

Age Cymru written response following oral evidence session – Care Home Commissioning.

1. Whether, overall, Age Cymru is confident that the Welsh Government is moving in the right direction, and quickly enough, with its policy reform to address the longstanding issues affecting care home commissioning that the Auditor General has highlighted.

Age Cymru believes that Welsh Government is moving in the right direction to address care home commissioning issues. The direction of travel is what we would want to see, as reducing the complexity of arrangements will over time benefit older people needing care and older carers who are supporting their loved ones.

We agree with the Auditor General's recommendations within the north Wales report. However, we feel that there are some specific areas within their recommendations that need looking at in further detail. The report highlights how moves towards pooled budgets to date may not be providing value for money.

Within this area of focus it will be important to look at whether changes in funding availability are linked to an identified level of need of the Welsh population and if there are any deficits, how these will be met. Whilst pooling funding will over time reduce the resourcing needed to allow older people to stay healthier and live independently for longer, the changes will take time to realise. A 2019 report found that while spending by local authorities on adult social services over the previous 5 years in Wales has remained broadly flat in real terms, spending per capita on older people has reduced by 13%. This may suggest that local decision making either does not consider increased levels of need, or that other age groups are being prioritised over and above the known level of need of older people. Other recent research indicates that funding levels do not appear to be based on identified levels of need e.g. continuing health care funding for those with complex needs appears to follow a trajectory of what funding is available, rather being needs-led². As such, we are cautious of assuming that the current spending levels are accurate.

During the oral evidence session we used the example of bringing funding streams together to develop the Supporting People programme. This example was used purely to demonstrate how nationally this can be done. However, we are aware that there are additional complexities in pooling together funding that addresses a wide range of needs from high risk interventions right through to earlier interventions and preventative services. It is therefore important that full consideration is given on

¹ https://www.adss.cymru/en/blog/post/delivering-transformation-grant-programme-2019-20-rebalancing-social-care-a-report-on-adult-services

² Innovative funding models to meet social care needs report https://www.adss.cymru/en/blog/post/innovative-funding-models-to-meet-social-care-needs

levels of flexibility of funding and what can be done to mitigate against a potential loss of earlier interventions and preventative services.

2. Whether there are any other key issues / areas for improvement in care home commissioning for older people from Age Cymru's perspective that have not already been covered – or examples of good practice that Age Cymru would point to.

We are concerned that commissioning decisions may not take fully into account how important it is that care home residents have ongoing access to social, activities and meaningful activities that help maintain wellbeing and that this should be considered in commissioning decisions (performance monitoring, unit cost pricing) and future planning (e.g. how commissioners and planners ensure that future care home provision is able to meet all needs of residents in recognition that this is their home). We include information from projects delivered through Age Cymru to support this below as we are aware of the positive impact they have had.

In the oral evidence session Natasha Asghar asked about the Welsh Government funded Age Cymru *Tell Me More* project³ and the learning we have taken from this. The project has been invaluable in hearing the voice of older people and care home residents feedback indicated that the engagement project helped improve their wellbeing after such a long period of isolation.

The cARTrefu project⁴ initial evaluation showed that creative arts and mentoring delivered through the programme showed a statistically significant improvement in wellbeing scores. It also improved care staff's confidence in engaging with residents in more meaningful ways. This project, delivered to 25% of care homes in Wales, is the largest of its kind in Europe and has attracted attention internationally. It is important that commissioners understand that such opportunities are not an 'add on,' but are an integral part of the needs of care home residents.

³ www.agecymru.org.uk/tellmemore

⁴ www.agecymru.org.uk/cartrefu

3. Whether Age Cymru has any observations that it would wish to raise about the Auditor General's recent report on Direct Payments for adult social care, including issues of concern around the interface between direct payments and access to NHS continuing healthcare.

We have the following comments to make regarding the use of direct payments for older people.

In order to increase the use of direct payments where it is the older person's choice to use this option to meet their care and support needs, older people need to be confident that they have support to act as an employer. Whilst the infrastructure is there for people with learning disabilities to support the use of direct payments, this is lacking for older people. During the pandemic we have heard from older people who were given direct payments in the absence of commissioned care service availability, but then were unable to use that funding to employ a carer – leaving them without the care they needed.

In our recent discussions with social care leads across Wales as part of our work looking at delays in access to care⁵, this is an area they feel that third sector support for older people can really help them meet the challenges of pandemic recovery and longer term changes in care delivery.

It is important to note that direct payments should be part of a suite of options as direct payments will not suit all older people and learning from issues with direct payments should be considered to support the development of the right infrastructure for older people's needs. Our information and advice service has received calls from older people telling us that they were not told about direct payments, so more needs to be done by social care to ensure that older people are given advice and information so that they can be in more control of decisions on what care will work best for them.

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⁵ This report is expected to be published shortly.