Social Services and Well-being (Wales) Bill
Consultation Response to the Health and Social Care Committee, National Assembly for Wales

March 2013

Action for Children-Gweithredu dros Blant
Action for Children-Gweithredu dros Blant speaks out for the most vulnerable and neglected children and young people, and supports them to break through injustice, deprivation and inequality, so they can achieve their full potential. Action for Children helps nearly 250,000 children, young people and their families through nearly 600 projects across the UK. We also promote social justice by lobbying and campaigning for change.

Summary
Action for Children - Gweithredu dros Blant welcomes the intention to introduce the Social Services and Well-being (Wales) Bill, and its overarching ambition to improve the well-being outcomes for people who need care and support and for carers who need support. We are pleased to respond to the Health and Social Care Committee’s call for evidence on the general principles of the Bill, and our response is based upon views and experiences from members of Cardiff Parenting Network, practical knowledge from our services and practitioners who work with children and families across Wales, and findings from the body of research we have developed regarding effective early intervention.

Getting Early Intervention right
We are extremely supportive of the legal duties which support local authorities to rebalance social services to provide early help for emerging needs and focus on prevention, reduction and mitigation. Action for Children – Gweithredu dros Blant is committed to early intervention and know first-hand from our work with children and families the difference that intervening early and responsively to emerging needs can make to improved personal well-being outcomes. Our Backing the Future report (2009) showed that intervening as early as possible when children, young people and families face difficulties is highly effective and can result in significant savings. The research found that for every £1 invested annually in Action for Children’s targeted services designed to catch problems early and prevent problems from reoccurring, society benefits by between £7.60 and £9.20 (2009 rates). This social value can be generated, for example, through improved family relationships.

These are significant social and economic outcomes; though achieving them requires the right services in place to respond to the local need spectrum. There must be a balance of targeted and universal services in a locality if we are to effectively deliver an early intervention, preventative response, with clearly defined entry and exit points for people to access support. This can be delivered cost-effectively and coherently if local authorities and partners take this opportunity to consider how best to overcome barriers to accessing the right support, such as joint commissioning, co-location and integrated, multidisciplinary delivery. Universal services that are able to engage with and are accessible to all children and families are essential to tackling early need, and for being able to access targeted interventions earlier, and can only be effectively delivered through fully integrated, multi-agency working. In its current form, we question the Bill’s ability to effectively draw in crucial support in achieving its aims from other public bodies, particularly health partners.
We also feel the Bill, as drafted, does not go far enough to deliver real voice and control to people who
need care and support. There are clear opportunities to enhance local authorities’, and others who
provide services on their behalf, responsibility to enable children and families to work alongside
professionals in seeking solutions to problems. For early intervention to have a lasting impact on
identified need it is essential individuals recognise their own contribution to solving problems and
increased resilience.

Improving our response to child neglect
Neglect is extremely damaging to children. Of all forms of abuse, neglect can have some of the worst
and most long-term effects on the brain, physical development, behaviour, educational achievement and
emotional wellbeing. In the most severe cases, children die – of starvation, for example, or accidents.
Neglect is often unpredictable and cumulative, and calls for careful assessment and analysis, and
appropriate service responses such as family and parenting support. There are several barriers
preventing neglected children receiving the help they need, and the Bill provides important opportunities
to unblock these to improve our response. The legal duty on local authorities to provide preventative
services is a valuable and important step, however we know sustainable, early intervention services to
address neglect require commitment and support from health partners to successfully address
underlying causes of neglect.

Crucially, no one knows how many children are currently experiencing neglect in Wales. Information
about local needs is the bedrock of effective commissioning, and without a specific focus on the
identification and recording of local data, we cannot hope to know that local services are making a
difference. Unless we have proper information about the number of children who are experiencing
neglect, both locally and nationally, it will continue to be impossible to plan effective services to meet the
needs of neglected children. We welcome the duty shared by local authorities and local health boards to
gain an improved understanding of the spectrum of need in their local areas, and consider this an
essential component of delivering real change.

