

**ADSS Cymru Evidence to the Finance Committee's Inquiry into
Welsh Government's Draft Budget 2022-23
January 2022**



ADSS Cymru

Yn arwain Gwasanaethau
Cymdeithasol yng Nghymru
Leading Social Services in Wales

General Comment

The Association of Directors of Social Services (ADSS) Cymru is the professional and strategic leadership organisation for social services in Wales and is composed of statutory directors of social services, the heads of service and tier three managers who support them in delivering statutory responsibilities: a group which consists of over 300 social services leaders across the 22 Local Authorities in Wales.

The role of ADSS Cymru is to represent the collective, authoritative voice of senior social care leaders who support vulnerable adults and children, their families, and communities, on a range of national and regional issues in relation to social care policy, practice, and resourcing. It is the only national body that articulates the view of those professionals who lead our social care services.

As a member-led organisation, ADSS Cymru is committed to using the wealth of its members' experience and expertise. We work in partnership with a wide range of partners and stakeholders to influence the important strategic decisions around the development of health, social care, and public service delivery. Ultimately our aim is to benefit the people our services support and the people who work within those services.

We welcome this opportunity to respond to the invitation extended by the Senedd's Finance Committee regarding its inquiry to scrutinise the Welsh Government's Draft Budget for 2022-23 and its potential impact on social care services in Wales.

Policy Context

The impact of the pandemic has inevitably affected local priorities and council finances. However, the Hardship Fund coupled with sound local financial management has assisted the position. Even so, demand led services in the social care sector have been particularly badly affected and real concern about service continuity and the on-going impact on finances will continue indefinitely.

It is widely accepted that key areas of social service functions are facing challenges in a system that is facing unprecedented levels of complexity and demand. This, combined with fundamental workforce shortages, has exposed an already fragile situation. The reasons for this include:

- Pent up demand suppressed during the COVID-19 pandemic and periods of Lockdown
- Increased complexity and frailty in older people from reduced prevention, medical care, increased waiting lists and a greater level of community isolation
- A vicious cycle of delay and deconditioning/decompensation in hospital because of delays and shortages in key healthcare roles to ensure timely discharge
- Exhaustion across health and social care workforces with more frequent early retirements and people leaving the sector to pursue other careers
- Increased wages and competition from sectors such as retail and hospitality
- The impact of immigration controls across sectors post Brexit
- A growing mental health crisis in young people and in family instability post pandemic
- Difficulty in recruiting and retaining social workers in sufficient numbers across the sector, particularly in frontline children services.

Whilst not an exhaustive list, these pressures have led to a crisis of delivery in health and social care. It is our view that the current pressures are now more profound and wide ranging than at any time during the management of this COVID-19 pandemic. This situation is starting to limit our ability to support some of our most vulnerable people in the community. This is equally attributable to both Adult and Children's Services.

The social services safety net that all children and adults living in Wales assumed was there when they needed it, is in danger of collapsing without immediate action. Failure to address these issues will inevitably cost lives of the most vulnerable in society and further exacerbate the critical position acute hospitals find themselves in.

We believe that Local Government Social Care must have a strong revenue and capital settlement, not just this next financial year but at least the next 3 financial years to allow it the fiscal autonomy and flexibility to respond to local needs and priorities. Our members are going to be managing the impact of the pandemic for at least the next 3 financial years and they require the resources to do that properly based on permanent uplifts rather than bureaucratic short-term grants.

We have set out the medium to long-term funding challenges in our ***strategic priorities and positions paper*** (Annex A). Essentially, we require a sustainable, long-term settlement for Local Authorities to meet the needs of the local population that balances the growing pressures in all parts of the social care service. Ultimately, that investment focus will be around prevention and early intervention and will address the fundamental route of the challenges we face, for example, the causes of why children and families require social services input.

While there has been considerable media attention recently on the plans the UK Government have presented to the UK Parliament in relation to the creation of a UK-wide health and social care levy, the focus has largely been on the England system, with very little in the way of impact on devolved settings. The devolved nature of social care in Wales, means it will be a matter for the Welsh Government to implement the proposed changes.

Announcement of additional funding will potentially benefit local government, but only if its role is acknowledged and an appropriate amount is passported to councils. It is estimated that over the next three years £36 billion will be raised, from which the NHS will receive around £25 billion, social care £5.4 billion and approximately £6 billion will go to devolved administrations.

It has been stated that after three years the increased sums for the NHS will be redirected to social care because the Covid backlog will have been dealt with. Clearly this will depend on the willingness to transfer this funding from the NHS to the care system at a time when more demand for health services is likely.

We need to understand what the full consequential spend for Wales would be, what additional Welsh legislation is required and what the Welsh Government intends to do with the money to support the sustainability of the whole social care system (both children's and adults) over the medium to long-term.

Comments on the Draft Budget and areas of concern

The Welsh Government have taken note of some of the pressures that we have set out in discussions with them. Whilst we welcome the initial allocation and the headline percentage increase, we must reserve some caution because as a sector, we cannot in one year address all the challenges we face. Therefore, it is helpful in that context to have some forward indicative allocation of the funding to follow to provide some confidence to progress some initiatives and service developments that are required. At the present time, we only have broad budgetary envelopes for Main Expenditure Groups, which will be revisited in subsequent budget rounds. While certain budgetary assumptions can be made, greater clarity would be welcome.

As we digest the detail of the Draft Budget 2022-23, we are also cautious about certain budgetary elements that will be inherited, for example certain grants will be incorporated into the RSG but others will be hypothecated. There is also likely to be a hidden inflationary cost in the independent commissioned social care sector, related in part to COVID but also increased wage costs and energy costs, which will feed through into fee levels and significantly erode the uplift gains provided.

It is also noticeable that capital funding may initially be reduced but could increase in future. This is significant because if the Welsh Government is looking to rebalance the care sector in a bid to make it more sustainable, Local Authorities must be given the confidence to actively position themselves as trusted and confident providers of quality care and support services both now and in the future. This will require additional capital investment to support a rebalancing of public provided service models that enable stability for all parts of the social care sector.

For example, in Children's Services, there has been a significant shift in the provision and ownership of residential care placements, with Local Authorities less likely to own and operate children's homes. It is clear the current market model is not delivering sufficiency. There is more that can be done to re-balance and re-shape the care placement market, so that there is a mixed economy of service provision and placements, which actually meet the real and present needs of children who are currently looked after. This will require investment to allow Local Authorities to purchase, enhance or remodel assets in a phased way and the Welsh Government will need to think through the resource mechanisms to facilitate this.

