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Llywodraeth Cymru
Welsh Government

Dr Dai Lloyd MS
Chair
Health, Social Care and Sport Committee
Weh Parliament
Cardiff Bay
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Dear Dai,

Thank you for your letter of the 29th January. As requested we have set out below our response to those issues that were not covered fully in the recent Committee meeting.

Details of any further longer term financial commitments that the Welsh Government is planning to make to support the sector, in particular to ensure that care homes remain viable.

Social care is a priority for the Welsh Government. The Welsh Government has continued to place health and social care at the top of priorities for the 2021-22 budget. The statutory responsibility for delivery of social services rests with local authorities. Welsh Government provides these bodies with funding through the Revenue Support Grant; overall an additional £176m has been allocated to the local government settlement in the Draft Budget for 2021-22.

Beyond this core investment, the Welsh Government has central budgets to support the social care sector and related areas. The majority of these budgets are within the Health and Social Services MEG. The Welsh Government is investing an additional £431 million revenue in health and social care in 2021-22

We will continue our investment in the Integrated Care Fund (ICF) for a further year with a revenue budget of £89m in 2021-22. The Fund is managed through Regional Partnership Boards, bringing health and social services together to deliver services around the needs of citizens.

Given the significant pressures facing the sector as a consequence of the pandemic the Social Care Workforce Sustainability grant has been increased from £40m to £50m in the draft budget for 2021-22. Officials are currently reviewing the criteria attached to this funding to ensure that it continues to support our strategic objectives relating to workforce sustainability.

We acted quickly to provide Local Authorities with the financial support necessary to enable them meet the additional costs of care provision during the pandemic through the Hardship Fund, and using this mechanism we have provided more than £88m to the sector to date. In addition to supporting the costs of additional staff and general provision through a flat rate uplift, this also included an element to support Local Authorities in responding to market stability pressures for

providers within their areas to ensure continuity of provision during the pandemic. We also provided £22.4 million to support Local Health Boards with health care and support for continuing health care through to the end of September 2020. We have since extended this provision with a further £22.4m available to the end of the financial year. Currently the Hardship Fund, and the additional support to Local Health Boards, ends at the end of March but we recognise the concerns raised about this by partners in the context of an ongoing pandemic.

The Finance Minister said in the draft budget that we will build on the small number of allocations for Covid response over the coming weeks and in the final Budget, once we can better assess how funding can best be targeted into 2021-22. In particular considering what additional funding is needed to support the NHS and local government as they stand at the forefront of our response to the pandemic.

The need for continued support for adult social care will be considered alongside other local government pressures within that context.

Details of how the Welsh Government intends to improve access to respite care for unpaid carers during the pandemic.

Local authorities continue to provide a range of support to unpaid carers (carers) as per their statutory duties under the Social Services and Well-being (Wales Act) 2014, including ensuring carers can access a carers' needs assessment. We expect local authorities to continue to meet people's care and support needs and those of carers. Respite for a carer can be identified as an eligible need, however we recognise the impact the pandemic has had on the delivery of face to face local support services.

We expect community based and other forms of provision to be reopened, as soon as it is safe to do so. Local authorities and the third sector have been nimble in developing other ways of maintaining contact and providing forms of respite, such as keep in touch phone calls and on-line activities. We gave an additional £50k to Carers Wales to operate their online MeTime psychological support sessions which have been popular. Local health boards and communities have also been creative and developed alternative approaches; for example in Rhondda Cynon Taf they have used funding from our £1m LHB Carers Fund allocation to Cwm Taf Morgannwg LHB to deliver the Carers Support Project. It has been providing a range of activities, workshops and social events to support a life alongside caring, using social media to give advice; delivering "boredom buster" packs; online-led activities like exercise classes; workshops on topics such as managing your child's anxiety; food and mood with a nutritionist; and fun things such as virtual takeaway nights.

Our Integrated Care Funding (ICF) also provides direct support for projects enabling carers to access opportunities for respite and help improve carers' own well-being. In 2020-21 RPB direct spend on carers was £8.9m. Our expectation is that this will increase in 2021-22 with carers, including young carers, continuing to be a priority group within the funding programme. The ICF is therefore helping to deliver the three National Priorities for Carers, including "Supporting life alongside caring".

