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# Regulations and Code of Practice in Relation to Part 2 of the Act

Consultation Response from  
ADSS Cymru and WLGA

February 2015

# Consultation Response Form

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## Introductory Comments:

This is a joint response on behalf of ADSS CYMRU and WLGA to the consultation on the regulations and code of practice in relation to the Social Services and Well-being (Wales) Act.

The WLGA and ADSS Cymru have previously communicated our broad support for the Act's vision and the ambitious principles that it sets out. We welcome its timely nature in the face of increasing pressures on social care services, both within local government and across our partners in NHS and the third sector. We also recognise and appreciate the fact that Welsh Government has worked with all stakeholders to influence the development of the draft codes of practice and regulations.

In responding to the current consultations a number of key themes have been identified and these need to be considered with the proposals set out in the codes of practice and regulations. These themes include:

**Financial** - We recognise that resources are limited and there is potential for some efficiencies to be achieved as the Act is implemented. However it is also inevitable that the Act will increase pressure on local authorities, for example through increased responsibilities around supporting the needs of carers. There is a need for some 'invest to save' funds and short term resources to allow for new services to be developed, whilst some current services are kept in place and the Delivering Transformation Grant has provided a welcome opportunity to start some of this work. Welsh Government has already recognised that there are some elements that will have clear cost implications for local authorities, e.g. assessing and meeting the care and support needs of prisoners, however the codes of practice and regulations also place a number of other additional burdens on local authorities, e.g. around IAA services, population assessments and meeting the support needs of carers all of which need careful deliberation. Alongside those factors are the increased pressures as a result of existing budget cuts, welfare reform and increasing demand and expectation. Following the publication of the Welsh Government Budget, local councils are warning that funding for local services will fall by £154m, and if local government continues to bear the brunt of austerity, some local services will disappear, for example preventative services. Indications suggest that local government will need to make up a shortfall of up to £900m by 2018, as a result of which many of the services, that communities rely upon, are expected to become unaffordable in the future. While council leaders understand the pressures being placed on the overall Welsh budget, there is a need to acknowledge that continued funding reductions on this scale will have a huge impact on local services. Councils will have no option other than to look seriously at extending their charging regimes, along with different models of delivery, in addition to those expected from the Act. Many of the services, that communities have been able to take for granted and upon which they have relied, are now at risk, including leisure centres, libraries, community facilities and opportunities for day activities.

**Implementation** - The Act is vast in scope, and whilst we have supported the move to legislate in key areas such as wellbeing, safeguarding and integration, we support the need for a sequential approach to implementation to ensure deliverability. Many elements of the Act will take time to implement in full, with clear training needs for staff or additional resources required. Whilst local authorities are working on the development of IAA services, promotion of social enterprises and an increasing focus on outcomes, experience has taught us that we need to allow time for their proper and healthy development. As such we need to be clear about the expectations for services to be in place from April 2016 and be realistic in agreeing what is achievable in this timeframe.

**Preventative Services** - The context of increasing demand for services, in part due to well evidenced demographic changes, increase the importance of developing more preventative activities that offer much earlier intervention, with the aim of holding off more costly and potentially intrusive interventions at a later stage. Current austerity measures, particularly affecting local authority budgets, are putting some preventative services and facilities at risk, e.g. closure of leisure centres, reduced hours for day activities, closure of community hubs and meeting places. In addition the potential uncertainty of grant funding, for example Families First and Flying Start, hampers the development and consolidation of key preventative services for children and families. WLGA and ADSS Cymru believe that discretionary services like leisure and culture, are an essential part of local facilities that harness and enhance people's opportunities to 'look after' themselves and promote well-being. Their reduction and in some cases disappearance creates a

barrier to participation and accessibility within communities. Raising the profile of prevention and early intervention is critical to meeting the aspirations of the Act, but with the lack of any significant investment accompanying the Act, local authorities will struggle to give it the priority necessary and will be unable to invest in developing the capacity of neighbourhoods to offer the kind of creative offer that will make a difference to people's lives.

