# **Welsh Language Impact Assessment**

October 2015

# **Welsh Language Impact Assessment**

Title:			WLIA Reference No (completed by WLU):				
	(complete)	<i></i>					
Co-operation	& Partnership	under Part 9					
of the Social S	Services & Wel	being					
(Wales) Act 2	014						
Name	of person com	pleting form:					
		Date:	October 20	015			
		Policy lead:	Steve Vau	ghan			
	Co	ntact details:	029 2082 3	3498			
Programme/Pi	roject Type						
Policy			☐ Projec	ct or p	rogramme		
Legislation			□ <b>5</b>		.1 .1		
Grant	hango		Resea	rcn, e	valuation		
Business cl	_		☐ Servic	Δς			
Infrastructure Services							
Construction, Capital  ICT Contracts, tenders							
Other (Plea	ase specify belo	w)	_				
Costs: How much is the projected whole life cost for the programme/project?							
If below £25k, then a full WLIA is not always required (see guidance).							
Under £25k         £25k - £49k         £50 - £249K         £250K - £1m         Over £1m							
					$\boxtimes$		
Of the above, please provide details if there are any identified costs directly associated							
with the Welsh language?							
How long is the programme/project expected to run?							
Up to 1 yr	Up to 2yrs	Up to 5yrs	Up to 10y		More than	Unknown	
					10 yrs		
					$\boxtimes$	L	
Kev mileston	e dates for the	programme/	project:				
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This Welsh language impact assessment should be read in conjunction with the other Welsh Language impact assessments undertaken in relation to the Act. Part 9 of the Act in relation cooperation and partnership will in itself impact upon all user groups including children and young people and their families, older people, people with disabilities, people with mental health problems, carers, people who misuse substances, etc. It also applies to a wide range of functions including assessment, care planning, safeguarding and the commissioning and provision of services. Hence the need to read this document in conjunction with other Welsh Language Impact Assessments.

Two consultation events were held as part of the consultation process. The purpose of these was to:

- Promote engagement with the consultation
- Provide a base level of understanding to key stakeholder groups of areas we were consulting on.

Attendees were asked to participate in discussions on the implementation of the regulations, and also to share information from the events with their wider networks to provoke deeper engagement with the proposals and a wider span of consultation responses.

The first event was held on 21 May in St George's Hotel, Llandudno. The second was held on 4 June in the Liberty Stadium, Swansea with 200 attendees overall, representing a range of organisations. The range of stakeholders included representation from:

- Age Alliance Wales
- British Deaf Association
- Care Council for Wales
- Children in Wales
- College of occupational therapists
- CSSIW
- Disability Wales
- Learning Disability Wales
- Local authorities
- Local Health Boards
- WLGA
- RNIB Cymru
- Public Health Wales
- Office of the Older People's Commissioner
- North Wales Social Services Improvement Collaborative.

Workshops were held at the events on each of the parts of the Act subject to consultation under Tranche 2. The content of these workshops was tailored to suit the subject matter but at the core of each was a presentation from officials and group discussions and activities.

The comments and outputs from these events were considered alongside the formal written responses in order to inform the final regulations, code(s) of practice and, in respect of Part 9 statutory guidance.

In addition to this public consultation process, the proposals were discussed with the stakeholder reference group as well as the following groups: North Wales Directors, National Commissioning Board, National Provider Forum, Learning Disability Advisory Group, Care Homes Steering Group, National Partnership Forum for Older People, Cymru Older People's Alliance South, Wales Carers Alliance and the National Citizens Panel.

A 12 week public consultation on these regulations and accompanying Code of Practice ran between 8/5/15 and 31/7/15. The Consultation Summary Report can be found at:

http://gov.wales/consultations/healthsocialcare/part9/?status=closed&lang=en

## **Competition Assessment**

The statutory framework will consist of three main elements:

- 1- the Act itself:
- 2- regulations made under the Act; and
- 3- codes of practice/statutory guidance.

These three elements work together to form the framework within which social services will operate from April 2016.

#### STAGE 1: PLANNING

# What are the aims and objectives of the policy? What are the desired outcomes/ what constitutes 'success'?

The overall effect of the regulations is to provide greater clarity, consistency and quality of care and support for individuals and carers. They will help Local Health Boards and local authorities to create an infrastructure through regional partnership boards, to progress the integration of services where appropriate. The regulation making powers will ensure that local authorities and Local Health Boards work effectively together to plan and ensure the delivery of integrated services, care and support to best meet the needs of people in their local area. This will include the development of new models and shifting the focus towards preventative services and early intervention. The regulations are also required to replace existing regulations that will be repealed when the Act comes into effect in 2016.

