



# BRIEFING 2: Prioritising Prevention, Community Wellbeing and Connection

**The Ask:** We want everyone to live as well and independently as possible, connected to their friends, families and communities. Investment in services needs to be prioritised and enhanced to prevent ill health and social isolation. These approaches can mitigate or delay the need for crisis care and support.

## A Welcome Direction of Travel

We warmly welcome the Welsh Government's appointment of a Minister for Public and Preventative Health. This is a significant and positive signal that prevention is being taken seriously at the highest levels of government, and we are encouraged that other political groups in the Senedd are aligning their spokespeople around the preventative health and wellbeing agenda. ADSS Cymru believes that a Wales that invests properly in prevention, community wellbeing and connection is a Wales that spends less on crisis care, has a healthier and more economically productive population and builds social capital that benefits everyone. The case for this investment is not only ethical; it is economic, evidential and urgent.

This shift in political focus reflects a direction of travel that ADSS Cymru, the WLGA and our sector partners have been advocating for some time. Social care has long understood that the most powerful and cost-effective interventions happen not at the point of crisis but far earlier in people's lives and circumstances. A government and a Senedd that shares that conviction creates the conditions for meaningful, lasting change.

Crucially, the preventative agenda must be properly resourced if it is to move beyond aspiration. Welcome structural changes and new ministerial portfolios will only achieve their potential if backed by sustained, ring-fenced investment in the community services and infrastructure that make prevention possible.

## Why Community Wellbeing and Connection Matters

Social care is not a peripheral service. Neither is it an extension of the NHS or a backstop when all else fails. As the ADSS Cymru Priorities 2025-28 make clear, the true value of social care and support lies in what happens far earlier: in preventing harm, sustaining wellbeing and building strong, connected families and communities, where people can live the lives they choose.

The evidence is clear that social isolation and poor community connection are among the most significant risk factors for physical and mental ill health, as well as for escalating demand on acute services. Loneliness carries health risks comparable to smoking fifteen cigarettes a day. Disconnection from community accelerates cognitive decline, increases falls risk and reduces resilience. These are not abstract concerns; they translate directly into NHS admissions, social care referrals and the activation of costly crisis responses.

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For example, adult social care teams in Wales completed over 64,000 assessments in 2025-26. In March 2026 alone, they received more than 18,000 contacts from citizens. These figures reflect not just demand but the scale of unmet need in communities across Wales. Behind each contact is a person who, with earlier and better-connected support, might not have reached crisis point at all.

Moreover, whilst there is often focused political and public attention on delayed care pathways, social services teams across Wales support tens of thousands of people in the community each year. The relatively small number of those people who are in hospital at any given time (1,275 at the end of April 2026) demonstrates that social care's primary function is community-based and preventative, not reactive and hospital-facing. We must be mindful of that and investment must reflect that reality.

The demographic pressures are intensifying. Wales has a rapidly ageing population, with projections showing significant growth in the number of people aged 80 and over by 2040. Increasing prevalence of dementia, long-term conditions, multi-morbidity and frailty will drive demand for social care and health services unless the system genuinely shifts upstream. The ADSS Cymru submission to the Senedd's Health and Social Care Committee inquiry into supporting people with chronic conditions highlighted how community-based, preventative approaches could significantly reduce demand on acute services if properly resourced and sustained.

### Day Opportunities, Respite and Short Break Services

Day opportunity and respite services are among the most powerful preventative tools available to local authorities. They keep people connected, sustain independence, support unpaid carers and prevent the kinds of deterioration that lead to hospital admission and long-term care placement. Yet these services have been under significant and sustained pressure.

We know from our review work that the COVID-19 pandemic had profoundly disrupted impact on this service provision. Many services were forced to close; some have not fully recovered. Whilst local authorities have found new and innovative models to deliver these services, evidence showed that a considerable number of people had not returned to services since they reopened, and that where services had resumed, availability had in many cases reduced in terms of frequency and duration.

The review found an increase in complexity among those using services, with some providers reporting that 80 per cent of people attending now require one-to-one or two-to-one support, compared to 50 per cent before the pandemic. Unpaid carers reported that the burden on them had intensified. One carer described how, after two years of caring alone for her husband living with Parkinson's disease, access to a day service allowed her to regain weight, reconnect with friends and feel confident she could continue in her caring role.

