

MINUTES

Date: Wednesday, 20 June 2001

Time: 2.00 to 5.40pm

Venue: Committee Room 3, National Assembly for Wales

Attendance: **Members of Health & Social Services Committee**

Kirsty Williams (Chair)	Brecon & Radnorshire
Peter Black	South Wales West (Items 1, 2 & 3)
Geraint Davies	Rhondda
Brian Gibbons	Aberavon
Brian Hancock	Islwyn
Jane Hutt (Minister)	Vale of Glamorgan
Ann Jones	Vale of Clwyd
Dai Lloyd	South Wales West
David Melding	South Wales Central
Tom Middlehurst	Alyn & Deeside (Items 1, 2 & 3)
Lynne Neagle	Torfaen
Rod Richards	North Wales
Janet Ryder	North Wales (Items 1, 2 & 3)
Gwenda Thomas	Neath (Items 1,2 & 3)

In Attendance

Sandy Blair	Welsh Local Government Association
Hugh Gardner	Association of Directors of Social Services
Tony Garthwaite	Bridgend County Borough Council
Cllr Meryl Gravell	Welsh Local Government Association
Rhian Huws Williams	Central Council for Education and Training in Social Work (CCETSW)
Mario Kreft	Care Forum Wales
Stan Rupa	UNISON
Malcolm Russell	Association of Directors of Social Services
Kevin Sullivan	Welsh NHS Confederation
Richard Thomas	Welsh NHS Confederation
Paul Williams	Bro Morgannwg NHS Trust

Officials

Dr Ruth Hall	Chief Medical Officer
Ann Lloyd	Director, NHS in Wales
Rosemary Kennedy	Chief Nursing Officer
John Morgan	Health Services Division
Mike Shanahan	Social Care Policy Division
Helen Thomas	Social Care Group
Graham Williams	Social Services Inspectorate Wales
Bob Woodward	Social Services Inspectorate Wales

Secretariat:

Jane Westlake	Committee Clerk
Claire Morris	Deputy Committee Clerk

Item 1: Apologies and Substitutions

1.1 There were no apologies or substitutions.

1.2 Members were reminded of the requirement, under Standing Order 4.5, to declare any interests before taking part in proceedings. The following declarations were made:

- Peter Black, member of the City & County of Swansea;
- Geraint Davies, Pharmacist and member of Rhondda Cynon Taff County Borough Council;
- Brian Gibbons, wife is a social worker;
- Brian Hancock, Self-employed health, safety and environment Consultant, Registered Safety Practitioner (RSP) and wife is a community midwife;
- Dai Lloyd, General Practitioner and member of the Council of the City and County of Swansea;
- Janet Ryder, member of Ruthin Town Council

Item 2: Local Government Prioritising and Spending on Social Services

Paper: HSS-10-01(p.1)

2.1 Cllr Meryl Gravell, Welsh Local Government Association (WLGA), thanked the Committee for the opportunity to present the Association's views. She said that social services were a key statutory responsibility for local government and the quality and availability of services contributed to a wide range of objectives. The agenda for change had been set out in the 1999 Social Services White Paper and there was real commitment amongst local authorities to engage in this improvement and change agenda. Local authorities had faced a period of continual change and re-organisation. They were expected to take on new areas of responsibility, but in addition demographic trends and rising demand and expectation outstripped resources.

The additional funding made available by the Assembly was welcomed, as was the move to a three year funding settlement. However, it needed to be recognised that local authorities had not yet reached a position where historic underfunding had been overcome. Services for older people, children and adult mental health were examples where aspirations would not be met without significant additional resources. Despite underfunding and overall budgetary pressures, the figures in Annex B showed that authorities' gross expenditure on social services had increased almost three times more than any other service, which demonstrated the priority given to social services.

It was important that the social services budget was not considered in isolation from the overall context of local authority spending. This would become increasingly relevant with the advent of flexible, interdepartmental and interagency strategies to respond to need and achieve early intervention and prevention, and it was important to identify where underfunding of other services was creating

unnecessary demands on social services. The Association was keen to engage with the Assembly in agreeing defined outcomes, the resources necessary to achieve them and the best means of monitoring and evaluation. It was felt that focusing on outcomes would provide a more relevant picture of how local authorities were performing and would be more compatible with developing partnership and funding arrangements between the Assembly and local government.