In Adult Services, we know that there will be a requirement to provide additional support to informal, unpaid carers who would have experienced significant pressure during the various lockdowns. We also know there needs to be a re-evaluation about the viability of day care services provided in the community. These services along with respite care relieve pressure on families to allow them to continue look after their family members in the best way possible. However, we must embark on this change in a thoughtful and co-produced manner. Developing the right kind of local service and getting the right type of respite beds, including high-end residential and for adults developing dementia, is going to be crucial. Therefore, Welsh Government must work with the sector to understand the capital and revenue cost implications of increasing capacity and implementing new care models.

Workforce:

The workforce is the priority for ADSS Cymru at the moment. While some sectors have moved to a recovery model, social care is still operating at a response level and the pandemic continues to impact and affect the delivery of some services in different ways.

Workforce capacity and the significant challenges in recruitment and retention (for both in-house and commissioned service) are issues that cut across all of the issues highlighted, and are the main reasons for the lack of capacity to provide packages of care needed to undertake assessments or provide reablement support; with the loss of existing staff and challenges in recruitment as significant concerns. This lack of capacity has seen a resultant

increase in agency related costs, which has added further financial pressure to local authority budgets.

Despite the impact, the sector has maintained a constant recruitment programme across Wales which has seen some success, but the market remains very volatile, particularly in relation to domiciliary care/care at home workforce. We of course welcome the support Welsh Government have given to fund further national media drives around the 'We Care Wales' campaign, which has been matched by Local Authorities within their localities. However, Local Authorities and independent providers are both struggling to retain and recruit carers. This has always been a challenge but over recent months it has become significantly more difficult.

However, addressing the current pressures needs a multi-pronged approach. ADSS Cymru, is working with the Welsh Government, Social Care Wales, the NHS and the WLGA to examine workforce action planning by examining a range of measures. However, these are likely to include additional financial commitments that will need to be funded. It is evidenced that there is a need to attract people to work in social care to deal with the current and future demand, but this will take time and will not immediately resolve acute pressures in the system. The pandemic has exposed the fragility of care markets, and this has a clear and direct link to the financial pressures faced by all Local Authorities.

We believe that there is a need for a clear and sustainable offer to stabilise the domiciliary care and care home workforce and to provide proper and fair remuneration for the workforce. ADSS Cymru is fully supportive of the Welsh Government's intention to increase pay for social care workers to the Real Living Wage (RLW) and we have been working with them to provide workforce data and intelligence. However, it is becoming increasingly clear that our ambition must go beyond this if we really want to be able to offer 'fair pay' for those who are undertaking some of the most important roles in society. There is also a need to take immediate action – the workforce challenges are already with us, and so there is a need to do all we can to increase social care workers pay now, there is simply no room to delay.

As sector leaders, we continue to call for an urgent focus on parity of esteem with health in relation to pay, terms and conditions and career progression and this requires additional investment now and over the next 3 years. We believe we need a national pay and grading system for care workers, which will ensure that conditions of pay, holiday entitlement, job security and opportunities for career development and growth are as equally ambitious as the healthcare workforce.

This is even more acutely felt in relation to professional social workers, as we know that there is a shortage of experienced qualified social workers across the sector but within

children's services in particular. Rebalancing the workforce so that capacity mirrors demand will take time.

We welcome the work that Social Care Wales are undertaking to increase student training commissions, enhance bursaries and increase access to them. It is also positive to note the creation of post-graduate professional development pathways linked to improving pay and career progression. However, this work needs to be expedited, as sufficient supply at all levels of practice, including the leadership capacity, is a very present barrier.

We are concerned about the competition for such scarce social worker resource between public bodies – not just between Local Authorities but between Local Authorities and Health Boards, Care Inspectorate Wales, CAF/CASS Cymru and the offices of Wales' Police and Crime Commissioners. We feel it would be beneficial for the Welsh Government to co-produce a national pay and grading system for social workers to dampen competitive drivers. The fact there are national bandings for teachers, youth workers and health professionals mean that movement based solely on pay incentivisation is significantly reduced. We think this is a fundamental issue that must be addressed within the next 3 years.

We also need to see the restoration of workforce grant funding and inflationary uplifts to the Social Care Workforce Development Programme (SCWDP), all of which ensures we promote the effective development of the current and future social care workforce to enhance skills and capacity.

At the present time we are trying to compete with other sectors including health, retail and hospitality and we are falling behind the competition in the employment market. We need additional investment in the workforce because within current financial arrangements, Local Government cannot fund the step change required.

The Model of Domiciliary care:

The principal model of domiciliary care as support for older and disabled people in the community is fundamentally flawed. The current model was developed to maximise 'efficiency' and reduce costs. In this model, the task is prescribed with routes for frontline workers set by algorithm to maximise the number of runs and visits a single person can do in a shift. It is widely accepted that the UK moved from a predominantly public sector provision 30 years ago to a point where most services were outsourced with costs saved through reduced terms and conditions of staff. Tenders have been difficult to win without the use of zero or low hour contracts for staff. Providers report that giving guaranteed hour contracts of 28-37 hours a week would make the largest single difference in retention. However, many contracts, as they stand, make this financially impossible for providers and unaffordable for commissioners.

Even when it is in the public sector, the pressure of visits and routes are increasingly unsustainable. People cared for by frontline workers are getting progressively frailer and the needs of individuals on each visit are becoming increasingly unpredictable.

Any government intent to rebalance the mix of public and private provision is currently limited by the disparity in cost and terms and conditions between the sectors. Alongside this, reduced terms and conditions, expectations of registration, regulation of tasks and even the cost to stay on the register are all presenting issues that have fallen increasingly out of step with reward or status. Social care workers are now being asked to meet a health professionals standard of practice and registration, without any of the status or reward afforded by their public sector health colleagues.

Whilst some good attempts have been made through commissioning models and additional spend to reform this, tangible change has only been realised on a very small part of the sector. ADSS Cymru is certain that fundamental change is needed in how we deliver domiciliary care. The Change required:

- a) Contracts that give staff guaranteed hours would cost approximately 20%ⁱ more to deliver. This allows staff to be paid regardless of cancelled visits or changes to runs. It affords them the right to a regular wage and the benefits such as mortgage eligibility that most people accept as standard when they work.
- b) Domiciliary care workers are contracted to deliver high levels of productivity within their work. However, the autonomy to fulfil their role is far more limited than any other health or social care worker. This makes the roles they do unsustainable, and they are voting with their feet. Paid time for training, autonomy of task so they can flex visits to meet real personalised need, allowing time for paid supervision, training and development, and reimbursement of rising travel costs, would afford them what every other community health and social care worker has. Our estimate is that to give them 5.5 hours paid non-contact time would necessitate an increase in costs of 15%. This would also enable a move away from split shift work patterns.

