Dear Ms. Griffiths,

**Consultation on the Social Services and Wellbeing (Wales) Bill**

Please find below the response of the older people’s charity WRVS to the Health & Social Care Committee’s call for evidence regarding the Social Services & Wellbeing (Wales) Bill.

WRVS is one of the largest voluntary sector organisations in Wales. We are committed to making Wales a great place to grow old through providing low-level preventative services targeted at older people. In over 100 schemes across Wales, we help older people to remain active and independent in their own homes, without having to rely on formal social services. We do this through the effort and dedication of over 3,500 volunteers, who give up their time throughout the year in all weathers to help their community.

**Overview**

WRVS welcomes the Bill, which we believe is much-needed to simplify legislation and ensure that Wales has a social services system which is fit for purpose and prioritises the need to help people as early as possible in order to prevent their care needs from escalating.

In particular, we strongly welcome the renewed focus on wellbeing and the revises definition which highlights the importance of social connectedness to a person’s quality of life – although we do also not that the progress in this regard needs to be replicated across all areas of Welsh Government policy, and for definitions in other legislation to be consistent with that being proposed in the Social Services & Wellbeing (Wales) Bill. We would also highlight the need for the concept of ‘wellbeing’ to be turned into something meaningful and tangible through outcomes measures which reflect people’s subjective feelings of wellbeing; this is an area which will need to be closely watched as the National Outcomes Framework is developed over the coming months.
We also welcome the proposed duties around preventative services, which we believe are critical in helping older people to live independent and satisfying lives. We would urge the Committee to look closely at the proposed legislation and consider whether the ambitions around preventative care are matched by the reality of the legislation.

We do have some outstanding concerns, explained in greater detail below, around ensuring that information and advice services remain free of charge (which we see as an essential component of preventative care). We are also firmly of the view that greater detail needs to be given regarding plans for national eligibility criteria if consultees and the Committee are to take an informed view of the Bill’s proposals.

Response to specific consultation 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 wellbeing of people who need care and support and carers who need support?

Yes. We welcome this area of the proposals, which we believe is much-needed.

In particular, we welcome the renewed focus on wellbeing within the Bill, and the proposed definition which now specifically includes a mention of “domestic, family and personal relationships” (p4, line 31) and “control over day-to-day life” (p5, line 3); the former reflects the fact that social contact are seen \(^1\) as being integral to people’s social and emotional wellbeing, whilst the latter reflects the centrality of personal independence to one’s sense of wellbeing \(^2\) and quality of life. WRVS is, however, less enamoured by “participation in work” (p5, line 4) forming part of the definition of wellbeing; for older people (particularly those who are retired) work is not a helpful or meaningful determinant of wellbeing. We would rather the definition be expanded to include reference to volunteering which allows the Bill to reflect the social benefits of participation outside of paid work. The Welsh Government’s own figures \(^3\) estimate the value of volunteering overall at £469 million a year, but volunteering is also associated \(^4\) with increased life satisfaction, with some evidence that older people derive greater mental health benefits from volunteering than younger age groups; volunteering also reduces the likelihood of older people experiencing depression and increases their life satisfaction.

We would also add that issues around wellbeing need to be reflected consistently across Welsh Government policy. Just within the last year, different conceptualisations of the

\(^1\) WRVS (2011) *Shaping Our Age: voices on wellbeing: a report of research with older people*, WRVS / Big Lottery / Brunel University / De Montfort University.


term have appeared within the Strategy for Older People\(^5\), the Social Services &
Wellbeing Bill\(^6\) and the Housing Bill\(^7\) - this cannot be helpful to creating a common
consensus around what wellbeing is and how it might be improved. Our own position is
that any definition needs to explicitly include issues around social inclusion and social
connectedness, given the accepted challenges Wales faces over social isolation
(particularly, but not exclusively, amongst older people). Any definition also needs to set
out how wellbeing will be measured so that improvements can be seen in a tangible way.

