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Code of practice in relation to achieving well-being: working document Issued under Section 145 of the Social Services and Well-being (Wales) Act 2014



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Preamble

This Code of Practice is issued under Section 145 of the Social Services and Well-being (Wales) Act 2014. Local authorities, when exercising their social services functions, must act in accordance with the requirements of this code, unless it provides otherwise, and have regard to any guidelines set out in it. Social services functions are set out at schedule 2 of the 2014 Act. A requirement is expressed as "must" or "must not". Guidelines are expressed as "may" or "should/should not". This code will come into force on the date of commencement of the Act.

Introduction

This code is a working document and will be consulted upon in early 2015. The aim of this code is to set out performance requirements on local authorities in relation to well-being. This code specifies quality standards, information requirements and steps to be taken in relation to those.

This code applies to local authorities in relation to their social services functions. However there will be implications for partner bodies, including local health boards, the third and independent sectors and for people who need care and support and carers who need support in Wales.

This code of practice covers:

- Well-being
- Measuring well-being
- Quality standards for local authorities
- Performance measurement requirements

Context and purpose of this code

The Social Services and Well-being (Wales) Bill received Royal Assent on 1 May 2014 to become an Act of the National Assembly for Wales. The Act comes into effect in April 2016. The Social Services and Well-being (Wales) Act 2014 is available at: www.legislation.gov.uk/anaw/2014/4/enacted

The Social Services and Well-being (Wales) Act 2014 creates a new legal system for social services. Key changes are that the principle of social services is based on the well-being of people who need care and support and carers who need support. This focus on well-being, and greater voice and control for service users and carers, will set the foundations for improvement across the sector.

Section 5 of the Act puts a duty on local authorities to seek to promote the well-being of people who need care and support and carers who need support. The Code of Practice on General Functions issued under Section 145 of the Social Services and Well-being (Wales) Act 2014 sets out requirements to local authorities in relation to this duty.

Section 8 of the Act sets out that Welsh Ministers must issue a statutory statement relating to the well-being of people who need care and support and carers who need support. This statement must specify the outcomes that are to be achieved in terms of well-being and outcome measures by reference to which achievement of those outcomes is to be assessed. The statement of well-being outcomes to be achieved will be issued by Welsh Ministers and laid before the Assembly on commencement of the Act in 2016.

This code has been developed through consultation with partners and people who need care and support and carers who need support.

This code should be read alongside all of the Codes of Practice issued under Section 145 of the Social Services and Well-being (Wales) Act.

Well-being

Well-being is a broad concept that relates to all areas of a persons life and is defined in relation to a person in Section 2 of the Act.

Local authorities need to understand the well-being outcomes that people wish to achieve. The outcome statements set out in the Code of Practice on General Functions issued under Section 145 of the Act are the key areas that care and support can make a difference to improve well-being outcomes for people, these are:

- a. Well-being (I know and understand what care, support and opportunities are available to me and I get the help I need, when I need it, in the way I want it);
- b. Physical and mental health and emotional well-being (I am happy and I am healthy);
- c. Protection from abuse and neglect (I am safe and protected from abuse and neglect);
- d. Education, training and recreation (I can learn and develop to my full potential and I can do the things that matter to me);
- e. Domestic, family and personal relationships (I belong and I have safe and healthy relationships);
- f. Contribution made to society (I can engage and participate and I feel valued in society);
- g. Securing rights and entitlements (My rights are respected, I have voice and control, I am involved in making decisions that affect my life, my individual circumstances are considered, I can speak for myself or have someone who can do it for me and I get care through the Welsh language if I need it);
- h. Social and economic well-being (I am supported to work, I have a social life and can be with the people that I choose, I do not live in poverty and I get the help I need to grow up and be independent);
- i. Suitability of living accommodation (I have suitable living accommodation that meets my needs).

Measuring well-being

The national outcomes framework for people who need care and support and carers who need support will evidence whether well-being is achieved. The national outcomes framework for people who need care and support and carers who need support can be seen at:

www.wales.gov.uk/topics/health/socialcare/well-being/?lang=en

The national outcomes framework will be a key tool to track progress locally and nationally towards the transformation of care and support services. This framework will measure how much difference care and support is making to people's lives.

People's personal well-being outcomes will hook on to the outcome statements, set out in the national outcomes framework, and will ensure that services are securing well-being for people who need care and support and carers who need support in Wales.

A performance measurement framework for care and support services will underpin the national outcomes framework and evidence the contribution that services are making in supporting people to achieve the well-being set out in the outcomes framework.

The purpose of a performance measurement framework is to:

- Provide national, consistent and robust evidence in relation to the provision of well-being outcomes, that will evidence responsibility and accountability for local delivery to the Welsh Ministers;
- Be outcomes focussed and drive the shift in service provision to focus on well-being outcomes for people;
- Enable people themselves to understand the quality of service they are entitled to and to make informed decisions about their care and support;
- Support persons providing care and support to secure well-being outcomes for people, and use this evidence to drive service improvement and learn and improve, including ensuring commissioned services meet the needs of the population;
- Enable persons providing care and support to compare and benchmark their performance against others; and,
- Underpin and inform the regulation and inspection regime.

