

Welsh Government Delivering Transformation Grant (DTG)

An analysis of the predicted increase in projected future pressures on social care and Regional Partnership Board plans to address these

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1. Document version

No.	Description
0.1	Initial draft
0.2	Internal draft
0.3	Internal draft
0.4	Following comments from Steve Milsom and additional requirements identified

2. Document description

- This document describes the current and predicted future pressures on social care in Wales and plans that the Regional Partnership Boards have put in place to address these issues
- This paper sets out the starting position for the Welsh Government Delivering Transformation project
- The project will use this information to assess how local government would use the proceeds of any social care levy and the practical content of any resultant social care "promise"

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4. Executive Summary

- 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 understanding the current situation and predicted future pressures on social care in Wales.
- From this analysis and examination of other research, the major issue is the predicted ageing population alongside the fall in Council budgets in Wales. The population of people aged 85 and over is expected to double by 2035.
- An aging population will lead to major increases in need for care and support as a result of
 - The additional health problems that come with age. Although life expectancy has increased, health life expectancy has not. The number of people living with limiting long-term illnesses is expected to increase. Dementia is a particular concern as is sensory impairment, stroke and continence issues.
 - o The lack of mobility and ability to self care
 - As people get older their carers also get older, and carers already have greater care and support needs themselves
 - There will be more older people living alone.
- Real net budget figures show that over the past ten years Council budgets have fallen by 13%. However, social services budgets have been protected, they have grown by 8% in real terms over the same period (real budgets have been adjusted for the effect of inflation). Despite this protection of social services budgets, the rise is not enough to cover the growth in demand that social care is facing. This level of protection is also unlikely to be sustainable in the face of austerity
- To maintain service provision at its current level Wales will need an increase in budget of about 25% by 2025.
- Professor Gerald Holtham (Paying for Social Care independent report to the Welsh Government) estimates that by 2035 there will be a gap between demand and available resources of over 50 per cent of current spending for social care of the elderly.
- There are also some issues around the predicted care and support needs for children, although the data is not as strong. The numbers of looked after children have increased and mental health, bullying and self-harm are causing concern. The numbers of families with one adult and dependant children is predicted to increase.
- Projections for health, mental health and other important factors (family circumstance, smoking, alcohol consumption, obesity etc) are based on applying the current incidence to predicted population changes. For older people, where the population is predicted to rise, we can clearly see problems for the future. For younger adults and children many of these important factors are predicted to remain stable as population numbers are predicted to remain relatively stable. However Population Needs Assessments provided circumstantial evidence for areas where more care and support may be needed, particularly around the mental health of children, depression, anxiety, bullying, sexting, self-harming and obesity in children. Policy changes, new or changing health treatments and societal changes may lead

to vastly different care and support needs for people than those predicted by simply applying current incidence to population projections.

- Local Authorities and Local Health Boards have together started looking at the care and support needs in their area against the services they have available. This is a requirement of the Social Services and Well-being (Wales) Act 2014 (SSWA) and is known as the Population Needs Assessment (PNA).
- They have also developed Regional Area Plans, which set out their regional and integrated priorities for the next five years in response to the issues and gaps identified in the PNAs. This is also required under the SSWA.
- Social Care Wales supported regions by providing a toolkit for the Regional Area Plans. It wasn't always clear from the plans what was an action / priority / objective. These seemed to be interchangeable in some plans. Clear actions were not set; these were generally statements of intent or signposts to other work, plans or strategies.
- Regional Area Plans identified common themes as priority areas for action alongside the core themes
 - o Integration, including pooled funding
 - o Workforce
 - Information Systems, including implementation of new Welsh Community Care Information System (WCCIS)
 - o Information, Advice and Assistance, particularly for carers
 - o Prevention
 - o Access and transport, particularly in rural regions Powys and West Wales
 - o Commissioning
 - o Welsh Language
 - o Strong and resilient community
 - o Advocacy
- Whilst many individual projects, specific to regions, were noted as actions to address these priority areas there is clearly scope for working together to develop strategies and actions to address these themes.

5. Introduction

Background

- 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.
 - o Innovative funding models to meet social care needs
 - o Innovative Care Delivery Models in the Community
 - The opportunities of pooled funds
- All three workstreams, but particularly the first, need to understand the current situation and predicted future pressures on social care in Wales. This report provides the basis for these three workstreams to make recommendations.

Legislation and policy for transformation

- It is generally understood that social care services needs to be transformed as the way services are currently delivered is unsustainable.
- The population is aging and social care budgets are not growing in line with the additional pressures this brings.
- Major legislative changes have been made in Wales over the last 5 years which set the legal context for transformation.
- The Social Services and Well-being (Wales) Act 2014¹ was developed to provide a legal framework for improving the well-being of people who need care and support, and carers who need support, and for transforming social services in Wales.
- The Regulation and Inspection of Social Care (Wales) Act 2016² followed the Social Services and Well-being (Wales) Act 2014 as the second step in making social services in Wales sustainable. The Act brings with it a move away from monitoring compliance to measuring success and impact. It makes the regulatory regime consistent with the changes which are being delivered by the Social Services and Well-being Act 2014.
- The Parliamentary Review of Health and Social Care in Wales: A Revolution from Within: Transforming Health and Care in Wales was published in January 2018³. It has been developed on the premise that the vision for health and social care in Wales should be "to revolutionise care so that it empowers individuals to take decisions, tailors care to the individual's expressed needs and preferences, is far more proactive and preventative, is provided as close as possible to people's homes, is seamless, and is of the highest quality".

¹ Social Services and Well-being (Wales) Act 2014 <u>https://www.legislation.gov.uk/anaw/2014/4/contents</u>

² Regulation and Inspection of Social Care (Wales) Act 2016 <u>http://www.legislation.gov.uk/anaw/2016/2/contents/enacted</u>

³ The Parliamentary Review of Health and Social Care in Wales: A Revolution from Within: Transforming Health and Care in Wales <u>https://gov.wales/topics/health/nhswales/review/?lang=en</u>

- The Well-being of Future Generations (Wales) Act 2015⁴ sets a duty on public bodies to improve the social, economic, environmental and cultural well-being of Wales. The public bodies listed in the Act include Local Authorities and Local Health Boards. The Well-being of Future Generations (Wales) Act 2015 specifies that population assessments undertaken as a result of the Social Services and Well-being (Wales) Act 2014, must be taken into account by the Public Services Board as part of the process of undertaking their local well-being assessment. There is a duty within the Well-being of Future Generations Act for public bodies and Public Services Boards to take into account the sustainable development principle, which is made up of five ways of working including integration. These are:
 - o Long term
 - o Prevention
 - o Integration
 - o Collaboration
 - o Involvement.
- In September 2017 the Welsh Government published 'Prosperity for All'⁵: its national strategy to deliver its key priorities for the rest of the Assembly term. The strategy is designed to drive integration and collaboration across the Welsh public sector, and put people at the heart of improved service delivery. Social care is identified as one of the 5 key priority areas which have the potential to make the greatest contribution to long term prosperity and well-being.

⁴ The Well-being of Future Generations (Wales) act 2015 <u>http://www.legislation.gov.uk/anaw/2015/2/contents/enacted</u>

⁵ Prosperity for All <u>https://gov.wales/newsroom/firstminister/2017/170919-new-national-strategy-for-a-more-prosperous-wales/?lang=en</u>

Requirements on Local Authorities

- The Social Services and Well-being (Wales) Act 2014 sets out the requirement for Local Authorities and Local Health Boards alongside the third and independent sector to
 - o identify care and support needs, and the needs of carers, in the area
 - o look at the services and assets available to meet those needs
 - o identify actions in response to the assessment and any unmet needs.

These are known as the Regional Populations Needs Assessments.

- In April 2016, seven statutory regional partnerships came into being. Their purpose is to drive the strategic regional delivery of social services in close collaboration with health. The Regional Partnerships worked together to publish their Regional Population Needs Assessments by April 2017. This was the first time the regions had worked together in this way and Social Care Wales provided a toolkit for the assessment⁶. The geographical makeup of the Regional Partnership Boards is shown in **Appendix 2**.
- The Boards have a statutory duty to focus on the priority areas of integration set out in part 9 of the Social Services and Wellbeing (Wales) Act. These are:
 - Older people with complex needs and long term conditions, including dementia.
 - People with learning disabilities
 - Carers, including young carers
 - o Integrated Family Support Services
 - o Children with complex needs due to disability or illness

To support this activity, Welsh Government has provided funding through the Integrated Care Fund (ICF).

- Regions looked at care and support themes across a number of core themes
 - o children and young people;
 - o older people;
 - o health and physical disabilities;
 - o learning disabilities and autism;
 - o mental health;
 - o sensory impairment;
 - o carers who need support; and
 - o violence against women, domestic abuse and sexual violence
 - o secure estate, this is an additional themes for relevant regions
 - They also identified any other themes which were relevant to their area e.g. homelessness, substance misuse, veterans
- At the same time regions were undertaking the Population Needs Assessments, local areas were undertaking well-being assessments as part of the Well-being of Future Generations (Wales) Act 2015. These assess the state of well-being locally, set objectives and produce a plan designed to improve economic, social, environmental and cultural well-being in a local area. Most regions conducted their well-being and population assessment work jointly and all regions are aware of the links between the two according to Social Care Wales.

⁶ Social Care Wales Population Assessment Toolkit <u>https://socialcare.wales/resources/population-assessment-toolkit</u>

Following the publication of the Population Needs Assessment reports, each region produced an Area Plan, which sets out its regional and integrated priorities for the next five years. Requirements for area plans are set out in statutory guidance⁷. The plans set out what regions will do to respond to the care and support needs identified in the Population Needs Assessments. These plans were published in April 2018. Social Care Wales provided a toolkit with a clear template for the Area Plans⁸ structured around the core themes used in the Population Needs Assessments.

⁷ Statutory guidance on Regional Area Plans <u>http://gov.wales/docs/dhss/publications/170404sguideen.pdf</u>

⁸ Social Care Wales Area Plan Toolkit <u>https://socialcare.wales/hub/hub-resource-sub-categories/planning-and-promoting</u>

Other evidence, research and linked work

This report does not include a literature review of all the evidence relating to current and projected needs for social care in Wales but does consider the following key information:

- WLGA and ADSS Cymru evidence to the Health, Social Care and Sport Committee on the Welsh Government Draft Budget 2018-19⁹
- WLGA and ADSS Cymru evidence to the Finance Committee Inquiry into the Costs of Caring for an Ageing Population¹⁰
- National Assembly for Wales Finance Committee Inquiry: The Cost of Caring for an Ageing Population Summary of Responses to Consultation¹¹
- A Written Statement was issued by the Government in June 2018- Paying for Social Care independent report by Professor Gerald Holtham¹²
- The lives we want to lead: The LGA green paper for adult social care and wellbeing¹³

http://senedd.assembly.wales/mglssueHistoryHome.aspx?IId=20013

⁹ WLGA and ADSS Cymru evidence to the Health, Social Care and Sport Committee on the Welsh Government Draft Budget 2018 <u>http://www.adsscymru.org.uk/wp-content/uploads/2017/10/Joint-Evidence-Submission-by-WLGA-and-ADSS-Cymru-to-WAG-on-Draft-Budget.pdf</u>

¹⁰ WLGA and ADSS Cymru evidence to the Finance Committee Inquiry into the Costs of Caring for an Ageing Population <u>http://senedd.assembly.wales/documents/s71955/CCAP%2021%20Welsh%20Local%20Government%20Association%20Association%20of%20Directors%20of%20Social%20Services%20Cymru.pdf</u>

¹¹ National Assembly for Wales Finance Committee Inquiry: The Cost of Caring for an Ageing Population Summary of Responses to Consultation

¹² Paying for Social Care – independent report by Professor Gerald Holtham <u>https://gov.wales/about/cabinet/cabinetstatements/2018/payingforsocialcareholthamreport/?lang=en</u>

¹³ The lives we want to lead: The LGA green paper for adult social care and wellbeing <u>https://futureofadultsocialcare.co.uk/</u>

The following research is relevant but not considered in detail due to time limitations:

- National Assembly for Wales Consultation: The Cost of Caring for an Ageing Population. Submission by Wales Public Services 2025, Joseph Ogle, February 2018
- Approaches to Social Care Funding: Social care funding options, Lillie Wenzel, Laura Bennett, Simon Bottery, Richard Murray, Bilal Sahib, February 2018
- A fork in the road: Next steps for social care funding reform. The costs of social care funding options, public attitudes to them and the implications for policy reform, Simon Bottery, Michael Varrow, Ruth Thorlby, Dan Wellings, May 2018
- Accessing and paying for Social care in Wales, Citizen's Advice Cymru, August 2016
- A delicate balance? Health and social care spending in Wales, Wales Public Services 2025, March 2017
- Transformational change in health and care: Reports from the field, The King's Fund, May 2018

Links to these sources are provided in **References and key links** at the end of this report.