Looking ahead at the wider picture of how carers want to access appropriate and timely respite support, officials are currently analysing more than 80 responses to our public consultation to develop a new national plan for carers. Specific questions about respite and short breaks were included in the consultation document and we are considering these views and examples of good practice. Our Carers Ministerial Advisory Group has been also been discussing respite as a key issue for carers, and will be working with us to see how best public, private and third sector organisations can provide respite and / or short breaks, for carers of all ages.

Your views on the evidence the Committee has heard from stakeholders about concerns that service users and unpaid carers having ‘managed’ with fewer formal care and support services during the pandemic could be interpreted as demonstrating that they need less intervention from social services in future.

Regarding social care packages available, thus far, the information we are receiving is that local authorities and providers are not systematically reducing packages. However, the wider protections that have been necessary to limit the transmission of the virus have had an impact on how people access their care and support. We know that some people are choosing to make changes themselves, due to anxiety over allowing care workers into their home and the risk of infection this may bring. Others have chosen to draw on the ability of furloughed family or relatives, who are able to provide the care needed from within the family.

Despite these challenges we know that individuals, care providers and local authorities have worked together to explore and identify alternative solutions to maintaining care and support. If anyone who has a care and support plan believes their physical or emotional wellbeing has been adversely impacted by a reduction or change in the services provided, they should contact their local authority social services department to discuss this and, if necessary, request a review of their care and support plan.

From the outset our expectations have been clear. Local authorities must comply with requirements of their statutory duties for as long and as far as possible. Any changes should only be implemented where this is essential in order to maintain the highest possible level of services, and any changes must only be temporary, justifiable due to unavoidable local circumstances, and removed at the first available opportunity. Our statutory guidance states: individuals’ care and / or support must return to their agreed arrangements at the earliest opportunity; the onus should not be on individuals or their families/carers to ensure that their care and support is restored; and local authorities need to establish arrangements and communicate to those impacted how this will be achieved.

Details of any further measures you are considering to facilitate care home visits and how you will assess the impact of measures such as the leasing of pods in facilitating safe visits.

Restrictions around care home visits have been one of the most difficult consequences of this pandemic. The need to balance people’s rights and support their well-being with the desire to protect people living in care homes from the risk of infection remains very challenging. The new variant of the virus adds to that challenge and we are still trying to understand its impact. Our position is that collectively we must do all we can to support people to see their loved ones as safely as possible. We will continue to keep the situation under review and will amend our advice and guidance should it be necessary.

The Welsh Government’s Coronavirus Control Plan provides guidance on what each alert level means for care home visits. We have updated our detailed national visiting guidance for care home providers (published on 1 February), to make it consistent with the alert levels and to give additional detail around the safe use of visitor pods. We hope that this will provide greater clarity for everyone – individuals and their families, providers and local authorities - both now and as restrictions ease.

In developing our visitor guidance we have worked very closely with our stakeholder visitor group which includes representation from the offices of the Older People’s Commissioner and the Children’s Commissioner as well as other representatives from the sector, including Public Health Wales.

We will be evaluating the impact of our £3 million pilot programme and are pleased by the level of interest and engagement in this scheme so far. We have now sourced a total of 101 visitor pods through the programme and 93 pods are in situ at care homes cross Wales. The pilot programme includes up to £1 million funding available through the hardship fund to support providers who choose to hire their own visitor pods. Claims for funding are being considered as they are received.

The Committee notes the addition of £250k to the £1million carers support fund. However, as this only runs until March 2021, could you provide clarification on what help will be available beyond March for carers who are struggling financially.

One aspect of support for unpaid carers is welfare benefits, where they are entitled to these. When we established our Single Advice Fund we required providers to offer welfare benefit entitlement checks to all those who accessed their service, regardless of their presenting problem. In the first year of operations, the benefit advice services delivered through the Single Advice Fund have helped people in Wales to claim over £34 million of additional welfare benefit income. This extra income is helping to lift people out poverty, easing their financial pressures and, importantly, boosting spending within local economies across Wales.

