



Carers Wales

Unit 5  
Ynys Bridge Court  
Cardiff CF15 9SS

029 2081 1370  
info@carerswales.org

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Dr Dai Lloyd AM  
Chair  
Health, Social Care and Sport Committee

Dear Dai,

**Carers Wales Feedback on the Welsh Government response to the Health, Social Care and Sport Committee's Inquiry Report into the Social Services and Well-being (Wales) Act 2014 and its impact on carers**

Thank you for the opportunity to give our feedback on the Welsh Government's response. We have noted our feedback under each recommendation below.

As a charity representing Wales' unpaid carers, many of whom feel exhausted, underappreciated and disillusioned, overall we are very disappointed by the weak response given to you by Welsh Government. There is a lack of detail in how they will action the recommendations and an inadequate acknowledgement that many of the recommendations will require financial commitment to be addressed successfully.

We have tried to keep our feedback brief, so please let me know if you have any queries or require any further information.

Yours sincerely,

Claire Morgan  
Director

## **Recommendation 1**

As you know this was also a recommendation of Carers Wales' Track the Act report in 2019. We welcome Welsh Government's commitment to develop a national plan for carers, which we hope delivers the practical actions needed to address the recommendations of your committee report.

As well as being concerned about that lack of capacity within the Welsh Government Carers Team to do this, we also note the reliance on the Ministerial Advisory Group in developing and delivering the Plan, yet the Ministerial Advisory Group only meets on a quarterly basis. As a member of the group we can update that progress is very slow. Furthermore, meetings have so far focused on specific current carers projects, rather than taking a strategic view of priorities and key issues to be addressed.

All the MAG member organisations have other work commitments and may not have the funding, staff capacity or time to take on additional work that may be needed to drive forward any process to develop the Action Plan, naturally this is especially so since the coronavirus spread. The membership of the group is also at an operational level and social care-focused and we question whether it has the decision-making clout needed.

The Minister has indicated that the new plan will be in place by the end of 2020 and we question whether there will have been enough time and capacity to have the necessary conversations within the MAG. We note that the next MAG meeting has been cancelled. In our opinion, for the Action Plan to be meaningful and meet carers expectations, it should be co-produced with carers, prior to a full public consultation period e.g. via the MAG Engagement and Accountability Group as a minimum.

Having seen the consultation document for the new plan, we are concerned that it is not aspirational or broad enough to be meaningful. It focuses on short term actions, opposed to planning for future carer needs. The national carers plan must be cross-governmental and sit alongside other key plans such as 'A Healthier Wales', 'Prosperity for All'. It must be made clear that the plan should inform local government, health and Regional Partnership Boards when they are developing their key strategies and delivery plans. Furthermore, it should influence Welsh Government funding allocations ensuring projects/initiatives have properly considered carer needs and whether carers benefit directly or indirectly.

## **Recommendation 2**

In Carers Wales' Track the Act Briefing 4 many of the local authorities and health boards gave examples of where they are bringing carer's considerations into their operational work and increasing profile. However, they voiced concerns regarding their ability to plan for the future and develop services for carers due to the annual funding allocations and lack of certainty surrounding their funding streams. It was clear from some of the responses that it has a negative effect on the continuity of services and has undermined innovation.

One health board recognised that support for carers needs to be subsumed into core activities and strategies, but pressure on budgets and other priorities make this challenging. The responses we received about future planning lacked significant detail. This is worrying with the move to more integrated services and care provided closer to home, which has an obvious impact on unpaid carers.

Whilst Populations Needs Assessments have been undertaken, our Track the Act research found that many local authorities don't have a Carers Strategy. As a result, we query if information from the PNAs are being used to inform projections and planning for the future.

We acknowledge that local authorities and health boards have responsibilities through legislation and national strategies, yet our concern is in reality how these are being implemented and monitored by Welsh Government. For example, accessing relevant information can have a significant impact on carers' lives. Those who see or are given information are more likely to achieve positive well-being and achieve personal outcomes. Those who miss out on information could face difficulties such as financial hardship, develop poor physical and mental health, struggling or being unable to maintain all or some aspects of their caring role. Evidence from Track the Act Briefing 4 found that 45% of carers had seen or had been given information, but this was an 8% drop on the previous year.

### **Recommendation 3**

See comments under recommendation 1.