The performance measurement framework will be made up of quality standards and measures that evidence activities against the quality standards.

Quality standards for local authorities

Quality standards for local authorities describe the activities that contribute to the achievement of well-being outcomes. They will support service improvement and transformation. Local authorities **must** achieve the quality standards set in this code in relation to achieving the well-being outcome statements.

1. Local authorities must work with people who need care and support and carers who need support to define and secure the personal well-being outcomes they wish to achieve and will ensure that they measure the impact of the care and support they deliver on people's lives and the achievement of personal outcomes.

In order to achieve this, local authorities **must**:

- a. Work with partners to ensure access to clear and understandable information, advice and assistance to support people to actively manage their well-being and make informed decisions.
- b. Work with people, as partners, to prevent the need for care and support and with other partners to arrange services in a way that prevents or delays peoples need for care and support.
- c. Work with people to undertake an assessment of personal outcomes in a timely manner.
- d. Ensure decisions made have regard to a person's individual circumstances and treat people with dignity and respect and promote peoples human rights.
- e. Ensure people have control over the planning and delivery of their care (or have someone who can do it for, or with, them).
- f. Ensure people who have a care and support plan have a named contact who shares relevant information with partners to allow a seamless transition of care and support across services.
- g. Work with other professionals, including providers to facilitate and lead a multidisciplinary plan for care and support.
- 2. Local authorities must work with people who need care and support and carers who need support and relevant partners to promote, protect and improve people's physical and mental health and emotional well-being.

In order to achieve this, local authorities **must**:

- a. Jointly develop with partners and people the means to promote and support people to maintain a healthy lifestyle.
- b. Encourage and empower people to manage their own health and well-being, be active and benefit from proactive, preventative care and support.
- 3. Local authorities must prevent, protect and safeguard people who need care and support and carers who need support from abuse and neglect or any other kinds of harm.

Abuse, neglect and harm are defined in the Social Services and Well-being (Wales) Act 2014.

In order to achieve this, local authorities **must**:

- a. Respond effectively to changing circumstances and regularly review achievement of personal well-being outcomes.
- b. Provide care and support to people in need of protection from identified risk and harm.
- c. Develop suitable arrangements for people who put their own safety or that of others at risk to prevent abuse and neglect.
- d. Manage risk in ways which empower people to feel in control of their life.
- e. Support people to take controlled risks, consistent with their age, maturity and understanding that are relevant.
- f. Work in partnership with others to investigate allegations of abuse and neglect to ensure that people are protected from harm.

4. Local authorities must actively encourage and support people who need care and support and carers who need support to learn and develop and participate in society.

In order to achieve this, local authorities **must**:

- a. Support people to do the things that matter to them to achieve their personal outcomes.
- b. Encourage people to be active members of their communities, and to support each other in reducing social isolation.
- 5. Local authorities must support people who need care and support and carers who need support to safely develop and maintain healthy domestic, family and personal relationships.

In order to achieve this, local authorities **must**:

- a. Support people to maintain the relationships that matter to them, consistent with safeguarding needs.
- b. Help people to recognise unsafe relationships and protect themselves from abuse and neglect.
- c. Take the views of people's families, carers and other personal relationships into consideration when assessing their care and support needs, if appropriate.
- d. Provide people with stable and consistent care and support placements.
- 6. Local authorities must work with and support people who need care and support and carers who need support to achieve greater economic wellbeing, have a social life and live in suitable accommodation that meets their needs.

In order to achieve this, local authorities **must**:

- a. Support people to participate as active citizens both economically and socially.
- b. Support people in accessing financial advice and help with benefits and grants.
- c. Provide access to services through the medium of Welsh, in line with the Welsh Governments' framework for Welsh Language, 'More Than Just Words' or in other languages of choice where necessary.
- d. Support people to access living accommodation that meets their needs and facilitates independent living.

Performance measurement requirements

In assessing whether the quality standards are achieved, different types of performance information will be required.

Performance information will:

- Relate to purpose; the promotion of well-being outcomes and what matters to people;
- Show variation over time:
- Be used by the sector to understand service provision and to learn and improve; and,
- Be used by front line staff and embedded in practice.

Performance measures will be outcome focussed and evidence activity towards achieving the quality standards and the well-being of people who need care and support and carers who need support.

Distance travelled performance measures aggregate people's progress towards agreed personal well-being outcomes. Local authorities **should** engage people in conversation to determine personal well-being outcomes and progress made in achieving these. In assessing the impact of care and support on people's lives local authorities **must** measure the distance travelled of achieving an individual's personal outcomes. Local authorities **should** use these measures as a tool to embed coproduction into everyday practice.