**Roles and Responsibilities of Partners** – The Codes of Practice and Regulations identify a number of new responsibilities for local authorities and similarly promote amongst partner agencies, in particular LHBs, a sense and duty of shared responsibility, since promoting well-being requires action by all agencies at all levels. The Codes of Practice and Regulations should be strengthened by being explicit in the expectations on partner organisations and specifically identifying sanctions for non-compliance by any of the partner agencies. In addition the Act requires a new way of working and thinking that encourages and requires people to take action to support their own well-being. This needs to be clearly communicated to the public so that a wider dialogue takes place, to ensure that the ideas and facilities develop through co-production.

**Training** – The workforce will be fundamental to the successful implementation of the Act, a workforce that is multi-agency and multi-disciplinary. The Act requires a very different way of working, particularly around the new approaches to assessment and eligibility. These new approaches will not be simple to apply and will challenge some of the existing practice and training. It will be key to get staff training and development right, in order to support staff to be able to meet the expectations set out in the Act. Time will also be required for this training to ensure that the changes become embedded into people's everyday practice. Some of this work has already started, for example local authorities having an increasing focus on outcomes, however the size of the changes required and the new expectations cannot be under-estimated.

**Children's Services** – The vision of the Act is welcomed, however it needs to be recognised that it appears to be more easily related to Adult Services and therefore Children's Services face particular challenges in meeting its aspirations. There is a danger that the current strengths of Children's Services are forced to fit into a comprehensive approach when they would work well, as now, in an aligned approach – in particular provisions under Section 17 of the Children Act still have a place under the Social Services and Well-being Act.

**The Commission on Public Service Delivery and Governance** – The Codes of Practice and Regulations prescribe and recommend different partnership footprints which in itself may cause some confusion due to the inconsistent approach adopted - from the LHB footprint for population assessments, to the public services footprint for Safeguarding Boards and national collaboration for some elements of the IAA Services. We would not to get too caught up on the potential implications falling out as a result of the Commission's work, as these are still unclear, however it is important to raise that there will inevitably be implications for local authorities, how they look in the future and what structures will be in place, which will impact on implementation of the Act.

Both the WLGA and ADSS Cymru welcome the opportunity to be involved in future debates about the issues considered in the consultation papers and remain committed to working with Welsh Government on Tranche 2 of the Act and its implementation.

## Chapter 1: Well-being

### 1. To what extent do you agree that this chapter will support local authorities to promote well-being in undertaking their social services functions?

Agree <input checked="" type="checkbox"/>	Tend to agree <input type="checkbox"/>	Tend to disagree <input type="checkbox"/>	Disagree <input type="checkbox"/>
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What will further support this?

We are pleased to see well-being at the centre of this legislation as it is critical if we are to make the changes necessary to deliver a different offer to people. It remains important to reinforce well-being as sitting outside of what has traditionally been the remit of social services and it is positive that this reinforces that well-being is a matter for the individual, family, community and wider partners to contribute to. The wider local authority and its associated services have to accept a shared responsibility, along with Health Boards, third and private sector agencies. All communication and training has to emphasize this point. It is important to recognize that intervention for safeguarding, mental health or for other reasons, when it is a single agency intervention, can be seen as cutting across these shared responsibilities, but it only serves to remind everyone of the need for trust between partners.

It is clear from some of the work undertaken on ICF that there is often little current knowledge about third sector and community group services/facilities amongst public sector workers and this presently limits the potential to connect people to facilities that can enhance their well-being. The guidance states that local authorities must ascertain and have regard to an individual's knowledge about third sector and community group services/facilities amongst public sector workers and this presently limits the potential to connect prevention and support services have suffered budget cuts alongside local authorities.

Future Generations and Well-Being Bill takes a more helpful 'whole local government' responsibility and there needs to be cross-referencing between the two pieces of legislation.