6. Methodology

This report brings together information from 4 key areas to describe the current and predicted expectation for social care needs and plans already in place to address these. The information is presented in line with the core themes for the Population Needs Assessments.

1. What the data tells us

- Statistics published by the Welsh Government and others on
 - o Demography, particularly population projections
 - o Social care
 - o Health

There is a large amount of information available and time available for statistical data analysis for this report is limited. Also the individuals Regional Population Needs Assessments have looked in detail at their regional statistics across these areas. This report will therefore present the key information only.

Social Care Wales worked with the regions and Data Cymru to develop a list of data items and sources that regions should use when compiling their Population Needs Assessments in a Statistical Data Catalogue. They have since developed this work to bring the information together in one place as a National Social Care Dataset for Wales which is available publically¹⁴. The exception is finance and budget data for social care which has not yet been brought into the Dataset but plans are in place to incorporate it. Budget data has been included in this analysis.

There are other data which could be examined to help support the key data but these are not included in this study due to time limitations, for example

- Youth justice
- Housing needs for older people

¹⁴ National Social Care Dataset for Wales <u>http://www.socialcaredata.wales/IAS/</u>

2. What the regions say

Regions own assessments of their needs and plans to address these

- o Regional Population Needs Assessments
- o Regional Area Plans
- Also, other summaries of regions' views
 - Social Care Wales summary of the Population Needs Assessments for Wales
 - ADSSC examination of the key trends for children from the Population Needs Assessments produced as part of the Prevention and Early Intervention work stream for ADSSC delivering Transformation Programme in 2017

Appendix 1 lists the Regions and provides links to the Population Needs Assessments and Area Plans.

3. Other key information and research

- a. WLGA and ADSS Cymru evidence to the Health, Social Care and Sport Committee on the Welsh Government Draft Budget 2018-19
- b. WLGA and ADSS Cymru evidence to the Finance Committee Inquiry into the Costs of Caring for an Ageing Population
- c. National Assembly for Wales Finance Committee Inquiry: The Cost of Caring for an Ageing Population Summary of Responses to Consultation
- d. A Written Statement was issued by the Government in June 2018- Paying for Social Care independent report by Professor Gerald Holtham
- e. The lives we want to lead: The LGA green paper for adult social care and wellbeing

7. What the regions say: Regional Population Needs Assessments

Background

In April 2017, regions across Wales published an assessment of the care and support needs of their area. Population assessments, as they are known, are a requirement of the Social Services and Wellbeing (Wales) Act 2014. The assessments are a joint exercise, undertaken by local health board and local authorities in partnership with the third and independent sectors across each region. These are overseen by the Regional Partnership Boards whose purpose is to drive the strategic regional delivery of social services in close collaboration with health.

The purpose of the assessments is to:

- identify care and support needs, and the needs of carers, in the area
- look at the services and assets available to meet those needs
- identify actions in response to the assessment and any unmet needs.

Social Care Wales produced a Wales version of the population needs assessments in November 2017. This work has not been repeated here in order to avoid duplication of effort but summarises the key messages.

Section 8 looks in detail at the Regional Area Plans and the key areas brought forward from the Population Needs Assessments as requiring action. It maps these and the actions across Wales identifying common themes and highlighting regions that have particular challenges.

Key areas

- Integration
- Prevention
- Loneliness and isolation
- Reducing poverty and deprivation
- Being independent
- Adopting flexible, outcome focused ways of care
- Building resilience, in individuals and communities
- Welsh language
- Advocacy

8. What the data tells us

8.1 Budgets

Current and past budgets

Information presented

- Table 1: All Wales Council and Social Services budgets 2008-2019
 - Nominal (actual reported values)
 - Real (Adjusted for inflation)
- Figure 1: All Wales Council and Social Services budgets 2008-2019, nominal and real, Wales 2008-2018
- Table 2: Council and Social Services budgets, by region, 2018-19
- Figure 2: Social Services budgets as a % of Council budget, 2008-2019
- Figure 3: Change in Council and Social Services Budgets from 2008-09 to 2018-19

Key messages from the information

- For 2018-19 All Wales Councils net budget is £7,217m, the All Wales Social Services net budget for 2017-18 is £1,840, 26% of the Council budget.
- When comparing budgets going back further in time is it sensible to remove the effect of inflation from the monetary values. These figures are known as 'real budget' figures.
- Real net budget figures show that over the past ten years (2008-09 to 2018-19) Council budgets have fallen by 13%. However, social services budgets have been protected, they have grown by 8% in real terms over the same period (Table 2, Figure 1).
- Council budgets have fallen for all Local Authorities over the past ten years. All regions have seen an increase in social services budgets in real terms over the period, although three individual Local Authorities saw a decrease (Figure 3).
- Powys region saw the greatest % decrease in Council budget over the last 10 years yet the highest % increase in social services budget over the same period. Under difficult financial constraints Pembrokeshire Council are continuing to invest in social care.
- North Wales saw a 14% decrease in Council budget over the last 10 years and a modest 1% increase in Social Services budget over the same period. Some regions are facing greater budget pressures than others.
- Despite this protection of social services budgets, the rise is not enough to cover the growth in demand that social care is facing.

		Nominal b	ts (adjusted ation)			
	Year	Council	Social Services	Social Services as a % of Council budget	Council	Social Services
Net budgets	2008-09	6,523	1,349	20.7	6,523	1,349
£m	2009-10	6,835	1,418	20.7	6,871	1,425
	2010-11	6,957	1,461	21.0	6,683	1,404
	2011-12	7,072	1,487	21.0	6,459	1,358
	2012-13	7,248	1,536	21.2	6,415	1,360
	2013-14	7,334	1,640	22.4	6,298	1,409
	2014-15	7,288	1,673	23.0	6,115	1,404
	2015-16	7,153	1,667	23.3	5,944	1,385
	2016-17	7,214	1,728	24.0	5,889	1,411
	2017-18	7,109	1,729	24.3	5,604	1,363
	2018-19	7,217	1,840	25.5	5,689	1,450
Percentage	2009-10	4.8	5.1		5.3	5.7
change in	2010-11	1.8	3.0		-2.7	-1.5
net budget from	2011-12	1.7	1.7		-3.4	-3.3
previous	2012-13	2.5	3.3		-0.7	0.2
year	2013-14	1.2	6.8		-1.8	3.6
	2014-15	-0.6	2.0		-2.9	-0.3
	2015-16	-1.8	-0.4		-2.8	-1.3
	2016-17	0.8	3.6		-0.9	1.8
	2017-18	-1.4	0.1		-4.8	-3.4
	2018-19	1.5	6.4		1.5	6.4

Table 1: All Wales Council and Social Services net budgets (nominal and real¹⁵) 2008-2019

Source: Welsh Government, Budgeted Revenue Expenditure (RA), and Revenue Outturn Expenditure (RA)

¹⁵ Nominal values for the budgets are the actual budget values for the year. Real budget values are the budget values adjusted to remove the effect of general inflation. This allows us to compare monetary values across years where the effect of inflation has been removed. The Retail Price Index (RPI) has been used to adjust for inflation and 2008-09 as the base year.

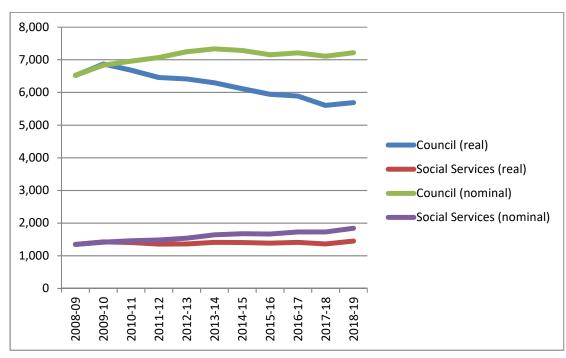


Figure 1: All Wales Council and Social Services budgets 2008-2019, nominal and real, £k 2008-2018

Source: Welsh Government Budgeted Revenue Expenditure (RA), Welsh Government Revenue Outturn Expenditure (RA), Office for National Statistics (ONS)Retail Price Index (RPI)

			Change in real budget			
	N	ominal budge	from 2	008-09		
			Services as			
		Social	a % of		Social	
	Council	Services	Council	Services		
	£m	£m	%	%		
Wales	7,217	1,840	25.5	-12.8	7.5	
North Wales	1,569	396	25.2	-14.1	0.7	
Powys	308	85	27.5	-17.0	15.2	
West Wales	866	223	25.8	-16.0	10.9	
Western Bay	1,251	311	24.8	-11.7	9.7	
Cwm Taf	764	203	26.6	-8.8	6.8	
Gwent	1,362	357	26.2	-15.7	7.1	
Cardiff and the Vale	1,097	265	24.2	-6.9	12.1	

Table 2: Council and Social Services budgets by region, 2018-19

Source: Welsh Government Budgeted Revenue Expenditure (RA), Welsh Government Revenue Outturn Expenditure (RA), Office for National Statistics (ONS)Retail Price Index (RPI)

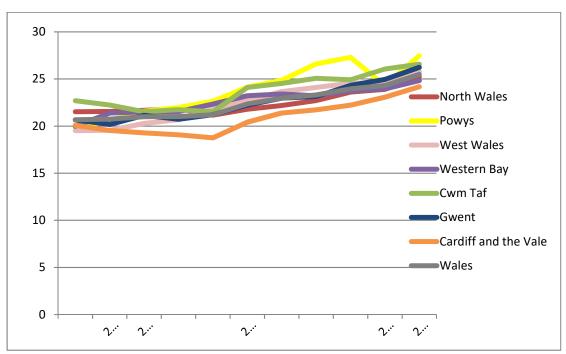
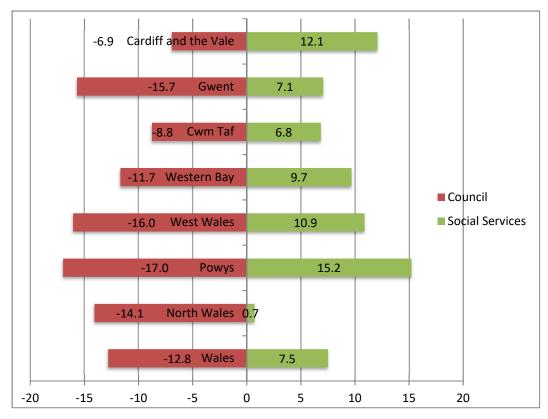


Figure 2: Social Services budget as a % of Council budget, 2008-2019

Figure 3: Change in Council and Social Services Budgets from 2008-09 to 2018-19 %



Projected budgets

A number of studies have looked at the projected future cost of social care based on the current issues facing the sector. This section refers to information from

- WLGA and ADSS Cymru evidence to the Health, Social Care and Sport Committee on the Welsh Government Draft Budget 2018-19
- WLGA and ADSS Cymru evidence to Finance Committee Enquiry: The Cost of Caring for an Ageing Population
- Written Statement issued by the Government in June 2018- Paying for Social Care independent report by Professor Gerald Holtham

Information presented

- Figure 4: Elderly people receiving care and real spending per head
- Table 3: Changes in older adult social care spending, 2007-8 to 2016-17 (2016-27 prices)
- Table 4: Social Services budgets as a % of Council budget, 2008-2019

The issues

- Since the introduction of austerity measures in 2010 local public services have faced at least £1bn in cuts across Wales. At the same time the public sector workforce has been impacted, initially by a two-year pay freeze, followed by a 1% cap over the last five years.
- A growing ageing population means spending on social care for the over 65's is not keeping pace with the growth in the population of older people. Whilst day-to-day spending on local authority-organised adult social services has remained broadly flat in real terms, spending per older person has decreased.
- It has been estimated that pressures on adult social care alone will rise by around 4.1% a year in real terms between 2015 and 2030-31, due to demography, chronic conditions and rising costs. This will require the social care budget to almost double to £2.3bn by 2030-31 to match demand.
- The changing demographics will also impact on unpaid carers. An ageing population with improved life expectancy for people with long term conditions or complex disabilities means the need for more high-level care provided for longer. We are likely to see more older people in a caring role, with the number of carers over 85 predicted to double in the next 20 years. Increasing hours of care often results in the general health of carers deteriorating incrementally.
- Social care has been identified as a sector of national strategic importance by Rebecca Evans AM, the Minister for Social Services and Public Health.
- Pressures due to social care continue to pose the most risk to council's financial sustainability in the medium to long term. The current funding arrangements will not cover the expected increases in cost and demand facing social services.
- The WLGA and ADSS Cymru are firmly of the view that the current levels of financial stress faced by councils cannot continue. Investment in preventative services must be the core priority for Welsh Government and longer-term planning is needed.

