



## Social Services & Well-being Bill (Wales) Consultation

### Community Housing Cymru Group response

#### 1. About Us

**Community Housing Cymru (CHC)** is the representative body for housing associations and community mutuals in Wales. Our members provide approximately 153,000 homes across Wales and invest heavily in housing-led regeneration and social care. In 2011/12, our members directly employed 7,500 people and spent over £850m in the Welsh economy.<sup>1</sup>

In July 2010, CHC formed a group structure with Care & Repair Cymru and CREW Regeneration Wales to jointly champion not-for-profit housing, care and regeneration.

**Care & Repair Cymru (C&RC)** are the 'Older People's Housing Champion'. We are a national charitable body and actively work to ensure that all older people have homes that are safe, secure and appropriate to their needs.

Care & Repair Cymru is committed to improving the health and well-being of older people in Wales by providing advice and assistance with home improvements, adaptations and general repairs.

We work in partnership with a number of organisations including the Welsh Government, Local Government Housing and Social Care Teams, NHS, Occupational Therapists, third sector organisations such as Age Alliance Wales, the Older Peoples Commissioner, and housing associations to ensure that older people have access to a range of housing and social solutions that enable them to live in housing that meets their individual needs.

There are 22 Care & Repair Agencies covering the whole of Wales. Each agency provides a wide range of services and support for older and vulnerable people, helping them to remain living independently in their own homes and communities.

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<sup>1</sup> Measuring the Economic Impact of Welsh Housing Associations, November 2012

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## Care & Repair Agencies

The 22 Care & Repair Agencies in Wales operate to the same boundaries as local government, and provide housing services to some 40,000 older people every year. The type and scale of services provided in 2011/12 was:

### Core Care & Repair service

- 29,199 older people helped
- 69% of people helped were over 75 years old
- 11,383 (43%) of people helped received the intensive Casework service
- 1,330 people received help to apply for additional welfare benefits which increased household income by £2.5m
- £433,000 raised on behalf of 475 clients from charitable funds to pay for repairs or adaptations
- £11m repairs and adaptations facilitated
- 2,200 older people helped to make their home more affordable to heat

### Rapid Response Adaptations

- 13,500 older people helped
- 4,100 of whom helped return home from hospital
- 10,400 of whom had works that helped prevent hospital admission
- Average time enquiry to completion was 8 days

### General comments

The Community Housing Cymru Group welcomes this opportunity to comment on the Social Services and Well-being Bill (Wales). Having commented previously on the development of this Bill we are keen to ensure that the important contribution Registered Social Landlords (RSLs) and Care & Repair agencies make to social services outcomes is well represented. We would strongly encourage further engagement with the organisations with whom we work in shaping the detail of the national outcomes framework for social services associated with the Bill.

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The creation and implementation of the Bill will mark a momentous shift in the way social services are delivered and the way in which people access information and are assisted to find the appropriate care and support relevant to their needs. Underpinning this through core legislative framework for social care and social services in Wales is highly encouraging. The aim of producing a system which ensures that organisations understand their shared responsibility in their approach to providing care and support is important and will pave the way for greater clarity and consistency in service delivery. In turn, this will provide individuals with a stronger voice and greater control over the services they receive. We also welcome the introduction of the National Eligibility Framework, with a view to standardising the quality of care services across the nation and eliminating the postcode lottery which currently exists across Wales.

With budgets tightening in social care and health, funding has been increasingly focused on critical services, with little recognition of the benefits and eventual cost savings of preventative services. Preventative services help people to remain independent and improve well-being. Early intervention around simple hazards in the home, for example, can prevent the escalation of problems into 'crises'. The introduction of this legislation will help guide focus at commissioning level to consider that preventative action is the way to save money and improve services.

As Registered Social Landlords (RSLs), CHC members are both social housing providers and many are providers of care and support services. These services are wide ranging and include both long and short term services that address the needs of a variety of vulnerable groups, including those with a learning disability, older people and mental health. Care & Repair agencies support older and disabled people to live independently within their own homes through provision of timely adaptations and contribute to the sector largely through prevention of more costly social care services.