While the focus of the regulations of the Act will be on improving outcomes and well-being, the intention of the regulations in Part 9 is also to improve efficiency and effectiveness of service delivery. The starting point for this is through section 14 of the Act, which requires local authorities and Local Health Boards to jointly undertake an assessment of needs for care and support, support for carers and preventative services and the range and level of services required to meet these needs. This will include an assessment of the capacity of current services to respond to the needs of people who would prefer to receive their services through the medium of the Welsh Language. This will in turn have an impact on the commissioning of services with the ability to provide services through the Welsh language being part of service specifications. (Contracting out public service contracts and the Welsh language – Advice under section 3 Welsh Language Act 1993). This will have further implications in terms of monitoring the service providers' ongoing capacity to provide services

through the Welsh language. Commissioners will need to decide exactly what is required of tenderers to deliver Welsh language requirements throughout the whole life of the contract. The advantages of integration are that Local Health Boards and local authorities are often purchasing services from the same providers such as, for example, care homes. An integrated approach to commissioning should improve the capacity of both organisations to conduct the commissioning process through the medium of Welsh and offer a more coherent approach to working with providers to offer services through the Welsh language.

The regulation making powers within section 166 to 168 of the Act (partnership arrangements) enable Welsh Ministers to ensure the appropriate structures (partnership arrangements and partnership boards) and resources (including staff and pooled budgets) are in place to enable the provision of integrated services to respond to the joint assessment.

The Act defines wellbeing, and this definition includes 'securing rights and entitlements'. For many Welsh speakers securing rights and entitlement will be being able to use their own language and will allow them to communicate and participate in their care as equal partners. Therefore whether people get care through the Welsh language is a key aspect of the well-being statement. This will be measured in the national outcomes framework for social services.

Success will be monitored by the achievement of well-being outcomes, using the national outcomes framework. Outcome measures will be stated in relation to achieving the outcomes set out in the well-being statement.

Outcome statements include whether people are receiving care and support through the medium of Welsh. The outcome measures will identify and highlight what needs to be done to improve people's wellbeing, rather than more traditional measures which focus on process..

The code of practice in relation to measuring social services performance (issued under section145) sets out a performance measurement framework for local authorities; this includes quality standards for local authorities in relation to their social services functions and performance measures. The quality standards require local authorities to provide access to services through the medium of Welsh, in line with the Welsh Government's for the Welsh Language, 'More than just words' or in other languages of choice.

The desired outcome for Part 9 is that through cooperation and partnership we can improve outcomes for individuals and their families and make more effective use of resources. This will include the provision of services both in terms of assessment and direct care provision through the medium of the Welsh language.

Partnership boards will have a key role to play in relation to bringing together key partners to determine where the integrated provision of services, care and support will be most beneficial to people within their region. Partnership boards will also play a vital role in the oversight and governance of partnership arrangements. With the move towards pooled budgets and resources, it is essential that effective governance and accountability arrangements are in place.

Sections 166, section 167(3) and section 168 provide Welsh Ministers with the provision to make regulations requiring local authorities and Local Health Boards to enter into partnership arrangements and to establish partnership boards (including associated funding arrangements).

Section 166 allows for Welsh Ministers to specify through regulations the partnership arrangements to be made between two or more authorities, or between one or more local

authorities and one or more Local Health Boards. This assumes partnership arrangements will be between local authorities and respective Local Health Boards in the area and that there will be no change to the existing Local Health Board footprints.

Partnership arrangements are arrangements for carrying out functions of a local authority specified in regulations which are social services functions or in the opinion of the Welsh Ministers, have an effect on, or are affected by, a local authority's social services functions, or functions specified in regulations of a Local Health Board or an NHS trust. It is not the intention to expand the functions of either a local authority or a LHB which can be delegated beyond those allowed in existing legislation.

In relation to section 166, the regulations require partnership arrangements to be established on the following basis:

- Aneurin Bevan University Health Board and Monmouthshire, Newport, Caerphilly, Torfaen and Blaenau Gwent local authorities.
- Betsi Cadwaladr University Health Board and Flintshire, Wrexham, Anglesey, Gwynedd, Denbighshire and Conwy local authorities.
- Cardiff and Vale University Health Board and Cardiff and the Vale of Glamorgan local authorities.
- Abertawe Bro Morgannwg University Health Board and Swansea, Neath Port Talbot and Bridgend local authorities.
- Cwm Taf University Health Board and Rhondda Cynon Taf and Merthyr Tydfil local authorities.
- Hywel Dda University Health Board and Pembrokeshire, Carmarthenshire and Ceredigion local authorities.
- Powys teaching Health Board and Powys local authority.