Early calculations indicate that delivering this model will cost in the region of £110 million across Wales. However, we will need to undertake further analysis of workforce data with Social Care Wales and other partners to be sure that this figure will meet future demand. This could be delivered incrementally through mandatory commissioning guidance and subsequently renewed contracts allowing the social care workforce to grow by the required 30+% over a period of two years. In conjunction with minimum wages, we are of the view that this is possible to deliver.

Without these changes the pressure on communities and hospitals and associated costs will continue to grow and cost society and the NHS more.

Children's Services:

As need increases in communities, we are seeing corresponding increases in the number of children looked after and children at risk. It is crucial that current growth does not simply meet care and statutory intervention costs. Preventative services must develop and expand to meet need at the earliest possible point. Current statutory service growth has been between 12 and 20%.ⁱⁱ However, meeting this growth simply balances the budgets.

We believe that a significant percentage increase in preventative services for vulnerable children should be made available. For example, for every £1 spent to meet immediate statutory demand an additional £2 should be spent on preventative services to reverse the current position.

Early calculations of this figure is estimated at approximately £40-50 million per annum. This investment could potentially be tapered down in a realistic timeframe as the prevention investment is realised with reduced demand in other parts of the system. This investment will assist us in supporting the removal of profit in the care sector as part of safe Children Looked After reduction strategies.

In terms of children's placements, there is growing concern that placement availability is being further constrained from a position which was already considered to be a crisis. Action must be taken now to avoid a worsening situation. In our view, the principle underpinning the objective of removing profit from the care of children who are looked after is a positive one and it has our resounding commitment.

However, we need a clear transitional pathway to achieving that outcome. We are mindful of the current market situation, the well-known placement crisis and workforce challenges. The steps to removing profit must not de-stabilise either current placements or the work that is underway in developing suitable local supply in the near future. A detailed and informed approach, attuned timing, and compatible messaging is essential to ensure the competent management of the journey to achieving this objective. However, as we have referenced above, the need for additional investment, particularly capital investment, is crucial if we want Local Authorities and social enterprises to be a part of this market.

Conclusion

While we of course welcome the increases earmarked by the Welsh Government in the Draft Budget for 2022-23, we are conscious that this is not going to put social care on a longer-term path to stability and sustainability. It is going to require significant additional investment over the coming years. As leaders in the sector, we continue to work with partners to help develop a medium to long-term plan that will ensure we have a sustainable

social care system in the future that delivers high-quality care to meet the needs of all of our citizens that require support.

References

ⁱ This figure is based on modelling in a single region and then extrapolated across Wales.

ⁱⁱ This is evidence taken from a Social Care Director's survey.



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Leading Social Services in Wales

ASSOCIATION OF DIRECTORS OF SOCIAL SERVICES (ADSS) CYMRU

National Strategic Priorities (2021-2024) &

Position Statements for Children's and Adults Social Services in Wales

September 2021

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Association of Directors of Social Services (ADSS) Cymru

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As a member-led organisation, ADSS Cymru is committed to using the wealth of its members' experience and expertise, working in partnership with other agencies, to influence the important strategic decisions around the development of health, social care, and public service delivery, to the benefit of the people it supports and the people who work within those services.

Foreword by the President of ADSS Cymru

This last 18 months have been the most significantly challenging in our lifetime. We have not witnessed a public health crisis of this scale and ferocity in over 100 years. The COVID-19 pandemic has impacted every aspect of life, and the journey to rebuild in its aftermath will shape public policy decisions for years to come.

While we have recognised for some time the challenges, we all face in delivering high quality, innovative and responsive services to those who need care and support, whatever their age and wherever they live in Wales, we now face an even greater range of challenges. These challenges will impact on peoples' lives and the ability of health and social care services to deliver for many years.

The consequences of the global health pandemic and the potential state of our public finances mean that we will need to renew, innovate, and evolve the way we work, the way we engage with citizens and most crucially, the way we deliver services.

While it is important that we continue to focus on the objective to deliver seamless, integrated services with the NHS in a fair and equitable way, the pressures of operating in a post-pandemic environment with an impacted workforce and uncertain financial resources means that we need to prioritise our work and our collective effort.

The national voice of professional leadership for social work needs to be raised now more than ever. As president of ADSS Cymru, I want to ensure that the views of our members, which are grounded in their profession as practitioners delivering key services to people face-to-face, contribute to the national thinking required to find the practical solutions to the current challenges we face.

This suite of national strategic priorities and series of position statements – one for children's services and one for adults' services – provide an insight and context regarding what our profession has and continues to endure on the frontline of the public sector's response to the COVID-19 pandemic but also what we need to do as a matter of urgency to rebuild our communities, tackling inequality and recovery of our workforce.



Jonathan Griffiths

President of ADSS Cymru 2021-2022

Our strategic priorities for 2021-2024

As the national professional leadership organisation for social services in Wales, our vision is to ensure that children and adults in need, experience well-being and achieve what matters to them by accessing the right care and support at the right time within their communities, and that we ensure vulnerable children and adults are safeguarded.

We believe in working in partnership with the wider social care and health sector to improve services, whilst maintaining the local autonomy, flexibility of approach and diversity of choice that supports people to have genuine voice and control regarding the services they want and how they want them delivered. We recognise in our priorities the need to continue to rebalance the sector to ensure delivery of choice for children and adults.

Our members know the people they serve more comprehensively than any other public service provider; and understand the intrinsic importance of social care across all ages and in every part of their community. We are keenly aware of the challenges to delivering effective, high quality and sustainable social care services in the years ahead. While these challenges have been amplified by the impact of the Covid-19 pandemic, a systemic transformation was always required to not only meet changing public aspirations regarding the future of care services but also to meet long-term governmental commitments to climate change. Therefore, we recognise that, more than ever, we must develop and adopt innovative and agile approaches to the commissioning and delivery of care and support services. These new models and approaches must be based on high-quality research and a robust evidence-base to allow us to move beyond just sector recovery but to truly respond to the changing needs of individuals, families, and communities right across Wales, now, and in the future.