**There is a common point that runs throughout this consultation and that is the question of the sanctions that will be applied for non-compliance by any of the partner agencies, including, but not solely applying to local authorities – these need to be outlined in the regulations, so that everyone understands the consequences of non-compliance, there need to be consequences, to evidence that this is a requirement.**

<b>2. To what extent do you agree that this chapter will support local authorities to deliver better well-being outcomes for people who need care and support and carers who need support?</b>			
Agree <input type="checkbox"/>	Tend to agree <input checked="" type="checkbox"/>	Tend to disagree <input type="checkbox"/>	Disagree <input type="checkbox"/>
<p>What else would help support and deliver this?</p> <p>See comments above and the outcome statements are a helpful means of illustrating what well-being means in language that is more easily understood and that will remain important in everything that is done to explain to people the difference between the current approach and the aspirations of the Act. The context for the implementation of the Act is increasing cuts in local authority budgets and uncertainty about the future shape of local government since the Williams report. Therefore it will be essential that there are examples of best practice to illustrate that real and positive change is possible.</p> <p>Whilst the Act states that this is a whole council and partners' responsibility, the suggested performance measures relate to social services only. Consideration should be given as to how they can be broadened out to support wider engagement, with progress measures reflecting the contribution of all partners, not only the local authority. There is a risk that the local authorities will be judged, when partners do not perform well, rather than because of their own commitment/actions. How this is reflected in inspection standards should be given some thought.</p> <p>Key to this will be staff training, to ensure that the right outcomes are being identified for people to start off with - this in itself is not an easy task. Much work is occurring across the UK to determine the best approach to outcomes based practice. How to aggregate personal outcome measures into reported national data is complex and not without difficulties, not least as there are huge differences amongst professionals as to a workable interpretation of outcomes. SSIA is currently leading a national pilot to develop and test the feasibility of recording and reporting on personal outcomes – this pilot has been developed in partnership with Welsh Government and runs until December 2015. The pilot is using research and evidence from across the UK to support the work and as such is delivering a challenging training programme which requires commitment from front line staff as well as the wider department. This sees us building on the understanding and skills base of local authorities to respond to service users and carers in an enabling yet supportive manner. It will be vital to learn from the experience of this pilot as this will not only include some of the fundamental challenges to identifying people's well-being outcomes, but will also look at and test the feasibility of recording and reporting on personal outcomes. Some of the early signs from the pilot suggest that there are considerable challenges around the changes required and the capacity to do it.</p>			

<b>3. To what extent do you agree that this chapter supports local authorities to empower people to have an equal relationship with social services?</b>			
Agree <input type="checkbox"/>	Tend to agree <input checked="" type="checkbox"/>	Tend to disagree <input type="checkbox"/>	Disagree <input type="checkbox"/>
<p>Whilst the words are helpful, only training and staff development will begin to instil the change in behaviour that is necessary from professional workers. We have had a number of decades that have placed workers in an increasingly powerful position with users and carers and to move towards a more egalitarian position, where workers are expected to work alongside people will take time and energy and regular reminders from peers and managers; this is particularly the case in Children's Services - this has been echoed by Heads of Children's Services. There are three levels of engagement with people explicit in the Act: <i>well-being</i> (which is a whole council responsibility with partners; <i>care and support</i> (which people are encouraged to self-manage, supported to access, or which is delivered with/for them; and <i>protection</i> where intervention may be necessary against people's wishes, at least initially to protect or safeguard. Whist this approach is most obviously relevant to the first two, it does have a part to play in protection, through ensuring that people have good information about the action that has been taken, the route to advocacy and where necessary the process to follow to complain. In this respect, this chapter helps make the explicit context in which social services (and other services) operate.</p> <p>It has to be a shared responsibility for all other agencies too, so as not to leave local authorities feeling alone in having to make the changes necessary.</p> <p>Tools will be helpful to ensure that workers develop a newly creative repertoire of questions and conversation openers, which allow people to more openly share the issues, that they can identify, that will make a difference to their lives.</p> <p>Equally it will be helpful to have reference to relevant UN Principles and Conventions to allow people to assess for themselves whether they feel that they have an increasingly powerful and mature relationship with service providers generally.</p>			
<b>Chapter 2: Population Assessment</b>			
<b>4. To what extent do you agree that the proposed structure of the population assessment report is clear and appropriate?</b>			
Agree <input checked="" type="checkbox"/>	Tend to agree <input type="checkbox"/>	Tend to disagree <input type="checkbox"/>	Disagree <input type="checkbox"/>