- As a result of demographic changes primary and community care services are facing increasing and more complex demands; more people are diagnosed with one or more preventable health condition; and frail, older people increasingly have more complex needs.
- Demand from people over 65 years of age continues to grow considerably and has resulted in rising numbers of GP appointments, demand for social care services and pressures in secondary care services.
- We are likely to see more older people in a caring role, with the number of carers over 85 predicted to double in the next 20 years.
- Preventative support from community and third sector services are reducing, arising from councils and other bodies re-directing resources to statutory functions and critical services, due to budget challenges over recent years. (SCW)
- There are other specific challenges being face by both social care services which collectively add significant additional financial pressures:
 - Price pressures associated with National Minimum Wage increases
 - Pressures associated with changes to the Social Services Charging Framework
 - Changes to Deprivation of Liberty Safeguards (DoLS) following the Cheshire West Judgement
 - o Increases in the numbers of looked after children
 - o Sleeping in judgements
 - Pension changes
 - o Travel costs
 - o Impact of HMRC changes
 - o Issues with staff recruitment and retention

Figure 4: Extract from: A Written Statement issued by the Government in June 2018- Paying for Social Care – independent report by Professor Gerald Holtham: Elderly people receiving care and real spending per head

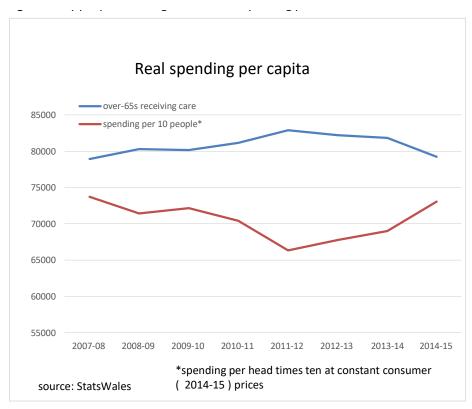


Table 3: Extract from: A Written Statement issued by the Government in June 2018- Paying for Social Care – independent report by Professor Gerald Holtham: Changes in older adult social care spending, 2007-8 to 2016-17 (2016-27 prices)

	LA spending (2016-	17 prices)	Percentage		
	2007-8	2016-17	change		
All-Wales					
	581.8	551.7	- 5.2		
(£m)	501.0	551.7	- 3.2		
Per capita (£)	1,098	869	-20.8		
Source: StatsWales : population over	ONS: CPI ex housing	plus 🕬 🖾			
65 and LA expenditure outturns;	costs;	calculations			

Estimate of projected budgets

- Due to demographic changes demand for spending is projected to rise by just over 85 per cent by 2035, comprising a 20 per cent increase in spending per head and an increase in numbers requiring care of over 55 per cent.
- Even if the UK economy and the Welsh budget grows at 1 ½ per cent a year faster than care costs, spending a constant proportion of the budget on care will lead to a real increase in funding of only around 30 per cent for social care of the elderly by 2035. That would leave a gap between demand and available resources of over 50 per cent of current spending.

Table 4: Extract from: A Written Statement issued by the Government in June 2018- Paying forSocial Care – independent report by Professor Gerald Holtham: Projected increase in expendituredemand

	percent increase from 2017
2017	-
2020	6.2
2025	44.0
2030	63.2
2035	87.1
2040	101.6

Source: author's calculations

The Situation in England

The Local Government Association in England published a green paper on adult social care and well-being in July 2018: The lives we want to lead. Whilst its focus is on England the Welsh Local Government Association were involved in its development as the issues are generally consistent.

- In England £15 billion is spent on social care per year, an additional £3.6 billion will be required per year by 2025 just to remain at the current rate of provision. That is an increase of 24%.
- Age UK estimates that there are 1.4 million people not getting the help they need.
- Growth in jobs in social care has fallen behind the demand for services.
- Social care has high vacancy and high turnover rates. We know the situation is the same in Wales.

The Impact of Austerity

Local government has been struggling following years of austerity. The growth in social care budget in real terms is not in line with the growth in need. Local government has kept the worst consequences of austerity at bay in recent years but its impact is now catching up with councils, threatening services that improve lives and communities. The major impacts of austerity are

- Local authorities have been balancing service delivery and budgets using eligibility criteria to determine met and unmet needs. Met needs are those the local authority provide services for and are above the eligibility criteria. Clearly shifting the eligibility criteria to increase unmet needs and decrease met needs is a way of making savings in social care. At some point this will impact on people's health and well-being.
- There is little scope for cost pressures to be reflected adequately in prices paid for care in the near future. Increases in costs cannot be absorbed by care providers indefinitely (nor cross-subsidised by self-funders) and unless a more strategic and sustainable solution is found, there will be significant consequences across the social care market.
- If services continually need to increase in numbers and complexity then quality is likely to fall unless effective preventative measures are in place.

8.2 Geography, deprivation, poverty and the Welsh Language

Geography

- There is no single definition and measure of rurality in Wales.
- Research into ageing in rural communities has described a set of compounding factors which result in 'multiple disadvantage' as rurality impacts on many factors including housing, deprivation, access to services and, vitally, levels of physical and social isolation. Evidence indicates that rural areas are also ageing faster.
- Clearly there are different challenges facing Cardiff and Vale region where population density is high, compared with Powys where population density is low.
- One of the major issues relating to rurality and care and support needs is transport. Some areas do not have good access to public transport and services may be located some distance away from individuals' homes. This could prevent people not only from accessing critical services but also preventative services, which may lead to higher future care and support needs.

Deprivation

- In nearly all instances, people living in the more deprived areas experience worse health than those in more affluent ones. There are therefore more likely to have care and support needs.
- All regions contain areas with high deprivation (according to the Welsh Index of Multiple Deprivation 2014). North Wales has the highest number of Lower Super Output Areas which are within the 10% most deprived in Wales, followed by Gwent and Western Bay.

Welsh language

- According to the 2011 Census 19% of people in Wales speak Welsh.
- West Wales and North Wales have the highest proportion of Welsh speakers, 37% and 31 % respectively. 19% of people in Powys speak Welsh. Proportions in Western Bay, Cwm Taf, Gwent and Cardiff and the Vale are lower at 10-12%.
- More than just words.... Follow-on strategic framework for Welsh language services in health, social services and social care¹⁶ requires Health Boards and Councils to plan their work to improve their offer including more services through the medium of Welsh. This builds on the Welsh Government's strategic framework for Welsh language services in health, social services and social care which has helped to improve Welsh language services in the sector. A priority is to maximise the active offer to speak Welsh, ensuring people can secure their rights and entitlements by using their own language to communicate and participate in their care as equal.

 ¹⁶ More than just words.... Follow-on strategic framework for Welsh language services in health, social services and social care <u>https://gov.wales/topics/health/publications/health/guidance/words/?lang=en</u>

- There will be differing issues in areas with higher and lower proportions of Welsh speakers around being able to provide sufficient Welsh speaking assessors and service providers for the local population.
- The sector has difficulty recruiting sufficient Welsh speakers to meet the needs of the elderly population, particularly outside areas with a significant Welsh speaking population of working age. Welsh speakers are in high demand and can thus obtain terms and conditions over and above what most care providers are able to raise.

8.3 Population

Information presented

- Table 5 Population projections, numbers and change 2018-2038
- Table 6: Projected population change from 2018
- Figure 5: Projected population change from 2018, Wales and Powys

Population changes

- Over the next 10 years (from 2018 to 2028) the population is projected to grow by 3% across Wales. However, the growth varies across area and age group.
- In general, the population of younger people (under 18 and 18-64) is projected to fall over the next 10 years whilst the population aged 65 and over is projected to increase. This mean that as the population ages there are fewer young people to care for them placing more need on local authorities to provide care and support.
- The population of children (under 18s) is predicted to remain fairly constant over the next 10 years in Wales but there are large variations across regions. Powys is predicted a 4% decrease in under 18 year olds whilst Cardiff and the Vale are predicted to see a 10% increase. Looking 20 years ahead Powys will see a 12% decrease and Cardiff and the Vale a 16% increase.
- The population of people aged 65-74 and 85+ are expected to grow significantly over the next 10 years. 65-74 year olds are predicted to increase by 15% by 2028 and 22% by 2038.
- People aged 85 and over are predicted to increase by 33% by 2028 and to have more than doubled by 2038. That is an additional 37 thousand people by 2028 and a further 63 thousand by 2038 (a total additional 100 thousand people across Wales in 20 years' time).
- As these groups are more likely to need care and support than younger individuals careful planning is required so that the needs of these people can be prevented, minimised or met.
- Powys sees the biggest growth in people aged 85 or over, with a growth of 47% by 2028 rising to 123% by 2038.
- The biggest challenges rising from the change in population age are likely to be seen in Powys, with a greater decrease in children and younger adults and a greater increase in people aged 85 or over.

The challenges associated with an older population

- Increase in number of older people will cause a rise in chronic conditions such as circulatory and respiratory diseases and cancers.
- Limiting long-term conditions and disability are generally more prevalent amongst the older age group.
- Frailty is a complex concept as it not an illness but a distinctive state of health, related to the ageing process, in which multiple body systems gradually lose their in-built reserves.
- The risk of being admitted to hospital increases with age.
- As people age they are more likely to need help with self-care, domestic tasks and have reduced mobility.
- The prevalence of dementia is also associated with aging and the condition is one of the major causes of disability in later life.
- Falls are a common and serious problem for older adults.

		2018	2023	2028	2033	2038	%	%
				Thousands			change 2018- 2028	change 2018- 2038
Wales	<18	626	640	637	631	629		
wales	18-64	1,840	1,817	1,792	1,761	1,741	2	1
	65-84	571	609	655	683	699	-3	-5
	85+	88	103	124	162	188	15 42	22 114
	All ages	3,125	3,169	3,208	3,237	3,256	42	4
North Wales	<18	140	143	141	139	139	1	-1
North Wales	18-64	398	391	385	376	369	-3	-7
	65-84	140	149	158	163	167	13	19
	85+	22	26	31	41	47	43	115
	All ages	700	708	715	720	722	2	3
Powys	<18	24	24	23	22	21	-4	-12
100033	18-64	71	68	63	58	55	-11	-24
	65-84	31	33	35	36	36	13	15
	85+	5	6	7	10	11	47	123
	All ages	132	131	129	127	123	-2	-7
West Wales	<18	73	73	72	71	70	-1	-3
	18-64	219	214	210	204	201	-4	-8
	65-84	82	87	93	94	94	13	15
	85+	13	15	18	24	28	43	116
	All ages	386	390	392	394	393	2	2
Western Bay	<18	103	104	104	103	102	1	-1
	18-64	317	315	311	307	305	-2	-4
	65-84	94	100	108	113	116	15	23
	85+	15	17	20	26	30	40	109
	All ages	529	537	544	549	553	3	5
Cwm Taf	<18	62	63	63	62	61	1	-1
	18-64	178	176	173	170	168	-3	-6
	65-84	51	53	57	60	61	13	21
	85+	7	8	9	12	14	39	110
	All ages	298	300	303	304	304	2	2
Gwent	<18	122	123	121	118	116	-1	-4
	18-64	344	337	330	319	311	-4	-10
	65-84	104	111	120	127	131	15	26
	85+	15	18	22	28	33	46	123
	All ages	584	589	592	592	591	1	1
Cardiff and the	<18	103	109	113	116	120	10	16
Vale	18-64	313	316	321	326	334	3	7
	65-84	69	75	84	89	93	22	35
	85+	11	13	15	20	23	33	104

Table 5: Population projections, numbers and change 2018-2035

|--|

Source: Welsh Government 2014-based projections for local authorities in Wales

		2018	2023	2028	2033	2038
Wales	<18	-	2	2	1	1
North Wales		-	2	1	-1	-1
Powys		-	-1	-4	-8	-12
West Wales		-	0	-1	-3	-3
Western Bay		-	1	1	0	-1
Cwm Taf		-	2	1	0	-1
Gwent		-	1	-1	-3	-4
Cardiff and the Vale		-	6	10	13	16
Wales	18-64	-	-1	-3	-4	-5
North Wales		-	-2	-3	-6	-7
Powys		-	-5	-11	-18	-24
West Wales		-	-2	-4	-7	-8
Western Bay		-	-1	-2	-3	-4
Cwm Taf		-	-1	-3	-5	-6
Gwent		-	-2	-4	-7	-10
Cardiff and the Vale		-	1	3	4	7
Wales	65-84	-	7	15	20	22
North Wales		-	6	13	16	19
Powys		-	6	13	15	15
West Wales		-	6	13	15	15
Western Bay		-	7	15	20	23
Cwm Taf		-	5	13	18	21
Gwent		-	6	15	22	26
Cardiff and the Vale		-	10	22	30	35
Wales	85+	-	18	42	85	114
North Wales		-	18	43	88	115
Powys		-	20	47	94	123
West Wales		-	18	43	88	116
Western Bay		-	18	40	81	109
Cwm Taf		-	17	39	83	110
Gwent		-	20	46	92	123
Cardiff and the Vale		-	15	33	71	104
Wales	All ages	-	1	3	4	4
North Wales		-	1	2	3	3
Powys		-	-1	-2	-4	-7
West Wales		-	1	2	2	2
Western Bay		-	1	3	4	5
Cwm Taf		-	1	2	2	2
Gwent		-	1	1	1	1
Cardiff and the Vale		-	4	8	11	15