We believe ADSS Cymru's collective voice is critical to ensuring these needs continue to be at the heart of the seamless social care and health services envisioned by *A Healthier Wales* as well as ensuring that all agencies are held to account for their duties to provide care and support and that opportunities to improve outcomes can be fully realised.

Through our collective experience as professional leaders and practitioners, coupled with the evidence gathered by our organisation and our partners, we have identified four priority areas that we will focus on over the next three years, and work to promote and embody the values that underpin those priorities at a local, regional, and national level.

Recognising the landscape of social care is ever-changing, we have identified the broad activities that we will undertake during the next 12 months. We will develop specific action plans around those activities and then review our position and consider future activities in line with our priorities based on the emerging recovery landscape.

Priority 1: The social care workforce is properly supported, resourced, and valued with the skills and resilience to deliver the high-quality, responsive services that people need.

What does this mean?

- The social care workforce deserves parity of esteem in line with colleagues working in the NHS, by working with unions and other stakeholders to collectively bargain for better pay, terms and conditions.
- National solutions that recognise and reward the value and professionalism of our social care workforce, whilst minimising the challenges of competition should be explored.
- The future role of the social worker profession must be developed, by contributing to the design of innovative and high-quality leadership and career pathways that support succession planning.
- We must ensure that our workforce and systems are equipped to deliver and record care and support services in people's language of need and choice.
- Partner organisations across health and social care must work together to deliver the vision of the integrated workforce strategy for health and social care.
- We have accountability for ensuring that the key action points for local authorities in delivering the outcomes of the Race Equality Action Plan for social care are met, and that we take a lead role in realising the vision for a Wales that celebrates diverse and eliminates inequality.

Our actions for 2021-22 will be...

- **We will work with partner organisations to deliver the vision of the integrated workforce strategy for health and social care in Wales.**
- **We will continue to seek parity of esteem for the social care workforce in line with colleagues working in the NHS by working with the Chief Social Care Officer for Wales, unions, and other stakeholders to collectively bargain for better pay, terms and conditions.**

Priority 2: We want to ensure that people and communities are at the heart of the remodeling of social care and health services.

What does this mean?

- Engagement with individuals and local communities is crucial to understanding their needs and to ensure social care and health services reflect the outcomes that people and communities want.
- Carers in Wales must be supported to ensure their financial and well-being needs, and those of the people whom they care for, are satisfactorily met.
- Families must be supported to stay together, by focusing on interventions that are strengths-based and founded on evidence of what works in our communities.
- Collaboration with public health and primary care services in our communities is fundamental to safeguarding children and young people's mental health; with access to specialist, high quality well-being services being given at the right time.
- The autonomy of local commissioners to make decisions based on the needs of their communities must be upheld, and we must ensure that regional and national partnerships support this work rather than hinder progress.
- There must be consistency of approach across Wales in the application of Continuing Health Care and Continuing Care for Children and Young People, which fully meets the needs of individuals.
- The elective home education sector must be properly regulated to secure and safeguard the rights of home educated children in Wales.

Our actions for 2021-22 will be...

- **We will challenge the inconsistency of approach across Wales in the application of Continuing Health Care and Continuing Care for Children and Young People; ensuring that the needs of individuals, not organisations are paramount.**
- **We will continue to press Welsh Government to pass appropriate legislation to ensure the elective home education sector is properly regulated to secure and safeguard the rights of home educated children in Wales.**
- **To support one another to lead, and continuously improve, relationship- based, outcome focused models of social work. We aspire to deliver services that build on collective strengths and safely prevents family breakdown.**

Priority 3: We want to ensure that people have real choice and control in how their care is delivered.

What does this mean?

- Our workforce must have the necessary skills, time and experience to ensure all care and support plans are person centred.
- Welsh language provision is a fundamental part of the service offer, and the rights of people to receive care and support in the language of need must be championed.
- Black, Asian and Minority Ethnic people should feel confident in accessing and using social services and social care services whenever they are needed; and be provided with the highest quality support that is accessible, dignified, culturally appropriate and does not leave people disadvantaged.
- Digital innovation that has supported the delivery of services throughout the Covid-19 pandemic should continue to be progressed where it is appropriate. It should be beneficial to people who receive care and support, including unpaid carers and ensures that it fully incorporates Welsh language provision.
- People of all ages are aware of, and have access to, appropriate Advocacy services as and when they are required.

Our actions for 2021-22 will be...

- **We will continue to progress digital development that fully incorporates the Welsh language; that enables greater independence for people and helps maintain their connection to networks that provide support; and improves engagement across agencies that deliver social care and health services.**
- **We will deliver work through our Delivering Transformation Programme to explore how Black, Asian and Minority Ethnic people engage with social care services.**
- **We will lead the development of services that mean young peoples' needs can be met as close to home as possible.**

Priority 4: Sustainability is central to the rebalancing of care and support, with local authorities having confidence that services can meet the needs of people now and in the future.

What does this mean?

- Local authorities must be actively positioned as trusted and confident providers of quality care and support services, seeking Welsh Government support for additional capital investment to support a rebalancing of public provided service models that enable stability.
- We must continue to explore innovative models of care and support that draw on the strengths of all parts of the social care and health sector to deliver high quality services.
- Arrangements for commissioning of services for children and adults must consider differing and complex needs of individuals and families, prioritising outcomes and quality.
- Wider and more honest conversations should take place on market reform, transparency of cost, as well as the improvement of care quality, so that the right citizen outcomes are achieved for the right cost to the public purse.

Our actions for 2021-22 will be...

- **We will assist with brokering greater transparency in conversations on market reform and the issue of paying for care, including a better understanding of cost, as well as the improvement of care quality which will have a positive impact on the people we support.**
- **We will actively position local authorities as trusted and confident providers of quality care and support services and seek Welsh Government support for additional capital and revenue investment to support a rebalancing of public provided service models that enable stability.**
- **To proactively contribute to opportunities where we can influence policy, practice and funding, to optimise our success in leading change.**
- **To continue to maximise the benefit of our collaborative working models for adoption, fostering and commissioning.**
- **We will work collaboratively with the Welsh Government to find a long-term and sustainable funding solution to pay for future social care costs.**

All Wales Heads of Children's Services (AWHOCS) Position Statement

July 2021

Children living in Wales deserve excellent services. They should expect services that:

- Are rooted in children's rights and knows the value of hearing their voices
- Intervenes early before problems get worse
- Build on family strengths and are also responsive to parents' needs
- Are outcome focused
- Improved their well-being and reduces risk
- Are attuned to unique personal circumstances and setting
- Are available in Welsh
- Are integrated with other services, reducing the number of professionals children need to get to know

With the right political and strategic support, coupled with stable and appropriate funding, this is achievable.