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 well-being of
people who need care and support and carers who need support? Please explain your
answer.

Action for Children-Gweithredu dros Blant welcomes the intention to bring forward a single Act for Wales
which provides the legal architecture for local authorities and partners to improve the well-being of
people who need care and support through shared responsibility. Well-being is a useful driver and we
are very supportive of the intention to introduce enhanced duties on local authorities to take steps to
reduce and prevent the needs for care and support of people in their areas. If discharged effectively, and
in collaboration with key partners such as local health boards, these duties can provide a framework to
bring about transformational change in the way we respond to care and support needs in Wales to
ensure that we identify and respond to need as early as possible to prevent, reduce or delay escalation.

Early intervention
Action for Children-Gweithredu dros Blant knows through our work to support the most vulnerable
children and families in Wales that by identifying and responding to need earlier, and working in
partnership with families to build on their strengths, we have the best chance of improved outcomes for
people. We deliver over 100 services for children and families in Wales, in partnership with
commissioners who include local authorities and local health boards, and succeed in helping children,
young people and families to overcome difficulties at an early stage to tackle problems before they
become entrenched or habitual.
The Social Services and Well-being (Wales) Bill provides an important and valuable opportunity to rebalance local authorities’ and partners’ duties and functions and ensure a clear, collaborative focus on early intervention. Crucially, it allows the National Assembly for Wales to consider and unblock the barriers which can presently impede local commissioners from providing for a spectrum of services which respond effectively to emerging need.

Sustainable development
We recognise Sustainable Social Services and the Social Services and Well-being (Wales) Bill are key parts of the Welsh Government’s commitment to Sustainable Development as a central organising principle. The White Paper for the planned Sustainable Development Bill describes a commitment to “social, economic and environmental well-being of people and communities” and the intention to bring forward a sustainable development duty on selected public bodies, to include local authorities and local health boards. To date, there has been no indication of how these pieces of legislation will interact with each other, or with the existing well-being duty in the Local Government Act 2000. This requires urgent consideration to mitigate the risk of duties being exercised in isolation without due regard for the combined contribution they make to increased capacity and well-being to the population of Wales as a whole.

Sustainable development relies upon increased social, as well as institutional, capacity through healthy, productive people and resilient, inclusive communities, and the Social Services and Well-being (Wales) Bill is a key component in achieving this if delivered coherently. We must not lose sight of the importance of drawing on cross-organisational commitment to improving individual well-being and responding holistically to children and families’ needs as social care, health, educational and other key partners.

2. Do you think the Bill, as drafted, delivers the stated objectives as set out in Chapter 3 of the Explanatory Memorandum? Please explain your answer.

The primary policy objectives (point 101) are given as:

a) Improve the well-being outcomes for people who need care and support and carers who need support; and
b) To reform social services law.

We fully welcome these positive objectives, in particular the shift towards early intervention and a committed focus on individual well-being and outcomes. However, the Bill as drafted raises some areas of concern with regards to unblocking barriers to improved well-being of people who need care and support that we wish to raise for the Committee’s consideration.

Collaboration
Action for Children – Gweithredu dros Blant supports the most vulnerable children and families in Wales via over 100 services, commissioned primarily by local authority partners. Successful early intervention relies upon effective working relationships and links with partners in health to ensure that young people and families have access to a full range of support for specific needs. We query how effectively the preventative duty, as drafted, draws essential partners in to supporting early intervention as part of a spectrum of provision for well-being. The expectation on local health boards in achieving this shift remains unclear. At present the duty provides for local health boards having “regard to the importance of achieving the purposes in subsection (2)” (i.e. prevention of escalating need), and we do not consider this drafting will bring about the shared commitment to prevention and sustainability required between local authorities and local health boards.