However, we know that more needs to be done to reach those groups who consistently fail to claim their entitlement to welfare benefits, including carers. Therefore, Single Advice Fund (SAF) Advice and Access partners are running 'Test and Learn' pilots in the six SAF regions, delivering tailored messages and support to encourage take-up amongst groups least likely to be claiming all the financial support they are entitled to. The pilots started in October 2020 and will end March 2021 and the learning will be shared. During the first 3 months the pilots reached 601 people advising them on over 1,600 issues relating to their welfare benefit entitlements and helping them to gain additional income of around £1m per annum. The learning from the pilots will be widely shared in early May, helping people from key groups, such as carers, to continue to claim all the financial support they are entitled to.

The financial pressures on carers have increased during the pandemic and whilst small grants for individual carers and families can provide some immediate relief to those eligible, as through the Carers Fund, or local authority assistance grants, our funding to support systems and delivery of services is the primary means to support carers now and in the future. We continue to provide significant resources to local authorities to enable them to deliver the services and support that their communities rely on. In addition to the Settlement, the Local Government Hardship Fund continues to be available to support local authorities with the additional costs of responding to the pandemic.

Discrete Welsh Government funding for carers concentrates on providing additionality to statutory services and we are providing £2.6 million over three years (2020-23) to Carers Wales, All Wales Forum of Parents and Carers, Carers Trust Wales and Age Cymru, via our Third Sector Sustainable Social Services Grant Scheme. The four projects aim to provide a range of support for carers of all ages as well as working with health and social care staff to improve awareness of the issues affecting carers, and how to better support carers. Additionally, our £1m annual carers funding to local health boards has been used in 2020-21 to support carers struggling with the increased pressures of the pandemic, and we are currently considering this funding for 2021-22. Finally, as noted above, carers continue to benefit from projects under the Integrated Care Fund (ICF) and in 2020-21 we invested £89m revenue and £35m capital in that Fund. Building on success to date we are investing in the ICF for a further year, with a revenue budget of £89m in 2021-22.

The Committee notes that some support services for young carers have been able to move online during the pandemic and that the launch of the young carers' card is in progress. Is the Welsh Government taking any further steps to support young carers or provide them with respite, particularly those who are currently unable to attend school.

The needs and issues affecting young carers were identified and several questions asked about how to improve help and support for young carers and young adult carers, as part of our recently closed public consultation to develop a new national plan for carers. This included a proposal for a new fourth national carers' priority which would focus on carers in education and employed carers. Officials are currently analysing the responses.

Since the beginning of the pandemic however, we have worked with national carers' organisations, including Carers Trust Wales, to understand how young carers are being affected. We were pleased to work with Carers Trust Wales, Community Pharmacy Wales and others to develop a guide and resources to help all carers access medication for those they care for. Also, as vulnerable learners, young carers remain eligible to access learning settings alongside the children of key workers. Even before the pandemic we knew that school provides a form of respite from the caring role, for many young carers. We continue to encourage them to contact their local authority to discuss their needs as vulnerable learners, and it remains the case that under the Social Services and Well-being (Wales) Act, young carers have the right to a carers' needs assessment. Whilst they are at home, activities have been provided by a wide range of organisations, to help them take a form of break. Our £1m Local health board and carers partnership funding has been used in a range of ways by these partnerships to support young carers projects. Examples include online cooking classes and delivery of "wellbeing packs".

However, we know there is a need for a wide range of support mechanisms to help all young people, including young carers, particularly with emotional and mental health needs. In 2020 we produced the Young Person's Mental Health Toolkit and they can access help via the CALL helpline service, and MEIC helpline and website. On 1 February, the Minister for Mental Health, Wellbeing and Welsh Language announced an extra £9.4 million will be available specifically to support children and young people in Wales, with the additional funding recognising the effect being away from school and their regular support networks has had on young people during the pandemic. <https://gov.wales/pledge-support-youth-extra-ps94m-investment-children-and-young-people-mental-health-services>

Details of how the Welsh Government's COVID-19 recovery planning is taking account of the implications for social care of:

- ***Delays in dementia assessment and reviews during the pandemic; and***
- ***Needs that may arise as a result of long COVID.***

In relation to Dementia Assessments, the Welsh Government will continue to invest £10m to support the implementation of the Dementia Action Plan 2018-22 next year, with the majority of this funding (over £9m) allocated to Regional Partnership Boards. We recognise that the pandemic will have impacted on services and so, in conjunction with the Dementia Oversight of Impact and Implementation Group, we are reviewing our current action plan to consider what further action is needed.