As the complexity and circumstances of the children, families, and communities we support continues to change, our desire and drive to innovate our services across Wales has never been more important.

Innovation in our work is key, and is well evidenced across Wales:

- Celebrating the achievements of our young people who are looked after and involving them in our work
- Recognising the immense contribution of carers including young carers, foster carers and adopters, and providing them with specialist support
- Through prevention and early intervention services, relentlessly looking for ways to provide better and earlier help
- Providing holistic support for disabled children and their families
- Improving multi-agency responses to children who are at risk
- Providing leadership in public law developments, and the evidence-based intensive interventions that support families, avoiding the looked-after and legal system, wherever it is safe and suitable to the needs of children
- Our National Adoption Service which is improving services through a unique collaborative approach and co-production
- The work of the National Fostering Framework, which has led to Maethu Cymru/Foster Wales
- Improvements in commissioning in our collaborative work with The Children's Commissioning Consortium Cymru (4Cs)
- Co-production with families, for example, via family group meetings and parent advocacy
- Implementation of trauma-informed approaches across services, but especially in our provision for young people known to youth offending services.

In all these areas, we remain committed to providing high quality support with partners from the statutory, voluntary, and independent sectors.

Responding to the pandemic

Children's services across Wales met the challenge of the COVID-19 pandemic by continuing to provide services to vulnerable families with creativity and determination; driven by a focus upon public duty and keeping children safe. Following risk assessment and despite the workforce implications, many staff have continued face-to-face work in the community.

As restrictions ease and eventually cease, we anticipate changing complexity and increasing demand for services as the aftermath of the pandemic takes its toll. We are already seeing the associated increases in poverty, domestic abuse, unemployment, isolation, family breakdown and homelessness, linked to the pandemic. These issues will continue to have an impact upon people's mental health and well-being, to the extent that more parents and children will need services across the spectrum of need, delivered by a resilient and robust workforce.

We are yet to fully understand the hidden impact for children and their families, but we do know that the unprecedented challenge has left the workforce exhausted. Therefore, recovery planning for children's services will have to be nuanced, multifaceted and locally directed across Wales, as the various issues and challenges emerge.

Looking ahead, children and young people must be placed at the heart of local and national government's plans to rebuild communities and create a better future. We must close the policy gaps between social care, health, education and tackling poverty and inequality. Fragmented services that are not people focused will mean more families will mean increased engagement with social care, health services, welfare, and benefits services and, all too often, the criminal justice system too.

Prevention and Family Support

As lead professionals in children's services in Wales, we understand why working on the underlying causes that prevent children from entering the care system needs to be a national priority for all public services.

Going forward, with the right investment our members will continue their already well-evidenced drive to improve interventions and services that support families and prevent family breakdown. We know that well targeted, evidenced and strength based therapeutic interventions that are centred around trusted relationships work.

We will maintain our commitment to working with Welsh Government and build on our progress in continuously improving family support services. All stakeholders need to recognise that it is not just a challenge for social care or local government to solve in isolation. It is a broader multi-dimensional issue that is affected by so many factors, such as mental health, housing, education, employment, crime, poverty, policy and law. We are yet to see the level of drive and commitment across the public services that reflect the need for a consistent joined up approach. Therefore, everyone must step up and fully play their part and take responsibility to ensure the well-being of children and families that need our support.

Heads of Children's Services in Wales have contributed significantly to the Public Law Working Group and will implement the Public Law Reforms that will see even greater emphasis on support that aims to prevent the necessity for care proceedings. We anticipate that this work will result in increased use of s.76, Special Guardianship orders and Supervision Orders that support our work aimed at facilitating family led solutions.

Chief in this, is making sure that parents can access the services including mental health services they need at the right time.

Safeguarding

Maintaining robust safeguarding arrangements has been our members' primary and central duty during the pandemic, and this will not change. It is also vitally important that Wales has a safeguarding system that is founded upon family support so that co-produced solutions can be designed and planned with young people and their families at the very centre.

Safeguarding and supporting the well-being of children and families is everybody's business, and it requires a multi-agency and community response. In the year ahead, Safeguarding Board Member Agencies will re-design their multi-agency safeguarding response to the increasing number of young people who are exposed to harm by influences outside the home, such as criminal exploitation.

Responding to the needs and challenges of adolescents is one of society's more complex issues and we can conclude that the current looked after system does not always deliver best outcomes. We need to better understand what works for children in these circumstances.

Children in care

The most recent Welsh Government data (as of 31 March 2020) shows that there are 16,580 children who receive care and support from children's services across our 22 local authorities.^{[11](#)}

Of those children being supported, 7,180 are looked after. Of those children, 17% live with their families or with other family members through kinship care arrangements, 70% live with foster carers, 8% live in residential care, 3% of children are placed for adoption and 2% of older children live independently with support.

We are immensely proud of our children who are looked after and all their inspirational carers who have made an even greater emotional commitment during the pandemic.

At present, Wales faces a crisis in the shortage of available and suitable placements for young people. The consequences present an impending perfect storm where authorities may find themselves unable to safeguard a child in the foreseeable future. The impact of this for children and their families is considerable.

This is despite the concerted efforts by local authorities to increase the supply of suitable placements. Alongside partners and stakeholders, we need to continue to overcome barriers involved in the provision of sufficient, suitable, stable, and resilient local foster homes, children's homes and supported accommodation. Alongside this, we need to continue to recruit adopters who can meet the needs of children with an adoption plan.

There has been a significant shift in the provision and ownership of residential care placements, with local authorities less likely to own and operate children's homes. It is clear the current market model is not delivering sufficiency. There is more that can be done to re-balance and re-shape the care placement market, so that there is a mixed economy of service provision and placements, which actually meet the real and present needs of children in care today.

There will be a requirement for investment to allow local authorities to purchase, enhance or remodel assets in a phased way and the Welsh Government will need to think through the resource mechanisms to facilitate this. In addition to capital investment, we must be mindful that these provisions cannot thrive without skilled staff teams and wrap-around specialist emotional well-being and mental health services that traumatised children need. Revenue investment is therefore equally critical if we are to make this happen.

