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| **Consultation Response Form** |
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| Your address:  |  |
|  **Responses to consultations are likely to be made public, on the internet or in a report. If you would prefer your response to remain anonymous, please place a tick in the box:**  |  |

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| **QUESTION 1: Do you agree that market stability reports should be prepared on a regional basis, by local authorities and local health boards through the regional partnership boards? If not, please give your reasons.**  |
| Agree☐ | Tend to agree☑ | Tend to disagree☐ | Disagree**☐** |
| As Regional Partnership Boards (RPBs) are responsible for strategic oversight of the provision of care and support in a region, and existing discrete responsibilities including undertaking population need assessments and area plans, we agree it makes sense to prepare reports on a regional basis. This will help ensure that data on demand and the response for ensuring adequate supply of care services are coterminous and mutually informing. However, it is important that any regional strategic plan does not come at the expense of place-based decision making. A success measure of the actions taken as a result of the market stability plans will be that individuals are able to receive high-quality care and support close to the places and people that matter to them. We welcome the explicit mention of this at section 3.21 of the code of practice, however, consider there would be real value to strengthening this ambition throughout the document, in particular in the *purpose* section.  |
| **QUESTION 2: Do you agree that market stability reports should be produced on a five yearly cycle alongside the population needs assessments? If not, what alternative arrangements would you propose, and why?** |
| Agree☑ | Tend to agree☐ | Tend to disagree☐ | Disagree**☐** |
| We agree, this seems proportionate.  |
| **QUESTION 3: Have we specified all the key matters that need to be included in market stability reports? If there are other matters you think should be included, please specify.**  |
| Agree☐ | Tend to agree☐ | Tend to disagree☑ | Disagree**☐** |
| There are two primary matters we believe should be refined and further developed in the code of practice and statutory guidance. Social valueWe are pleased to see the focus on social value included at sections 3.31 and 3.32, and the requirement to understand the nature of providers throughout the document. However, social value is a term open to interpretation and debate and we consider the code of practice would benefit from greater indication of what Welsh Government consider represents social value beyond “the contribution that social enterprises, co-operatives, user-led services and the third sector have made to the market for regulated services … “ (3.31).Our view is that social value is best determined by the outcomes delivered to communities, rather than the mechanism alone.As not-for-profit social businesses, Housing Associations deliver a wide range of social value and well-being outcomes for communities through their provision of good, affordable homes and targeted housing-related support that works, both of which are essential for individuals to maintain independence and promote good health. As well as our members who provide regulated social care services, Housing Associations provide a wide range of targeted, community-based services that aim to intervene early, prevent issues escalating and promote people’s independence, health and opportunities. Indicators of the social value delivered by Housing Associations include activity to address health inequalities and the causes and impact of poverty; providing good employment and training opportunities for the local workforce; supporting local supply chains; and mitigating action on climate change, to name a few. However, the work of Housing Associations would not be automatically included in this description as quoted in the code of practice. We are aware of the work of the Wales Co-operative Centre to explore social value models of delivery, and are seeking an opportunity to contribute to this important piece of research. As well as through provision of services, Housing Associations are significant local employers and economic actors who create social value in the local workforce and economy. Housing associations spend 85p in every pound in Wales, and have ambitions to increase this to 90p in the pound by the end of the Senedd term. For every [1 person employed full time by a housing association, another 1.5 good quality jobs are supported elsewhere in the economy](https://chcymru.org.uk/uploads/general/2018_Economic_Impact_of_Welsh_HA_sector_Report_FINAL.pdf).For example, in 2019/20 Clwyd Alyn Housing Association in North Wales supported Betsi Cadwaladr Health Board’s Step into Work scheme, by offering 4 care work placements to trainees. In addition, they also continue to support nurse work placements managed by Bangor University and Llandrillo College. During the year they offered a total of 46 work experience opportunities to their residents and people in our local communities, with 10 securing permanent employment. As a minimum, we consider that Housing Associations should be included in this list provided in the code of practice as significant providers of both regulated and preventative services across Wales. To encourage active and informed consideration of how social value is delivered by the care and support sector more widely, we consider that further detail of the Welsh Government’s interpretation of the indicators of social value would also be helpful here.  We would be pleased to contribute to any ongoing work on this issue. We also consider that social value must be central to conversations about the workforce (Section 3.3.6), explicitly and fair remuneration and progression. In order for the care and support sector to deliver social value, it must have the resources needed to deliver improved outcomes for citizen users, the workforce and social value to communities. We would welcome this section being updated to reflect this primary mechanism to delivering social value. Engagement between providers and commissionersAt present, the guidance is not sufficiently clear about the importance of local authorities and local health boards engaging with providers to understand the threats and mitigating factors to market stability. At various points in the code of practice, terms are used including “make contact with (3.11), “engaged with” (4.5). Our view is that open and transparent engagement that is open to all providers, and potential providers, in a region should be expected and this should be reflected in the narrative throughout the documents.  