

National Assembly for Wales

Health and Social Care
Committee

Inquiry into residential care
for older people:
Key conclusions and
recommendations



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Inquiry into residential care for older people

Key conclusions and recommendations

The Health and Social Care Committee agreed to undertake an inquiry into residential care in Wales in September 2011. The aim of our inquiry was to examine the process by which older people enter residential care and how effective the residential care sector is at meeting their needs. The Committee was also keen to consider the future direction for residential care in Wales and alternatives to it, particularly in the context of an ageing population and new patterns of service provision.

This inquiry has been the main focus of the Committee's work over the last year. The time we have taken to gather evidence is testimony to the importance we attach to this subject. Many people will, at some point during their lives, require care. The source of such care will vary from the formal care sector – through the NHS, social care and social housing – to the informal, yet equally important, support of committed family and friends. This is a matter that is likely to touch more of us, more often, and more significantly as we live longer lives. However, as we were told on numerous occasions during this inquiry, entry to residential care remains a 'once-in-a-lifetime' decision. It is incumbent upon us, therefore, to shine a light on how we care for our older people and what we are doing to provide them with services of the highest quality.

This leaflet contains the key recommendations and conclusions contained within our report. These are the issues we expect the Welsh Government to respond to over coming weeks.

The Committee's key recommendations

Key recommendation 1: The Welsh Government should take action to ensure that older people in Wales have access to effective advocacy. We believe that this is particularly important for those older people who are:

- in hospital and likely to require on-going social care; or
- residing in a care home that is at risk of closure.

Key recommendation 2: More should be done to provide advice and information to support older people, their families and carers in making decisions about their long-term care. We believe the Welsh Government should consider re-aligning existing budgets to create a simple information service. This service should offer simple, timely and accessible information in a way that older people, their families and carers find easy to use. All professionals and others providing support to older people should be made aware of this advice and information service to enable them to signpost older people to it when it is most needed.

Key recommendation 3: The Welsh Government should ensure that local authorities offer an assessment of need to all older people who are considering admission to residential care. This should specifically include those with sufficient resources to fund themselves. A requirement to offer a needs assessment prior to undertaking a financial assessment would ensure that those with resources in excess of the current threshold for support are not denied sufficient information and advice to make appropriate long-term care decisions.

Key recommendation 4: The NHS in Wales must do more to ensure that common disabling conditions experienced by older people – such as incontinence, stroke recovery, falls, and dementia – are managed and treated more effectively in the community. We believe that this will reduce their impact and the likelihood that they will trigger the need for older people to require long-term care.

Key recommendation 5: The Welsh Government should ensure that older people are always offered a period of reablement or intermediate care following a period of illness, particularly when this has involved hospital treatment. Care decisions should take full account of a person's potential for maintaining and increasing their independence. Entry to permanent residential care straight from hospital should not occur. Furthermore, the Welsh Government should produce guidance to improve the clarity and consistency of local authority and health board definitions of reablement. We believe this will help ensure

that meaningful data is collected to measure outcomes and drive improvements.

Key recommendation 6: The Welsh Government should work with partners to develop new initiatives that give residents, their families and carers greater voice and control. The aim of this should be to influence the shape and direction of services *and* exert continual pressure on service quality. Once an individual care home reaches a certain size (to be determined by the Welsh Government in consultation with the sector), it should be obligatory to have resident and family/carer forums within the home. Such an arrangement could be built into contracts with providers by service commissioners.

Key recommendation 7: Residential care should not be viewed simply as an option where irreversible decline is the only outcome. We believe that the Welsh Government should work with the sector to ensure that residents are enabled to experience a more stimulating and purposeful life that encompasses their spiritual needs. This would help prevent or delay the negative aspects of institutionalisation as well as improving quality of life. Greater involvement of carers in an individual's residential home life and stronger links with local communities would help achieve this.

Key recommendation 8: Given the Welsh Government's significant contribution to the costs of staff training in social care, it should require that a greater proportion of funding is devoted to enhancing levels of skills and awareness of specialist conditions, particularly dementia, amongst care

staff. There is scope for an enhanced role for third sector bodies with particular expertise, such as the Alzheimer's Society, Parkinson's UK Cymru and those representing people with sensory loss and learning disabilities, in supporting this.