Satisfaction performance measures detail people's experience of care and support. These measures allow services to manage and improve. These measures can be collected using a number of ways including a survey. Local authorities **must** collect the satisfaction measures set out in this code. Local authorities **must** work with people to understand reasons for low and high satisfaction scores, in any of the subjective satisfaction measures. Local authorities **must** use this information to understand what they might do differently and how they can learn and improve.

Local authorities **should** consider any relevant advice and most recent inspection report from the Care and Social Services Inspectorate Wales (CSSIW) to learn and improve.

Local authorities **should** take into consideration any other available information on effectiveness of care and support. This may include people's stories that detail the experience behind their care and support. People's stories will provide a more enriched account to accompany an evidence source that details whether what matters to that person has been achieved, and can be aggregated to look at whether outcomes for individuals have been achieved. This can promote sharing best practice and developing an understanding of local performance improvement.

Local authorities **must** provide the following performance measures to the Welsh Government annually from May 2017 onwards. The annual data must reflect a financial years worth of data (the first year will detail the financial year 2016-17), in relation to people who need care and support and carers who need support.

The measures have been mapped to the standards, by reference to which performance in achieving the quality standards is to be assessed.

- 1. The percentage of people who have received care and support through the Welsh language (or language of choice) [Standard 6]
- 2. The percentage of people reporting they have received the right information or advice when they needed it [Standard 1]
- 3. The percentage of people reporting they were treated with dignity and respect [Standard 1]
- 4. The percentage of people reporting they are supported to do what matters to them [Standard 4]
- **5.** The percentage of people reporting that their accommodation is suitable for their needs **[Standard 6]**
- 6. The percentage of people (aged10+) reporting that they feel safe [Standard 3]
- 7. The percentage of people aged (16-24) reporting they received advice, help and support to prepare them for adulthood [Standard 6]
- 8 The percentage of people with a care and support plan who have written information of their named lead practitioner responsible for the co-ordination of the care and support planning and review [Standard 1]

- **9.** The percentage of people reporting they felt involved in any decisions made about their care and support **[Standard 1]**
- 10. The percentage of people who are satisfied with care and support that they received [Standard 1]

In addition, the following performance information is to be provided for all carers who need support:

- **11.** The percentage of carers reporting they feel supported to continue in their caring role **[Standard 5]**
- **12.** The percentage carers reporting they felt involved in designing the care and support plan for the person that they care for **[Standard 5]**

In addition, the following performance information is to be provided for all adults (aged 18 or over) who need care and support:

- 13. The percentage of adult protection referrals where the risk has been managed [Standard 3]
- **14.** The percentage of unscheduled admissions of older people who are receiving care and support services (aged 65 or over) to hospital **[Standard 3]**
- **15.** The rate of delayed transfers of care of older people (aged 75 or over) for social care reasons per 1,000 population **[Standard 2]**
- **16.** The percentage of adults at the end of re-ablement phase who
 - a. have a reduced package of care and support [Standard 2]
 - b. have no ongoing package at the time of ending and 6 months later [Standard 2]
- **17.** The percentage of adults who ceased receiving a package of care and support to live independently **[Standard 2]**
- **18.** The rate of adults supported to live in their own home and community per 1,000 population **[Standard 2]**
- **19.** The average length of time older people (aged 65 or over) are supported in care homes per 1,000 population by the local authority **[Standard 2]**

In addition, the following performance information is to be provided for all children who need care and support:

- **20.** The percentage of looked after children (aged 10 or over) reporting that they enjoy school, recreation or training **[Standard 4]**
- **21.** The percentage of re-registrations of children on Child Protection Register (CPR)
 - a. due to the same circumstances [Standard 3]
 - b. due to changing circumstances [Standard 3]
- **22.** The average length of time of children on the CPR [Standard 3]
- 23. The percentage of children seen by a registered dentist within 3 months of becoming looked after [Standard 2]
- **24.** The percentage of looked after children registered with a GP [Standard 2]

- 25. The percentage of children achieving educational targets set by their teacher (this will include the current Key Stage/Core Subject Indicators for those children and young people as appropriate) [Standard 4]
- **26.** The percentage of looked after children experiencing (2) or more educational placement moves in the year **[Standard 4]**
- **27.** The percentage of looked after children on 31 March who have had three or more placements during the year [Standard 5]
- **28.** The percentage of care leavers in education, training or employment continuously for 3 months, 12 months and 24 months after leaving care **[Standard 6]**
- **29.** The percentage of homeless young people (aged 16-21) provided with suitable accommodation **[Standard 6]**
- **30.** The percentage of children supported to stay with their family [Standard 5]
- **31.** The percentage of parents who felt involved in decisions made about their child's care and support **[Standard 6]**

In order to ensure that the performance measures are comparable and consistent, local authorities **must** comply with technical guidelines in relation to the performance measures stated. This will be stated when this code is issued for consultation in early 2015.