### **Recommendation 4**

We welcome the commitment to deliver the awareness campaign. However, this needs to be co-produced with carers. The information distributed so far referred to the term carer. Consideration needs to be given about the language being used to reach carers, because many carers do not self-identify as such or recognise the word carer.

We would be keen to see details on the marketing approach beyond the first phase mentioned i.e. which carers does the campaign aim to target, what is the plan/timescale for the campaign? As part of the publicity campaign on a national level there should be a requirement that local authorities and local health boards to also disseminate information through their own communication channels, including voluntary sector organisations, primary and secondary health care amongst others to raise the profile of carers and the rights that carers have.

As well as an awareness campaign on carers rights, we are also keen to see how Welsh Government can instigate a societal change in attitude to caring and would welcome discussions on this.

### **Recommendation 5**

We welcome the work by Social Care Wales and Health Education and Improvement Wales, which Carers Wales contributed to, and look forward to the Welsh Government publishing a Workforce Strategy.

In the meantime, Carers Wales has serious concerns about carer/carers' rights awareness of local authority service staff in initial point of contact services and social work teams. There are a cohort of carers who do not recognise their caring role and would not necessarily know of any services that may be able to help them. The Act states that where a carer may appear to have a need, the local authority must assess what those needs are. The local authorities' information and advice services should identify whether someone is a carer at first point of contact and then tell them about their rights and what help may be available to them. This is a process that should be on-going as we know of the 370,000 carers in Wales, every year a third will stop caring but be replaced by a third who will start. We have concerned about whether staff training on implementation of the SSWB Act has been continued by the local authorities. Many carers contact us having been given completed wrong information about their rights by a social worker.

Education should also start at the point of training in universities and colleges, so that our future health and social care practitioners are educated earlier about unpaid carers and their rights.

The proposed action plan for carers should consider what can be done to drive this work forward and ensure that there is sufficient monitoring of how many professionals have been trained.

### **Recommendation 6**

The code is not being followed. Evidence from Track the Act 2019:

- Only 69% of carers were asked whether they were willing and able to do certain tasks
- More than half weren't asked about their work situation
- Only 40% were asked about emergency planning if they were unable to care

We would like to understand if Welsh Government will consider a standardised assessment process/form for all local authorities to follow.

Carers Wales worked with Social Care Wales to develop the good practice toolkit for social care practitioners on carers needs assessments. That now needs to be rolled out as a matter of urgency and we would like to understand how Welsh Government will enable this. We understand that the British Association of Social Workers Cymru will be helping translate some of this toolkit into an app to help social workers.

### **Recommendation 7**

See response above.

The toolkit is an excellent resource but there must be monitoring of how many practitioners have undertaken the toolkit training and an evaluation of how they are using it in practice.

### **Recommendation 8**

We welcome this evaluation but through our Track the Act research question the ability of local authorities to provide accurate, and therefore meaningful data, especially when approaches to undertaking the carers needs assessment process and data collection vary so widely.

It is positive that the new Performance and Improvement Framework includes a new section on carers, to which Carers Wales contributed. We hope the new data collection through this framework is effective and enables more comparable data to be collected. However, we have been told by local authorities that they don't currently have the mechanisms in place to capture the data.

### **Recommendation 9**

### **Recommendation 10**

Due to Track the Act evidence of long waiting times, Carers Wales would ideally like to see a maximum waiting time for an assessment or at the very minimum a triage system should be developed so that immediate needs that would be deemed eligible for some sort of service are met.

We are getting more and more calls from carers at breaking point and are in crisis who cannot wait for an assessment. This will be exacerbated by the coronavirus and changes to assessment guidance. We hope that the new measures that brought in through the Coronavirus Bill will not push back progress on carers being able to access their rights in the SSWB Act in the longer term.

### **Recommendation 11**

There needs to be clarification to carers if a 'What matters' conversation is a form of assessment, which it is in some local authority areas. For many carers who have had a 'What matters conversation' they are unaware that they have been assessed. Similarly, those who are assessed as part of the 'whole person' approach are also unaware that their needs may have been assessed and taken into account in the care plan for those they care for. There must be a mechanism so that this information is captured in the performance and monitoring that local authorities are required to undertake.

85% of respondents who completed our Track the Act survey said they had not had a Carers Needs Assessment in the past year. Given that 61% of carers who responded to the survey said they were caring for over 50 hours a week, with 69% saying they have been caring for over five years, we are very concerned that those who may have the most intensive caring responsibilities seem not to be accessing or receiving assessment.