Regulations under section 166(3)(d) require the sharing of information between local authorities and Local Health Boards, between teams established under section 166(4)(b) and to support the Regional Partnership Board. This is vital to the work in assessing the needs of individuals and carers and developing appropriate care and support arrangements.

Regulations under section 166(4) (b) will be used to require the establishment of teams for Integrated Family Support Services. The key purpose of Integrated Family Support services (IFSS) is to ensure families are provided with services and support in order to safeguard the welfare of their children and enable them to remain safely with their families. A key principle is that children are best looked after within their families, with their parents playing a full part in their lives – unless compulsory intervention is necessary. Section 167(1) and (2) allows a local authority and a Local Health Board to pay towards the expenditure incurred for the purpose of, or in connection with, partnership arrangements by making payments directly or by contributing to a pooled fund. It also allows a local authority and LHB to provide staff, goods, services, accommodation and other resources. Section 167(3) enables Welsh Ministers to make regulations requiring the establishment of a pooled fund and determining the amount of contributions to a pooled fund.

The Partnership Arrangements Regulations require the establishment of pooled funds in relation to:

- The exercise of care home accommodation functions;
- The exercise of family support functions;
- Functions that will be exercised jointly as a result of an assessment carried out under section 14 of the Act or any plan prepared under section 14A.

These duties will take effect from 6 April 2016, with the exception of the duty to establish pooled funds in relation to the care home accommodation functions, which comes into force on 6 April 2018.

The Welsh Government will expect to see an integrated approach to the development of early intervention and preventative services. There is a specific requirement for pooled funds in relation to the Integrated Family Support Services. Local authorities have been allocated funding as part of a local settlement to enable integrated family support services to be established and to cover the health and social care costs of the service. This will form the basis of a formal partnership with a pooled fund.

Whilst the requirement for pooled funds in relation to the care home accommodation functions is not until April 2018, Local Health Boards and local authorities will be expected to:

- Undertake a population needs assessment and market analysis to include the needs of self funders.
- Agree an appropriate integrated market position statement and commissioning strategy.
  These will specify the outcomes required of care homes, including the range of services
  required. There should also be an agreement on the methods of commissioning (for
  example, some services may require a block contract, step up, step down intermediate
  care services, respite care, etc).
- Agree a common contract and specification.
- Develop an integrated approach to agreeing fees with providers.
- Develop an integrated approach to quality assurance.
- Adopt a transparent use of resources. Budgets must be aligned with overall expenditure identified, together with the financial commitments of both agencies to the commissioning of care homes. These arrangements will need to be subject to a written agreement.

The purpose is to ensure that Local Health Boards and local authorities work together to maximise their influence to shape the future development of services. This includes ensuring there is sufficient capacity and an appropriate range of good quality services to respond to the needs of people in their region. This should encompass both local authority placements and NHS funded placements (funded nursing care and continuing NHS healthcare). It should also encompass short term interim placements to facilitate transfers of care from hospital and choice of accommodation; intermediate care beds (step up / step down), long term placements, respite care and other services that partners wish to commission from care homes. In developing their integrated approach to commissioning, the partners will need to take account of the needs of people funding their own care.

Comprehensive monitoring arrangements must be put in place to provide relevant assurance to partners that their shared aims and objectives are being delivered.

Section 168 allows for Welsh Ministers to specify through regulations the establishment of partnership boards in respect of partnership arrangements made under section 166. In relation to section 168, regulations require a Regional Partnership Board to be established to secure strategic planning and partnership working between local authorities and Local Health

Boards to ensure effective services, care and support are in place to best meet the needs of the respective population. The regulations require the establishment of seven regional partnership boards, namely Gwent regional partnership board, North Wales regional partnership board, Cardiff and Vale regional partnership board, Western Bay regional partnership board, Cwm Taf regional partnership board, West Wales regional partnership board and Powys regional partnership board.