The review also highlighted a significant concern: where residential respite beds had previously been available alongside day services, these beds were increasingly being used to manage hospital discharge, at the expense of their preventative function. Because day opportunity and respite services are not statutory in the same way as other services, they are often the first to be cut when budgets are under pressure. ADSS Cymru believes this must change: these services must be recognised, resourced and protected as core components of the preventative infrastructure.

### Supporting Unpaid Carers

Wales has approximately 370,000 unpaid carers who form the backbone of our care and support system. Yet unpaid carers are themselves at significant risk of social isolation, physical and mental health deterioration and financial hardship. The Social Services and Wellbeing (Wales) Act 2014 gives unpaid carers rights to assessment and support in their own right, but in practice the services

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that enable carers to take breaks and remain in caring roles have been significantly reduced. Short break provision, sitting services and carer-specific support have all contracted, and Carers Wales has consistently reported that for many carers, services have not returned to pre-pandemic levels.

ADSS Cymru has worked constructively with Welsh Government and partners to strengthen support for unpaid carers, helping to shape national programmes such as the Short Breaks Scheme and wider improvements to carers' rights, access to information, advice and assistance. This partnership has supported more consistent and proactive approaches to identifying and supporting carers earlier, recognising their vital role in sustaining independence and wellbeing in communities across Wales. We are keen to build on this positive progress with the new government to further embed preventative, community-based support for carers.

### Keeping Children and Families Together

Supporting families to stay together is a central part of a preventative social care system. ADSS Cymru has consistently emphasised the importance of moving upstream, investing in early help and family support so that children, young people and their families receive the practical, emotional and community-based support they need at the right time, preventing escalation into statutory care. By strengthening partnerships across local authorities, health, education, policing and the third sector and investing in universal and early intervention services, we can better support families to remain safely together, improve life chances for children, and reduce the need for more intensive interventions.

### A Whole-System Approach to Prevention

Effective prevention cannot be delivered by social care alone. It requires the alignment of housing, education, leisure, culture, transport and primary health care around shared goals of wellbeing and community connection. Local government, through its stewardship of many of these services, is uniquely placed to convene and coordinate this whole-system approach.

The local government Vision for Social Care in Wales calls for social care to be recognised as a promoter of wellbeing and healthy living that keeps families and communities together and reduces the need for reactive services. This aligns closely with the pre-election commitments of all political parties to create a healthier society. ADSS Cymru has set out a clear ambition to embed prevention in place-based systems by working across local government, health boards and community partners to integrate services, and we would like to see this backed by meaningful structural and financial commitments from Welsh Government. This must include recognition of the vital role played by primary and community care. Services such as district nursing, physiotherapy and general practice are central to helping people stay well and remain self-caring, yet they are themselves under significant resource pressure. Where this part of the system is stretched, more demand inevitably falls to social care.

### Challenges and Risks

First, prevention is chronically underfunded. Funding flows in health and social care are heavily weighted towards acute and crisis intervention, and short-term grant funding for preventative programmes creates instability and prevents the accumulation of relational capital that effective prevention depends upon. Ring-fenced, multi-year investment in community-based prevention is essential.

Second, there is a risk that the new preventative health ministerial portfolio becomes a coordinating function without corresponding resource. Good intentions and effective structures are not sufficient.

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Without dedicated capital and revenue funding flowing to local authorities and third sector partners who actually deliver preventative services, the agenda will stall.

Third, pressures on local authority budgets have forced difficult choices. Social care departments are increasingly directing resources towards statutory crisis functions, reducing capacity for the early intervention and community-building work that prevents crises from occurring. This is a false economy that Welsh Government policy and funding must actively counteract.

Whilst we welcome the new Welsh Government's early commitment to develop a roadmap for shifting NHS resources closer to communities, including through primary care, this must not be framed as a shift to primary care alone: investment must support the wider ecosystem of community, place-based and preventative services that keep people well, independent and connected.

### Conclusion

ADSS Cymru and our partners in local government are committed to building communities where everyone can live well and independently, connected to the people and places that matter to them. The appointment of a Minister for Public and Preventative Health and the growing cross-party alignment around this agenda are genuinely encouraging signs. We are ready to work constructively with the Welsh Government, with Senedd Members across all groups and with our health and third sector partners to turn this commitment into reality.

### Key Sources

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ADSS Cymru is the Association of Directors of Social Services in Wales, the professional leadership body for directors and senior managers of social services in all 22 Welsh local authorities.

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