The services delivered by our members are designed to empower individuals to live as independently as possible, maintain close links and involvement with their local communities whilst being supported to achieve their goals and aspirations. Ensuring that the appropriate individuals are able to readily access such services is vital – it is encouraging that this will be supported by the Bill which considers (and provides procedures to facilitate) the portability of care and support plans, access to information and integrating compatible services.

Having formed a group structure with Care & Repair Cymru (C&RC) and CREW Regeneration Wales, as a membership body we reflect the role of our members as driving agents of improvement and positive change in the areas of housing, care and regeneration.

The Community Housing Cymru Group has responded to those questions that are most relevant to the work of our members:

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## Questions

**1. Is there a need for a Bill to provide for a single Act for Wales that brings together local authorities' and partners' duties and functions in relation to improving the well-being of people who need care and support and carers who need support? Please explain your answer.**

The Regulatory Impact Assessment included in the Bill provides an understanding of the outcomes associated with *not* developing the current system in any way. The consultation document rightly indicates that this will only serve to put a further strain on resources and fail to recognise the increasing need of the population in the coming decades. Furthermore, the Bill cites *Sustainable Social Services for Wales: A Framework for Action* which emphasises the need for social services to undergo a transformation in order to meet the needs of the population, noting that:

*“The number of people registered with local authorities in Wales as having a learning disability is increasing and there is an increasing number of older people with complex care needs who can benefit from support - and whose support needs are extensive.”*

In considering the future demand for older people's services, Public Health Wales report that with decreasing birth rates and increasing life expectancies, the proportion of older people aged 60 or over is around 1 in 4. Over the next 20 years the population is only expected to grow by 3% but the percentage of those of retirement age is expected to rise by 11%. Furthermore the number of people aged 85 or over is set to increase by over a third to 82,000. The Personal Social Services Research Unit forecast that, compared to 2010, demand for social care will increase by 60% by 2030.<sup>2</sup>

The National Dementia Action Plan for Wales notes that the number of people with Dementia is expected to increase by 31% by 2025. The action plan emphasises the challenge this represents to Health in managing demand for services and ensuring that individuals do not remain in a hospital setting for longer than is needed. It is through greater interaction on a strategic level with health that our members can offer appropriate services to ensure that individuals live in a desirable, appropriate setting. We continue to develop our relationship with health and social care to ensure that we are able to champion such outcomes and facilitate the process whereby they come to be realised.

In relation to continuing health care, there is currently a project being taken forward with members who are sitting on the Social Care, Housing and Health Forum within the Aneurin Bevan Health Board region. This group represents a pro-active gathering of professionals from Health, Housing, Social Care and the Local Authorities to ensure efficient planning of

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<sup>2</sup> Wittenberg, Raphael and Hu, Bo and Hancock, Ruth and Morciano, Marcello and Comas-Herrera, Adelina and Malley, Juliette and King, Derek (2011) Projections of demand for and costs of social care for older people in England, 2010 to 2030, under current and alternative funding systems. PSSRU discussion paper, 2811/2. PSSRU, London, UK

current and future housing stock for those with learning disabilities requiring continuing health care. The approach looks to make the best use of current housing provision and prompts greater planning when considering future accommodation need, separating out an individual's care need from their housing need. The model is being piloted in this context but the hope is that if the financial savings and benefits for individuals are realised, then it could be extended for use in services for a variety of clients groups where similar interactions occur.

The work being undertaken by this group is a broader reflection of potential gains that may be realised through increasing cross-sector working. Our members are ready and willing to undertake such work where strategies and projects have the potential to produce desirable outcomes. We are keen to highlight the benefits associated with making closer links between housing, health and social care at both a strategic and operational level.

It is clear that in order to produce the required shift, there is a need for closer collaboration on multiple levels. It is encouraging to note that the Bill seeks to firm up how duties and functions that already exist between Local Authorities (LAs) and their partners can further complement each other to provide greater outcomes for the well-being of individuals. It is important that the Bill does not lose sight of the Welsh Government's intention for the shaping of social services, as set out in the Programme for Government which stated:

*"Better social services will be delivered by ensuring citizens have a much stronger voice and greater control over the services they receive. We will make the way that services are delivered simpler, and by working collaboratively with others we will focus on improving the well-being of all our citizens. We will lead a shared approach with our partners in the public, private and voluntary sectors to deliver the transformational vision set out in Sustainable Social Services."*

Through the provision of high quality information and a simplified system of delivery, we believe that the understanding of social services functions will become easier to digest. This must rightly be met by consistent collaboration across Wales. We hope that the evidence and views provided in this response go some way to demonstrating how that is currently happening and highlights how the Bill will improve the breadth of this positive work.