At its best, this engagement should lead to open, transparent and constructive conversations with providers about the operating environment and true cost of providing high-quality care and support, which then leads to any threats to market stability being acted upon. Section 3.26 should be amended to make clear that providers are an essential partner in navigating and managing risks. We do not consider challenges and risks can be fully understood, nor mitigated, without open, evidence-based discussions with providers. True cost analysis is an essential element of discussions about the workforce, including issues such as rises in the National Minimum Wage and Real Living Wage. We consider it important is included in section 3.66 relating to the workforce. We are pleased to see the explicit focus on the role of preventative services in sections 3.16 - 3.18. This is an important inclusion that will allow all RPB partners to take a holistic view of the provision in their regions along the spectrum of need. The draft code of practice is clear that some contact is required with providers of regulated services, but makes no such requirement for providers of preventative services. We consider sections 3.17-18 should be strengthened to require quality engagement with providers of preventative services which as the document states “have a major impact upon the need for regulated services”. Other members of RPBs, including Registered Social Landlords, Local Authority Housing representatives, 3rd sector representatives, carers, and a public representative are well placed to support this engagement. We also consider this section could useful be illustrated to provide examples of the scope of preventative services. This could include, for instance, those provided in individual’s existing homes such as aids and adaptations, and those in non-regulated accommodation, such as Extra Care, sheltered accommodation and other forms of accessible housing. It will be important that the market stability reports take an informed view of the true scale of preventative support available across a region and within communities, much of which exists beyond the traditional boundary of social care. For example, Hafod Housing Association operate a Neighbourhood Coaching model through which coaches offer personalised, tailored early support to promote independence and well-being. The model is relationship based, and coaches work with individuals to understand individual’s own hopes and goals and then help to create the conditions for them to flourish as independently as possible. By looking beyond traditional boundaries, the reports provide an opportunity to further support integrated working in pursuit of a shift towards preventive action.  |
| **QUESTION 4: Do you agree that market stability reports should be kept under regular review and revised as necessary, but at least at the mid-way point of the five year cycle? If not, what other monitoring and review arrangements would you propose, and why?**  |
| Agree☐ | Tend to agree☑ | Tend to disagree☐ | Disagree**☐** |
| We agree midway appears proportionate for a full review and potential revision of the market stability report. However, to ensure the market stability report is a live document actively informing decisions, we consider it would be appropriate to report on actions taken on market stability in each RPB’s annual report.  |
| **QUESTION 5: In your opinion, does the draft code of practice strike the right balance between what is required of local authorities and what is left to their discretion? Are there further requirements or guidelines you would like to see added, or other ways in which the document might be improved?**  |
| Agree☐ | Tend to agree☐ | Tend to disagree☑ | Disagree**☐** |
| Please see our response to question 3 in relation to issues we consider are outstanding and require further detail.   |
| **QUESTION 6: In your opinion, does the draft statutory guidance set out clearly the partnership approach that local authorities and local health boards should take in preparing their market stability reports? Are there further requirements or guidelines you would like to see added, or other ways in which the document might be improved?**  |
| Agree☐ | Tend to agree☐ | Tend to disagree☐ | Disagree**☐** |
| Role of RPBSDespite the proposal to prepare and publish these reports on a regional footprint matching the Regional Partnership Boards, it is unclear what the role and contribution of the total board representatives are beyond dispute resolution, as set out at section 6.10 of the statutory guidance, or final agreement (section 6.13). We do not consider the term “partnership bodies” sufficiently distinct from RPBs throughout these documents and would welcome clarity on this point. Representatives on RPBS not included within the local authority and local health board representation include a registered social landlord; a third sector representative; a member of the public and a carer. We consider that the development of market stability reports would be strengthened by making clear in this guidance that the full Regional Partnership Board has a valuable contribution to make to supporting both effective engagements in discussions and analysis of the findings that inform the final plan. It is also unclear from the draft code of practice what the expected role of the RPB is in circumstances where the combined analysis of the population needs assessment and market stability report shows action is required to respond effectively to local need. Clear expectations of the role of the full RPB Board in the process of developing and actions arising from the market stability reports can play an important role in further strengthening the strategic role of RPBs and ensuring the efforts of all partners are directed towards shared priorities. We would welcome further clarity on these points.  |
| **QUESTION 7: What impacts do you think our proposals will have on the duties of public bodies under the Equality Act 2010, or upon a local authority’s duty under the 2014 Act to have due regard to the United Nations Convention on the Rights of the Child, the United Nations Convention on the Rights of People with Disabilities, or the United Nations Principles for Older People?**  |
| We welcome the intention to include Equality Impact Assessments as an appendix to these reports, and for issues to be actively considered as part of market stability discussions. It will be important to monitor the effectiveness of these requirements, and if appropriate take action to support improved consideration.   |
| **QUESTION 8: We would like to know your views on the effects that our proposals with regard to market stability reports would have on the Welsh language, specifically on opportunities for people to use Welsh and on treating the Welsh language no less favourably than English.****What effects do you think there would be?  How could positive effects be increased, or negative effects be mitigated?** |
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| **QUESTION 9: Please also explain how you believe the proposed policy around market stability reports could be formulated or changed so as to have positive effects or increased positive effects on opportunities for people to use the Welsh language and on treating the Welsh language no less favourably than the English language, and no adverse effects on opportunities for people to use the Welsh language and on treating the Welsh language no less favourably than the English language.** |
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| **QUESTION 10: Under the Well-being of Future Generations (Wales) Act 2015, public bodies have a duty to consider the long-term impact of their decisions. We would like to know to what extent you think our proposals will support the principle of sustainable development set out in that Act.****Further information on the Well-being of Future Generations (Wales) Act 2015 may be found here:** <https://www.futuregenerations.wales/about-us/future-generations-act/> |
| We have combined our answers to questions 8 – 10 below. The Well-being of Future Generations (Wales) Act 2015 provides a framework to consider sustainable development. Through the Well-being goals, it also requires public bodies to work towards a Wales of vibrant culture and thriving Welsh Language. Neither the Act, the definition or sustainable development nor the well-being goals are referenced in the code of practice nor statutory guidance. We consider this expectation should be set out explicitly within this document. The inclusion of the Well-being of Future Generations Act will also provide a helpful reference point for informed discussions about we understand by social value.  |
| **QUESTION 11: We have asked a number of specific questions. If you have any related issues which we have not specifically addressed, please use this space to report them** |
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