The objectives of the regional partnership boards are:

- (a) To ensure that the partnership boards work effectively together to:
- (i) Respond to the population assessment carried out in accordance with section 14 of the Act and
- (ii) Implement the plans for each of the local authority areas covered by the board which local authorities and local health boards are each required to prepare and publish under section 14A of the Act.
- (b) To ensure that the partnership bodies provide sufficient resources in accordance with their powers under section 167 of the Act.
- (c) To promote the establishment of pooled funds where appropriate.

These requirements will require regional partnership boards to identify opportunities from their assessments of the population and service requirements to identify opportunities for the integration of services where this will improve outcomes for people in need of care and support and their families and to make more effective use of resources. They will also identify opportunities to improve the health and wellbeing of citizens.

The membership of the boards will secure the engagement of both Local Health Boards and local authorities, together with representatives of the third and independent sectors and of people who use care and support services and carers. The regional partnership boards will also be able to co-opt other members as appropriate

These arrangements have been designed to build 'support and challenge' into the development and management of services with all sectors represented and users and carers. The representatives of users, carers, the third and independent sectors will serve to ensure that the contributions and views of these stakeholders are taken into account.

Regional partnership boards must prepare a report on the extent to which the board's objectives have been achieved. These reports will be used to evaluate progress and to ensure that opportunities to improve outcomes and make more effective use of resources are being identified and taken forward.

To support local government and its partners in making the transition to the new arrangements of the Act, a Delivering Transformation Grant was made available to the six regional partnerships and selected national partners to enable local government and its partners to put in place the requirements of the new Act in 2013/14 and 2014/15. Welsh Government has doubled the funding available through this grant to £3m in 2015/16.

What policy options have been considered?

What impacts will there be if the policy is *not* implemented?

The Social Services and Well-being (Wales) Act gained royal assent in May 2014 and the impact assessments conducted as the Bill was being scrutinised by the National

Assembly for Wales, identified significant impacts if the Act was not implemented. These included the unsustainability of social services in Wales as a result of both demographic changes, that services were becoming increasingly focused and restricted to those at a critical level, and the lack of any early intervention and prevention in the system.

A Welsh Language Impact Assessment was conducted on the Social Services and Well-being (Wales) Bill to support the scrutiny process through the National Assembly for Wales. The impact assessment identified that the Bill was designed to create a fairer and more equitable system for all people eligible for care and support, and that there were opportunities to increase the use of the Welsh language in service provision.

While the current standards are based on the Welsh Language Act 1993, new standards developed under the *Welsh Language (Wales) Measure 2011* will take effect from April 2016 at the same time that the Social Services and Well-being (Wales) Act 2014 is implemented.

The key principles of 'More than just words: the Strategic Framework for Welsh Language Services in Health, Social Services and Social Care' have been embedded into the Act, including that all people and organisations involved in the delivery of Social Services and social care must have regard to the right of people to communicate in Welsh.

Sustainable Social Services for Wales outlines the challenges facing social services in Wales, and the Welsh Government's approach to meeting those challenges, including developing a programme of policy and legislation.

The code of practices in relation to assessing and meeting the needs of individuals is underpinned by the principles set out in the Act. The codes set out that the assessment process must have regard to the characteristics, culture, language and beliefs of the individual. They also set out that the determinations of eligibility for care and support should be undertaken through the person's language of need.

The process should also recognise the concept of language need, and details that the assessments of need should be conducted through the medium of English or Welsh (as appropriate to the individual or family concerned).

This will ensure that individuals are able to receive services in their own language throughout the process of identifying and meeting care and support needs.

The code of practice also makes it clear that the requirement for an assessment to be in the medium of Welsh should <u>not</u> delay the process of assessing the needs of an individual.

During the process, an individual should be able to fully participate by being able to express themselves through their preferred language and means of communication.

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The process of assessing and meeting the needs of individuals also requires local authorities to meet the National Minimum Core Data Set (NMCDS). A requirement of the NMCDS is that the recording of the assessment must be in the preferred Language / Communication as appropriate to the needs of the child or adult whose needs are being assessed.

The Act specifies the legislative framework for social services and social care in Wales and gives effect to the policy stated in the White Paper Sustainable Social Services for Wales: A Framework for Action.

The timetable ensures the full suite of subordinate legislation is in place by April 2016.

The inclusion of Welsh language requirements within the commissioning process will serve to ensure that organisations priding direct care and support such as home care, residential care, family support services, etc. should have the appropriate capacity to provide services through the Welsh language.

# Does the programme demonstrate a clear link with the Welsh Government's strategy for the Welsh language - laith fyw: laith byw?