Carers Wales already holds evidence through our Track the Act research about refusal rates and much of this relates to a lack of confidence that an assessment will make any positive difference to their caring responsibilities. Nevertheless we are pleased that the government will seek further evidence about the reasons for refusal.

### **Recommendation 12**

Emergency planning is a core part of a proportionate or an in depth carers assessment. This is not happening in the majority of cases.

We welcome the drafting of a new policy framework for urgent and emergency care, as we believe there is currently inadequate planning and commissioning of services to meet carers' emergency needs e.g. emergency respite beds, emergency care providers able to meet needs etc.

### **Recommendation 13**

Whilst we understand that commissioning and services vary by local authority, Carers Wales believes there should be a minimum carer service expectation. We welcome the idea of a carers charter within the carers action plan consultation document to create more clarity about commitment to carers services at local authority level.

The Population Needs Assessments should also be used to inform the Public Service Boards and vice versa. The Wales Audit office review of the PSBs suggested that there needs to be clarity about the role who operate on a local authority footprint and how they link to the Regional Partnership Boards who operate on a LHB footprint.

### **Recommendation 14**

Carers Trust Wales produced detailed research for Welsh Government on carers respite needs and we believe this should be published to inform the debate.

The £3 million recurring funding is public money and how it is spent should be transparent and open to scrutiny. In addition by sharing and having access to this information, it can highlight good and bad practice, what works and what doesn't.

In relation to Direct Payments it would be useful to know the uptake and whether individuals are able to meet their needs for respite and also whether it offers that flexibility.

There needs to be a move to an agreed definition of what respite is and a change in terminology. Most carers do not like the word respite because the dictionary definition states it

'is a short period of rest or relief from something difficult or unpleasant'.

**Recommendation 15**

See response above.

**Recommendation 16**

Is there any mechanism for recording how many people have been offered, accepted or declined a Direct Payment? If people have declined, are their reasons noted? Similarly for those who have received a Direct Payment were there enough services available to meet their needs? This is important for future planning mechanisms in Regional Plans.

Social Work practitioners also need training and Social Care Wales should be able to monitor how many people have accessed their resources. These resources should also be published on local authority and Direct Payment broker websites.

**Recommendation 17**

**Recommendation 18**

**Recommendation 19**

**Recommendation 20**

**Recommendation 30**

No particular comment, Carers Trust Wales is the expert carer organisation for young carers in Wales.

**Recommendation 21**

See previous comments.

We support provision in the Welsh language, so that carers can access IAA in their preferred language.

We would again query the membership makeup of the MAG to deliver the plan as laid out in their response e.g. the service managers responsible for IAA and ensuring discussion at the MAG actually results in positive change at the local authority level.

**Recommendation 22**

We agree. The general public are largely unaware that the DEWIS website exists.

We would also be keen to understand how the local authority IAA services, DEWIS etc relates to advice provision via the Citizens Advice Cymru contracts funded by the Welsh Government's Single Advice Fund.

**Recommendation 23**

See previous comments.

We look forward to seeing the new competency framework and hopes this includes how its delivery will be monitored.

**Recommendation 24**

From Track the Act 2019 we asked local authorities to comment on the barriers and obstacles that are preventing them from successfully rolling out the Act. Most indicated that funding continues to be the main barrier with budgets being inadequate to meet demand. The short term nature of certain Welsh Government funding streams and uncertainty about future

funding stifles progress. Some asked for funding streams to be ring-fenced while others raised frustrations that existing funding streams are more complicated than they need to be. Health Boards also raised similar concerns with some stating that it also has an affect on providing continuity of services as well as undermine innovation.

It would be helpful if views from the third sector could also be taken into consideration regarding paying for care, as many including ourselves, have policy positions on this which could be helpful.

**Recommendation 25**

**Recommendation 26**

We are pleased to see this recognition. It is critical for funding needs of the third sector to be addressed, to ensure consistency in provision and support to deliver the carers action plan.

It should also be noted that third sector organisations are not funded to attend the MAG, which means our capacity to attend and contribute needs to be carefully managed.

Third sector bodies are often still not seen as equal partners by statutory sector bodies.

**Recommendation 27**

**Recommendation 28**

We support both these recommendations.

**Recommendation 29**

See previous comments.