2.2 Hugh Gardner of the Association of Directors of Social Services (ADSS) said that he shared many of the viewpoints and concerns of the WLGA, particularly in terms of working collaboratively with the Assembly. He also welcomed the additional funding but said it had only enabled existing services to be maintained. He believed most progress had been made in areas where clear policies and expectations existed and there was specific funding, e.g. Children First. The Service would value clear delineation of resourcing. The Social Services White Paper provided a framework for a more clearly defined professional service and joint working with the health sector.

It was felt that in broad terms children's services had been protected at the expense of adult services, and frontline services protected at the cost of management development. Social services were still badly under-resourced in terms of management capacity. It was acknowledged that variation of service provision across Wales was a cause for concern and work to address this was ongoing, but it also needed to be remembered that different communities had different needs.

Concern was expressed at the adequacy of services for older people. Many people in the community were currently waiting for care because of resource shortages. If provision of care in the community rather than in a residential setting was to be addressed there would need to be significant investment in social care. There were also concerns about the pressures being placed on the private/independent sector who played a huge part in the delivery of services but whose future could not be guaranteed without adequate resourcing.

2.3 In response to Members' questions, the following points were made:

- There were technical reasons why only 95% of the additional funding was allocated for social services use. The WLGA would provide written details.
- With the Assembly's support and joint working it was felt that the recommendations of the joint reviews could be implemented.
- A joint approach to measuring outcomes across Wales was needed. That would help determine to what extent outcomes reflected the resources expended.
- Workers in the social care field were demoralised. The media rarely focussed on any positive issues or good news in this area.
- A gap of £95m had been identified in the level of resource required to meet assessed needs for a comprehensive community service for older people. The WLGA would provide supporting information for that figure.
- The whole ethos of how services were provided needed to change, to engage a wider range of services to support people's independence for as long as possible.

- There was a need to increase management skills and also to attract young people to join the sector.
- Many authorities were already responding to the Waterhouse recommendations by preparing their action plans under Children First. Consideration needed to be given to whether there were any recommendations that were not being addressed through Children First that would require additional resources.
- Partnership working was still in the early stages but it was felt that the benefits of being able to pool resources with health authorities would be seen in time.
- There was some relationship between the performance of the economy and demand for support services. Generally, experience showed that demographic changes and the increasing recognition of the extent to which there were service needs not being met outweighed the benefits of an improved economy and lower unemployment.
- Low wage economy had implications for the overall demand on services.
- Investment in policy development and management would be critical to the delivery of improved services.

2.4 Members also made the following points:

- Consideration should be given to asking the Audit Commission to prepare a report on the implementation of the Waterhouse recommendations in Wales.
- Outcomes needed to be measurable but without creating a "league table" culture. Consideration should be given to a two-tier approach - strategic, at the Assembly level, but with the capacity to reflect local needs and pressures.
- Concern was expressed at the possible loss of capacity in independent care homes due to resource difficulties. They were seen as an important partner in the delivery of services, particularly for the elderly.
- The £7m identified for management information systems was welcomed but it would not be enough when shared between 22 local authorities.

2.5 The Minister made the following points:

- The social care workforce was not given the recognition and support it deserved.
- £46m additional funding was being provided for the Children First programme over the next three years.
- An Audit Commission study on the implementation of Waterhouse might be appropriate in 2002 by when the effectiveness of Children First could be measured .
- Although social services were engaging with health services in taking forward joint arrangements, people could not be charged for any health care service provided.
- The Committee would be considering guidance on local authority charging for domiciliary care in the autumn. Local Government and Housing Committee should be invited to join the Committee's discussion of this item.
- The NHS Wales Bill would enable the Assembly to examine draft primary legislation for Wales.