We also welcome the inclusion of well-being within the bill; however, whilst the definition of well-being within the bill includes 'social and economic well-being', it does not specifically include 'housing issues', such as ensuring that people live in a safe and secure home. Housing impacts upon people's health, well-being and independence which is particularly pertinent as we age, as many older people spend disproportionately large periods of their life in their homes.

To highlight the issue of home safety and the significance for health and well-being for older people, it is useful to highlight the scale of the problem of falls. In Wales in 2009, 259 older people died as a result of a fall, over 20,000 people were admitted into hospital and over

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44,000 attended emergency departments.<sup>3</sup> Most falls occur within a person's own home. Recent research by WRVS found that many older people lost confidence through falling and 17% of older people over 80 who had fallen preferred not to leave the house at all.<sup>4</sup> Improving home safety not only saves the lives of older people and increases their independence, it also saves money through preventing the need for other services, such as health and social care.

Current intelligence from Care & Repair agencies indicates a worrying level of housing disrepair and an increasingly complex older and frail client group. The incidence of poor domestic heating, fuel poverty, and dampness which have associated health consequences, as well as other factors such as neurological disorientation, and profound loneliness, stress and anxiety from poorly secured homes, all have the potential if not well managed to require crisis intervention. Care & Repair's proactive casework and technical service provides an assessment of need and sources timely solutions to address the most critical challenges that face older people.

## **2. Do you think the Bill, as drafted, delivers the stated objectives as set out in Chapter 3 of the Explanatory Memorandum? Please explain your answer.**

We welcome new duties on Local Authorities to promote the development of new models of service delivery through social enterprises, cooperatives and user-led and third sector services. In the context of limited resources and increasing pressure on services, this appears to be an apt time to ensure that this promotion is done. This will support RSLs and Care & Repair agencies. RSLs as providers of care and support services, delivered in partnership with Local Authorities, fall under the definition of social enterprise as detailed in the Bill. In addition our members often allocate individual staff members who are responsible for developing strategies aimed at involving service users in the delivery and development of services, recognising that meaningful development cannot take place without this attitude being present within the organisation. Care & Repair agencies are an example of how a third sector organisation can work successfully in partnership with social services and health organisations to provide seamless services to support older people to live independently and safely in their own home.

A system that is clear and comprehensive to members of the public is highly desirable. We support the measure to improve the consistency and quality of information and advice relating to the care and support options available across Wales. At a recent strategic day centred on older people's services, our members identified a need to promote their work in providing extra care to a greater degree. Whilst, as a representative body, CHC does much

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<sup>3</sup> Public Health Wales (2012) The Burden of Injury in Wales  
[http://www2.nphs.wales.nhs.uk:8080/PHWPapersDocs.nsf/85c50756737f79ac80256f2700534ea3/10630ae242ba186480257a99003784a0/\\$FILE/20%2009%20BurdenOfInjuryInWales2012%20final.pdf](http://www2.nphs.wales.nhs.uk:8080/PHWPapersDocs.nsf/85c50756737f79ac80256f2700534ea3/10630ae242ba186480257a99003784a0/$FILE/20%2009%20BurdenOfInjuryInWales2012%20final.pdf)

<sup>4</sup> WRVS (2012) Falls; Measuring the impact on older people  
[http://www.wrvs.org.uk/Uploads/Documents/Reports%20and%20Reviews/Falls%20report\\_web\\_v2.pdf](http://www.wrvs.org.uk/Uploads/Documents/Reports%20and%20Reviews/Falls%20report_web_v2.pdf)

to ensure that this work is highlighted through channels such as our website, press releases and consultation responses, the facilitation of information to the public on their local services will complement this further.