We would welcome reference to mapping ‘existing services’ and including all the information held in IAA systems. Maintaining up-to-date information will always be challenging, but offering clarity about the need to locate services that are currently in place, particularly preventive services. This allows for the possibility of identifying a need when there may be a service already in place in third or private sector agencies, which has not been included and if it was included, that unmet need is no longer apparent.

The frequency set makes sense and whilst it is helpful that there is not an overly prescriptive approach, a template will be a helpful contribution towards consistency. We acknowledge that sections 100\101 offer guidance on how to present assessment findings, but it is still at a very general level. Whilst the guidance does set out some clear pointers – such as linkage to performance measurement framework as part of the National Outcomes Framework – this very broad approach means that every population assessment is likely to be very different in its format (and in turn variable in ease of use or usefulness). It will be helpful if a template is offered, posing key questions that are expected to be covered in the population assessment. It will need to be considered how this assessment can replace / incorporate any of the other data that is already being produced to avoid duplication.

There will be a real challenge for local authorities to produce a meaningful population assessment that covers a whole region. Much of the information required will be local data and will be used to commission local services at the community level. It would be reasonably straightforward to aggregate data as necessary (provided that local authority areas are collecting the same information in the same way) but the data will primarily exist and be used at a local level. A regional assessment would involve aggregating data for the publication of an assessment document, but the disaggregated data would be needed for local commissioning and planning.

**5. To what extent do you agree that this chapter provides for an effective assessment of the support needs of carers?**

Agree <input type="checkbox"/>	Tend to agree <input checked="" type="checkbox"/>	Tend to disagree <input type="checkbox"/>	Disagree <input type="checkbox"/>
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Key to this question is whether carers feel, or have been, fully engaged in their assessment of need. There are existing mechanisms and fora that should play a part in developing the assessment and inevitably this will highlight unmet need and gaps in service. Carers will subsequently need support in helping to play a part in developing and adjusting services and dealing with the timescale for delivering changes.

There are some concerns over the repeal of the Carers Measure and the impact this could have in diluting the responsibility of the NHS for leading on information and advice for carers – it will be important to demonstrate clearly how the aims of the



Measure are reflected in the Act given most of the responsibilities and performance measures rest with councils.

The current assessment framework in children's services considers caring as part of a holistic assessment and it will be important that this focus is not compromised,

**See the response to question 3 above**

**6. What arrangements should be put in place to further support those undertaking population assessments?**

See question 4 and the need for a template and some key questions, whilst also recommending that the population assessment is completed by an integrated team from the local authorities and the LHB

It is important that WG do not underestimate the pressures on local government resources and the capacity required to undertake detailed assessments. We would urge WG to be mindful of the pressures and ensure their expectations reflect them as it is these areas / resources that have been impacted upon as local authorities continue to meet the budget cuts imposed. In addition, following the recent announcement to cut the Improvement Grant which has an impact on the Local Government Data Unit, we need to be mindful of what resources are available to support local authorities and health boards in undertaking these types of assessments.

An understanding of projections and trends will add an important dimension to the assessments, helping to commission for emerging and future needs. Anticipating future need is especially important for developing preventative approaches. However, this is difficult and requires resource and expertise.

