

WELSH GOVERNMENT INTEGRATED IMPACT ASSESSMENT

Title of proposal:	Suite of documents to support implementation of the Citizen Voice Body for Social Care (Llais): Code of practice on access to premises Statutory guidance on representations NHS service change guidance (guidance on engagement and consultation)
Official(s) completing the Integrated Impact Assessment (name(s) and name of team):	Anthony Jordan Legislation Workstream Chair, CVB Establishment Programme
Department:	Health and Social services
Head of Division/SRO (name):	Prof Chris Jones SRO

Cabinet Secretary/Minister responsible:	Minister for Health and Social Services
Start Date:	20 June 2023

SECTION 1. WHAT ACTION IS THE WELSH GOVERNMENT CONSIDERING AND WHY?

(Please note that this Section will be published)

In narrative form, please describe the issue and the action proposed by the Welsh Government. How have you applied / will you apply the five ways of working in the Well-being of Future Generations (Wales) Act 2015 to the proposed action, throughout the policy and delivery cycle?

Ministers are committed through provisions in the Health and Social Care (Quality and Engagement) Act 2020 ('the 2020 Act') to develop, consult upon and issue a Code of practice on access to premises and Statutory guidance on representations. The NHS service change guidance is an extant document which Ministers undertook to revise and reissue to coincide with establishment of the Citizen Voice Body (hereafter 'the CVB'). The documents are not policies in themselves but provide guidance to take forward the policy direction which was given legislative expression within the 2020 Act. The code of practice will provide guidance about requests from the CVB to enter health and social care premises to seek the views of individuals, and where access to those premises is agreed, engagement with individuals at those premises for that purpose. The statutory guidance will set out factors to which NHS bodies and local authorities must have regard when dealing with representations made to them by the CVB. Finally, the updated guidance for NHS bodies on taking forward service change is revised to take account of the changing role of the CVB as compared to the Community Health Councils (CHCs) which it has replaced.

Long term

The provisions within the documents, although subject to a one-year review in the light of experience, are intended to support the longer-term impact of the introduction of the CVB and, ultimately, a stronger voice for citizens in the delivery of health and social care.

Prevention

The provisions within the documents are intended to support breaking the negative poor-health cycle by strengthening mechanisms for quality improvement in health and social care services through a reinforcing and amplifying of the citizen voice. The potential for negative impacts has been considered (for example in relation to privacy of individuals, contravention of rights, or added burdens on local authorities and local health boards) and these have been mitigated as far as possible within the design of the guidance by putting in appropriate checks and balances.

Integration

The documents connect the health and social care policy agendas at the *provision of services to the public* nexus and have made specific provision for this point, for example in relation to

representations from the CVB about services or issues which cross health and social care. This has been strengthened in the final documents.

Collaboration

The CVB itself, CHCs, local authorities, NHS bodies, statutory commissioners, the third sector and health and social care providers all have an interest in the documents. The documents were developed drawing upon engagement with a range of these partners, reviewed in draft form with working groups of key partners and then subject to 12 week formal public consultation. Delivery will be for the CVB, local authorities and NHS bodies in particular, following issue of the documents.

Involvement

See under 'Collaboration' above.

Impact

This activity is largely non-discretionary; Welsh Ministers must implement what is set out in the 2020 Act. The impact of the guidance set out in the documents was explored through pre-engagement with key partners and formal consultation open to all.

Costs and Savings

The costs associated with developing the documents and their electronic dissemination (issue) are sunk Welsh Government costs and will be absorbed by existing budgets. As the overall expectations (that the CVB will seek access to premises; that health bodies and local authorities will receive and respond to CVB representations - or, in the case of health bodies, effectively continue to do so in continuation of CHC-related arrangements; and that NHS bodies will consult and engage with stakeholders including the CHCs/CVB) are already extant as a result of the 2020 Act or other Acts, there are no new financial implications projected as a result of these documents. No significant representations as to costs were made by stakeholders in response to formal consultation.

Mechanism

The mechanisms are set out principally in the 2020 Act. No legislation is proposed.

SECTION 8. CONCLUSION

(Please note that this section will be published)

8.1 How have people most likely to be affected by the proposal been involved in developing it?

The CVB itself, CHCs, local authorities, NHS bodies, statutory commissioners, the third sector and health and social care providers all have an interest in the documents. The documents were developed drawing upon prior engagement with a range of these partners, reviewed in draft form with working groups of key partners and then subject to 12 week formal public consultation.

Owing to the nature of the guidance (being guidance principally for statutory bodies in relation to discharge of duties imposed upon them by statute) participatory work has not been undertaken with citizens, including with children and young people. Engagement has been undertaken with the partners with statutory responsibility for the wellbeing of people (such as local government and the NHS) and with the Office of the Children’s Commissioner for Wales.