Table 6: Projected percentage population change from 2018

Source: Welsh Government 2014-based projections for local authorities in Wales

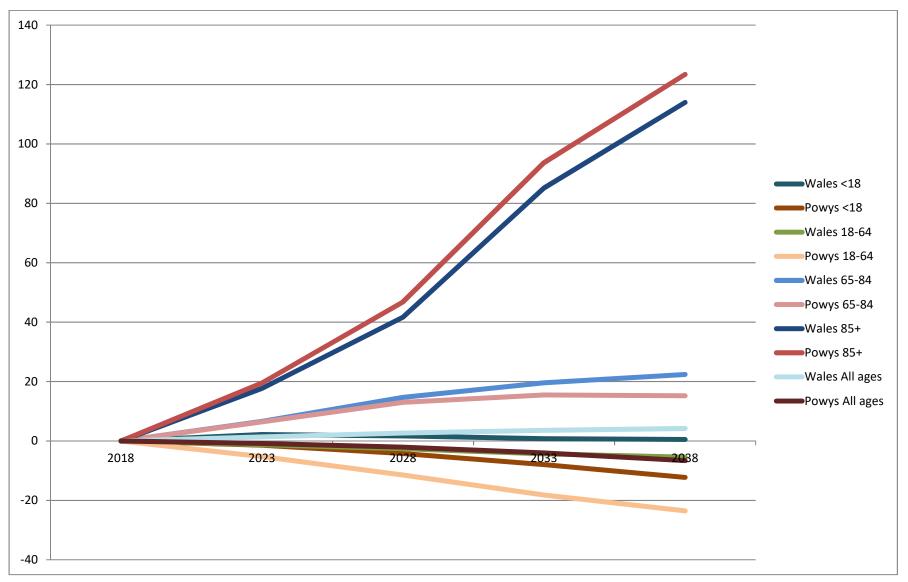


Figure 5: Population projections, change by age group 2018-2035, Powys and Wales

Source: Welsh Government 2014-based projections for local authorities in Wales

8.4 Core themes

Children and young people

Looked after children and children in need

- Table 7: Numbers of looked after children and children in need at 31 March, 2007-2017
- Figure 6: Children in need by category of need at 31 March, 2010-2016, Wales
- **Figure 7:** Children starting to be looked after in the year by need for care 2003-2016, Wales
- Figure 8: Children looked after by placement type at 31 March, 2010-2016, Wales

Looked after children

- The numbers of looked after children have risen across wales by 28% over the period 2007 to 2017.
- All regions have seen an increase in the numbers of looked after children from 2007-2017 except West Wales where there has been no change although the numbers did increase to 2012 and fall back down again. North Wales has seen the biggest increase of 41%.
- The main reason children start to be looked after is abuse and neglect. This has risen in Wales from 795 to 1,310 children from 2010 to 2017.
- Family dysfunction is lower but has increased over the period.
- Most looked after children are placed in foster placement, and numbers of children in foster placement has risen in line with the numbers of looked after children.
- Children living independently and children who are absent or other have increased over the period although numbers are small.

Children in need

- The number of children in need in Wales has remained relatively stable over the period 2010-2016, increasing slightly over the period but them decreasing to the same level by 2016 with an overall 1% increase.
- Regions have however seen a different change in the numbers of children in need over the period 2010-2016.
 - North Wales has seen a 23% increase
 - Cwm Taf a 10% increase
 - Western Bay a 5% increase
 - o Gwent a 3% increase
 - Powys a 13% decrease
 - West Wales a 17% decrease
 - Cardiff and the Vale a 20% increase
- The main reason children are in need is due to abuse and neglect. Across Wales the number of children in need due to abuse and neglect has risen from 2010 to 2017 from 9 thousand to 10 thousand.

• Children in need due to family dysfunction has fallen over the period from 4,290 to 3,215.

Children's health

- **Table 8**: Mental and physical health and learning disability conditions for children, 2017 and predicted 2035
- Where there are significant numbers of children with health conditions the predicted numbers are useful
 - o Limiting long term illness
 - o Disability under DDA
 - o Obesity
 - Moderate learning difficulty
- The numbers of children with the conditions listed above are expected to fall slightly or stay the same by 2035. This is mainly because the population of children as a whole is expected to fall.
- For the other conditions numbers are small, even at Wales level. For example, convulsive epilepsy is predicted to decrease by 9%, but this is only a decrease of 7 children across Wales. Population predictions are probably not accurate at this level meaning local authorities can plan on a basis that these conditions will stay about the same.

Family situation and special circumstances

- **Table 9**: Family situation and parental health for children, 2017 and predicted 2035
- Table 10: Special circumstances for children, 2017 and predicted 2035
 - The number of households with dependent children is predicted to rise from 2017 to 2035 in Wales, that is an additional 7 thousand families. This is despite the fall in in population of adults aged 18-64 and no change in number of children.
 - The rise is due to the rise in numbers of households with one adult and dependent children (increase of 14% or 13 thousand households) and converse fall in number of households with two adults and dependent children (2% or 5 thousand households).
 - Households with one adult and dependent children may need more care and support than households with two adults as the challenge of raising children is greater without a partner's support.
 - Abuse and neglect of children is predicted to fall slightly over the period 2017-2035 by 1%, this is a small change in numbers for Wales.
 - For special circumstances around youth justice and teenage pregnancies the numbers are small and no major changes are predicted.
 - Young carers in Wales are predicted to remain relatively stable in Wales, again the numbers involved mean changes at this level are not significant.
 - Mothers' health is predicted to improve slightly between 2017 and 2035.

												% Change 2007-
Children looked after	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2017
Wales	4,645	4,635	4,695	5,160	5,410	5,720	5,765	5,745	5,615	5,665	5,955	28
North Wales	795	815	810	885	910	970	995	1,005	990	1,070	1,120	41
Powys	140	140	140	145	170	175	150	150	135	150	155	11
West Wales	405	405	425	470	495	500	490	445	435	420	405	0
Western Bay	965	960	985	1,240	1,315	1,370	1,465	1,410	1,335	1,265	1,215	26
Cwm Taf	615	625	600	645	715	785	800	825	785	765	835	36
Gwent	1,005	995	1,045	1,070	1,080	1,125	1,120	1,105	1,090	1,160	1,270	26
Cardiff and the Vale	725	695	690	715	725	790	740	795	840	840	945	30
												% Change 2010-
Children in need	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2016
Wales	-	-	-	18,865	19,710	20,240	19,920	20,145	19 <i>,</i> 385	18,990	-	1
North Wales	-	-	-	2,940	3,560	3,250	3 <i>,</i> 365	3,505	3,255	3,615	-	23
Powys	-	-	-	745	660	715	635	660	680	650	-	-13
West Wales	-	-	-	2,140	2,200	2,115	1,990	1,895	1,885	1,780	-	-17
Western Bay	-	-	-	3,550	3,860	4,280	4,310	4,330	4,020	3,735	-	5
Cwm Taf	-	-	-	2,245	2,220	2,435	2,440	2,730	2,625	2,475	-	10
Gwent	-	-	-	4,250	4,065	4,450	4,330	4,195	4,305	4,365	-	3
Cardiff and the Vale	-	-	-	2,985	3,150	3,005	2,855	2,830	2,615	2,380	-	-20

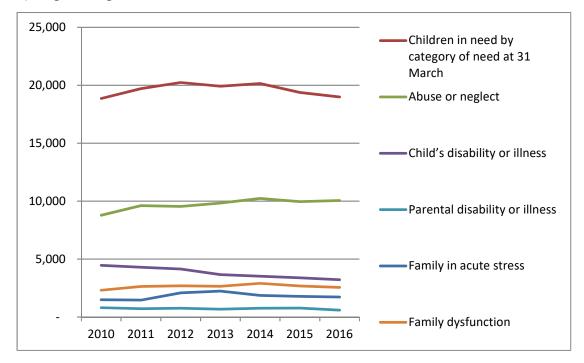
Table 7: Numbers of looked after children and children in need at 31 March, 2007-2017

Source: Welsh Government Children in Need Census

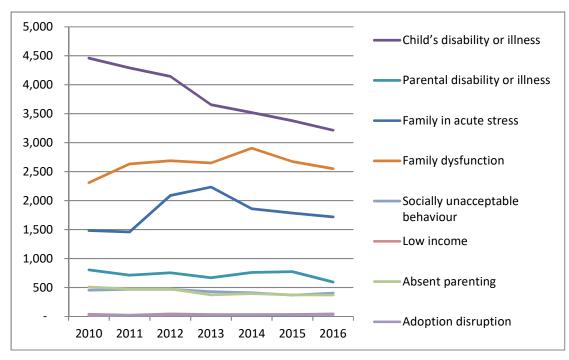
1 Numbers of children in need for 2017 not yet available

Figure 6: Children in need by category of need at 31 March, 2010-2016, Wales

a) Larger categories



b) Smaller categories



Source: Welsh Government, Children in Need Census

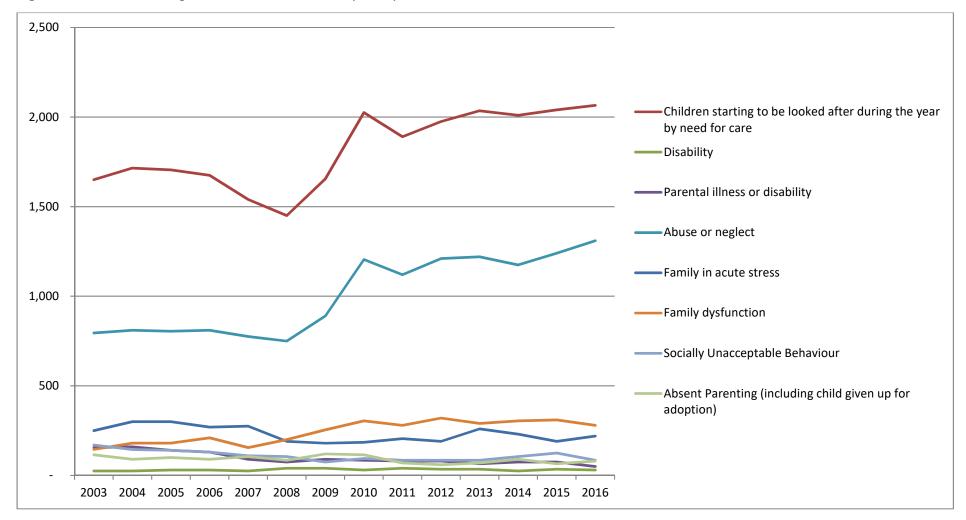
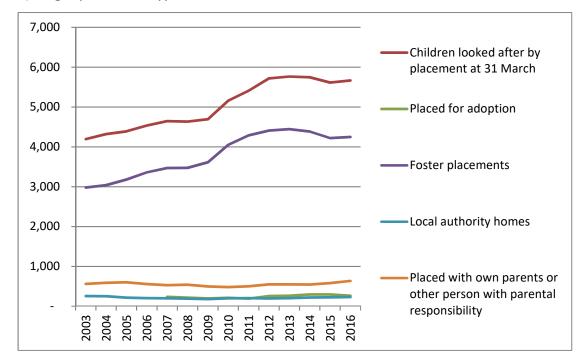


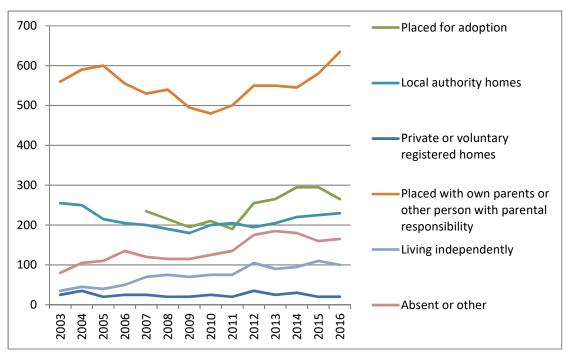
Figure 7: Children starting to be looked after in the year by need for care 2003-2016, Wales

Figure 8: Children looked after by placement type at 31 March, 2010-2016, Wales



a) Larger placement types

b) Smaller placement types



Information presented

Table 8: Mental and physical health and learning disability conditions for children, 2017 andpredicted 2035

	2017	2035	Change	Change
	No	No	%	No
Health and disability				
Limiting long term illness	31,377	30,678	-2	-699
Disability under DDA	46,302	45,896	-1	-406
Severe disability	634	629	-1	-5
Convulsive epilepsy	82	75	-9	-7
Obesity	104,015	103,746	0	-269
Hearing and visual impairment				
Visual impairment	624	591	-5	-33
Hearing impairment - lower limit	504	539	7	35
Hearing impairment - upper limit	626	669	7	43
Mental health and learning disability				
Moderate learning difficulty	22,707	22,508	-1	-199
Severe learning difficulty	2,937	2,911	-1	-26
Profound learning difficulty	723	717	-1	-6
LD, challenging behaviour	203	208	2	5
Autistic spectrum disorder	7,364	7,299	-1	-65
Down's syndrome	339	336	-1	-3