**7. To what extent do you agree that it is appropriate that population assessment reports are approved within local authorities by the full council on submission by the council's executive or board?**

Agree ☒

Tend to agree ☐

Tend to disagree ☐

Disagree ☐

This makes good sense but it should equally be required that the population assessment is approved by the executive group and full board of the Local Health Board.

<b>8. To what extent do you agree that the role of the lead co-ordinating body is sufficiently clear?</b>			
Agree <input checked="" type="checkbox"/>	Tend to agree <input type="checkbox"/>	Tend to disagree <input type="checkbox"/>	Disagree <input type="checkbox"/>
<p>What further detail should be included?</p> <p>The guidance seeks to be non-directive but once again LHBs need to be absolutely clear of their shared responsibilities for this part of the Act and that should be reinforced in guidance and regulations, making clear the consequences for non-compliance by any party.</p> <p>It will require a full and mutual understanding of the data currently collected by local authorities and LHBs, to avoid duplication of effort and confirming that the expectation is of a joint effort, rather than separate activities brought together into a final report.</p>			
<b>Chapter 3: Preventative Services</b>			
<b>9. To what extent do you agree that the requirements placed on local authorities to provide preventative services are clear?</b>			
Agree <input type="checkbox"/>	Tend to agree <input checked="" type="checkbox"/>	Tend to disagree <input type="checkbox"/>	Disagree <input type="checkbox"/>
<p>Section 134 broadly covers this issue. Again we suggest that a template may help to reinforce the need for each of the purposes for preventative services to be used in drawing together, in the population assessment, what is already in place and where are the gaps, to meet all of the purposes. Section 129 helpfully makes clear that achieving the purposes of prevention is a whole authority requirement, but perhaps not sufficiently emphasizing wider collaboration and prevention for children, young people and their families, where criminal justice agencies and schools will have role to play, as well as national and local third sector agencies whose focus is children. WG could play a helpful role in requiring a collaborative approach for preventative services through identifying the number of funding streams that are currently contributing towards prevention.</p> <p>It needs to be recognized however that whilst the development of preventative services is to be welcomed, given the very severe budget problems being faced by authorities and the lack of any significant investment accompanying the Act, it will remain difficult for local authorities to be able to invest in this area, as this will ultimately require disinvestment in other areas that are currently providing critical</p>			

frontline services. The cuts to public funding, and the scale of the reductions in budgets, particularly local authority budgets, is putting some preventative services at particular risk, e.g. closure of leisure centres, reduced hours for day activities, closure of community hubs and meeting places. WLGA and ADSS Cymru believe that a shortfall in funding, particularly in discretionary services like leisure and culture, is more than likely to hinder this as a form of preventative activity, as well as create a barrier to participation and accessibility within communities. A recent analysis of local authority budgets submitted as evidence to the Finance Committee identified that since 2009-10 cultural expenditure has significantly reduced, with sports and leisure services reducing by 27% and libraries 19% in real terms.

**10. To what extent do you agree that this chapter makes clear the requirement for preventative services to meet the needs identified in the population assessment undertaken as a result of section 14 of the Act?**

Agree <input checked="" type="checkbox"/>	Tend to agree <input type="checkbox"/>	Tend to disagree <input type="checkbox"/>	Disagree <input type="checkbox"/>
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This is broadly covered in section 134, but the provision of a template, as stated above, would be a useful additional source of clarification.

## Chapter 4: Social Enterprises

**11. To what extent do you agree that this chapter will support local authorities in their duty to promote social enterprises, co-operatives, user led services and the third sector?**

Agree <input checked="" type="checkbox"/>	Tend to agree <input type="checkbox"/>	Tend to disagree <input type="checkbox"/>	Disagree <input type="checkbox"/>
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What else is needed to support this duty?

The structure of the guidance is clear and again helpfully reiterates that it is a whole authority responsibility to promote user-led services. Yet again it will be helpful if the same duty to promote user-led services is confirmed for LHBs.