Additionally, in the draft budget for 2021/22 we propose that up to £3m of service improvement money be made available to support memory assessment services and the required wrap-around support to ensure people are supported whilst they go through this assessment and diagnosis process.

More broadly, we are continuing to learn more about long COVID from research and people's experiences. We know people are experiencing a range of longer-term difficulties and while every person is different, these include fatigue, breathlessness, pain and cardiac, respiratory, cognitive

and neurological issues. We are taking a personalised approach in Wales to meet the specific needs of the individual because long COVID has such a wide range of impacts.

The National Institute for Health and Care Excellence (NICE) has developed a clinical guideline, published on 18 December 2020: <https://www.nice.org.uk/guidance/NG188>.

The guideline covers identifying, assessing and managing the long-term effects of COVID-19 and uses the following clinical definitions:

- **Acute COVID-19:** signs and symptoms of COVID-19 for up to four weeks.
- **Ongoing symptomatic COVID-19:** signs and symptoms of COVID-19 from four to 12 weeks.
- **Post-COVID-19 syndrome:** signs and symptoms that develop during or after an infection consistent with COVID-19, continue for more than 12 weeks and are not explained by an alternative diagnosis.

In addition to the clinical case definitions, NICE acknowledges '*long COVID*' is commonly used to describe signs and symptoms that continue or develop after acute COVID-19 i.e. it includes both ongoing symptomatic COVID-19 and post-COVID-19 syndrome.

A Written Statement was issued on 20 January providing an update on action in Wales to support people experiencing longer term effects of COVID 19: <https://gov.wales/written-statement-longer-term-effects-covid-19>.

In addition, the Technical Advisory Group (TAG) has published a paper on 3 February entitled '[Long Covid - what do we know and what do we need to know?](https://gov.wales/technical-advisory-group-long-covid)' which pulls together latest UK and international evidence and research to support policy and local action: <https://gov.wales/technical-advisory-group-long-covid>. The paper identifies further important research questions to understand and monitor the impact of long COVID on individuals and services in Wales, and develop effective care pathways. These will require continual review as evidence needs are fulfilled through ongoing and future research studies, and as new areas of need emerge.

The impact of these longer term impacts affects all patients and services and is a consideration of recovery plans. We want people with post-Covid syndrome to be able to access the majority of the services they need – be that assessment, diagnosis, treatment and rehabilitation support – as close to home as possible or via remote services, only having to travel for more specialised services, which have to be provided in an acute hospital setting.

Rehabilitation is a critical component of care for people recovering from COVID-19. It is also critical for groups of people indirectly affected by the pandemic, including those with dementia. This includes people whose planned care was paused, those who may have delayed seeking advice on a health problem, and those people affected by the lockdown measures, such as those who have been isolated or were shielding.

Allied health professionals (AHPs) and colleagues have worked creatively and consistently to maintain routine service delivery where possible by remaining in contact with their known patients without urgent needs, to provide advice to help them self manage. AHPs have implemented many innovations, such as running rehabilitation groups or sessions online, using Attend Anywhere for consultations, and providing psychological support via video consultation in order to provide the advice and care safely where they are not able to see people face to face.

An update on PPE supplies for the social care sector. In particular, any steps that the Welsh Government is taking to ensure that there is an appropriate and sustainable supply of PPE to effectively meet needs in social care for the foreseeable future.

We have worked in partnership with NHS Wales Shared Services Partnership (NWSSP) and have developed a strategic plan for PPE procurement. As a result of this partnership working, I'm pleased to confirm that our PPE position continues to be stable. The majority of recommended items are held in stocks sufficient for a 24 week period and that will be the case for all item types by the end of this month.

We have also helped to facilitate a service level agreement for the provision of PPE between NWSSP and the Welsh Local Government Association. This agreement provides for the continued supply of 100% of the recommended PPE for social care, which will continue to be fully funded by the Welsh Government. The service level agreement is in place until the end of August 2021.

We continue to follow the Infection Prevention and Control (IPC) guidance on use of PPE in health and social care settings – this guidance is UK-wide and based on the latest evidence and data. The IPC guidance was recently considered in light of the new variant and our PPE position is unchanged by the newly published guidance. The guidance, and consequently our PPE position, will be kept under review as more evidence and data becomes available.

We trust that you find the above information of assistance in preparing the Committee's report.

Yours sincerely



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