A Ministerial commitment was given that the regulations and guidance which underpin the Social Services and Well-being (Wales) Act would have due regard to the Welsh Language. As a result of this, regulations, and codes of practice are all underpinned by the principles set out in the Act, which contain an overarching duty at 6(2)(c) that any person exercising a function under the Act must 'have regard to the characteristics of culture and belief of the individual which includes language'.

The key principles of 'More than just words: the Strategic Framework for Welsh Language Services in Health, Social Services and Social Care' have been embedded into the Act, that all people and organisations involved in the delivery of social services and social care must have regard to the right of people to communicate in Welsh.

The Social Services and Well-being (Wales) Act addresses many of the aims as set out in "laith fyw: iaith byw - Strategaeth y Gymraeg 2012-17" ("A living language: a language for living - Welsh language strategy 2012 -17"). The regulations, in relation to assessing the need of individuals, makes provision for 5 of the aims to:

- increase their awareness of the value of the language
  - strengthen the position of the Welsh language in the community
  - increase opportunities for people to use Welsh in the workplace
  - improve Welsh language services to citizens
  - strengthen the infrastructure for the language, including digital technology.

<sup>&</sup>lt;sup>2</sup> http://wales.gov.uk/docs/dhss/publications/121121narrativeen.pdf

## 1. To increase their awareness of the value of the language

Within the regulations for assessment under the Social Services and Well-being (Wales) Act the requirement has been made to ensure that the recording of the assessment of need must be in the preferred language / communication style of the individual whose needs are being assessed. Additionally, individuals and their families should be able to fully participate in the process by having all relevant information available in a format that is accessible to them including through their language of choice and preferred means of communication. Information must be accessible through the medium of Welsh and English reflecting the Welsh Government Strategy 'More than Just Words' and in due course be compliant with the new Welsh Language Standards.

# 2. To strengthen the position of the Welsh language in the community

The primary objective of the policy is to promote an individual's independence and ensure they have a stronger voice and control over their care and support. All people and organisations involved in the delivery of social services and social care must have regard to the right of people to communicate in Welsh. Additionally, the Social Services and Well-being (Wales) Act provides for a fairer and more equitable access to and provision of care and support, this will have a positive impact on Welsh speakers and predominantly Welsh speaking communities where more services are available in Welsh.

# 3. To increase opportunities for people to use Welsh in the workplace

The Social Services and Well-being (Wales) Act places a duty on any persons exercising its functions to seek to promote the well-being of individuals, including a duty to have regard to the characteristics, culture and beliefs of the individual (including language). This strengthens the promotion and use of the Welsh language to improve the well-being of people and the quality of care and support.

## 4. To improve Welsh language services to citizens

Local authorities should make sure Welsh language services are built into the process of care and support planning. The code of practice for assessment sets out that the assessment process must be conducted through the medium of English or Welsh (as appropriate to the individual or family concerned). This will ensure that the individual is able to receive services in their own language throughout the process of identifying and meeting care and support needs.

For many Welsh speakers, language is an integral element of their care, e.g. some people are vulnerable and giving them the responsibility of asking for services through the medium of Welsh can contribute to their anxiety. It is the responsibility of social services to deliver appropriate services that meet users' language needs; this is referred to in 'More than just words' as the "Active Offer".

Section 14 of the Act requires that local authorities and health boards must jointly carry out an assessment of the needs for care and support, and the support needs of carers in the local authority's area (population needs assessment). This

assessment must also identify the range and level of services required to meet those needs including how these services will be delivered through the medium of Welsh.

## 5. To strengthen the infrastructure for the language, including digital technology.

The information, advice and assistance service will be available online, in addition to other methods, in an accessible format and will include information about how to access the care and support service.

From March 2016 new Welsh Language Standards will come into force for 26 public service bodies, which is the same implementation period for the Social Services and Well-being (Wales) Act.

The Welsh Language Standards (No 1) Regulations 2015, which were approved by the National Assembly for Wales in March 2015, set out the following standards:

- service delivery standards and compliance notices must require a body to comply with certain standards. This will apply to all services providing direct care.
- policy making standards
- operational standards and a compliance notice must require a body to comply with certain standards
- promotion standards and a compliance notice must require a body to comply with certain record keeping standards
- supplementary matters

These standards will enable the Welsh Language Commissioner to place duties in relation to the Welsh language on Local Authorities, National Park Authorities and Welsh Ministers.

Local authorities responsible for the implementation of the Social Services and Well-being (Wales) Act must also have regard to the standards and compliance notices which will be issued by the Welsh Language Commissioner in autumn 2015, and come into force in April 2016.