There are already a number of examples of cooperatives and social enterprises providing social care and wellbeing services in Wales and the feasibility of such arrangements is being actively pursued in other areas. Examples include 'Menter Fachwen' in Gwynedd, a social enterprise providing work experience and training for local people with a range of disabilities. However, we would contend that there remains a need for considerable development of this sector – again this is not

something that local authorities can do on their own. The role of other agencies, such as WG and the Wales Co-operative Centre, is vital to be able to support this. With a need for the right environment to be created that includes capacity building, collaboration, promotion of good practice and funding to support the agenda. This is something that can take a significant amount of time, effort and support. It is helpful that ADSS Cymru is close to securing a memorandum of understanding with Wales Cooperative Centre and Social Firms Wales to offer advice and support in the development of cooperative ventures that accord with this part of the Act, this could be very helpful in advising service areas that have less experience in the development of social enterprises, e.g. children's services.

**12. To what extent do you agree that progress on promoting the duty in Section 16 should be reported as part of the overall requirement to report on the population assessment?**

Agree <input checked="" type="checkbox"/>	Tend to agree <input type="checkbox"/>	Tend to disagree <input type="checkbox"/>	Disagree <input type="checkbox"/>
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Broadly yes, as the population assessment sets out what is required, hence it will be helpful to also report on the extent that needs are being met, or could be met by co-ops, social enterprises and user-led services and this will mean that agencies involved in delivering the new models of service are engaged in the population assessment. There will need to be a wider assessment of the market through existing market shaping responsibilities, though it is worth noting that given the organic nature of developments it would be difficult to compare like for like across local authority areas.

**13. To what extent do you agree that this chapter will support an environment where people can be supported to be involved in the design and delivery of services?**

Agree <input checked="" type="checkbox"/>	Tend to agree <input type="checkbox"/>	Tend to disagree <input type="checkbox"/>	Disagree <input type="checkbox"/>
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The principles are well set out in section 225

What else would support this?

A requirement that those agencies/groups/communities offering a different kind of service model, that is user-led, are invited to contribute to an assessment of the performance of public sector agencies (NHS and local authorities) in creating the right kind of environment – offering them a role in scrutinizing how well the Act is being implemented.

## Chapter 5: Provision of information, advice and assistance

**14. To what extent do you agree that the national standards for information, advice and assistance in this chapter will support local authorities to deliver a high quality Information, Advice and Assistance Service to all people?**

Agree <input type="checkbox"/>	Tend to agree <input checked="" type="checkbox"/>	Tend to disagree <input type="checkbox"/>	Disagree <input type="checkbox"/>
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The standards are helpful as they lend themselves to answer the ‘how do we..?’ question, which will help in planning the service. It is important that involving users in the design and review of the service features as a standard and we would welcome seeing a similar standard applied to other parts of the Act around this – see question 13 above.

It is helpful to have standards rather than being prescriptive in how an IAA service should be operated by a LA. The code recognises the importance of LHB’s providing information, though as mentioned previously it is not clear what sanctions would be applied if they failed to adhere to this – information provided by LHBs needs to be provided in an accessible form.

Local authorities already offer IAA services and these have been mapped out by work undertaken by SSIA ([http://www.ssiacymru.org.uk/home.php?page\\_id=8471](http://www.ssiacymru.org.uk/home.php?page_id=8471)). What is not clear is the expectations from WG on existing provision and how much change to these services is expected. The code of practice states that local authorities ‘**must** establish a team which reflects a mix of skills and experience from a range of professionals from the social care, health, third and independent sectors’, but provides no detail on how this should be done – is the expectation that local authorities will be housing a multi-agency information team? There are obvious costs and barriers to this responsibility and it would be better to use language around developing a team that builds on the existing IAA service - many local authorities have already established specialist social services duty teams made up of a range of specialist roles, e.g. Social worker, OT, etc. to provide a first port of call and information and advice.

There is an expectation that local authorities will maintain a directory of services which ‘**must** be accurate, up-to-date and relevant’ – this in itself is a significant challenge to be able to maintain.