Perhaps the best known early intervention “brand” in Wales is the Welsh Government’s Flying Start scheme, which Action for Children – Gweithredu dros Blant is pleased to deliver on behalf of a number of local authority partners in Wales. One of the most valuable elements of this programme is a family’s ability to access a range of support via one service – including basic skills development, parenting support and enhanced health access, which includes prompt access to health visitors, community psychiatric nurses, dieticians and speech and language therapists. In a focus group with Cardiff Parenting Network on the provisions of the Social Services and Well-being (Wales) Bill in March 2013
parents reported that Flying Start is a “fantastic service” and “a great reassurance because there is always someone on the end of the phone to help with any problem before it becomes a bigger issue”. Input from front-line health professionals is essential if we are going to be able to deliver a meaningful step-change towards prevention. We cannot treat emerging social needs in isolation of a family’s whole circumstance, particularly health needs, if we are truly focused on achieved increased well-being. The preventative duty as it stands would not require local health boards to collaborate in delivering Flying Start services, and if the duty does not deliver the status quo we cannot reasonably expect it to deliver extensions of this good practice and draw in health partners to achieve a shared step change towards early intervention.

Third sector
We welcome the new duties on local authority to promote the availability of preventative services from the third sector in the arrangements it makes for providing care and support, and are pleased to see recognition of the value of third sector organisations in delivering effective early intervention and prevention alongside other models of service including social enterprises, co-operatives and user-led services. This is an important recognition of the added value third sector organisations can bring to early intervention services, as part of a spectrum of provision.

It is important the Bill and subsequent guidance maintains a clear sense of the value sought by requiring local authorities to involve the third sector and other service models in delivery. Co-production is a core value of Action for Children-Gweithredu dros Blant’ services and our interventions are decided flexibly in partnership with children and families’ according to their particular needs, and through a range of offers. It is our ability to respond flexibly to need, and to work in partnership with children and families that mean we have the greatest chance of achieving desired outcomes and preventing need from escalating. Guidance must not lose sight of this added value.

Co-production
Improving well-being outcomes for people in need of care and support relies upon their meaningful involvement in achieving those outcomes. For early intervention to have a lasting impact on identified need it is essential individuals recognise their own contribution to solving problems and increased resilience. When we asked members of Cardiff Parenting Network for their thoughts on what the biggest barriers to accessing support was, we heard many contributions about the importance of listening to children and parents properly, and being led by what they identify as the issue and potential solutions. At present there are missed opportunities within the Bill to drive local authorities, and those responsible for providing services on its behalf, to actively involve the child, adult or family members involved in designing the support they receive and thereby maximise its effectiveness.

For example, under Part 3, Section 10, subsection 4 local authorities have a duty when carrying out a needs assessment to “(a) seek to identify the outcomes that the adult wishes to achieve in day-to-day life, and (b) assess whether, and to what extent, the provision of care and support could contribute to the achievement of those outcomes”. Whilst we welcome the broad intention of this duty, this should be strengthened to require on local authorities, and those providing services on its behalf, to enable people, according to personal capacity, to contribute to identifying outcomes they wish to achieve and thereby making real the underlying principle of voice and control. Clarification is also required about how this principle will be embedded in non-statutory needs assessments and support to ensure the spectrum of provision is driven by presenting need rather than available services.

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 well-being of people. Do you feel the Bill will enable the delivery of social services that are sustainable? Please explain your answer.

As explained in our response to question 2, we are concerned about the Bill’s ability as drafted to effectively draw in key partners, particularly local health boards.
Charging
Sustainable social services rely upon ensuring people are able to access information, care and support to address need from the earliest possible point. Provisions in the Bill under section 54 allow local authorities to charge for preventative services, including information and advice. We are concerned about these provisions and the risk they present to undermining the policy commitment to early intervention and improving well-being outcomes. Charges for early intervention present a clear disincentive to people to address care and support needs early and prevent escalation to crisis, and thereby reducing the capacity of the Bill to deliver social services sustainably. It also presents real issues with regards to the ability of the Bill to draw in health partners effectively whereby different elements of a collaborative service may incur charges.