2) Do you think the Bill, as drafted, delivers the stated objectives as set out in Chapter 3 of
the Explanatory Memorandum?

Yes. In general, the objectives set out in Chapter 3 of the Explanatory Memorandum are
reflected by the areas covered within the Bill.

One exception could be in relation to charges for preventative services. The over-arching
objective of the Bill in this regard is to expand access to prevention and to ensure that
local authorities are providing services which can prevent an individual’s need from
escalating. However, the Bill also states: “*Regulations may make provision about charges
for information, advice or assistance*” (p39, lines 32 and 34). Whilst WRVS accepts that
charging for preventative services may be necessary, it seems impossible to reconcile the
ambition of expanding access to prevention with making provision for authorities to
charge for information and advice which might signpost individuals towards those
services. We would be concerned that this measure would actually reduce the likelihood
of older and vulnerable people seeking support rather than widening access.

3) The Bill aims to enable local authorities, together with partners, to meet the challenges
that face social services and to begin the process of change through a shared
responsibility to promote the wellbeing of people. Do you feel that the Bill will enable
the delivery of social services that are sustainable?

Yes, in part.

WRVS sees the expansion of preventative services as being the key challenge for social
care in Wales. Research\(^8\) has suggested that prevention is the only way to meet the
demographic challenges we face, and there is an ever-growing consensus\(^9,10,11,12,13\) that

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changes”, Health Services Management Centre policy paper 8, Birmingham: University of Birmingham.
\(^9\) SSIA (2011) *Better Support at Lower Cost: improving efficiency and effectiveness in services for older people in Wales*, Wales:
Social Services Improvement Agency: p4.
\(^10\) Public Health Wales (2011) *Submission to Health & Social Care Committee Inquiry into Residential Care of Older People*; Welsh
Assembly website.
\(^11\) National Association Of Old Age Pensioners of Wales (2011) *Submission to Health & Social Care Committee Inquiry into
Residential Care of Older People*; Welsh Assembly website.
properly-funded and effective preventative care services are in the best interests of older people and the public purse. Indeed, recent research\(^\text{14}\) from the British Red Cross (2012) found that low-level support services delivered savings of between £700 and £10,430 per person.

The Social Services & Wellbeing Bill contains some excellent proposals in relation to prevention, in particular the proposed duty on local authorities to provide (or arrange the provision of) a range of services to meet the public’s need in relation to prevention (page 7, lines 7-8). This is a significant step forward, and one which we strongly welcome as enhancing older people’s wellbeing and quality of life.

However, for this ambition to be successful, we believe two things are needed. Firstly (as set out in response to the previous question), there should not be any question of authorities being allowed to charge for information and advice services, which are critical in directing individuals towards preventative services. Secondly, we would like to see the Bill make explicitly clear the role of preventative services in relation to social wellbeing.

The Welsh Local Government Association recently noted\(^\text{15}\) that an increasing number of people in Wales are reporting high levels of social isolation; we also know from our own research\(^\text{16}\) that older men in Wales are the loneliest cohort of people in the UK.

Loneliness is closely associated\(^\text{17}\) with depression, and has been linked\(^\text{18}\) to increased risk of functional decline and even death. Because of this, we believe that the Bill (or its supporting legislation and guidance) ought to highlight the issue of loneliness and social isolation and ensure that the duty on local authorities in relation to prevention explicitly covers these areas.

4) How will the Bill change existing social services provision and what impact will such changes have, if any?

As stated above, we welcome the Bill’s ambitions to shift the balance of social care more firmly towards prevention. This will – if properly executed – increase older people’s independence and reduce the cost to the state over time.

Nevertheless, in the shorter term there are existing challenges with social services departments in Wales increasingly raising eligibility thresholds and as a result removing preventative services. Despite the work of the Social Services & Wellbeing Bill, this trend will continue unless the issue of eligibility is dealt with more explicitly. WRVS welcome the proposals for common eligibility criteria, and we believe the principle will

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\(^{12}\) Care and Social Services Inspectorate Wales & Healthcare Inspectorate Wales (2012) *Growing old my way: review of the impact of the National Service Framework (NSF) for Older People in Wales*, Wales: CSSIW/HIW.