Action

- Further details of how the additional funding for social services was allocated and on how the need of an additional £95 million had been assessed would be provided by the WLGA.
- Members of the Local Government and Housing Committee would be invited to join the discussion on charging for domiciliary care, when the current consultation was complete.

Item 3: Recruitment and Retention of the Social Care Workforce

Paper: HSS-10-01(p.2)

3.1 The Chief Inspector of Social Services, for Wales, Graham Williams presented the findings of the Task and Finish Group he had chaired. Members of the group accompanied him

3.2 The Chief Inspector said that the Task and Finish Group report provided recommendations for developing a strategic framework for tackling the range of problems in the recruitment and retention of the social care workforce. The Group had consulted widely. Current problems would worsen if not addressed and there was agreement that a major long term strategy should be developed and delivered in partnership between the Assembly, public, private and voluntary arenas , local authorities as commissioners of services and providers. This would be essential to meet the Assembly's aspirations for a high quality service.

3.3 The recently published King's Fund report emphasised the need for the provision of appropriate care for the elderly, and improving pay levels, training, and support networks for the staff. The Task and Finish Group emphasised that the sector needed to value its staff, and to address the issue of pay and conditions of the workforce. However, pay levels were not within the Group's terms of reference. There were other considerations also. Exit surveys showed that workers leaving the industry did so for a range of reasons including poor salaries, but the pressures of work, poor career development opportunities and support networks were also emphasised.

3.4 The presentation followed the five main themes of the terms of reference and expounded the Group's recommendations. The themes were:

- to engage in a partnership with the sector to understand the size and the nature of the problem;
- to develop a strategy for improving the profile of the sector;
- to examine the feasibility of national / local partnerships for recruitment and career development in social care, and the possibility of developing a funding scheme for trainees;
- to work with employers across the sector to help them develop good recruitment and retention policies based on the "People Need People" report;
- to develop proposals for reforming social work training within the context of the Quality Strategy, including a review of funding arrangements.

3.5 A copy of the key points of the presentation including the recommendations is [attached](#).

3.6 Members raised the following points:

- The importance of pay and conditions for social care workers should not be underestimated even though it was not part of the terms of reference of the Task and Finish Group.
- Undervaluing the social care workforce implied a failure to value the people that they care for.
- More expertise and greater responsibility is now expected of the workers in the Community.
- Care workers often worked much longer hours than in their contracts in order to provide adequate care, and should be paid accordingly.
- Life experience, as well as formal qualifications should be valued and recruiting middle-aged people might provide more stability in the workforce than recruiting younger staff.
- The least experienced social workers often worked with children; with a 20% a year turn-around of staff in this area there was a lack of the continuity essential for the emotional stability of the children.
- It was important to include front line staff in discussions about the problems associated with the recruitment and retention of social care and social workers, not just those at a management level.
- The Trade Unions also had a central role in securing the delivery of the training agenda in social care, as they do in other sectors.
- There was a need to establish a partnership forum in the social care sector, similar to that that exists in the health sector.

3.7 Graham Williams made the following responses to points raised by Members:

- It was important to remember that the Group had given attention to recruitment and retention issues in respect of delivery in training programmes for social workers and social care workers. The whole workforce needed to be appropriately qualified for their job, but they also needed to know that their knowledge and skills were valued.
- Better access to training, with a review of financial support, and an enhanced role for employers could reverse the downturn in the numbers of people studying for a diploma in social work.
- The discussion by the Assembly's Committees underlined the importance of raising the profile of the service. The Care Council would be able to build upon the report.

3.8 Other members of the working group made the following comments:

- **Tony Garthwaite, Director of Social Services, Bridgend County Borough Council:** The commissioning of services by local authorities and policies on services and fees impacted on the workforce in all sectors. Service users were less concerned with which sector provided their care, provided the quality was good. Most would be happy to see care workers better paid as people equated quality with reward.
- **Rhian Huws Williams, Central Council for Education and Training in Social Work:** Pay, good working conditions and experienced staff as well as proper supervision and strong

management were essential especially in child services. Regional partnerships were being developed to make the best use of training resources. Health and social care courses were a high growth area in further education, but there was a high dropout rate of young students. This may be because the course was not what they were expecting, or not what they wanted for their immediate future. However in later life they might come back to the service because they retained their interest. NVQs helped older people with experience to qualify.