Long-term planning and delivery
To facilitate practical reform and achieve long-term sustainability, we need to make sure this progress is not hampered by political and budgetary cycles which can undermine our commitment to long-term outcomes for the population of people who need care and support. The Bill provides a clear opportunity to incentivise local authorities and their partners to take a long-term view of responding to the spectrum of need, and translate this into service responses which are not hampered by short term commissioning and which have time to forge local partnerships and deliver a sustained difference to communities. When we asked members of Cardiff Parenting Network for their ideas on “What Social Services can do to stop issues getting bigger and prevent crisis?” we heard many contributions which recognise the importance of continuity and community presence. One mum explained “give them a chance to embed and make a difference, it means people know they are there and that help is out there”.

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

The Bill has the potential to bring about a fundamental shift in social services that refocuses intervention on maintaining well-being and prevention, if duties are discharged effectively. The impact of the Bill on local provision relies on a number of key factors including:

- local authorities’ ability to draw in key partners to delivering early intervention services;
- accurately assessing emerging need at a population level, and using this to plan effective early intervention services which successfully address need
- local authorities’ ability to shift resources towards a long-term focus on reducing need, and translating this focus when commissioning service responses.

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

As previously stated, we welcome the policy objectives as stated in the Explanatory Memorandum that the Bill aims to deliver. Our response to question 2 of this consultation presents the main barriers to implementing the desired shift towards early intervention effectively.

A very real barrier to implementation at this time is the lack of accurate information on the spectrum of care and support needs locally and nationally. Systems in place to monitor social care needs at this time are inadequate for these purposes and focus largely on high-level need that meets the existing threshold criteria, and does not account for the broad spectrum of care and support needs. This is particularly true in the case of available data on child neglect, where the only national data set available at present is the Children in Need census in which neglect is not presented as a distinct need but merged with other forms of abuse. Without changes to the ways in which individual, area and national data are collected we cannot hope to provide the early responses required, and crucially, to know whether we are collectively making a difference. This requires a significant reform of the way we gather social care and support need data sets in Wales, and relies on a collaborative, coherent approach to measuring need from key partners, including health.
A primary barrier to effective implementation is cost of reform. We are concerned about the usefulness of the Regulatory Impact Assessment as presented. For example, the only cost listed to implementation of the Bill is cost of staff training in social services. This is limited, and does not account for the required buy-in from other budgets, in particular health budgets, to deliver this step-change effectively.

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? Please explain your answer.

We recognise the importance of future-proofing this Bill and for some issues to be left to regulation. We consider balance is dependent on the particular element or objective of the Bill under discussion.

7. a) 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)

7. b) What are your views on the financial implications of the Bill

There is a clear, well-accepted economic case for making the transition to early intervention and delivering well-being outcomes. However, this transition requires investment to deliver the desired change and Regulatory Impact Assessment does not recognise this cost beyond delivering training to social services staff. Clearly, the focus on well-being and early intervention requires a far wider shift in practice than staff in Social Services departments. Workforce development and capacity building cannot be limited to local authority social services staff, as it undermines the principles of the Bill regarding collaborating and joint-working to achieve shared outcomes. For example, Health staff clearly requires information on their obligations and expectations set out under the Bill.

8. Are there any other comments you wish to make about specific sections of the Bill

Cumulative impacts of welfare reform

The Welsh Government recently published research on the cumulative impacts of welfare reform, commissioned from the Institute of Fiscal Studies, which indicates the proposed changes by the UK Government through the welfare reform agenda could result in increased levels of need across the population. This will have a subsequent increased demand on social care and support services and we would welcome debate and information about the risk welfare changes poses to local authorities' and partners ability to deliver Social Services reform, and how the Welsh Government can mitigate. We would also like to see these costs accounted for in the Regulatory Impact Assessment.

We hope that you find our submission helpful. Please do not hesitate to contact us if you have any questions about any of the comments or suggestions we have made.

We would be very pleased to expand on our evidence via oral evidence to the Committee and share our expertise and learning from working with children and families in Wales.

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