The stipulation to make people aware of services that they may need now and *in the future* is particularly important. Whilst the expected increase in cases of Dementia (for example) and individuals requiring more intensive care services is well reported in line with commentary on the ageing population, it is vital that the public understanding of what type of care and support can be provided is appropriately enhanced, especially among those who do not interact with such services at present. Public perceptions around social services must be shaped further towards the understanding that these are enabling, life enhancing services that support individuals to live as independently as possible. Promoting this perception will help both those who may eventually require contact with such services as well as their family members.

The duty to meet need is an important and required aspect of the Bill. Some caution is required, however, in understanding who will be and who will not be served by this duty. It is encouraging to note that LAs will have the power to meet care and support needs without referring to the eligibility criteria. This will ensure that those who are in crisis and require a care and support service as a matter of urgency will not be delayed by a need to receive an assessment relating to their suitability in accordance with the eligibility criteria.

The portability of care and support plans is a very encouraging step and will ensure that those who want to move, to be closer to family members (for example), can do so. We welcome the improved rights of carers to an assessment of their own needs and the requirement to provide support directly to the carer. We would question why portability is not available for care and support plans relating to carers. In some instances it may be the case that (for example) between a married couple one may be the carer of the other partner. We would seek further clarification as to why one partner's care and support plan (the recipient of care) is portable whilst the care and support plan of the other (the care provider) is not. This may cause unintended complications or delays when a couple in this situation seeks to move to another LA area.

The duty on Welsh Ministers to publish a *statement of the outcomes to be achieved in terms of the well-being of people who need care and support and carers who need support* will place a clear role on Ministers in shaping the ends of social service provision in Wales. It is important therefore that Ministers work closely with service providers and service users to work collaboratively in matching up what should be expected using current resources. CHC members work closely with the Care and Social Services Inspectorate (Wales) in providing services. As such, it would be expected that the duty relating to the aim of increasing the quality of services would draw heavily from such interactions to certify that the most is made of information already being collected through such regulation.

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The definition of well-being within the Bill differs from other Welsh Government definitions of well-being, including the Strategy for Older People in Wales and the Housing Bill. We recommend that there should be an agreed definition of 'well-being' within the Welsh Government, carried through all strategies and other documents. This would enable a shared vision between the Welsh Government and other organisations of approaches to improving the well-being of Welsh citizens and lead to improved measurement of outcomes.

The move to promote integration through the Bill is strongly welcomed. A recent report from the National Housing Federation found that bringing together housing, health and care can deliver savings of between almost £3,000 to approximately £18,000 per year for each individual case.<sup>5</sup> It is important that, whilst this does not need recognition through additional regulation, an understanding of the contribution a person's living situation, albeit in social housing or extra care housing (for example) makes to an individual's well-being is appropriately recognised.

A greater emphasis on prevention in the bill is welcomed by the group. Proper investment in preventative services would improve the well-being of the people of Wales, whilst saving public funds. Helping more people to live independently, through services such as Care & Repair, reduces demand on the NHS and social services. The Rapid Response Adaptation Programme (RRAP) administered by Care & Repair is a fast response minor adaptations service and is an excellent example of how investing in prevention can both improve well-being, through enabling hospital discharge and preventing hospital admittance, and save public funds. For every £1 spent on the Rapid Response Adaptation Programme, £7.50 is saved from the NHS and social services budgets and yet Care & Repair services attract very little from these budgets. An equally powerful example of 'prevention' is demonstrated through the Care & Repair proactive assessment and advice service, visiting vulnerable older people in their own homes (and often before they reach the stage of 'vulnerability') to highlight threats to well-being and agree personalised strategies to deal with individual problems.

This legislation will serve to change attitudes at commissioning level with regard to the development of preventative services, which would both save money and improve services and health outcomes. The definition of 'preventative services', however, remains unclear. We feel that without specific guidance regarding evidence of what services work to help to prevent or delay the need for care and support, it will be extremely difficult for local authorities to negotiate which services to support or develop. The work of Care & Repair, for example, is extremely well evidenced. Care & Repair services help people to live independently in the community, reduce the need for care, improve well-being and prevent poor health. Timely home adaptations and reablement services get people home from hospital quickly and prevent hospital readmissions, helping them to recover their independence after illness.