Key recommendation 9: In order to better reflect changing patterns of service provision:

- care home registration categories should be reformed to increase flexibility and reduce the need for older people to move when their needs change. This reform should retain the important safeguards the current system provides for individuals to have their changing needs assessed and met. Specifically, the separate category of provision for people diagnosed with dementia should be discontinued.
- the arrangements for the regulation and inspection of new and emerging models of care, including Extra care housing schemes should be re-examined and clarified.

Key recommendation 10: The Welsh Government should take action to reduce the incidence and impact of a breakdown of services by:

- working with CSSIW to ensure that arrangements for the financial scrutiny of independent providers are strengthened. This should be done by requiring providers to submit annual accounts to CSSIW for individual care settings.
- re-visiting and re-assessing current 'fit and proper person' arrangements in cases of care home acquisition to ensure that they include consideration of financial sustainability

and are applicable to corporations as well as individual managers / owners.

Key recommendation 11: The Welsh Government should strengthen the *Escalating Concerns With, and Closures of, Care Homes Providing Services for Adults* guidance to local authorities on care home closure in a way which clarifies the arrangements and responsibility for informing residents and their families regarding the impending closure. A fixed point in the process, at which residents and families have a right to be informed about such an event, should be established.

Key recommendation 12: The Welsh Government has already done much to promote Extra care schemes. As a consequence of the public money already invested in this area, it has become clear that Extra care is an effective and workable model. More now needs to be done by the Welsh Government to scale up the role of Extra care in Wales. This will require a more flexible deployment of public funds across more than one ministerial portfolio. This will allow Extra care providers to maximise their own capacity to raise funds and develop a substantial programme for the future jointly with the Government.

Key recommendation 13: The Welsh Government needs to move from being simply an enabler in the field of social care to taking an active role in shaping and delivering a model that is fit for purpose for future generations. The Government must move more urgently from its current analysis and idea development to a position where it is

implementing policy and delivering action on the ground. To enable this, the not for profit and co-operative sector should be given a stronger and separate voice in discussions with the Welsh Government. We believe that this will help ensure that the sector can make a full contribution to the provision of care services for older people in Wales.

The Committee's conclusions

Conclusion 1: The Welsh Government's current direction of policy focuses on enabling older people to remain independent for as long as possible and receive care and support at home. We fully support this direction of travel but believe that more could and should be done to reduce our reliance on residential care in Wales. The use of residential care ought to be less important in the future as alternative care models in both residential and community settings are developed further.

Conclusion 2: The role of carers and families is crucial to the care of older people in Wales. Their work is often undertaken at their own financial and emotional expense; yet their dedication is maintained, in the majority of cases, over a period of many years. Although the views of the older person will always remain paramount, we must improve our support for the carers and families of older people to ensure that their valuable contribution is at the centre of any short or long term care decisions.

Conclusion 3: We believe that earlier diagnosis of dementia would better equip older people, their families and carers to plan for and manage the condition and reduce or delay the need for long term care, including residential care. Investment in better community health services can therefore produce savings in other service areas, an approach that is consistent with the Welsh Government's policy of refocusing health services away from acute settings towards community based services.

Conclusion 4: We support the Welsh Government's approach to prevention and early intervention. We believe this is an area in which the further development of policy and services would produce long term benefits, both for older people and for the more effective use of public funds. We acknowledge that the capacity of local authorities to provide preventative services for older people is limited in the current financial climate. We believe, however, that local government has the potential to:

- use its influence to encourage older people to consider and seek preventative services; and
- work with partners in the third and private sectors to help people identify trustworthy and reliable providers.

We believe that will increase people's awareness of such services and increase their confidence in purchasing them.

Conclusion 5: Whilst we are encouraged by the direction of travel of local authorities in terms of planning residential care provision and engaging more actively with the market, we believe more could be done. The development of

market position statements will provide important information to providers about what is required and allow them to plan. These statements should be finalised and published as soon as possible.

Conclusion 6: How we pay for care is crucial to its quality. Funding of social care in Wales is closely linked to broader policy issues such as welfare benefits and taxation, responsibility for which remains with the UK Government. As such, we urge the Welsh Government to work with its UK counterpart on this urgent issue with a view to finding a suitable funding resolution for social care in Wales as soon as possible. We believe the Welsh Government's Ministerial Task and Finish Group for Welfare Reform, which is assessing the impact of the current UK Government's welfare reforms in Wales and responding to them, should be aware of the issue of paying for care and the potential impact of any changes in Wales.