\(^{13}\) Age Cymru (2012) *Prevention Into Practice*, Cardiff: Age Cymru.


\(^{16}\) WRVS (2012) *Loneliness rife amongst older men* (web story), Cardiff: WRVS.

\(^{17}\) Campaign to End Loneliness (2011) *The Health Impacts of Loneliness*, Campaign to End Loneliness: p1.

reduce inconsistencies across local authority areas. However, without seeing the detail of those proposals, it is impossible to comment on them in any meaningful way. We could end up in a bizarre situation where despite the proposed duty on prevention, more and more local authorities set their eligibility threshold at Critical; this would be a backwards step.

WRVS would strongly urge AMs to demand more details on the proposed eligibility criteria from the Welsh Government. Without this information, there can be no meaningful discussion on the potential impact. The Welsh Government needs to outline openly its proposals on eligibility (or at the very least give an indication of the desired direction of travel) and explain how this links to the proposed duty on preventative services. Para 29 of the Explanatory Memorandum refers to a national eligibility framework being developed through regulations on what constitutes ‘eligible need’; WRVS would argue that early sight of these regulations is necessary in order that consultees and the Committee can be satisfied that service users with lower level preventative needs will have their needs addressed.

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

See above – further detail on eligibility criteria is required if we are to take an informed view on whether the Bill can meet its ambitions. Furthermore, the Bill needs to be clear that local authorities cannot charge for information and advice services (see answer to Consultation Question 2).

6) **In your view does the Bill contain a reasonable balance between the powers on the face of the Bill and the powers conferred by Regulations?**

No. As set out in answer to Consultation Question 4, more detail is required within the Bill on the issue of eligibility criteria (as set out in Section 19). WRVS strongly believe that the Bill should explicitly tackle the issue of eligibility thresholds and take a view of what is a reasonable threshold for local authorities to set for access to services, given the Bill’s duties around prevention. As stated above, the Bill’s ambition to widen access to prevention is irreconcilable with local authorities being allowed to raise their eligibility threshold to Critical, and the resultant loss of services to those with lower-level needs.

This is a point which has acknowledged by the Welsh Local Government Association, who have said: "Due to the intense financial pressures that councils are now facing, most local authorities have raised the eligibility threshold to ‘substantial’ and ‘critical’. People with moderate or low needs are sign-posted elsewhere (usually to voluntary sector organisations); however, the risk is that moderate need may escalate to substantial..."
without appropriate or adequate community support.” 19

In other respects, the balance is reasonable.

7) What are your views on powers in the Bill for Welsh Ministers to make subordinate legislation (i.e. statutory instruments, including regulations, orders and directions)?

We welcome the provisions of the Bill which provide the power to impose new duties on both LHBs local authorities to co-operate in promoting the integration of care and support with health services.

8) What are your views on the financial implications of the Bill?

Until the Government has consulted on the supporting regulations, it will not be clear what the full financial implications will be. In particular, we would refer the Committee to the regulatory impact assessment on pages 73 and 74 of the Explanatory Memorandum.

9) Are there any other comments you wish to make about specific sections of the Bill?

We would simply add that WRVS also welcomes and supports the arrangements within the Bill to promote co-operation, and the duty to co-operate and provide information in the exercise of social services functions. Any moves to promote integration of care and support within health services are to be welcomed.

I trust this response is of assistance. I can confirm that WRVS have no objection to our consultation response being made public, and that we would be more than happy to give oral evidence to the Committee if that was felt to be useful.

If you require any further information, please do not hesitate to contact me.

Yours faithfully,

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19 Welsh Local Government Association / Association of Directors of Social Services Cymru (2011) Submission to Health & Social Care Committee Inquiry into Residential Care of Older People; Welsh Assembly website.