	2017	2035	Change	Change
	000s	000s	%	No
Households with dependent children				
All households	366	374	2	7
2+ adults and dependent children	274	269	-2	-5
1 adult and dependent children	92	105	14	13
1 adult and 3+ dependent children	13	13	4	1
Parental health, mother with				
Longstanding illness	166	164	-1	-1
Smokes 10 or more cigarettes per day	146	145	-1	-1
Drinks alcohol 5 or more times a week	37	37	-1	0
Who misuses drugs	22	22	-1	0
Depression or serious anxiety	65	64	-1	-1
High psychological distress	23	23	-1	0
Medium psychological distress	185	183	-1	-2
Obese or morbidly obese	97	96	-1	-1

Table 9: Family situation and parental health for children, 2017 and 2035

Source: Daffodil

Table 10: Special circumstances for children, 2017 and predicted 2035

	2017	2035	Change	Change
	No	No	%	No
Abuse and neglect				
Serious absence of care	38,056	37,723	-1	-333
Sexual abuse	38,056	37,723	-1	-333
Serious physical abuse	44,399	44,010	-1	-389
Teenage pregnancy				
Girls aged 15-17 predicted to conceive	1,488	1,672	12	184
Conceptions leading to maternities	845	950	12	105
Conceptions leading to terminations	643	723	12	80
Youth justice				

Committing an offence resulting in a disposal	3,650	4,020	10	370
Young carers				
Providing unpaid care	27,784	28,029	1	245

Older people

• Table 11: Older people, living conditions and health, 2017 -2035

Life expectancy and healthy life expectancy

- Healthy and disability-free life expectancy is rising more slowly than life expectancy. People are living longer but with increased levels of illness and disability.
- People are more likely to have care and support needs after they have reached their healthy life expectancy.
- For males life expectancy is 78.3 for females 82.3
- Healthy life expectancy for males is 65.3 for females 66.7.
- Male life expectancy after healthy life expectancy is 13 years, for females 15 years. The number of people in Wales aged 67+ is expected to increase by 33% by 2038. This amounts to large increase of people years after healthy life expectancy where care and support may be needed.

Living alone

- We can assume that people living alone will need more care and support from the local authority than people living with others.
- Evidence suggests that older people are particularly vulnerable to loneliness and social isolation
- In 2017 44% of people in Wales aged 65 and over lived alone. This is predicted to rise to 51% by 2035. The numbers of people living alone in younger age groups is predicted to remain the same.

Self-care and mobility

- As people get older their ability to look after themselves and be independent reduces.
- By 2035 the number of people aged 65 and over who are unable to manage at least one self-care activity on their own is predicted to rise by 46%; an additional 99 thousand people potentially needing care and support.
- It is projected that for Wales by 2035 the number of people aged 65 and over who are unable to manage at least one domestic task on their own will rise by 46%. That is potentially an additional 120 thousand people who will need care and support.
- It is likely that some of the people who are unable to manage at least one self-care activity will are also counted in the number of people who are able to manage one domestic task on their own; these numbers of people are not additive.
- We also expect to see an increase in the number of people admitted to hospital after a fall.

Health of older people

- The number of older people with a limiting long-term illness is predicted to rise by 38% by 2035.
- Dementia and the issues it brings with it is a huge challenge to the future of health and social care. As the numbers of older people rise so will the incidence of dementia. Numbers of people with dementia is predicted to rise by 64% by 2035.
- We also expect to see an increase in other health conditions: Visual impairment, stroke, heart conditions and continence.

		N	umber 000)s		Change	
	2017	2020	2025	2030	2035	2017-2035	2017-2035
						000s	%
Living alone	292	306	332	363	389	96	33
Unable to manage at lest one self-care activity on their own	214	228	254	285	313	99	46
Unable to manage at least one domestic task on their own	261	278	311	348	382	120	46
Unable to manage at least one activity on their own	118	126	141	160	178	60	51
Limiting long term illness	229	242	268	294	317	88	38
Admitted to hospital after a fall	15	16	19	21	24	9	63
Obese	140	146	155	170	181	40	29
Dementia	44	48	55	64	73	28	64
Moderate or severe visual impairment or registerable eye condition	75	81	92	101	110	34	46
Receive treatment for a stroke	50	53	60	66	71	21	42
Heart condition (excluding high blood pressure)	183	194	216	237	255	72	39
Diabetes	104	109	120	131	141	37	36
Continence	105	110	119	128	133	28	27

Table 11: Older people, living conditions and health, 2017 -2035

Health and physical disability

- Table 12: Health conditions 2017 2035, people aged under 65, Wales
- People with health conditions are more likely to need care and support than those without them.
- The section on older people shows that as the population ages so does the prevalence of people with certain health conditions.
- The different health conditions will have associated care and support needs and whilst these will be individual Local Authorities may be able to predict what types of support people with certain conditions will need.
- For people aged under 65 the prevalence of all the health issues listed are expected to fall which may mean fewer younger people needing care and support. However, for the 65 and over age group the predicted numbers of people with the health issues listed rises, more than outweighing the fall for younger adults.

Sensory impairment

- Table 13: Sensory impairment, 2017 2035, Wales
- As identified in the section on Older People sensory impairment is predicted to rise in people aged over 65.
- Sensory impairment is predicted to fall in people aged under 65. Again, this decrease is more than outweighed by the increase for older people.

Table 12: Health conditions 2017 - 2035, people aged under 65, Wales

				Change			
	2017	2020	2025	2030	2035	2017-2035	2017-2035
						000s	%
Population	1,864	1,862	1,854	1,842	1,838	-25	-1
Limiting long term illness	191	192	192	188	185	-6	-3
Heart condition (excluding high blood pressure)	70	71	71	69	67	-3	-5
Obese	440	441	441	437	435	-6	-1
Diabetes	83	84	84	82	80	-3	-4
Receiving treatment for a stroke	20	20	20	19	19	-1	-4
New cancer cases	6	6	6	6	6	0	-5
Bronchitis and emphysema	5	5	5	5	5	0	-8

Source: Daffodil

Table 13: Sensory impairment, 2017 - 2035, Wales

				Change			
	2017	2020	2025	2030	2035	2017-2035	2017-2035
18-64						000s	%
Population	1,864	1,862	1,854	1,842	1,838	-25	-1
Severe visual impairment	191	192	192	188	185	-6	-3
Moderate / severe / profound hearing impairment	77	78	77	75	72	-5	-6

65+							
Population	647	678	734	805	860	213	33
Moderate / sever visual impairment / registerable eye condition	75	81	92	101	110	34	46
Moderate / severe / profound hearing impairment	277	297	340	378	416	139	50

Mental Health, Learning Disability and Autism

Information presented

• Table 14: Mental health and learning disability 2017-2035

Mental health

- Healthy and disability-free life expectancy is rising more slowly than life expectancy.
- The numbers of people with a common mental health problem is expected to increase by 7% from 2017 to 2035, an additional 30 thousand people.
- The numbers of people with 2 or more psychiatric disorders is expected to increase by 8% from 2017 to 2035, an additional 14 thousand people.

Learning disability

- The numbers of people with learning disabilities aged under 65 is expected to remain unchanged between 2017 and 2035.
- The numbers of people aged 65 and over with learning disabilities are expected to increase by 34%, an additional 5 thousand people in Wales.

 Table 14: Mental health and learning disability 2017-2035

	Numbers					Change	
						2017-2035	2017-2035
	2017	2020	2025	2030	2035	No	%
People aged 16 and over 000s							
Common mental disorder	417,121	421,141	430,038	439,364	447,519	30,398	7
Borderline personality disorder	11,685	11,795	12,039	12,297	12,522	837	7
Antisocial personality disorder	8,890	8,998	9,218	9,442	9,640	750	8
Psychotic disorder	10,369	10,468	10,688	10,919	11,121	752	7
Two or more psychiatric disorders	185,829	187,707	191,794	196,051	199,779	13,950	8
People aged under 65							
Early onset dementia	821	842	854	812	769	-52	-6
With a learning disability	45,418	45,385	45,224	45,061	45,119	-299	-1
With a moderate or severe learning disability	10,317	10,311	10,310	10,341	10,393	76	1
People aged over 65							
Dementia	44,275	47,841	55,255	64,087	72,769	28,494	64
With a learning disability	13,468	14,145	15,285	16,752	17,996	4,528	34
With a moderate or severe learning disability	1,827	1,892	2,001	2,175	2,305	478	26

Carers who need support

- Table 15: Unpaid carers, 2017 and predicted 2035
- Numbers of unpaid carers are predicted to increase in Wales from 2017 to 2035.
- However the numbers of younger adult cares (aged under 65) are predicted to decrease.
- Numbers of older carers are predicted to increase. Older carers may need more care and support themselves in order to be able to provide unpaid care. Caring puts carers own wellbeing under threat. Preventative services for carers will be key in reducing their own likelihood of needing care and support.
- Carers aged 65-74 are predicted to increase by about 10%, carers aged 75-84 by more than a third and carers aged 85 and over to double by 2035.

	Wa	les	Wa	les
	2017	2035	2017 to	o 2035
	Numbe	er 000s	% change	No change 000s
Under 65				
Providing 1-19 hours of unpaid care	171	169	-1	-2.3
Providing 20-49 hours of unpaid care	41	40	-1	-0.5
Providing 50+ hours of unpaid care	63	62	-1	-0.9
65-74				
Providing 1-19 hours of unpaid care	29	32	13	3.6
Providing 20-49 hours of unpaid care	9	10	13	1.1
Providing 50+ hours of unpaid care	25	28	13	3.2
75-84				
Providing 1-19 hours of unpaid care	10	13	37	3.5
Providing 20-49 hours of unpaid care	4	6	37	1.6
Providing 50+ hours of unpaid care	16	22	37	5.9
85+				
Providing 1-19 hours of unpaid care	2	4	107	2.0
Providing 20-49 hours of unpaid care	1	2	107	0.9
Providing 50+ hours of unpaid care	4	8	107	4.3
All ages	375	397	6	22.4

Table 15: Unpaid carers, 2017 and predicted 2035

Substance Misuse

- Table 16: Substance misuse 2017-2035
- Around 260 thousand people misuse drugs across Wales, this number is predicted to remain stable over the next 20 years.
- The numbers of people who are admitted to hospital from drug related conditions is 4,600. Again, this is predicted to remain stable over the next 20 years.
- The population aged 16 or over who binge drink is around 660 thousand, a 2% rise is predicted by 2035.

Table 16: Substance misuse 2017-2035

						2017-2035	2017-2035
	2017	2020	2025	2030	2035	No	%
People aged 16-24 predicted to misuse drugs	106,789	101,298	100,220	106,927	108,990	2,201	2
People aged 25-59 predicted to misuse drugs	154,476	155,123	153,181	150,031	151,251	-3,225	-2
People aged 16-59 predicted to misuse drugs	261,265	256,421	253,401	256,958	260,241	-1,024	0
Total population aged 15 and over predicted to be admitted to hospital for drug related conditions	4,603	4,607	4,655	4,698	4,745	142	3
Total population aged 16 and over predicted to binge drink	658,282	657,861	659,462	664,740	671,129	12,847	2

8.5 Services for adults

Information presented

- Table 17: Assessments 2016-17
- Table 18: Adults receiving services by service 2016-17
- Figure 9: Adults supported by local authorities 2007-2015

Note on data sources:

- Welsh Government data on adults receiving services is new for 2016-17; it has been developed to reflect the new Act.
- As the data collection is in development it is imperfect. Not all local authorities were able to
 provide fully completed returns, due to issues with implementing or preparing for the new
 Welsh Community Care Information System (WCCIS) computer system. It also takes time for
 definitions to become embedded and recording to become consistent across Local
 Authorities.
- Information prior to 2016-17 is not comparable to the new collection due to differences in data items and definitions

Key messages from the information

- 53,000 adults received advice or assistance from the IAA service during the year in Wales. There is a large difference in numbers and rates of adults receiving advice or assistance from the IAA across Wales.
- In general, across Wales, there are less adults receiving advice or assistance from the IAA service than assessments of need for care and support undertaken during the year. This may change as the IAA develops.
- Almost 150,000 services were provided in West Wales to 83,000 adults in 2016-17.
- The most frequently provided services were equipment, domiciliary care, equipment and telecare.
- The most infrequently provided services were adult placements, sheltered accommodation, advocacy and recreational, leisure and lifelong learning opportunities.
- Data from 2007-2015 is not comparable to the 2016-17 data due to changes in the data collection. However, it gives us an idea of how things have changed in Wales in the recent past. Over the period 2007-2015 the number adults aged 65 and over supported rose from 80 thousand to 83 thousand in 2012 and then fell to 70 thousand.
- The numbers of adults aged 18-64 supported rose from 26 thousand to 28 thousand over the period.
- The overall fall in adults aged 65 and over supported is difficult to explain, in a period when the population has aged. It may be due to decisions in relation to service provision, funding available or possibly prevention?