Conclusion 7: We believe that action is needed to ensure that older people in residential care have access to the same standards of healthcare services as the wider community.

Conclusion 8: There is a need to ensure that staff recruitment and training helps to ensure that good communication between care staff and care home residents is facilitated, both in terms of language and sensitivity to the particular communication needs of people with conditions such as dementia, Parkinson's disease, sensory loss or autism.

Conclusion 9: Given the increased care needs of those within residential care, such as dementia or sensory loss, and the need for a continuum of care to minimise disruptive moves, we are encouraged by the development of innovative approaches to design and believe the sector should promote the sharing of good practice.

Conclusion 10: There is a need to improve the safeguarding and protection of older people in residential care through improvements to inspection around care quality, staffing levels and improvements to the training of care staff. We welcome the Welsh Government's plan to provide a legislative footing for this in the forthcoming Social Services Bill.

Conclusion 11: There is a need to increase awareness of care staff, through better training, of statutory duties under the *Mental Capacity Act 2005* and Deprivation of Liberty Safeguards. We welcome the proposals in the forthcoming Social Services Bill to put adult safeguarding on a statutory footing. However, we are concerned that the new arrangements eventually enacted through the Bill/Act should be closely monitored and assessed to ensure they are fully effective in improving adult safeguarding.

Conclusion 12: Improving the status of care workers and promoting their professionalisation are key considerations for improving services for older people in residential care. These should be priorities for the Welsh Government and should include work to further develop career pathways for

social care staff. To this end the Committee welcomes the re-establishment of the Academy of Care Practitioners.

Conclusion 13: In light of the strong views expressed to us about registration during our evidence gathering, we believe that the Welsh Government should keep the case for registration of all care staff under active consideration.

Conclusion 14: Care homes are required by regulations to provide up-to-date information on staffing numbers, relevant qualifications and experience. This information should be made more easily available to prospective residents and their families. Greater efforts should also be made by residential care homes and relevant bodies to encourage prospective residents and their families to seek this information when making decisions about an older person's future care.

Conclusion 15: There is a need to raise the level of knowledge and skills of care staff to meet the increasing demands placed on them. Given the pivotal role of registered managers we believe future training strategies should prioritise training for them. The Welsh Government and the Care Council for Wales need to be confident that they regularly consider and refresh their approach to training to ensure that the best outcomes are achieved for both staff and residents. We would emphasise the importance of ensuring comprehensive recording of training activity undertaken by staff to encourage progress in this area.

Conclusion 16: We acknowledge the importance of trade union representation for staff working in residential care and the valuable work they undertake in promoting the interests of their members and highlighting their concerns about the quality of services provided in the sector. We also note the potential value to care home providers of formally recognising the role of trade unions.

Conclusion 17: We welcome the improvements outlined by CSSIW to the inspection process to focus on the quality of care and to capture the views and experiences of older people, their families and carers, and care staff. We are particularly pleased to learn that lay assessors will be recruited to undertake inspections and urge the Welsh Government and CSSIW to ensure that they are adequately trained and equipped to undertake their work. We believe there will be a need for on-going monitoring and evaluation to ensure that these improvements achieve the required changes. We are concerned that the reforms are progressed and not delayed by the announcement of a separate Welsh Government Bill on the regulation of social care services and staff. We welcome the reassurances from the Deputy Minister for Children and Social Services on this matter.

Conclusion 18: The Committee agrees that, as a key method for gaining information, inspection reports need to be easily accessible both in terms of how they are drafted and where they are located. Consideration should be given to where inspection reports are made available. In addition to internet access, reports should be available in public places and at each care home to allow older people and

their carers and families to easily access them. Reports need to be drafted in a manner which is easily understood and clear about the services provided by each home. Given the prevalence of visual impairment amongst older people it is important to ensure that reports are published in a range of accessible formats.

Conclusion 19: A mixed economy of ownership can help to foster a more diverse and innovative sector and provide a stronger foundation for providing choice and high quality services for the growing number of older people who will need them. As a key part of that the not for profit sector can make a valuable contribution to care provision in terms of innovation, value for money, and stability of provision. We therefore welcome the Minister's work with relevant organisations to develop options for future models of residential care provision.