The launch of Maethu Cymru/Foster Wales demonstrates the culmination of collaborative working across Wales in respect of fostering services. This will support local authority fostering services to recruit and retain foster carers and realise the collective ambition of placing more fostered children in local authority placements within their home area. Maethu Cymru/Foster Wales will raise the profile of local authority fostering in Wales, increasing the number of foster carers and families available to the growing number of children who need them, and provide a more consistent and quality service to foster children and families alike. Welsh Government are supporting this work; their ongoing commitment, alongside that of our services across Wales, is needed to achieve the ambitious change this represents.

Given the disproportionate impact of the pandemic, there now needs to be an even greater focus on the strategic ambition and support given to children's mental health. The Nyth/Nest Framework^[iii] and Whole School Approach^[iiiii] initiatives are greatly welcomed. Sadly, and despite the very clear recommendations in 'No Wrong Door'^[iv], there remain too many examples of children with complex needs being unable to access the specialist integrated services, accommodation, treatment and support that they need.

These young people are facing an uncertain post pandemic world, and we will need to harness the full potential of our creativity and corporate parenting capabilities if we are to minimise the impact of this, through the provision of well-designed support services. This includes continuing the focus on developing robust adoption support for those children who cannot return to their birth families or communities.

We believe that we should be ambitious in tackling each of these issues and welcome the support and engagement of other key stakeholders in this work.

Workforce

Workforce well-being is a critical factor for Welsh Government and sector leaders to address as a matter of urgency. As the pandemic eases, we are moving very quickly to take stock of staff welfare and the balance of home-to-office working. We need to ensure that the workforce have the right systems and support mechanisms in place to thrive and that there are attractive settings to retain and nurture a healthy and effective workforce.

Virtual engagement, and the wider use of digital technology in professional practice accelerated exponentially during the pandemic. As we move forward, these relatively new approaches, which compliment face to face practice, are now being robustly researched and tested. This will ensure the long-term feasibility of virtual communication and technology within social work practice across Wales.

We know that there is a shortage of experienced qualified social workers within children's services.^[v] Rebalancing the workforce so that capacity mirrors demand will take time.

We welcome the work that Social Care Wales are undertaking to increase student training commissions, enhance bursaries and increase access to them. It is also positive to note the creation of post-graduate professional development pathways linked to improving pay and career progression. However, this work

needs to be expedited, as sufficient supply at all levels of practice, including the leadership capacity, is a very present barrier.

Resources

We cannot get away from the fact that the disruption to children's education, social and family lives has meant that our young people have paid a disproportionate price for keeping our adult population safe. It is vital that sufficient sustainable resources are in place to ensure capacity can meet demand.

It is of critical importance that Welsh Government continues to support local authorities in their work as they seek to intervene with families earlier and prevent problems from escalating. A number of the services that vulnerable families depend upon are funded by short-term and time-limited funding, accompanied by business processes that increase authorities' workload. Government must ensure that local authorities are able to invest in preventative, universal and early help services, so children and families receive practical, emotional, educational, and mental health support as soon as they need it.

As the whole social care system looks to recover after the pandemic, there is a real need to have an open, honest, and transparent discussion between partners in the system about the resources for care. Costs are increasing, particularly placement fees, in a context of reduced local government funding and an overstretched workforce.

Conclusion

Heads of Children's Services in Wales, supported by the Association of Directors of Social Services (ADSS) Cymru has a clear vision in pursuit of excellent services for children. What happens next on the pathway to translating this into consistent national delivery, is in the hands of leaders across the professional and political network in Wales.

We cannot be complacent, neither can we overlook innovation and change. There is a considerable amount of learning that has occurred over the last 16 months that must be synthesised and evaluated. We must look to safeguard the elements that worked well, whilst being open about the challenges in the system and how best to address them collectively.

During the next 2 years Heads of Children's Services, supported by ADSS Cymru will focus their combined leadership efforts on the following:

- Supporting one another to lead, and continuously improve, relationship- based, outcome focused models of social work. We aspire to deliver services that build on collective strengths and safely prevents family breakdown
- Lead the development of services that mean young peoples' care and support needs can be met close to home
- Continuing to maximise the benefit of our collaborative working models for adoption, fostering and commissioning
- Proactively contribute to opportunities where we can influence policy, practice and funding, to optimise our success in leading change.

¹¹ StatsWales, *Children receiving care and support by local authority and looked after status*, 24 March 2021.

<https://statswales.gov.wales/Catalogue/Health-and-Social-Care/Social-Services/Childrens-Services/children-receiving-care-and-support/childrenreceivingcareandsupport-by-localauthority-lookedafterstatus>

[As accessed on 6 July 2021].

^[ii] NHS Wales Health Collaboration, *Nyth/Nest Framework*, May 2021. <https://collaborative.nhs.wales/networks/wales-mental-health-network/together-for-children-and-young-people-2/the-nest-framework/>

[As accessed on 6 July 2021].

^[iii] Welsh Government, *Framework on embedding a whole-school approach to emotional and mental well-being*, March 2021.

<https://gov.wales/sites/default/files/publications/2021-03/framework-on-embedding-a-whole-school-approach-to-emotional-and-mental-well-being.pdf>

[As accessed on 6 July 2021].

^[iv] Children's Commissioner for Wales, *No Wrong Door: Bringing services together to meet children's needs*, June 2020. https://www.childcomwales.org.uk/wp-content/uploads/2020/06/NoWrongDoor_FINAL_EN230620.pdf

[As accessed on 6 July 2021].

^[v] British Association of Social Workers (BASW) Cymru, *Social Work Manifesto: Senedd Elections 2021*, November 2020. https://www.basw.co.uk/system/files/resources/181170_basw_cymru_social_work_manifesto.pdf

[As accessed on 6 July 2021].

All Wales Adults' Services Heads (AWASH) Position Statement

July 2021

The pandemic has been an unprecedented challenge for all of Welsh society but none more so than the adult social care sector. Statutory service commissioners and their provider partners have been pushed to their very limits in trying to respond to and deliver services in, what has been an extraordinary public health emergency.

Our members have been at the forefront of our nation's emergency response. Yet, despite the unrelenting pressures, the whole adult care workforce has stepped up to meet the challenge in ways that should be recognised and celebrated.