Table 17: Assessments 2016-17

	1 Number of adults who received advice or assistance from the IAA service during the year	2 Number of assessments of need for care and support undertaken during the year	2.1 Of those, the number that led to a care and support plan	2.1 Of those, the percentage that led to a care and support plan	Rate of IAA contact per 10,000 population aged 18+
Wales	53,464	70,303	20,886	30	214
North Wales Powys	18,076 5,040	29,908 2,476	5,153 952	17	323 467
West Wales	5,293	9,294	3,023	33	169
Western Bay	7,999	7,210	4,027	56	188
Cwm Taf	5,001	3,178	2,258	71	212
Gwent	6,511	11,506	3,433	30	141
Cardiff and the Vale	5,544	6,731	2,040	30	141

Source: Welsh Government, Adults receiving care and support

Table 18: Adults receiving services by service 2016-17

a) Numbers

	18-64	65+	18+
Total of services (volume)	35,611	111,577	147,336
Domiciliary care	5,370	26,315	31,685
Day Care	3,206	4,951	8,157
Respite Care	1,482	3,982	5,464
Reablement	1,052	10,739	11,791
Equipment	5,744	18,147	23,891
Adaptations	3,113	7,084	10,197
Direct Payments	3,684	2,175	5 <i>,</i> 859
Supported Accommodation	2,393	725	3,118
Sheltered Accommodation	338	1,196	1,534
Adult Placements	445	79	524
Adult care home (without nursing)	1,709	10,521	12,230
Adult care homes with nursing	305	5,260	5,565
Telecare	2,262	15,270	17,532
Advocacy	328	286	762
Recreational, leisure and lifelong learning opp's	2,270	350	2,620
Other	1,910	4,497	6,407
Total number of adults supported (count)	19,963	62 <i>,</i> 598	82,561
Population	1,863,850	646,960	2,510,820
Rate of adults supported per 10,000 population	107	968	329

	18-64	65+	18+
Total of services (volume)	100	100	100
Domiciliary care	15	24	22
Day Care	9	4	6
Respite Care	4	4	4
Reablement	3	10	8
Equipment	16	16	16
Adaptations	9	6	7
Direct Payments	10	2	4
Supported Accommodation	7	1	2
Sheltered Accommodation	1	1	1
Adult Placements	1	0	0
Adult care home (without nursing)	5	9	8
Adult care homes with nursing	1	5	4
Telecare	6	14	12
Advocacy	1	0	1
Recreational, leisure and lifelong learning opp's	6	0	2
Other	5	4	4

b) Percentage of services provided per service volume

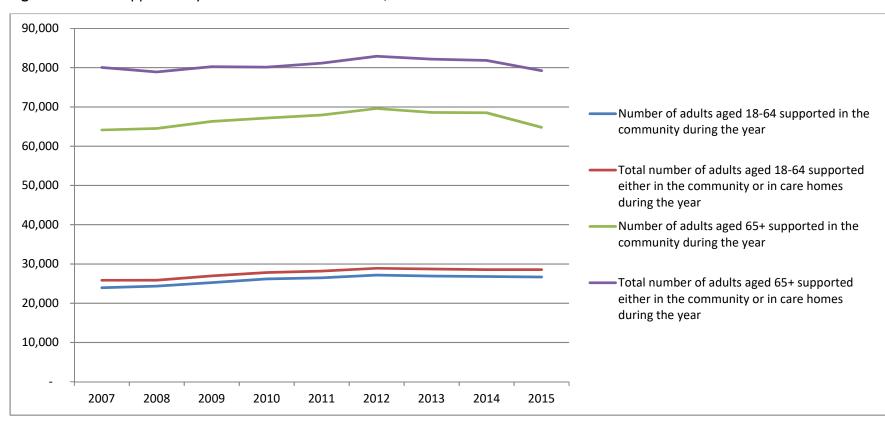


Figure 9: Adults supported by local authorities 2007-2015, Wales

Source: Welsh Government PM2

8.6 Staff

Information presented

- Table 20: Service users and staff at 31 March, 2011-2017
- Figure 10: Staff ratios at 31 March, 2011-2016

Key messages from the information

- Numbers of social work staff in adults and children's services have increased over the period 2011 to 2017.
- Staff numbers have changed far more than service user numbers (adults using services have fallen and children risen slightly). Therefore, staff to service user ratios have fallen over 2011 to 2016.
- Numbers of social workers per adults service user has fallen from 44 in 2011 to 29 in 2016.
- Numbers of social workers per child service user has fallen from 9 in 2011 to 6 in 2016.
- It does not necessarily follow that services users are receiving a poorer service if there are less staff, more efficient processes and systems may mean services are maintained or improved with fewer staff.
- Numbers of staff in adult services in West Wales have increased by 37% from 1,800 to 2,500.

	Social work sta	ff	Service users p	er staff
	Services for adults	Services for children and young people	Services for adults	Services for children and young people
	WTE	WTE	Ratio	Ratio
2011	1,806	2,242	44	9
2012	1,819	2,371	43	9
2013	1,799	2,487	44	8
2014	1,818	2,485	43	8
2015	2,637	3,259	28	6
2016	2,512	3,191	29	6
2017	2,467	3,127	-	-
% Change 2011-2017	37	39		

Table 20: Service users and staff at 31 March, 2011-2017

Source: Welsh Government Social Care Staffing, PM2, Children in Need Census

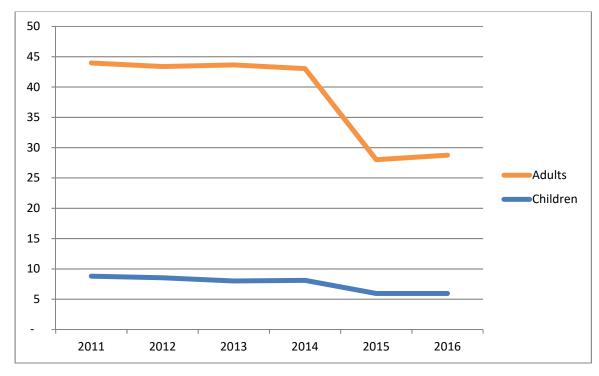


Figure 10: Staff ratios at 31 March, 2011-2016

Source: Welsh Government Social Care Staffing, PM2, Children in Need Census

9. Where is action being focused? Regional Area Plans

9.1 Background

Following the publication of the Population Needs Assessment reports, each region must produce an Area Plan which sets out its regional and integrated priorities for the next five years. The plans set out what regions will do to respond to the care and support needs identified in the Population Needs Assessments. The plans were due for publication in April 2018. Requirements for area plans are set out in statutory guidance and Social Care Wales produced a toolkit to support the development of these plans and help ensure a consistent approach.

This Wales analysis of the 7 Regional Area Plans follows the structure of the Social Care Wales area plan toolkit. It looks across the 7 plans to identify commonalities and areas specific to regions. The analysis

- Is structured across the core themes
- Identifies additional cross-cutting themes specific to the regions
- Looks at regional and integrated priorities
- Looks at actions against priorities, including prevention and how these will be carried out
 - o Models
 - o funding arrangements
 - o partnership arrangements and governance
 - Monitoring and evaluation

9.2 Summary of issues and actions

- All 7 regions published their Regional Area Plans within the required timescales.
- Most used the Social Care Wales toolkit to some extent although there was deviation
- All regions addressed the 8 core themes. **Table 21** lists the additional and cross-cutting themes addressed by the regions.
- Cross-cutting themes addressed were
 - o Workforce
 - o Information Systems
 - o Integration
 - o Prevention
 - Access and transport
 - o Commissioning
 - o Information, Advice and Assistance
 - o Welsh Language
 - o Strong and resilient community
 - o Advocacy
- It wasn't always clear from the plans what was an action / priority / objective. These seemed to be interchangeable in some plans.
- Clear actions were not set, these were generally statements of intent or signposts to other work, plans or strategies.

Table 21 describes the issues brought forward from the Population Needs Assessments and priorities and actions from the Regional Area Plans. A detailed table of the issues from the Population Needs Assessment, priorities and actions from the Regional Action Plans is provided in Appendix 3.

Table 21: Summary of issues, priorities and actions from Regional Area Plans

Core themes

	Issues from PNAs	Priorities	Actions
Children and young people	 Population projected to remain stable or decrease slightly across regions, Powys to see a bigger decrease in population Most regions seeing increases in LAC Concerns over mental health issues, bullying, self harming and life satisfaction 	Integration of services Improve well-being and mental health	Programmes of integration, multi- agency work Early intervention and prevention initiatives Work with communities Increase practitioners, support and training
Older people	Ageing population, particularly over 85 Ratio of older to younger people rising, more extreme in Powys Loneliness and isolation Increase in dementia	Integration of services Sustainable range of services Sustainable provider market Build community resilience, strong networks Dementia	Programmes of integration Dementia strategies and projects Health related projects for older people e.g. Get moving, falls awareness Look at markets, contracts etc. for providers Rural centres in Powys
Health and physical disability	Alcohol consumption Overweight and obesity Concerns in deprived areas Gap between least and most affluent	Promote healthy lifestyles, early intervention and prevention Managing long term conditions	Integrated service models Reduce duplication of services Social prescribing

	Issues from PNAs	Priorities	Actions
Sensory impairment	SI expected to rise as population ages	Coproduction Multi agency approaches Information more available and accessible	 3 regions included specific projects for their regions e.g Gwent to increase enhanced eye health examinations West Wales to set up a regional task and finish group to look at gaps and areas for improvement
Mental Health	Mental Health issues expected to increase Will be people who need help but are not known to us Dementia predicted to rise	Integration of services Strategies and plans for Mental Health to be developed or under development Increase awareness and understanding	 Various projects across 3 regions e.g. North Wales looking at well- being assessments and plans, West Wales to provide a single contact number for mental health, Gwent to increase employment through Growing Spaces and Mental Health Consortium
Learning Disability and Autism	Numbers increasing but possibly due to awareness Some undiagnosed Expected to rise in plder people	Integration of services Support independence Increased voice and control Active role in society Pooled budgets	Programmes and strategies for integration Integrated Autism Service Engage with users, carers and families

	Issues from PNAs	Priorities	Actions
Carers who	Provide a high proportion of care	Integration of services	Strategies
need support	Many providing more than 50 hours of	Provide more support for carers	Statements of Intent
	care per week Numbers of carers increasing	Better information, advice and assistance for carers	Various projects across 5 regions e.g.Gwent to increase befriending
	Numbers of young carers increasing	Identify and recognise all carers	Cwm Taf to have School Awards
	Numbers of older carers increasing	Provide more respite, pre-planned and	SchemesWest Wales Carer Aware / Young
	Carers have poorer health and more of their own care and support needs Respite is limited	emergency Raise awareness	Carer Aware e-learning programme
Violence against women, domestic abuse and sexual violence	Under reported Numbers reported increasing Limited support available, inconsistent services	Increase awareness Education on equal and health relationships Prevention and early intervention Effective, timely and appropriate response	Strategies
Substance misuse	Concerns over levels of alcohol consumed	Integration of services	Strategies, Frameworks Develop Information, Advice and Assistance

Cross-cutting themes

Theme	Regions including	Priorities and Actions
Workforce	Powys	Strategies, cross-sector
	West Wales	Integration
	Cwm Taf	Workforce plans
		Apprenticeship schemes
Commissioning	Powys	Develop the market
	West Wales	Regional commissioning arrangements, strategies
	Cwm Taf	Integrated training and development
	Gwent	Development of social enterprise, cooperative and user-led services
Information	Powys	Implement WCCIS
systems	West Wales	Implement various TEC solutions
	Cwm Taf	
Information,	Powys	IAA to be developed
Advice and	West Wales	Training for IAA
Assistance	Cwm Taf	Develop standards
	Gwent	
Integration and	Powys	Service integration and pooled funds
co-production	West Wales	Develop and embed coproduction
	Cwm Taf	New models of care for integration e.g. Powys
	Gwent	regional rural centres
Welsh language	Powys	Maximise active offer to speak Welsh
	West Wales	Develop Welsh skills of children to create new Welsh
	Cardiff and the Vale	speakers
Prevention	Powys	Well-being programmes
	West Wales	Preventions framework
	Gwent	
Strong and	Powys	Community well-being hubs
resilient communities	West Wales	Repatriate activity
Advocacy	Powys	Advocacy plans
	West Wales	Regional advocacy services
	Cwm Taf	Independent Professional Advocacy
	Gwent	Golden Thread Advocacy

Appendix 1: List of Regional Partnership Boards with links to Population Needs Assessments and Area Plans