8.2 What are the most significant impacts, positive and negative?

The provisions within the documents, although subject to a one-year review in the light of experience, are intended to support the longer-term impact of the introduction of the CVB and, ultimately, support a stronger voice for citizens in the delivery of health and social care.

They are intended to support the breaking of the negative poor health cycle by strengthening mechanisms for quality improvement in health and social care services through a strengthening of the citizen voice. The potential for negative impacts has been considered (for example in relation to privacy of individuals, contravention of rights, or added burdens on local authorities and local health boards) and these have been mitigated as far as possible within the design of the guidance by putting in appropriate checks and balances.

The documents connect the health and social care policy agendas at the *provision of services to the public* nexus and have made specific provision for this point, for example in relation to representations from the CVB about services or issues which cross health and social care.

The CVB itself, CHCs, local authorities, NHS bodies, statutory commissioners, the third sector and health and social care providers all have an interest in the documents. The documents were developed drawing upon engagement with a range of these partners, reviewed in draft form with working groups of key partners and then subject to 12 week formal public consultation. Themes coming from the engagement (pertinent to this IIA) included clarifying/expressing the applicability to children and young people, enhancing references to the Welsh language, safeguarding, and publication and accessibility of information.

8.3 In light of the impacts identified, how will the proposal:

- **maximise contribution to our well-being objectives and the seven well-being goals; and/or,**
- **avoid, reduce or mitigate any negative impacts?**

The guidance in the documents should positively impact to a moderate extent people (including people with protected characteristics) and communities. In terms of people, this would be specifically those either currently in receipt of health and/or social care, together with people who are connected to those receiving such care; others who are interested including those who might be in receipt of health and social care in the future; and those working in or providing health and social care. Communities with or without relevant in-locality health provision will also be moderately impacted, positively. The nature of this impact will vary but can be summarised as providing additional/enhanced opportunities to express views to, and have these views amplified through the medium of, the CVB, thereby positively impacting upon the quality of provision itself and also the quality of decision-making in relation to this provision (for example in relation to service changes).

Additionally, the documents contribute to integration through connecting the health and social care policy agendas at the 'provision of services to the public' nexus and have made specific provision for this point, for example in relation to representations from the CVB about services or issues which cross health and social care. This has been strengthened in the final documents, making them more supportive of joint working and recognising more clearly the integrated nature of many services across providers and localities.

The potential for negative impacts has been considered (for example in relation to privacy of individuals, contravention of rights, or added burdens on local authorities and local health boards) and these have been mitigated as far as possible within the design of the guidance by putting in appropriate checks and balances. For instance, human rights considerations have been highlighted in relation to consideration of access to individual dwellings/private spaces, to mitigate against the possibility that the guidance might be interpreted as granting a right of access. Similar applies in relation to guidance dealing with overall access to settings underpinning the notion of consent (but also referencing the wishes and interests of service users). References to rights have also been inserted into the statutory guidance on representations in the event of representations being made which name individuals.

Express provision has also been made, in relation to those aspects of the guidance which relate to engagement with individuals, to considerations around accessibility of information, support for engagement, and informed consent (appropriate reference has also been made to consent for

engagement with children.). These provisions are intended to support the bodies concerned to exercise relevant functions in a way which promotes equality.

8.4 How will the impact of the proposal be monitored and evaluated as it progresses and when it concludes?

The ultimate policy owners for the documents (Code of practice on access, Statutory guidance on representations, NHS service change guidance) will undertake a one-year review of the documents after the first year of operations and consider changes at this point. Arrangements beyond this point will be for the policy owners to determine.

A. CHILDREN’S RIGHTS IMPACT ASSESSMENT

1. Policy objectives

- What decision are you impact assessing?

Suite of documents to support implementation of the Citizen Voice Body for Social Care (Llais):

Code of practice on access to premises

Statutory guidance on representations

NHS service change guidance (guidance on engagement and consultation)

2. Gathering evidence and engaging with children and young People

The documents are not policies in themselves but provide guidance to take forward the policy direction which was given legislative expression within the 2020 Act.

