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**This response was submitted to the [Health and Social Care](#)  
[Committee](#) consultation on [Health and Social Care Workforce](#)**

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**Ymateb gan: | Response from: Cymdeithas Cyfarwyddwyr Gwasanaethau  
Cymdeithasol Cymru | Association of Directors of Social Services**

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## Consultation submission to the Senedd's Health and Social Care Committee inquiry on the health and social care workforce

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#### Background:

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 of approximately 300 social services leaders across the 22 local authorities in Wales.

The role of ADSS Cymru is to represent the collective, authoritative voice of directors of social services, heads of adult and children's services, together with senior lead professionals who support vulnerable adults and children, their families, and communities, on a range of national and regional issues of social care policy, practice, and resourcing. It is the only national body that can articulate 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, 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.

We welcome the opportunity to respond to this inquiry on the health and social care workforce and in particular, to provide commentary on the joint workforce strategy produced by Social Care Wales (SCW) and Health Education Improvement Wales (HEIW), where we currently are and where we need to get to.

#### Current context:

This last 19 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. The pandemic has placed a spotlight on the incredibly valuable role social care plays. As sector leaders, we want to capture the positive elements of this showcasing, rather than raising concerns of a sector in crisis.

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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 together.

### **1. Plans for implementation of A healthier Wales: our workforce strategy for health and social care (published in October 2020), including progress made to date and whether delivery is on track for 2030.**

The implementation of the strategy has of course been impacted by the COVID-19 pandemic. However, the re-focusing on themes that are looking to support the well-being of the workforce, as well as the drive to improve recruitment and retention is the right approach in our view.

ADSS Cymru has identified that the well-being and sustainability of the workforce is our members number 1 priority and we have reflected that in our recently published strategic priorities document. To take forward the actions set-out within this priority area, we have enhanced our internal Workforce Leadership Group – led by one of our past Presidents, Jenny Williams (Strategic Director of Social Care & Education Services at Conwy CBC) – with additional organisation resource. The group regularly engages with sector stakeholders including Welsh Government, SCW, Welsh NHS Confederation, Welsh Local Government Association, Regional Partnership Boards, in a bid to align our strategic vision and priorities with key national priorities.

The issue of workforce recruitment and retention is widely regarded as the most significant challenge facing the Welsh health and social care system now and, in the future, and there is no doubt that COVID-19 has compounded the issues of staff shortages that existed previously. The pressures across all aspects of the workforce have never been more acute.

Specifically in terms of social care, there are now real challenges in relation to recruitment and retention both for in-house and commissioned services. Social care departments within local government have 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. The sector has welcomed the support that the Welsh Government have given to fund a further national media push around the 'We Care' campaign, led by Social Care Wales, which has been matched by Local Authorities within their localities. However, independent providers are also struggling to retain and recruit carers. This has always been a challenge but over recent months it has become significantly more difficult.

We have particular concerns about the resilience of the workforce supporting children's services. This part of the sector continues to face serious challenges in the following areas:

- Difficulties in recruiting qualified childcare social workers - a recurrent theme over many years but this has worsened;
- Difficulties in finding agency social workers and ever-increasing agency fee levels;
- Significant pressures in respect of high levels of unexpected absence and staff sickness; none of which could have been predicted or planned for;
- Social workers stepping down from the profession into non-professional roles due the immense strain – consequently adding to the strain on the remaining workforce;

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- Staff that remain in the system becoming increasingly fatigued, both emotionally and physically.

Workforce action planning is now in place across Wales to impact change in delivery. This work includes the review of terms and conditions and job design, apprenticeship programmes, maximising community based micro enterprise and direct payments offers.

Within regions, there is collaborative working taking place to address the recruitment and retention challenge. For example, in North Wales:

- Health and Social Care continue to collaborate on the Step into Work programme linking with employability programmes across the region. Social Care has now been included in the mentoring circles that are provided for the candidates on the programme to promote and encourage individuals to join the sector.
- The regional WeCare Group held the latest jobs fair via Facebook on 1<sup>st</sup> October with 34 providers actively participating and 130 guests registering. The regional group will be participating in the national WeCare Week being held between 11<sup>th</sup> – 17<sup>th</sup> October 2021.
- The group continue to support other national initiatives available via social media, together with raising awareness of the online introduction to social care training that is available.
- A task and finish group have held a series of workshops for Social Workers within children's services across the region. The outcome of these workshops has assisted in identifying regional approaches to strengthen the way we recruit, develop and retain our social worker workforce. A final action plan is to be produced and presented the regional workforce board in October 2021 for ratification and implementation.