Regional Partnership Boards	Local Authorities	Population Needs Assessment	Area plan
Wales (compiled by Social Care Wales)	All	https://socialcare.wales/res ources/care-and-support- in-wales-national- population-assessment- report	Not applicable
North Wales	Isle of Anglesey Gwynedd Conwy Denbighshire Flitshire Wrexham	http://www.wales.nhs.uk/si tesplus/861/page/91335	Regional plan <u>https://www.northwalescolla</u> <u>borative.wales/north-wales-</u> <u>population-</u> <u>assessment/regional-plan/</u>
Powys	Powys	http://pstatic.powys.gov.uk /fileadmin/Docs/Adults/Int egration/Powys Population Assessment Summary - Final V1.pdf	Joint area plan <u>https://customer.powys.gov.</u> <u>uk/article/1742/Powys-RPB-</u> <u>Documents</u>
West Wales	Ceredigion Pembrokeshire Carmartheshire	http://www.wwcp.org.uk/w p- content/uploads/2017/03/ West-Wales-Population- Assessment-March- 2017.pdf	Area plan <u>http://www.wwcp.org.uk/fea</u> <u>tured-on-home-page/area-</u> <u>plan/</u>
Western Bay	Swansea Neath Port Talbot Bridgend	http://www.westernbaypop ulationassessment.org/en/h ome/	Area plan http://www.westernbay.org. uk/areaplan/
Cwm Taf	Rhondda Cynon Taf Merthyr Tydfil	http://www.ourcwmtaf.wal es/cwm-taf-population- assessment	Well-being area plan <u>http://cwmtaf.wales/how-</u> <u>we-work/plans-and-</u> <u>reports/cwm-taf-social-</u> <u>services-and-well-being-area-</u> <u>plan/</u>

Gwent	Caerphilly Blaenau Gwent Torfaen Monmoushire Newport	http://www.blaenau- gwent.gov.uk/resident/heal th-wellbeing-social- care/social-services-well- being-act/population- needs-assessment/	https://www.blaenaugwentp sb.org.uk/news/draft-area- plan.aspx
Cardiff and the Vale	Cardiff Vale of Glamorgan	http://www.cvihsc.co.uk/ab out/what-we- do/population-needs- assessment/	http://www.cvihsc.co.uk/abo ut/what-we-do/cardiff-vale- glamorgan-area-plan/

Appendix 2: Regional Partnership Boards





Appendix 3: Detailed summary of Regional Area Plans by core theme

Children and young people

Children and y	oung people	-		-		-	
	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
Issues from PNA	Increase in LAC and CPR More disabled children and children with complex needs Promote healthy lifestyles Prevent ACEs Sexting and online bullying a concern Mental health and self harm Child centered and family centered approach	Population of children to decrease Young people migrate out Family relationships important Vulnerable children 10-15 difficult to place	Population expected to stay stable Lower LAC than national average Areas for improvement – prevention and early intervention	LAC remains high LAC leaving care expected to rise Some young carers are not known to social care services	0-24s declining Some high levels of child poverty High rates of mental ill-health 1 in 5 children report low life satisfaction Increase in young carers Want to be listened to		
Priorities	Integration of services for children and young people and IFSS	Tackling ACEs		CYP.P1 Better services for children with emotional difficulties and well-being or	CYP1 Well-being achievement and independence CYP2 Early help CYP3 Target intensive support	To improve outcomes for children and young people with complex needs through earlier intervention,	CYP1.2 Integrated provision CYP1.1 Additional learning needs

North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
			mental health issues CYP.P2 Multi- agency arrangement for children with complex needs	for those who are struggling	community based support and placements closer to home To ensure good mental health and emotional well- being for children young people through effective partnership working	CYP 2.1 Role in decision making CYP2.2&2.3 Educational outcomes and transition to employment CYP2.4 LAC and CiN services CYP2.4 Emotional and mental health CYP2.7 Happy and healthy CYP2.6 Prevent sexual exploitation CYP2.8 Welsh skills IFSS1.1 Intensive intervention with families IFSS1.2 Explore extension if IFSS

	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
Actions	 Programmes of integration for IFSS, children's services Projects for each priority area Develop assessments Develop Fostering strategy Projects for NEET 	Integrated Youth Support and Skills Service Multi-agency ACE plan Integrated parenting and family support services Multi agency prevention and early intervention for emotional and mental health and well-being Implement key findings of CAHMS review Reduce perinatal mental health through community based interventions Enhance transition arrangements Fully integrated multi agency team	Regional children's services group Early intervention and prevention initiatives Implement The Right Help at the Right Time Implement Signs of Safety Practice Framework Implement Child Poverty Strategy Together for Children and Mental Health Strategy for preventative services Regional arrangements for the IFSS, in partnership with other services, pooled funding Together for Mental Health Strategy for Iong		Integrated place- based approach Invest in and collaborate with communities Implement regional strategy for supporting children, young people and families Co-produce shared plans for early interventions Joint arrangements Shared framework for assessment, eligibility and support, Extend IFST pooled budget 2016 statement of intent for CYPF	Increase the number of ACE informed practitioners Increase the support to reduce the number of out of county placements and increase number of young people provided skills for living. Increase training and workforce development	

North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the
						Vale
	Flexible accommodation	term care and support needs				
	options	Embed regional adoption service				
		Establish regional complex needs service				

Older people

Older people	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the
							Vale
Issues from PNA	Population ageing Ratio of older to younger people rising Loneliness and isolation is a challenge Dementia Will need more nursing home places, especially for mental health and dementia Long-term condition strong indicator of need Consider rights	Population aging more than other regions, ratio of older to younger people higher People want to stay in their own homes More places to go during the day Some isolation Many living alone Not able to carry out domestic tasks Lack of infrastructure and assistive technology Want to accommodate in their local communities	Higher older population that Wales average Population predicted to age High increate in over 85s expected Rurality is an exacerbating factor for older people, isolation, deprivation and poor access to services	Population over 65 will grow Dementia predicted to rise Loneliness and isolation	Expect increase in older people Informal carers over 65 has increased Provide substantial levels of care Dementia to increase		Expect increase in older people Dementia to increase
Priorities	Integration of services in relation to older people with complex			OP.P1 Sustainable range of services –	OP1 Supportive communities and family networks through universal	To improve emotional well- being for older people and reduce	OP1.1. First Point of Contact and Single Point of Access

North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
needs and long- term conditions including dementia Maintain a sustainable provider market across North Wales Support people affected by dementia Reduce loneliness and isolation			demand / at home / independence OP.P2 Range of future accommodation options – demand / independence OP.P3 Develop community resilience and cohesion to tackle social isolation OP.P4 Develop an optimum model for older people's mental health services inc Dementia	services, health and wellbeing initiatives OP2 Integrated, time limited and goal orientated services OP3 People have access to holistic assessment, needs and wishes, promoting choice and control to OP4 Specialist or substitute service available for an improved quality of life	loneliness and social isolation with earlier intervention and community resilience To improve outcomes for people living with dementia and their carers Improve appropriate housing and accommodation for older people	services, digital services, access points OP1.2. Resilient communities with local services, infrastructure and strong community networks OP1.3. Range of future accommodation options – demand / home OP1.4. Develop improved assessment, diagnosis and care planning practices – collaboration and outcomes OP 1.5 Develop as a dementia friendly region

Older people	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
Actions	 Programme of integration Understand market issues, market position statement, partnership workshops to agree regional work Dementia RED regional project to provide Care Information Centre Points in GP surgeries Ageing well plans Older people's delivery framework Getting North Wales moving programme Living Well, Staying Healthier strategy 	Develop Day Time Activities Dementia friendly communities and pathways Psychological therapies within communities New health and care coordination hub to reduce DTOC etc Joint commissioning plan for Supporting People programme Virtual ward and integrated teams Regional rural centres (repeat) Community well- being hubs (repeat) Flexible accommodation options	Regional dementia strategy for IAA and prevention, targeted care and support Single regional contract for older people's care homes Regional pooled fund		Community ZonesCommunitycoordinationserviceFalls AwarenessProgrammeDementia FriendlyCommunitiesWhole systemcommissioningReablement andintermediate careservicesStay Well @ HomeprogrammeVirtual wardEnd of Life CareDelivery PlanCare Home PooledFundMarket positionstatementCare home contractand servicespecificationCare Home supportteam	Reduce DTOC Increase support for dementia Increase Dementia Friends, Dementia Champions, Dementia Friendly organization Care Closer to Home strategy Frailty service	

Health and physical disability

	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
Issues from PNA	Better health than Wales average but varies across region Disabled people say services and public transport need to be more accessible	Higher life expectancy and more healthy behaviours that Wales Inequalities between most and least affluent Overweight and obesity Smoking Drinking in excess Lack of physical activity	Higher levels of overweight and obese people Pockets of deprivation Higher alcohol consumption in Ceredigion	Gap between least and most deprived As population ages expect more health and physical disability issues	Significant issue Think numbers are higher than reported Deprived area		
Priorities		Tackling the Big 4: Cancer, Respiratory, Circulatory Early help and support priorities: Primary and community care Early help and support priorities: Managing long term conditions	Prevention and health improvement Managing long term conditions	HPD.P1 Focus on improving range of flexible housing options HPD.P2 Promoting early intervention and prevention, through Information, Advice and Assistance	PDSI 1 Improving outcomes for people with a physical disability and/or sensory impairment	Support disabled people – independence, community based. Transport Reduce risk of poor health and well- being – early intervention, community support	HPD1.1. Promote healthy lifestyles and improve and protect health and well-being

	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
				HPD.P3 Map out / audit of locality groups available to provide clarity and guidance to commissioners on specific needs			
Actions	Develop social prescribing Care Closer to Home project for people with chronic conditions	Joint statement of intent for adults with physical disabilities and or sensory impairment and their carers Service models for people living with long term conditions Integrated model for community response to cancer			Multiagency working group Statement of intent	Decrease duplication of services Reduce duplication of resources Well-being plans	
		Chemotherapy outreach Strengthen end of life palliative care					
		Community stroke, heart and diabetes services					

Sensory Impairment

Sensory Impai	irment						
	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
Issues from PNA		RAP gave statistics for SI	Expected to rise Early identification, prevention and improving access to services are vital	Babies at risk if detection not early enough Dual sensory impairment increasing Higher prevalence in BME	Included in 'Health and physical disability'		
Priorities				SI.P1 Agreement of priorities and actions through coproduction SI.P2 Multi-agency approach SI.P3 Make information more accessible SI.P4 Better understanding of population needs	PDSI 1 Improving outcomes for people with a physical disability and/or sensory impairment (repeat)	Ensure people are supported through access to accurate information, assistance and 'rehabilitation' where required Improve emotional well-being especially through peer to peer support	SLI1.1. Deliver the Cardiff and Vale of Glamorgan Eye Care Plan in conjunction with Primary Care, Secondary Care, Cardiff and Vale of Glamorgan University Health Board and Welsh Government SLI1.3. Explore the establishment of a partnership

Sensory Impair	1		144 1 144 - P				
	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
							delivery mechanism to meet the wider needs of people with sensory loss and impairment SLI1.2. Develop and implement a health board wide action plan to meet the All Wales Standards for Accessible Information and Communicatior for People with Sensory Loss
Actions		Joint statement of intent for adults with physical disabilities and or sensory impairment and their carers (repeat)	Regional task and finish group to look at gaps and areas for improvement Piloting the Sensory Loss Friendly Award Sharing learning from HDdUHB			Reduce waiting lists for eye tests Increase enhanced Eye Health Examination Integrated Eye Care Collaborative Board	

North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
		Communication Support Service				
		Regional review of services				
		Consider assessment and care planning				

Mental Health

Mental Health	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
Issues from PNA	Better mental health than Wales Increasing rates Many people not seeking help People being admitted to mental health facilities outside the region BME facing harassment in areas where BME is low	Depression and anxiety Highest projected rise in dementia Young people issues are anxiety, stress, self-worth and relationships Emotional health and well-being need improvement	% of people with MH problems receive no treatment MH issues expected to increase Early intervention crucial	MH expected to increase GPs treat most MH issues	Highest levels in Wales Dementia will increase Highest suicide rates Highest rate of drug misuse and alcohol related deaths in Wales		
Priorities	Integration of services in relation to:	Tackling the big 4: Mental health	Transforming mental health and learning disability services	MHP1 Agreed optimum model for Adult Mental Health services MH.P2 Ensure placements for people with complex needs are effective, outcome based and appropriate.	MH1 Developing the 10 year strategy for adult mental health services MH2 Developing a children's and young people's mental health and well-being strategy	Increased understanding and awareness of mental health amongst the public, stigma and help people to seek support earlier To improve emotional well- being and mental health through early intervention	AMHCI1.1. Deliver 'Together for Mental Health Plan Other Partnership Priorities