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<sup>5</sup> National Housing Federation (2013) Providing an alternative pathway The value of integrating housing, care and support. [http://www.housing.org.uk/publications/find\\_a\\_publication/care\\_and\\_support/care\\_pathways.aspx](http://www.housing.org.uk/publications/find_a_publication/care_and_support/care_pathways.aspx)

We are also concerned at the issue of charging for services, particularly information and advice services. Many information and advice services, including those provided by CHC Group members such as Care & Repair and Moneyline Cymru, are provided free to the service user. People in need of information and advice are often at their most vulnerable. It is concerning that such people will be charged to receive valuable information and advice, which could potentially transform their circumstances. Older people, for example, tell us that it is difficult to negotiate information and advice, particularly around complex issues such as welfare benefits. With many benefits being unclaimed, older people who are entitled to financial support are struggling to support themselves. It is vital that people can access such advice, and for such advice services to remain free of charge.

**3. The Bill aims to enable local authorities, together with partners, to meet the challenges that face social services and begin the process of change through a shared responsibility to promote the well-being of people. Do you feel that the Bill will enable the delivery of social services that are sustainable? Please explain your answer.**

The challenges facing Local Authorities and their partners are wide ranging, particularly in the current financial climate. Our members interact with LAs in a number of operational environments, including housing, health and regeneration. Sustainability clearly needs to be at the heart of any Bill that seeks to shape the provision of social services in the future. The population projections and the increasing requirement to meet individuals with more complex needs should indicate that sustainability must result in a system that allows for flexibility and remains conscious of the expected changes associated with the care and support needs of future generations as well as today's. The point being that these are likely to vary, and services should therefore be reflective of this potential trend.

The only way for services to meet the increasing demand would be for the health sector and local government (including social care and housing) to change the way that they work to achieve better alignment of services and strategy to see a holistic approach to delivery. The results would achieve significant savings, help achieve sustainable services, provide a better experience for service users and help to make a contribution to social inequalities in health.

In addition, we believe that the sustainability of the Bill is closely linked with the eligibility criteria for individuals deemed to require a care and/or support service upon assessment. These eligibility criteria will aid in clarifying what flexibility will look like and how individuals will be assessed and (potentially) referred to the appropriate service(s). The National Eligibility Framework is a potential threat to the sustainability of social services, depending upon the thresholds which are set. Without more specific detail on the criteria the impact of the bill cannot be properly evaluated, with regard to potential outcomes for those who receive services or the financial implications for local authorities and service providers.

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## **5. What are the potential barriers to implementing the provision of the Bill (if any) and does the Bill take account of them?**

The Bill comprehensively covers how collaborative working will look going forward and underpins this with an understanding of 'why' this is now required. With increasing population growth and a growing need for care and support services, the provision of such services to meet this demand will continue to be a challenge for our members and for others.

The increased shift towards formalising the arrangements for partnership working will clearly require (in some instances) a substantial shift in culture and attitudes within some working environments. Whilst in some areas of Wales there are strong traditions of collaboration, this is not the case in all areas of Wales. The Bill should therefore recognise that this transition will be more complex in some areas whilst in other areas, it will more or less formalise arrangements that are to some degree already in place.

### **Conclusion**

We strongly support the aims and ambitions behind the Social Services Well-being (Wales) Bill to transform the way that social services are delivered, making them simpler and giving people stronger voices and more control. We welcome the aspiration toward standardising the quality of care services across Wales and the opportunity for greater collaboration between sectors. We are also pleased about the recognition the Welsh Government has given to the importance of broadening the scope for preventative services.

The recent proposal by Welsh Government to develop a Public Health Bill for Wales recognised housing circumstances as a determinant of good health. Whilst the role of housing is acknowledged within this bill, we would like to see further recognition of the fruitful partnerships that cooperation between housing, health and social care produce. We have emphasised the role housing plays in relation to an individual's well-being and quality of life, and the organisations with whom we work both provide flexible innovative housing models and work with individuals to sustain independent living.

**Community Housing Cymru Group  
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