# What are the impacts/ effects (both positive and/or adverse) on the Welsh language you have identified at the initial planning stage

i.e. Welsh speakers, Welsh language communities, Welsh medium education, Welsh learners, services available in Welsh?

The Social Services and Well-being (Wales) Act, and its associated legislation, provide for a fairer and more equitable access to the provision of care and support. This will have a positive impact on Welsh speakers, and predominantly Welsh speaking communities, as a result of there being more services available in Welsh in the future.

The Welsh Government's Strategic Framework for the Welsh Language in health and social care, 'More than Just Words' recognises the concept of language need. For

many Welsh speakers, language is an integral element of their care e.g. some people are vulnerable and giving them the responsibility of asking for services through the medium of Welsh can contribute to their anxiety. It is the responsibility of social services to deliver appropriate services that meet users' language needs; this is referred to in 'More than just words' as the "Active Offer".

From March 2016 new Welsh Language Standards will come into force for 26 public service bodies, which is the same implementation period for the Social Services and Well-being (Wales) Act,

Local authorities responsible for the implementation of the Social Services and well-being (Wales) Act must also have regard to the standards and compliance notices which will be issued by the Welsh Language Commissioner in autumn 2015, and come into force in April 2016.

# Who are the stakeholders? Are the needs of Welsh speakers and learners addressed? To what extent are Welsh language interest groups likely to respond positively to the proposals?

The Act applies to all people in Wales who need care and support, and carers who need support.

The regulations are underpinned by the principles of the Act which states that any person exercising a function under the Act must have regard to the characteristics of culture and belief of the individual which includes language. To this end Welsh Government is expecting that any individuals who have their needs for care and support assessed by the local authority, can access care and support services in Welsh, should they so wish.

As noted above the Act addresses many of the aims as set out in *laith fyw: iaith byw,* which positively addresses the needs of Welsh language speakers and learners.

The wide ranging consultation process and engagement events captured many views, which included representation from *Estyn Llaw,* who attended the consultation engagement events to offer support and guidance in increasing the use of Welsh through the Act.

Local authorities responsible for the implementation of the Social Services and Wellbeing (Wales) Act must also have regard to the new Welsh Language standards and compliance notices which will be issued by the Welsh Language Commissioner in autumn 2015, and come into force in April 2016.

The way in which the subordinate legislation has been drafted means that the Welsh Language, and its place in supporting individuals to fully engage and participate in the care and support process, are fundamental to enhancing people's ability to have voice and control over their lives.

Where an assessment was not completed, or no impacts were identified, please provide a full account for record keeping purposes?

(This could be used in the Welsh Language Tribunal in future)

### N/A

# What actions/ further work has been identified at the initial planning stage?

e.g. data requirements, need for peer review, external engagement with Welsh speaking groups, identify stakeholders or consultation list, need to contact Welsh Language Unit for advice)?

All the public facing documents supporting the consultation exercise on the regulations and the codes of practice (Tranche 1 and 2) were provided bilingually.

The bilingual material included:

Consultation Documents
Consultation Questions
Executive Summary
Children and Young People executive summary
Easy Read executive summary.

### STAGE 2: IDENTIFYING AND ASSESSING IMPACTS

# Impact Assessment Summary

As no significant impacts, have been identified during the initial impact assessment an Impact Risk Assessment Tool has not been completed.

## Positive effects/ impacts:

The programme of work will provide the following positive impacts:

- the rights of the individual are placed on the face of the Social Services and Wellbeing (Wales) Act;
- an increased awareness of the need to embed More Than Just Words Welsh Language Framework and increased use and availability of Welsh language care and support services (an increase of the active offer and uptake of the active offer where it is requested). This will give people greater voice and control, and input over the services that they need to enable them to achieve their well-being outcomes;
- it should increase the number of Welsh speaking staff working within the social care workforce, to support services to speak in the language of their choice;
- it also has the potential to help retain dedicated staff within Welsh speaking communities.

## Adverse effects/ impacts:

The programme of work may provide the following adverse effects:

- there may not be enough Welsh speaking staff to meet demand for care and support through the medium of Welsh, which in turn would place extra demand on the current Welsh speaking workforce to deliver services through the medium of Welsh; and
- Welsh language skills of care and support staff may not be at a sufficient level to offer a full service through the medium of Welsh; this could lead to increased training needs for those Welsh speaking staff.