- **Mario Kreft, Care Forum Wales:** Support for training older care workers in the independent sector needed addressing if this potential source of staffing was to be tapped successfully.
- **Stan Rupa, UNISON:** It was an important indicator of the need to improve equality of opportunity within the service that four out of five social care workers were women. Staff had to be trained to provide quality care and sufficient funds should be made available. The fact that they were competing with other sectors was problematic.

3.9 The Minister thanked the Task Group for their work. She said that £500,000 was available this year to progress the recommendations in the report and the task and finish group would continue its work by preparing an implementation plan and advising on how the money should be deployed. She agreed that the contribution and skills of the social care workforce were not adequately recognised. A partnership forum for social care workforce could be considered.

3.10 A plenary debate on the recruitment and retention of the social care workforce was planned for the autumn.

Item 4: Long Term Care of the Elderly

Paper: HSS-10-01(p.3)

4.1 In response to the paper, Members made the following points:

- Plaid Cymru advocated provision of free personal care as well as nursing care and were pleased at the commitment to look at the feasibility. Dai Lloyd thanked Rosemary Kennedy and the Task Group for their excellent work in developing a single assessment framework and a free nursing care definition.
- Disappointment was expressed at the timescale of spring 2002 for the rollout of free nursing care.
- Concern was expressed that the Assembly could be open to legal challenge and the associated costs in relation to the provision of free nursing care.

4.2 In response to Members' questions, Brian Gibbons and Jane Hutt made the following points:

- The aim was for the new arrangements to operate with effect from October 2001 for those who currently fund their nursing care and spring 2002 for people going through the new assessment process.

- The assessment process was about delivering services to patients. It was not just an eligibility test.
- An holistic approach towards total patient care was being taken.

4.3 Assembly Officials also made the following points:

- Both flat rate and variable rate arrangement could be subject to a legal challenge.
- Nursing home fees were not broken down into nursing care, personal care and hotel costs and sundries. It was therefore difficult to measure what was the nursing care element of the package.
- Issues of personal care might be outside the scope of the NHS Wales Bill. Providing free personal care would probably require an amendment to the 1948 National Assistance Act and other social services legislation.
- There were shortages of nurses in both the NHS and independent sector. It was vital that nursing homes were able to offer equally attractive terms and conditions or they would not be able to meet the establishment requirements set by the registering authority.

4.4 The Minister and Chief Nursing Officer referred to the work that was needed to bring in free nursing care. The assessment criteria had to be established and tested and nurses trained. The template for setting the flat rate was being finalised.

Action

- A paper on the potential for legal challenge would be provided when the Committee next discussed this item.

Item 5: Public Private Partnerships and the Private Finance Initiative (PPP/PFI)

Paper: HSS-10-01(p.5) and HSS-10-01(p.5a)

5.1 The Chair welcomed Richard Thomas, Paul Williams and Kevin Sullivan of the Welsh NHS Confederation who presented the Confederation's evidence on PPPs.

5.2 In response to comments from Members, the NHS Confederation made the following points:

- The total cost of a PPP scheme would only become clear after the contract was completed. Schemes were not evaluated solely on the cost of borrowing but on the total associated costs, e.g. design, build, maintenance, facilities management, etc.
- It was not accepted that PFI generally resulted in building smaller hospitals. Any scheme needed to be developed in response to a defined health need and shown to be the most cost effective.
- It was thought that it should take no longer than six months to assess whether PPP/PFI was the best value option.
- It was not accepted that lack of maintenance was a result of bad management. It was impossible to achieve the investment of 7½% of turnover recommended for maintenance given the other demands and pressures on budgets.

- Staff cuts could not be excluded from the need to make savings but a good management team would work through the issues with staff and their representative organisations.

Item 6: Minutes of Meeting 6 June 2001

Paper: HSS-08-01(min)

6.1 This item was deferred to the next meeting of the Health & Social Services Committee (Wednesday, 4 July 2001).