In the West Wales region, they launched a workforce survey in September, with initial results currently being examined. The survey will help us as leaders better understand why people are attracted to social care work, why people have stayed or left the sector and also the reasons why people may never consider social care as a career and we will share that information with SCW.

Nationally, we have advised Welsh Government that our members are examining current terms and conditions and looking at costings for different role design in domiciliary care. ADSS Cymru will continue to contribute to the Social Care Forum with the data we capture in this regard.

However, there needs to be an urgent focus on parity of esteem with health in relation to pay, terms and conditions and career progression. We cannot wait for the investment when additional social care funding is timed to arrive in two to three years' time because not only are we not attracting enough new people into the profession, but we are haemorrhaging workers to the NHS and to other non-care related sectors. We need an investment in the workforce now because within the current financial envelope, local government cannot make the step change that is required.

Workforce well-being is a critical factor for Welsh Government and sector leaders to address as a matter of urgency. As the immediate health implications of 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.

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Virtual engagement, and the wider use of digital technology in professional practice has accelerated exponentially during the pandemic. As we move forward, these relatively new approaches, which compliment face-to-face practice (not replace), 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.

### **2. The alignment of the strategy and its implementation with other priorities and actions, including those identified in the Welsh Government's Programme for Government for 2021-2026, and A Healthier Wales: our Plan for Health and Social Care (2018).**

There is a lot in the new Programme for Government that we warmly welcome. For example:

- Reform primary care, bringing together GP services with pharmacy, therapy, housing, social care, mental health, community and third sector (focusing on prevention and early intervention);
- Explore radical reform of current services for looked after children and care leavers;
- Provide additional specialist support for children with complex needs who may be on the edge of care;
- Develop more than 50 local community hubs to co-locate front-line health and social care and other services;
- Support innovative housing development to meet care needs;
- Increase apprenticeships in care and recruit more Welsh speakers;

However, there are workforce implications for many of these commitments that need to be examined in more detail and will need to be addressed within associated thematic action plans.

The Government's commitment to implementing the Real Living Wage is welcome and we are working with SCW and other partners through the Social Care Fair Work Forum to consider key questions ranging from the scope, like the practical challenges and differentials within the sector; the engagement with the sector and the implementation/phasing.

However, we have seen from experiences in Scotland, recently set out in the Independent Review of Adult Social Care in Scotland, that while the implementation of RLW has been helpful, it will not address the issue of recruitment and retention in isolation. That is why we continue to reiterate the point that the parity of esteem agenda must be expedited. Moreover, we are prepared to work with unions to collectively bargain for improved terms if required to do so.

### **3. The extent to which HEIW/SCW's workforce strategy and broader work on workforce planning and the commissioning/delivery of education and training, will ensure that we have a health and social care workforce which is able to meet population health and care needs, and support new models of care and ways of working, including optimising the use of digital technology and the development of Welsh language services.**

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.

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We welcome the work that SCW 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 5 years.

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.

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 must be more positive messages from the Welsh Government around language, culture and heritage implications within social care and we will work with them and other stakeholders to help influence and shape that work.

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. We welcomed Welsh Government's review of the strategy and the recent publication of the review's findings, and we will examine them in detail to understand the implications for the sector. We welcome the opportunity to be part of the Minister's

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Task and Finish Group – with SCW - to develop a 5-year work plan so that we truly deliver 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.

#### **4. The mechanisms, indicators and data that will be used to measure progress in implementing the workforce strategy and evaluate its effectiveness.**

We know that SCW/HEIW are committed to developing medium term implementation plans that focus on themes beyond the immediate workforce pressures. Those plans will require a system approach, given the wide range of factors that can impact on the workforce nationally as well as locally. Therefore, the collection and collation of key workforce data and indicators are important to the performance management and accountability of those plans.

ADSS Cymru has been working with Social Care Wales and other stakeholders regarding the importance of common data standards and what data needs to be captured and that work is progressing.