Opportunities to promote the Welsh language e.g. status, use of Welsh language services, use of Welsh in everyday life, Welsh at work increased?

The programme of work will provide opportunities to promote the Welsh language:

- pro-active offers and seamless professional services will encourage Welsh speakers to use the Welsh language effectively and place a duty on providers to do more to consider the user and their needs and provide services through the medium of Welsh rather than wait for them to be asked to;
- opportunities to use Welsh are promoted for children and young people and should ensure a positive attitude towards the Welsh language;
- Welsh speakers will be encouraged to remain or return to Welsh speaking communities;
- encourage people (including staff) to improve their Welsh language skills continuously and therefore improve confidence and use when receiving day to day care and support in Welsh;
- contribute towards the policy objectives in 'laith fyw: iaith byw' and increase numbers or percentages of Welsh speakers and increasing the use of Welsh;
- increasing the visibility of Welsh speakers and the services available for them; and
- increasing the skills of current Welsh speakers and learners to use more Welsh at work/professionally.

The Code of Practice for Assessment states that language is an integral element of the care that people receive and it is the responsibility of the local authority to deliver appropriate services which includes meeting users' linguistic needs.

The code makes it explicit that the assessments of need should be conducted through the medium of English or Welsh as appropriate to the individual or family concerned, and that this choice should not delay the assessment process.

A requirement set out in the code of practice is that National Minimum Core Data Set must keep a record of the assessment in the preferred Language / Communication as

appropriate to the needs of the child or adult whose needs are being assessed.

The population needs assessment must take account of the needs of people whose preference is to receive services through the medium of the Welsh language.

## Evidence/ data used including demographic profile when considering the effects/ impacts:

In 2011, the Welsh Language Board published a report "The Welsh Language and Social Services" that outlined the consequences for people who did not receive care in their preferred language. The report stated that "world-wide evidence shows the damaging effect of language barriers in care - lack of access to social services; user satisfaction; lack of a therapeutic relationship; difficulties in obtaining consent; problems with continuity of care as the user is referred from one agency to the next; a lack of quality care; user safety; health status of the user; care costs - personal costs to the user and financial costs to the service".

A report called "Welsh Speakers' Experiences of Health and Social Care Services" was published by IAITH in 2012<sup>3</sup>. It was undertaken on behalf of the Department for Health, Social Services and Children, the Welsh Government and the Care Council for Wales. It focused on the experiences of service users and carers in the four priority groups identified (children; older people; mental health service users, including those with dementia, and people with learning disabilities), and the research affirmed the link between language and care.

It draws on examples which imply that the quality of care to vulnerable users may be compromised by the failure to communicate in their first language. The crucial role of language as an assessment and diagnostic tool is also addressed and the reliance on translation, using family members to convey information between service user and professional, is seen to be fraught with problems which may affect the nature of the assessment undertaken. For users and carers, the ability to communicate in their preferred language is seen to have an effect on the formation of clinical and therapeutic relationships.

The research also found that respondents felt that Welsh medium service delivery in many areas is often haphazard and seldom planned. Individual members of staff at many levels lack the confidence to use their Welsh language skills in a professional context; employing agencies may fail to acknowledge and place value on these skills, and individual language skills remain hidden and untapped as a result. The prevailing culture within the health and social care sector in Wales appears to be premised on the expectation that service users or carers will identify the need and create the demand for Welsh-medium services, rather than on the basis that service providers have a duty to offer and provide. For many vulnerable and disempowered individuals in the priority groups covered by the research, the ability to articulate their need and create demand is beyond their grasp. They are often reliant on carers and family to do this for them. Many have no such support. The most vulnerable and isolated

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<sup>&</sup>lt;sup>3</sup>Welsh Speakers' Experiences of Health and Social Care Services

service users therefore need access to services and underlying systems which are robust and reliable enough to recognise their language needs and respond appropriately. Respect for the dignity of individuals requires this.

The Welsh Language Board's report also provides evidence from research carried out by Consumer Focus Wales in 2010, "Gwasaniaithau: Consumers and the Welsh Language". It states:

"Finally, looking at research relating to users, Consumer Focus Wales carried out a survey from the perspective of Welsh speakers in 2010. By way of a sample, some 759 Welsh speakers were asked for their opinion on Welsh language services. In discussing the use of Welsh over a quarter said that Welsh language services were not available: "When asked how current services could be improved, the single biggest suggestion in both the public and private sector was to have more Welsh-speaking staff available. 28% of all respondents said this was the reason they didn't use Welsh more in their dealings with the public sector". From the qualitative work carried out as part of this research, it was also discovered that a Welsh-medium service was not offered."

