

[National Assembly for Wales](#)  
[Enterprise and Business Committee](#)  
[Discussion on the Welsh Government's Co-investment in Skills Framework](#)

**Evidence from Care Forum Wales – CIS 14**



**Care Forum Wales Response to the Discussion on the Welsh Government's Co-investment in Skills Framework**

1. Care Forum Wales is the main professional representative organisation for independent health and social care providers in Wales. Our 450 plus members include third sector organisations, but are predominantly private businesses, providing care to people of all ages across all settings, from domiciliary care to supported living and residential care. In our original response to the Welsh Government consultation, Care Forum Wales argued that there are strong grounds for exempting the health and social care sector from co-investment.
2. The Social Services and Wellbeing Act Wales 2014 highlights the need to take action to maintain a sustainable social care sector that can meet the needs of its growing elderly population. There is a projected increase in the need for residential services for adults from 13,661 in 2013 to 20,948 in 2030; and a corresponding increase in community services for the same period from 64,780 to 87,839 (taken from Daffodil system). The independent sector underpins the NHS and provides the majority of health and social care in Wales, effectively providing a public service to Wales at a lower cost than statutory services.
3. The independent social care sector likewise underpins the Welsh economy as a key employer of a highly diverse workforce, providing flexible working patterns and a variety of job opportunities, many of them skilled. A career in social care is a natural progression for informal carers and the sector enables many “informal” carers to stay in employment, making a contribution to the economy rather than claiming carers’ benefits. The workforce includes a high percentage of ethnic minorities, older people (often changing direction on early retirement), women and those who traditionally struggle to find work after career breaks. The care sector is also a major employer of people with low academic attainment who are disaffected and have had a poor

experience of formal learning, but have the personal qualities needed to care for others and can progress through vocational based qualifications.

4. Over 75% of the social care work force is aged over 25 - these are the people who will be caring for us when we are frail and we believe that the Welsh Government has equal responsibility to them. The restriction of funding to the under 25s will have a major impact on employers, employees and the people using care services. Anecdotal evidence also indicates that recruits under the age of 25 are much less likely to stay in the sector, thus focussing on training under 25s is not likely to be an efficient use of resources.
5. The care sector is already in crisis, service provision is disappearing, public confidence is being eroded and care providers and their staff feel undervalued. If we are to meet Welsh Government ambitions for sustainable care services, we need to professionalise the workforce, attract high quality practitioners, provide a career path and restore the self-esteem of the work force. However, this needs to be paid for and the fact is that the care sector is already significantly under-funded and there is no fat to trim.
6. If care services were commissioned on quality then employers would be seeking the very best training for staff. However, services are predominately commissioned on lowest cost, which does not encourage an environment where training and learning is valued. If the monies expended on training were used to bolster fees for service provision then we could be selective about the training we bought.
7. It should also be borne in mind that the majority of people receiving care services in Wales are subsidised by the state and additional training costs would have to be passed back to Local Authority and NHS commissioners as a legitimate cost of care. Money would simply move around the system without bringing in external funding.
8. We know that our concerns are shared by many of our statutory partners including Care Council for Wales. However, Welsh Government has declined to treat the sector as an exception. Whilst we applaud the additional departmental funding made available for sector training by the Minister for Health and Social Services, we remain concerned that this is not a long term, sustainable solution.
9. Co-investment is not a new concept – it already exists. The current system was developed as an equal partnership of employers and the training and education sector that recognised and valued the costs to employers of participating in training – releasing staff, training, mentoring and supporting staff between the monthly visits of assessors. In the past employers' 'in-kind' contribution was recognised and valued but the gradual inclusion of 'free' into the language of training has done a great disservice to employers and in some instances has undermined the effectiveness and credibility of this provision. If we are to underpin social care in Wales there must be more understanding of the important role that is played behind the scenes and the pressures placed upon these employers. It is also worth considering that we pay between £70,000 - £100,000 to train a nurse in the NHS, but no more than £10,000 to train a vocationally trained social care practitioner to Level 5. This person will have equal responsibility and accountability as a nurse manager and the shortfall in training for this is paid for 'in kind' by the employer.

10. We have consulted with employers in the care sector and they will not pay for apprenticeships, especially when there has been so little recognition of their contribution over the years. The qualifications in health and social care are requirements under the National Minimum Standards. Given that employers are already regulated against these standards, it seems unlikely that paying a larger proportion of the training bill will give them any more motivation or control over the quality of training.
11. Employers have long complained about their lack of control over the delivery of training and quality and availability of assessors. They need to be treated as equal partners in the process, but instead their position has been dramatically reduced by moving from work based to peripatetic assessment as standard, by lack of transparency about the payments made to further education establishments and training providers and through lack of access to statutory sector training. Increasing employer investment will not change this. More effective solutions would be central monitoring of education providers, regulation of training providers and assessors and encouraging training providers to better understand the sector and to work in equal partnership. It might also help to provide funding, however limited, as a 'bursary' to each social care employee apportioned in partnership with the employer, the individual and a training provider.
12. Employers tell us that too much money is being spent on a process that does not focus enough upon the learner in the race to increase statistics and achieve quotas. We have reached a situation where some training providers advertise that they can get any member of staff through their apprenticeship in 6 months. In reality many learners need more time to assimilate the learning and theory in the qualifications. For instance, the level 5 has a notional 900 hours learning attached to it - how many could give even a proportion of this time in a 6 month period when working full-time? This has seriously damaged employers' belief in the integrity of the qualification.
13. Training must focus upon the key attributes and vocational skills staff need in social care, but this focus has been diluted over recent years by the drive to increase literacy and numeracy skills. This has led Further Education Institutions (FEIs) and Training Providers (TPs) away from the very essence of the social care role - supporting the people of Wales when they are at their most vulnerable. The traditional social care workforce includes a large number of people who left school without formal qualifications, were let down by the education system and need particular support and flexible learning even in the areas where they are competent – their job. These people need motivating and supporting to develop confidence. When the vocational qualification is done properly, most will demonstrate enhanced literacy purely because they have gained the confidence to try. Too many FEIs and TPs are driven by a desire to get better and better attainment and this has led to a reduction in quality of learning for individuals. Moreover, employers, FEIs and TPs cannot be expected to have the expertise to redress the literacy and numeracy issues that have not been cemented during over a decade's full-time education in school. It takes the very best teacher's time to remove the barriers created

by issues such as poor teaching, poor attendance and the impact of constant failure on the individual's self-esteem.

14. The care sector does not need people who can write essays or work with number to 'A' Level standards: we need staff with enhanced verbal and non-verbal communication skills able to report in writing factually and accurately and who can measure and calculate reliably. We need to focus on the softer areas of communication and developing values, ethics and a culture of psychological responsibility, we need basic nursing skills and enhanced people awareness and non-judgemental attitudes – these capacities take time to instil with some, others come with them well-embedded. These are almost ignored during the rush to complete Apprenticeship frameworks.
15. In summary, Care Forum Wales firmly believes that the health and social care sector should be exempted from the Co-investment in Skills Framework. The framework fails to recognise the extent of existing employer contributions in kind and of the overall importance of the sector to Welsh economy and society. It makes a simplistic assumption that co-investment will improve employer control and motivation to improve sector training whereas there are several other external factors that need to be addressed. The framework overestimates the ability of providers to increase their financial contribution whilst underestimating the consequent impact on quality and sustainability of social care services.

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