#### **5. Whether the financial and other resources allocated to implementation of the strategy are adequate.**

ADSS Cymru welcomes the recognition the Welsh Government has afforded the sector over the last 19 months, 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 of course acknowledge and appreciate the additional recovery fund investment which has been guaranteed until the end of this financial year. However, this will not be enough to support recovery

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and winter pressures that we will face during the remainder of this financial year. There must be additional funding realised and allocated directly to Local Authorities to deal with forthcoming pressures that will be experienced this winter, which we anticipate as being significant.

We also need to secure additional money to support therapeutic input in residential care for interim step-down placements; physio and Occupational Therapist (OT) support are vital to prevent physical deconditioning and deterioration.

As we enter the budget setting process for the next financial year, we believe that Local Government must have a strong revenue and capital settlement 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 2 financial years and they require the resources to do that properly based on permanent uplifts rather than bureaucratic hypothecated grants.

We have set out the medium to long-term funding challenges in our strategic priorities and positions paper. 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, this needs to be examined in a devolved context. We need to fully understand the implications for Wales, what the full consequential spend for Wales will 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.

### **6. The extent to which the strategy and its implementation are inclusive, reflect the needs/contribution of the whole workforce—for example, on the basis of profession, stage of career or protected characteristics—and also take into account the role of unpaid carers and volunteers.**

As a cadre of social care leaders, we are acutely aware of the responsibility we have to develop more Black, Asian and minority ethnic leaders within the sector. We know that while ethnic minority groups, particularly women within those groups, are over-represented within the frontline social care workforce, they are disproportionately under-represented at management and leadership level, and this must change. However, we should also be mindful that our ability to recruit and retain staff in the social care workforce from any racial background at the present time is very challenging. That is why delivering on the parity of esteem commitment is absolutely critical. Only by professionalising the social care workforce and ensuring it has the same pay, conditions, responsibility differentials and long-term career pathway as our colleagues have in the NHS, will we secure the same respect and recognition within the public and employment arenas that our members deserve.



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These key elements, coupled with values-based principles of vocational service will mean will be able to attract the brightest and the best into the sector, no matter what protected characteristic they may have or diverse cultural background they come from. Therefore, the equalisation drive within the social care leadership and the wider workforce must run in parallel with the professionalisation of the social care workforce.

On our recent submission to Welsh Government on its draft Race Equality Action Plan, we accepted there is always more than can be done within the sector to grow and develop a social care workforce which is reflective of general society. However, as leaders, we need clarity about the future and how to achieve the ambition of an anti-racist Wales, which can then be factored into the delivery of a national strategy.

Leaders will need to understand the strategic direction of travel and possess the ability to solve immediate problems within their setting and enable staff to deliver services to individuals and communities irrespective of race, gender, or sexual orientation.

We agree with Government that successful transformation requires leaders with capacity and skills to plan, drive, and deliver change and navigate the complexity of interrelated systems. Many currently struggling to find time to look beyond the immediate or capacity to develop cultures that are positive and consistently use data and research evidence to improve the value and experience of frontline delivery.

Health and social care systems need more leaders who are adept and have time to deal with complex and changing circumstances and readily have capacity to bring about change and continuous quality improvement.

### **7. Whether there are any specific areas within the strategy that would benefit from focused follow up work by the Committee.**

#### **National pay and grading system for social workers**

As we referenced under Q.3, we are concerned about the current competition for such scarce social worker resource between public bodies. We feel it would be beneficial to create a national pay and grading system for social workers to dampen competitive drivers. We think this is a fundamental issue that must be addressed within the next 5 years and need to be factored into the strategy.

#### **Workforce Forecasting**

Accepting a significant amount of the workforce is 50 plus – a key issue is workforce supply over the next 5- 10 years. Wales demographics, social and labour trends indicate young people with degrees, move from Wales to pursue their careers. This produces a significant future skills imbalance as migration into Wales in terms of this group is not like for like. Of those remaining in Wales a number of significant issues impact on their ability to meet our future workforce requirements.

Economically, this age group may lack economic independence which will impact on their mobility in terms of social care work. For example, we are dependent upon a workforce to be mobile to deliver community services, this potentially excludes significant amounts of individuals who cannot afford to run a car based on their income from working within social care.

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As a nation, we need investment into encouraging young people from Wales to stay here and build their careers. The economic barriers to young people and how these impact upon their ability to become our future workforce needs to be better understood and addressed.

As a sector and this includes health, we really need to base our workforce planning on the actual population of Wales and understand how changes we can make can increase the employment pool/opportunities to enter the employment market.