	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
					MH3 Developing a Cwm Taf Dementia Strategy MH4 Developing a Cwm Taf wide response to the national plan for	and community support.	
					Suicide Prevention - Talk to Me 2 MH5 Reviewing our Assessment pathways and how people access support in a crisis		
					MH6 Implementing the co-occurring mental health and substance misuse framework MH7 Implementing the new Cwm Taf Integrated Substance Misuse service model		
ctions	Together for mental health partnership board developing collaborative		Local Mental Health Partnership Board		Included in priorities	Increase no of service users accessing IAA	

North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
approach from integrated MH strategy Well-being assessments and plans		Together for Mental Health Strategy for preventative services, targeted supportProvide single contact number of Mental HealthCommunity mental health service 24/7 and centre			Employment through Growing Space and Gwent Mental Health Consortium Increase emotional well-being in schools	

Learning disability and Autism

	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the
							Vale
Issues from PNA	Number may be higher than we know	Higher proportion of LD then rest of Wales	LD expected to rise but in line with population	Provided statistics	Rise in older people with LD expected		
	Numbers increasing More young people with complex needs Other protected characteristics Autism increasing, probably due to awareness Some Autistic adults may be undiagnosed	753 people with Autism Some out of county placements, would like to bring back home Children with LD would like more control over their lives	Significant rise in over 75s with LD expected Want to continue to meet needs through care in the community				
Priorities	Integration of services Understand partnerships approach Plan for working together Pooled budgets		Transforming mental health and learning disability services	LD.P1 Develop age blind person- centred models of care to ensure prevention and early intervention through multi- disciplinary services, by remodelling services away	LDA 1 Modern services – belonging, community LDA 2 Maximise independence, reduce dependency, choice and control. LDA 3 Efficient and effective services -	Support, independence, early intervention, greater public awareness More timely diagnosis of ASD and IAA for ASD	LDA1.2. Active role in society - engage , volunteering, employment LDA1.1. Maximise independence LDA1.4. Enabled to stay

	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
				from establishment based care into community based services	citizen centred well-being outcomes LD4 Services that minimize escalation of need and risk LD5 Services that enable greater privacy and personalised care LD6 New Integrated Autism service - lifelong; flexible, responsive, overcomes barriers, includes education and employment		healthy and feel safe Valued and included, voice, choice and control LDA1.5. Supported become lifelong learners LDA1.6. Develop a new Integrated Autism Service
Actions	Integrated mental health strategy National Autism Service Learning disability partnership		Regional Learning Disability Programme Group Draw on regional Statement of Intent and Model of Care and Support IAA for LD		Effective communication and engagement plans Engage with service users, carers and families Strategy for positive image	Increase number of social opportunities 'My Mates' Increase employment LD strategy Reduce waiting times for Autism diagnosis	

North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
		Regional integrated Autism serviceIntegrated step-up models for LD drawing on regional 		Statement of Strategic Intent Suitable housing Integrated Autism Service	Increase awareness Specialist support for Autism New Integrated Autism Service	

Carers who need support

Carers who ne	ed support						
	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
Issues from PNA	Provide 70-95% of care Carers increasing Half in employment, need employer support Young carers have increased	Increasing numbers of unpaid carers Carers health below average Providing high hours of care Young carers increasing as population ages Dementia sufferers need lots of care, many undiagnosed cases Respite is limited Young carers more likely to be NEET	1 in 8 are carers Many young carers Cost of replacing unpaid care is very high	Some carers providing more than 50 hours Young carers, some spend more than 50 hours caring per week Carers have poorer health, the more they care the poorer their health	Higher number of carers than Wales average Most older carers Older carers increasing Provide substantial amounts of care Want respite Support groups valued		
Priorities	Integration of services in relation to: Carers, including young carers Action: Map current provision and assess against SSWA. Explore integrated approached,	Supporting unpaid carers	Carers	CA.P1 Promote early recognition of all Carers CA.P2 IAA and support to all Carers - informed choices, maintain their own health and well-being.	C1 Identifying carers of all ages and recognising their contributions C2 Up to date, relevant and timely information, advice and assistance	Support carers to care through flexible respite, access to accurate information, peer to peer support and effective care planning Improve well-being of young carers and	AYC1.2 Improve physical and emotional support for young carers, including emergency and pre-planned

North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
Consider pooled budgets. What matters assessments Regional carers projects Social prescribing Community navigators Young cares services and sub groups			CA.P3 Co-produce with all Carers on an individual and strategic basis - voice	C3 Support, services and training C4 A voice with more choice and control over their lives C5 Working together to make the most of our resources for the benefit of carers	young adult carers through an increased public understanding	respite and reducing ACEs AYC1.1. Carer engagement model based on best practice AYC1.4. Involve carers, including young carers, in the planning of hospital admission and discharge AYC1.3. Improve physical and emotional support for adult carers, including emergency and pre-planned respite AYC1.5. Easily accessible information to

Carers who i	need support	-				1	1
	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
							relatives in a range of formats and languages AYC1.6. Raise awareness around caring and carers
Actions	Integration of services for carers including young carers, map provision, explore and develop approaches	Review and update Powys Carers Joint Commissioning Strategy Everybody's Business Model for carers Joint statement of intent for adults with physical disabilities and or sensory impairment and their carers (repeat)	Carers development group Carer Aware / Young Carer Aware e-learning programme Co-produced carer respite IAA for carers Appropriate carer involvement in assessments and offered own assessments		Carers Strategy Carers Champions Staff awareness training Schools Award Schemes Blue print offer for carers Integrated carers team	Increase befrienders Increase schools involved in Young Carers awards scheme Increase GP 'Carer aware' surgeries	

Violence against women, domestic abuse and sexual violence

	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
Issues from PNA	Under reported but number reported increasing Men and women victims have different needs	Rise in domestic violence incidents More in North Powys where BME and LGBT groups affected Many cases not reported Predict further rise	Increase in recorded sexual offences involving children Higher rate of MARAC cases than Wales	Increase in domestic abuse cases	Limited support available Most unrecorded Services are not consistent		
Priorities				VAW.P1. Increase awareness and challenge attitudes VAW.P2. Increase awareness in children and young people of the importance of safe, equal and healthy relationships VAW.P3. Increase focus on holding perpetrators to account VAW.P4. Make early intervention	VWDASV1 Increase awareness of violence against women, domestic abuse and sexual violence VWDASV2 Enhance education provision in relation to healthy relationships and gender equality VWDASV3 Hold perpetrators to account for their actions and support to change	Provide earlier intervention and safeguarding arrangements to potential victims through 'Ask and Act' Safeguard victims, including men, through effective partnership support	VAWDASV1.1. Deliver the Violence Against Women, Domestic Abuse and Sexual Violence Strategy (under development) CYP2.5. Support for children and young people affected directly or indirectly by parental relationship

	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
				and prevention a priority VAW.P5. Ensure relevant professionals are trained effectively VAW.P6. Provide victims with equal access to appropriate services	VWDASV4 Provide effective, timely and appropriate responses to victims and survivors VWDASV5 Increase the number of specialist services		breakdown and domestic violence (repeat from Children and Young People) IFSS1.1 Continue to provide an intensive intervention with families where there are serious child protection concerns as a result of parental / carer substance misuse, domestic abuse or mental health (repeat from Children and Young People)
Actions		Joint commissioning	Joint strategy to Tackle violence		Included in actions		

North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
	protection of violence against	Domestic Abuse or Sexual Violence				
	women, domestic abuse and sexual	IAA and prevention for VAWDASV				
	violence	Review assessment and care planning process				

Additional theme: Substance misuse

Substance mis			1	I	I	I	
	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
Issues from PNA			22% drink at harmful levels				
			Increase in alcohol- related hospital admissions				
Priorities					MH6 Implementing the co-occurring mental health and substance misuse framework MH7 Implementing the new Cwm Taf Integrated Substance Misuse service model (repeat from Mental Health)		SM1.2. Increase safety of communities where where discarded injecting equipment and other drug paraphernalia is prevalent SM1.1 Deliver Substance Misuse and Wellbeing Commissionin Strategy 2016/2020 - prevention, education, treatment, support

	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
							IFSS1.1
							Continue to
							provide an
							intensive
							intervention
							with families
							where there
							are serious
							child
							protection
							concerns as a
							result of
							parental /
							carer
							substance
							misuse,
							domestic
							abuse or
							mental health
							(repeat from
							Children and
							Young People
Actions			Dyfed APB for				
			Substance Misuse				
			to develop regional				
			commissioning				
			strategy				
			IAA and prevention				
			for SM				

Additional theme: Secure estate and offenders

Secure estate	and offenders						
	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
Issues from PNA	Numbers held in prison increasing			2 prisons, 1 secure children's home			
Priorities							ASR1.1. Deliver the Cardiff and Vale of Glamorgan Community Cohesion Delivery Plan 2017/2020 (under development
Actions	North Wales Resettlement Broker Coordination project						

Additional theme: Asylum seekers and refugees

Asylum seeke	rs and refugees						
	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
Issues from PNA							
Priorities							V1.1. Deliver the Cardiff and Vale of Glamorgan Armed Forces Community Action Plan 2017/2019
Actions							

Cross-cutting

Cross-cutting							
	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
Issues from PNA	Welsh language critical for some groups High incidence of people wanting to access services through Welsh Pockets of deprivation Perception of lack of information and	Rurality Isolation	Rurality	Expect Safeguarding issues to increase			
Workforce	services	Staffing model Partner engagement Action: Cross sector workforce strategy Action: Integrated joint workforce plan Action: Apprenticeship scheme	Regional workforce strategy Action: Integrated training and development programme Action: Regional Workforce Strategy		CC6 Secure a sustainable and good quality workforce across Health and social Care Action: Recruitment and retention action plan, prepare for RISCO, Social Care Wales Car at Home Strategy, Cwm Taf	Integration of care and support	

Cross-cutting							
	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
					Social Care workforce strategy		
Commissioning		Third sector commissioning Care home commissioning Action: Develop the market in Powys rural economy Action: Review domiciliary care delivery model	Integrated commissioning Action: Review service contracts Action: Implement Care and Support at Home Action: regional strategic commissioning strategy Action: Regional innovations forum for commissioners and providers Action: Regional approach to fee setting Action: Support development of social enterprise, cooperatives and user-led services Action: Integrated training and development		Regional Commissioning arrangements	Regional Joint Commissioning Group Domiciliary care joint commissioning process Link to National Commissioning Board	

Cross-cutting			1	1			
	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
			programme to support improved commissioing				
Information systems		Implementing WCCIS	WCCIS Action:		Implementing WCCIS		
		Telecare and telehealth	Implementing WCCIS		Action: WCCIS Implementation		
		Action: Electronic referral, discharge and diagnostic information	Action: Embed and promote Dewis Action: regional strategy for TEC		road map, governance and project		
		Action: TEC at home	strategy for the				
		Action: Florence text service, My SOPD and Neurological apps					
		Action: Scale up Skype and remote consultations					
		Action: Specialist consultant in telemedicine					
		Action: Online cognitive behavioural therapy					

Cross-cutting							
	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
		Action: Predictive modeling tool for population assessments					
ΙΑΑ		IAA Action: Develop IAA	IAA / prevention Action: Regional standards for IAA Action: training for IAA		Access to IAA CC5 Ensure consistent, timely and easy access to information, advice and assistance that supports resilience and Wellbeing Action: Community Zones	DEWIS Regional communication groups	
Integration and co-production		Joined up care Unscheduled care New models of care – regional rural centers Planned care closer to home Action: Further integrate primary care with	Service integration and pooled funds Action: shared health and well- being strategy Action: Consistent, multi-disciplinary approach to assessment and care planning		Embed co production, asset based approach, work with communities CC2 Development and embedding of co production as our way of working, adopting an asset based approach working	'Care to Cooperate'	

Cross-cutting							
	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
		community based services Action: Agree models for integrated care teams Action: Pooled funding	Action: Integrated community care model Action: pooled funding Action: Review Integrated Community Equipment Stores		with people and communities Action: Community Zones, Cwm Taf social value forum, Dewis, evaluate IAA		
Welsh language		Transforming partnership Action: Maximise active offer to speak Welsh	Welsh Language				Develop Welsh skills of children, create new Welsh speakers (repeat from CYP)
Prevention		Action: Prevention and health improvement programmes on well-being	Action: Regional Preventions Framework			Single prevention agenda Early years pathfinder project	
Strong and resilient community		Strong and resilient community Action: Review community development	Action: Integrated community care model, community hubs				

Cross-cutting							
	North Wales	Powys	West Wales	Western Bay	Cwm Taf	Gwent	Cardiff and the Vale
		Action: Community well-being hubs Action: Rural Centres Action: Repatriate activity	Action: Community based support for timely discharge				
Other		Innovative environment Access and transport Safeguarding Action: Engagement mechanism for public Action: Review non emergency transport Action: Develop	Action: Regional Advocacy service	Safeguarding SDoL.P1 Reduce exploitations SDoL.P2 Improvement of care provision in relation to safeguarding	Independent and Professional Advocacy	Advocacy Golden Thread Advocacy Children's Services joint commissioning of a singe advocacy service	

References and key links

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