As mentioned in the consultation on parts 3 and 4 of the Act the IAA service will provide the first port of call for people and at this stage a ‘simple’ assessment may be undertaken. It will be vital to ensure that those undertaking these assessments have the necessary skillset and experience to do this and this will not necessarily be able to be done by the first person that someone speaks to – the service will need to incorporate and link with a number of assessment teams, who will have the skills

and experience to be able to support people with a range of different needs, including both children and adults

We have a concern that the Act says that the IAA service is the responsibility of the Director of Social Services and this yet cuts across the theme of a whole authority approach when in a number places the single point of entry is a corporate responsibility.

**15. What more is needed in this chapter to ensure an Information, Advice and Assistance Service that is accessible and responsive to all people?**

It will be helpful to refer to a complaints procedure, so that people can see there is a route to take when things go wrong. This will link Part 2 of the Act with Part 10, Complaints, Representation and Advocacy Services. It will also be useful to develop a national benchmarking review so that best practice can be highlighted and poor practice eradicated.

**16. Are there elements of the Information, Advice and Assistance Service that could be better delivered through national collaboration between local authorities?**

Particularly so, where service providers work across local and regional boundaries, as it would encourage a more consistent approach to offering IAA. There will always be local access arrangements and local key contacts, but there needs to be a relationship between this work and the work that has already taken place on a national portal, by SSIA, to ensure that the learning from that project informs the development of local, regional and national approaches to IAA

SSIA's work on the citizen portal in support of the provision of IAA is aiming to scope out a national model, but it is clear from this work that implementation and running costs will need to be met. Similar statutory models such as the Family Information Services, introduced as part of the Childcare Act 2006, received funding to support implementation and delivery. However, recent research suggests that continued running costs have far exceeded provided funding, which local authorities have had to resource, at the expense of existing budget lines.

**Other**

**The Welsh Government is interested in understanding whether the proposals in this consultation document regarding part 2: general functions will have an impact on groups with protected characteristics. Protected characteristics are: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex, and sexual orientation.**

**17. Do you think that the proposals in this consultation will have any positive impacts on groups with protected characteristics? If so, which and why/why not?**

A great deal will depend on the quality of engagement with groups with protected characteristics – an understanding of the cultural differences is required and consideration given as to how to identify and include some of the smaller groups with protected characteristics, as they may not be easily featured in elements like the population assessment. However if that contact and engagement is serious, in listening to what people have to say about what interferes with them gaining access to services and being taken seriously and subsequently acting on their response, this part of the Act will have a positive impact on the groups of people set out above.

**18. Do you think that the proposals in this consultation will have any negative impacts on groups with protected characteristics? If so, which and why/why not?**

The 'easy to read' guidance is a good first step to offer information in a form that is more easily accessible and a helpful message that there is interest in hearing from children, young people, people with learning disabilities and other groups for whom this will be helpful. However for people whose first language is neither Welsh nor English, there needs to be an acknowledgement/requirement that information in a range of other languages and formats will be necessary, to reflect the diverse and changing nature of the Welsh population.

**19. Re-balancing the care and support system to deliver the new legal framework will require reprioritisation of resources. What are the key actions that need to be taken to achieve this?**

Training and staff development is referred to above and it stands as an imperative if the changes required are to become a common feature in the everyday practice of front-line staff of all agencies and all service areas of local authorities. It will also require encouragement from operational and strategic managers, elected members of councils and non-exec members of LHBs, by showing an understanding of the changes required and the challenges associated with making those changes.

In addition new technology will have to play a greater part in supporting choice and control, particularly where direct support contact is appropriately planned to reduce and this may require some additional resources to develop the technology and encourage its use.

<p><b>20. 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 tell us about them.</b></p> <p>None at present</p>

<p><b>Responses to consultations may be made public – on the internet or in a report. If you would prefer your response to be kept confidential, please enter YES in the box.</b></p>	
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