiming to make recommendations to the Age Cymru Board of Trustees early in 2019.
- British Red Cross provided examples of innovative services by British Red Cross
 - PIVOT: A seven day a week Prevention and Enablement Project across Pembrokeshire since 2014
 - Transport home currently delivered by PACTO & RVS Volunteers
 - Positive Steps/Campau Cadarn: Positive Steps is a partnership between two organisations – RVS Cymru and Red Cross. It aims to support older people across Wales to regain and maintain their independence living in the community.