Owing to the nature of the guidance (being guidance principally for statutory bodies in relation to discharge of duties imposed upon them by statute) participatory work has not been undertaken with citizens, including with children and young people. Engagement has been undertaken with the Office of the Children’s Commissioner for Wales at two stages during the process, firstly in the pre-consultation phase, and then through the formal consultation. In relation to the pre-consultation phase, the Office of the Commissioner was represented at a working group meeting focusing principally on drafts of the Code of practice on access to premises and Statutory guidance on representations. The Commissioner also made a response to the consultation. The feedback focused in particular on making specific reference to children and young people and their rights within the documents, to make it clear that references to the CVB’s functions, etc (e.g. “*listen to and represent the interests of the public, in all parts of Wales, in matters related to health and social services*”) specifically incorporated listening to and representing the interests of children and young people. This has been taken forward in work to finalise these post-consultation. Rather than relying solely on reference to ‘individuals’ and to individual rights in general, specific reference to children and young people and their rights have now been inserted where appropriate, for example in amendments to paragraphs 4 and 7 and a footnote to para.1 of the Code of Practice on Access.

3. Analysing the evidence and assessing the impact

The guidance in the documents should positively impact to a moderate extent children and young people, specifically those either currently in receipt of health and/or social care, together with people who are connected to those receiving such care; others who are interested including those who might be in receipt of health and social care in the future; and those working in or providing health and social care. In the appropriate places the role of the CVB in engaging with children and young people and ascertaining and representing their views is specifically referenced and considerations which are relevant to engagement with children and young people are set out in the Code of Practice on Access. This should support the CVB to provide additional or enhanced opportunities to express and share their views, including the scope to consider specific routes for children and young people to do so, although this is beyond the vires of the powers under which these documents are issued.

The nature of the impact will vary but can be summarised as providing additional/enhanced opportunities to express views to, and have these views amplified through the medium of, the CVB, thereby positively impacting upon the quality of provision itself and also the quality of decision-making in relation to this provision.

Potential negative impacts (for example in relation to the right to privacy for children and young people) have been considered and mitigated during the development of the guidance within the documents. For instance, human rights considerations have been highlighted in relation to consideration of access to individual dwellings/private spaces and engagement with individuals in those spaces, to mitigate against the possibility that the guidance might be interpreted as granting a right of access/engagement. Appropriate reference has also been made to consent for engagement with children, with the Code of Practice on Access specifically noting that:

‘In line with the general expectation that engagement with children will be undertaken with due regard for their rights, consent whilst on the premises to engage with the children should be sought from the child, if they have the requisite legal competence to consent, or from a responsible adult.’

- How does your proposal enhance or challenge children’s rights, as stipulated by the UNCRC articles and its Optional Protocols? Please refer to the [articles](#) to see which ones apply to your own policy.

UNCRC Articles or Optional Protocol	Enhances (X)	Challenges (X)	Explanation
<p><i>Article 12 Children have the right to say what they think should happen, when adults are making decisions that affect them, and to have their opinions taken into account.</i></p>	X		<p>The guidance in the documents should positively impact to a moderate extent children and young people, specifically those either currently in receipt of health and/or social care, together with people who are connected to those receiving such care; others who are interested including those who might be in receipt of health and social care in the future; and those working in or providing health and social care.</p>
<p><i>Article 16 Children have a right to privacy. The law should protect them from attacks against their way of life, their good name, their families and their homes.</i></p>	X		<p>The nature of the impact will vary but can be summarised as providing additional/enhanced opportunities to express views to, and have these views amplified through the medium of, the CVB, through facilitating access to individuals in their own homes or social care settings, thereby removing some of the barriers some individuals may face in terms of transport, access and understanding and positively impacting upon the quality of provision itself and also the quality of decision-making in relation to this provision.</p>

			<p>Potential negative impacts (for example in relation to the right to privacy for children and young people) have been considered and mitigated during the development of the guidance within the documents. For instance, human rights considerations have been highlighted in the Code of Practice on Access in relation to consideration of access to individual dwellings/private spaces and engagement with individuals in those spaces, to mitigate against the possibility that the guidance might be interpreted as granting a right of access/engagement. As discussed above, appropriate reference has also been made in the Code to consent for engagement with children.</p>
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- Consider whether any EU Citizens Rights (as referenced in the Equality Impact Assessment) relate to young people up to the age of 18.

None identified

For further information on the [UNCRC](#) and its [Optional Protocols](#), please visit the [Children's Rights Intranet Page](#).

4. Ministerial advice and decision

Consideration of impacts has informed relevant ministerial advice.

5. Publication of the CRIA

Following in due course.

6. Communicating with Children and Young People

Although the question of communicating with children and young people over the content of the guidance is not applicable, the relevant guidance (Code of Practice on Access to Premises) itself sets out expectations around accessibility of information. These will be strengthened and specific reference made to accessibility of information (format/content/language) for children and young people in the final version. It is also the case that the Code (through facilitating access to individuals in their own homes or social care settings) will have a potential positive effect removing some of the barriers some individuals may face in terms of transport, access and understanding.

7. Monitoring and Review

Monitoring and review arrangements will be determined by the policy owner but are likely to be incorporated within the planned review of the documents after one year of operation.