'More than Just Words' recognises that it is the responsibility of social services to deliver appropriate services that meet users' language needs; defined as the "active offer". The legislation and national outcomes framework and performance measurement framework ensures the 'active offer' is an integral part of improving well-being outcomes for people who need care and support and carers who need support. The new Welsh Language Standards will offer a renewed impetus for public services bodies to embrace the Welsh language and build it into every day services – this will be reflected for all ages fro children through to older people.

The current evidence base for social services describes the process; but there is little evidence on the impact that social services make on people's lives and whether the service improves outcomes for people. Therefore there is a significant gap in evidence which supports our approach to develop an outcomes framework that measures the effectiveness of services.

This approach will include measures that will monitor whether people are receiving care and support through the Welsh language and whether people are communicating in Welsh more widely with health or social care staff. This approach is set out under section 145 of the Act, the national outcomes framework for people who need care and support and carers who need support. There has been a separate CRIA completed for this the framework.

What is the overall anticipate impact on the Welsh language policy is taken forward based impact assessment/ risk assessment/	ge if this d on the	Positive: Adverse: Neutral: Unknown:		
Decision following IA	No major change			$\boxtimes$
	Adjust the policy to improve impacts			
	Continue the policy with mitigation measures			

	<ol><li>Stop and remove</li></ol>		
If answered 2,3, or 4 above -	_	_	
_	-	e the outcomes for the Welsh	
language? Details of mitigati adverse impacts and increas	•	s/ alternative options to reduce	9
auverse impacts and increas	e positive outcomes.		
If engaging or consulting, wh			
	h Language Impact Assessi	ment and Welsh language relat	ed
issues?			
A formed 40 week compatite	.;		
		oosals for regulations and coo sessing and Meeting the Nee	
		ember 2014 to 2 February 20	
		,	
		ation to the Welsh language	
	posals would have any	positive impacts on groups	with
protected characteristics.			
Workshops to support the	public consultation exerc	cise included a Welsh speak	er on
	•	d to receive an answer to	
questions in Welsh.			
	ATION AND PREPARING	FOR PUBLICATION, MONITO	RING
AND EVALUATION			
Following consultation, what	changes have you made t	o address any Welsh language	
issues that were raised?		, ,	
		ere appropriate, in Welsh incl	_
		e summary, children and y asy read version of the sum	_
		ry report will also be publish	
Welsh.		, торот п опос по разлеч	
		promoting emphasis in line	
		Strategic Framework for V	veisn
I I anduada Sarvicas in Haa		Juliai Caie.	
Language Services in Hea	in, Goolai Gol vioco ana c		
		e were raised through respon	ses
			ses
No other direct issues in re			ses
No other direct issues in re			ses

How will you monitor the ongoing effects during the implementation of the policy?

The Social Services and Well-being (Wales) Act 2014 contains provisions to allow for Ministers to monitor functions of the Act carried out by local authorities and other bodies. Ministers may require these bodies to report on their duties in implementing these regulations.

The Welsh Government intends to commission an evaluation to enable the impact of the new national model of assessment and eligibility to be considered.

Additionally, the Welsh Government will continue to monitor the impact of the regulations on areas such as the Welsh language.

Please outline how you will continue to capture effects / impacts in future monitoring and evaluation?

Welsh Government will continue to monitor the impact of the regulations on the Welsh language, this will include taking account of the work completed under the national outcomes framework.

	Anν	other comments -	<ul> <li>ongoing result</li> </ul>	s of evaluations	. emerging impa	cts
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### 4. Declaration

Policy lead:
The policy does not have an impact upon the Welsh language. Where there were identified adverse impacts or missed opportunities, the appropriate amendments and actions have been put in place.
Name:
Steve Vaughan
Department:
Health and Social Services
Date (s):
October 2015
Signature:

Planned Review Dates:		

# **SRO ENDORSEMENT and REVIEW**

I am satisfied that the WLIA is an accurate reflection of the programme/project at this stage of development. By signing, I am able to confirm that the Welsh Language Standards have been given the appropriate attention. I will re-assess the programme/project at key stages throughout the life of the programme/ project, including policy reviews.

Signed	(Senior Responsible Owner)	Date
Signed	(Senior Responsible Owner)	Review Date
Signed	(Senior Responsible Owner)	Review Date
Signed	(Senior Responsible Owner)	Review Date