While we continue to meet the exceptional challenge of the COVID-19 pandemic in partnership with Welsh Government and other statutory agencies, partners and third sector organisations, it is important to reflect on and evaluate the tangible opportunities that the pandemic has caused. Responding at pace to the constantly evolving circumstances initiated by the virus has enabled us to deliver new and innovative models of citizen-centred care. It has also improved partnership engagement and integrated working by removing systemic blockages and organisational barriers. The sector has demonstrated that it can be nimble, flexible, and adaptable in difficult circumstances, managing risk positively to reformulate and change.

In a post-COVID society, we all have a significant opportunity – local and national government, along with the NHS, public health, care providers and the regulator – to recalibrate and renew the sector but still hold true to the objectives set out in the Social Care and Well-being (Wales) Act 2014. It is about people and what matters to them, rather than organisations, processes, and systems. To truly deliver transformative services to the most vulnerable in our communities, all partners need to continue the pathway of change, so that the learning and experiences of the pandemic are maintained and imbedded. Supporting leadership at all levels so that confident and trusted decisions are made at the right place, at the right time will be fundamental.

Rebuild and Renewal

Many of the challenges we now face in adult social care have been with us for some time. They are not new. We accept that the changes in our population profile – with a growing number of older people living longer with different needs, the public finance challenges and pressure of austerity, the fragility and nature of the care market, and the complexity of commissioning – are all well founded concerns that need to be addressed. Some of these aspects have been exacerbated by the COVID-19 pandemic, particularly the complexity that comes with service remodelling, the reablement of older adults who have contracted and suffered the most acute aspects of the virus; as well as the impact on the provider market and imprint left on the well-being of the workforce. We do not want to go back to the way things were because the challenges still exist and need to be overcome. We need a period of renewal. A time to rebuild. We want to work with the new Welsh Government to lead that process.

What this pandemic has shown is that social care deserves true parity of esteem with the NHS. This needs to be backed up by a long-term and sustainable funding settlement for social care, which local government has long been calling for. The only way we can accelerate innovation in preventative services and sustain

new models of health and care, is if local government is properly resourced to undertake the full scale of its work unfettered. The fragility of the acute health sector has been even more exposed by the pandemic. Therefore, we must accelerate the policy intent in *A Healthier Wales*, that focuses on the redistribution of resources away from the medical model of treating ill health, to the social model of preventing ill health.

We know that the wider determinants of health lie beyond the NHS. Education, housing, economic development, along with our community assets – our public infrastructure – prevent people from becoming ill, materially deprived, and socially disconnected. They erode inequality and promote resilience and community cohesion. Only by focusing on these social determinants and on quality well-being outcomes, will we improve the health and life chances of our citizens and our communities. Moreover, only by increasing integrated working at the local level between primary and community health services and social care services, will we be able to intervene at the earliest point of need and provide a holistic response to keep people mentally and physically well.

This cultural and systems shift from a hospital-centred health care system to a health and social care system rooted in the community in its broadest sense, must happen now. There must be an even greater emphasis on prevention to improve health and well-being and reduce the cost burden on public services longer-term. This starts with enabling families to support themselves from a basis of strength rather than weakness. We then build on this by improving and sustaining community resilience and community assets; the realisation of the localism agenda. This is where local government shows leadership and demonstrates its widest value if given the local flexibility and autonomy to do so

Welsh Government must seize this opportunity and be bold and ambitious with both action and resource to not just recover what we had before but to rebuild and renew.

Workforce

The pandemic has placed a spotlight on the incredibly valuable role social care plays. The adults' social care workforce has been on the frontline throughout this crisis, risking their lives, doing an incredible job in extremely challenging circumstances to protect those they care for.

ADSS Cymru welcomes the recognition the Welsh Government has afforded the sector, which has ensured the whole workforce has remained high in the public's consciousness. However, while the introduction of the social care worker card and financial bonuses have been appreciated, we must make the care sector an exciting and vibrant profession of choice, if we are to attract and retain the very best caregivers.

While leadership, culture and values-base are important magnets, it is essential that social care workers, including those working in care homes, are offered the same opportunities and conditions as NHS workers. We need long-term investment in the care workforce and parity right across the system – from students to leaders – which is permanent, sustainable, and easily recognisable to the public. We also need parity between health and local government more broadly. Social care does not work in isolation from other local government services; we work with and rely on each other. The volume and scale of that work, along with the responsibilities and accountabilities must be properly recognised. We will lead on this with other key partners, and we are prepared to work with unions to collectively bargain for improved terms if required to do so.

It cannot go unnoticed that the pandemic has had a devastating impact on people working in social care; particularly those working in residential care. When adjusted for age and sex, social care workers have twice the rate of death due to COVID-19 compared to the general population. The intense and continued pressure

on the entire workforce – including leaders and managers – is a cause of concern, particularly the longer-term impact on mental health and well-being. We must also acknowledge the ageing demographic of the workforce too. ADSS Cymru has real concerns about workforce burn-out and its impact on retention over the next two to three years, as the pandemic has left an indelible imprint on many older workers, which, for some, may be simply too much to bear. While the scale is still unknown, the potential loss of that knowledge, experience and expertise from the sector could well be considerable and we must prepare for that.

Understandably, addressing staff recovery and finding the time to prepare for any future waves of the pandemic is going to be crucial in the short-term. Therefore, it is vitally important that key elements of the national integrated workforce strategy that focuses on workforce well-being are rolled out at pace, so that the workforce is holistically supported to recover over the weeks and months ahead.

Partnership working

In many cases, responding to the pandemic has strengthened joint working at local, regional, and national levels, with more agile and responsive decision-making and action planning being enabled. The sense of urgency created by the crisis meant that all partners worked towards delivering a shared vision and common purpose, without the focus on who pays. This resulted in decisions, sometimes very difficult and complex, being made more quickly. In addition, relationships with providers have been strengthened by the continual and real-time dialogue with local authorities and others, supporting them with the provision of advice and updates, as well as shared learning. We must continue with and build on this good work.

Partnership working at its best – where trusting relationships are formed and nurtured – can lead to better outcomes, more effective and efficient services, and creativity. We want to explore and facilitate further opportunities where this can continue both in terms of integrated decision-making, reduced duplication and the sharing of leadership and workforce cultures; not just with health colleagues but also with providers and critically, the third sector. However, it is important that a more fundamental debate is had between partners and with the public about the future of social care. What are this nation's collective aspirations for social care? What is the final destination point of this integration journey and what does it mean in terms of responsibilities, accountabilities and quality of service? Protracted and resource-intensive discussions around issues like Continuing Health Care and the use of Direct Payments are no longer sustainable or tenable. They simply decelerate progress, test partnerships and undermined relationships. They must be addressed as a matter of urgency because they are not putting the person accessing services at the centre of the decision-making process.

Innovation and sector improvement

As social care leaders, we welcome innovation and improvement of the sector. Even at the very height of trying to manage a public health emergency, local authorities have taken the opportunities afforded to them by the situation to innovate, reconfigure and develop new services to meet citizen need. Having the ability to remain flexible and adaptable to change has been vital.

There have been significant changes in the way people have worked in response to the pandemic, with the greatest impact being on the increased and improved use of digital platforms and technology. So much of what we have taken for granted in both health and social care has transformed. Many services that have been face-to-face has moved online, digital platforms have enabled us to communicate wider and more frequently, and apps have enabled our citizens to access some support from their own homes.

It is, of course, vital that we evaluate the changes and learning that has taken place to working practice and, where possible, harness all the power that technology and digital innovation offer us through effective leadership and workforce development. However, we should not forget that, at its heart, social care is about people; human connection, compassion and empathy. It is about building and maintaining trusted relationships and not all of this can be done online. Similarly, for the workforce itself, particularly in terms of peer-to-peer support, the sharing of experience and maintaining workforce morale; digital technology can only go so far, as some work cannot be done without direct interaction.

What has emerged to some extent during the pandemic is there has been a shift in the level of support that some people who use services have required. There have been many cases of citizens who have previously accessed services finding other ways of coping without the extent of the service they'd previously had. It is not clear what impact this will have on citizen expectation and service delivery in the longer-term. Whether this is because family/friends have been able to fill any gaps in care and support while their work patterns have changed will not fully emerge until the Furlough Scheme is removed. However, we do know that there will be a requirement to provide additional support to informal, unpaid carers who would have experienced significant pressure during the various lockdowns. We also know there needs to be a re-evaluation about the viability of day care services provided in the community. These services along with respite care relieve pressure on families to allow them to look after their own. However, developing the right kind of local service and getting the right type of respite beds, including high-end residential and for adults developing dementia, is going to be crucial. Welsh Government must work with the sector to understand the capital and revenue cost implications of increasing capacity and implementing new care models. We must embark on this change in a thoughtful and co-produced manner.

Cost of care and market fragility

The parity of esteem agenda with the NHS must extend beyond equal pay and conditions for the social care workforce. There needs to be a genuine, long-term, and sustainable funding settlement for social care, which local government has been calling for long before the current COVID-19 crisis. The financial short comings in relation to cost pressures and cost differentiation that existed before the pandemic must be acknowledged and understood in order to put the current period in context. It could easily be argued that existing market models coupled with the funding environment that we have for adult social care, simply is not working.

We believe that the pandemic has exacerbated the precarious financial position that many care providers have found themselves in and calls into question the long-term viability of a number of care providers in the market, particularly within the residential care market, which had been disproportionately impacted by the pandemic. Many residential care providers remain under financial pressure, which is compounded by falling occupancy levels, either due to excess deaths or due to practical restrictions on new admissions, as well as a reduced demand for residential care.

Short-term funding has been made available to offset the cost of occupancy voids through the Welsh Government's Hardship Fund. This has been a significant financial support mechanism and we welcome the Government's continued support into this financial year. However, while we understand that there must be a gradual tapering of this support over the year, we want to work with Government and care providers to ensure this is undertaken fairly and at the right time. If decisions are rushed or arbitrarily taken, it could hasten market withdrawal in the sector and see care homes being returned to the public sector at a time when local authorities and other providers have limited or no capacity to intervene. This means that capacity would be lost from the sector completely and may limit the level of choice when exploring longer-term

provision. Moreover, it would also have a significant impact on the ability to support the hospital discharge process, which would result in even greater pressure being placed on the acute health sector, as well as domiciliary care.

We believe there is a need for a wider and more honest conversation on market reform, transparency of cost and quality improvement that goes beyond the development of national commissioning frameworks. It is reform that must guarantee care providers a much greater level of certainty regarding income but coupled with enhanced expectations about further investment in people and assets to improve and maintain quality provision. However, there needs to be a realisation that rebalancing the care market means increasing local authority market share, to have a full mixed model of provision. Further involvement of local government and not-for-profit providers will initiate reform that promotes co-production and social value, with a much stronger emphasis on the contribution providers can make to the lives of the people they support and to the communities in which they operate.

We need to urgently reflect on the suitability of the social care structural asset base in a bid to understand what is fit for purpose in a post-COVID society. There is a need for increased capital investment to modernise and adapt facilities and spaces to allow us to embed new models and ways of working that have emerged from the pandemic. As leaders, we must support the sector to adapt and improve. Failure to do this will have an impact on revenue costs and there will be spaces and facilities that may not survive this pressure.

While there has been a real focus on protecting vulnerable adults in care homes, we should not lose sight of the support and services that are given to vulnerable adults in the community – those in supported living, in extra care accommodation or in shared lives accommodation, and particularly those receiving domiciliary care at home. Increased service demands and cost pressures are also being felt by care at home providers, particularly in relation to rehabilitating those post-COVID patients who have spent long periods in hospital or who are suffering Post-COVID Syndrome (Long COVID). We are concerned about additional cost pressures of caring for these citizens disproportionately falling on the shoulders social care, particularly as there are domiciliary care supply and demand gaps emerging in some parts of Wales following a significant increase in hospital discharges into community settings.

More Welsh language care provision

ADSS Cymru strongly believes that the language of choice is fundamental in terms of commissioning and delivering services to our citizens. It's not about just complying with legislation and regulation; it's about fundamental human rights - dignity, choice and control. There have to be more positive messages from the Welsh Government around language, culture and heritage implications within social care.

We have been supportive of the policy intent of *More Than Just Words*, but our experience is that this has become less of a strategic priority in recent years compared to the amount of traction that was gained in its first iteration. The strategic framework is almost a decade old, and it needs to be reviewed and refreshed, so we can really embed the right conditions for transformative service change in the Welsh language.

One intervention that could be implemented nationally could be improved training initiatives and supporting tools to enhance oral communication. We know that recording language in people's homes is a challenge, particularly around clinical recording policy versus what the service user and their family want. While local authorities and commissioned providers are constantly attempting to meet people's rights, the current costs of care simply do not consider the cost of providing a bilingual service and the cost of improving the Welsh language skills of the workforce. This needs to change and must be addressed by the Government in its current review regarding improving social care arrangements and partnership working.