WLGA Response to Supplementary Questions:

Public Accounts Committee
Care Experienced Children and Young People

April 2018

1. Additional detail on how a preventative care fund could look like to provide real focus on prevention and developing those preventative and early intervention services for children.

The WLGA has welcomed the Integrated Care Fund established by Welsh Government (originally the Intermediate Care Fund) but has also called for this Fund to be accompanied by a separate transformation fund with the aim of implementing new prevention strategies that will drive real change and improvements in the availability of preventative services. Increasing demand and financial pressures mean there is an urgent need to focus and invest more on prevention, reducing the demand for more complex and expensive services and making the most efficient and effective use of health and social care resources. We would like to see a Preventative Integrated Care Fund established, which builds on the success factors from the Integrated Care Fund (e.g. joint decision-making; focused interventions based on need and demand) to develop more preventative services, speed up service integration, particularly in relation to primary and community based services so that communities can benefit from a more coordinated and holistic approach to health management, social care and well-being.

While local government already receive funding for social care, and they have the freedom in principle to spend other sources of income on these types of preventative initiatives, they cannot do it within existing budgets at the scale required and during this prolonged period of austerity. It is also difficult for local authorities to build a business case to invest scarce resources in initiatives where the financial benefits will in the main accrue to other agencies such as the NHS or the benefits system, or where the financial return won't be realised for many years.

We recognise that providing additional financial support is exceptionally challenging, especially given the financial pressures across the public sector. However, the alternative is that without resources specifically for community, primary and secondary prevention, there is a risk that we won't see the radical step change required to reduce impacts on the NHS and social care.

We need to shift from a service that reacts when people have acute need or a crisis to one which focuses on prevention to reduce demand for acute services. We believe a new and additional fund specifically for this purpose is necessary to provide a stable funding environment for existing services to make the shift to a system geared more towards prevention – which would include easing the transition from hospital to community-based services.

The introduction of a Preventative Integrated Care Fund would enable some double running of new investment in preventative services alongside 'business as usual' in the current system, until savings can be realised and reinvested into the system – as part of wider local prevention strategies.

There is general recognition of the benefits of prevention – and it is now codified in the Social Services and Well-being (Wales) Act – but very little has been done at the scale that will be necessary to see meaningful impact.

There is a need for flexibility at the local level, provided through additional funding, to enable local authorities and partners to make the scale of changes necessary, with a focus on transformation of preventative services rather than a fund that maintains the existing provision of services. This includes a need to consider:

- Integrated primary and community based teams
- Strong community services linked with social care provision
- Examining how our nursing and residential home residents can be cared for in a fundamentally different way.
- Carving out space and time for people to do the work
- 2. The issue of some anomalies in spend between local authorities. The figures referred to in Committee were that Monmouth have increased their expenditure by 105 per cent and Wrexham have cut their expenditure by 30 per cent.

Following consultation with the local authorities referred to in Committee it appears that the data that was referenced is misleading because there have been changes to the Welsh Government forms that collect the data.

The data used to calculate the 30 per cent reduction in Children Looked After Services expenditure for Wrexham was taken from the Line 10 total from the social services out-turn return for each year from 2011-12 to 2016-17. However, the Line 10 total is an area where there have been some classification changes in the services included. It is this that distorts the data time series and so does not reflect the true picture.

The total Children's and Families Services expenditure for Wrexham (Line 26 of the social services out-turn forms) actually increased by 24.74% between 2011-12 and 2016-17.

3. Is there any evidence that the pupil development grant is being well spent in delivering outcomes for the children?

The WLGA has previously submitted evidence to the Children, Young People and Education Committee's inquiry on targeted funding to improve educational outcomes. The full submission can be found here.

The WLGA fully supports the policy intentions behind the PDG in the current economic climate and the purpose of the grant as it recognises the adverse impact that poverty and deprivation having on educational outcomes.

Whilst the WLGA itself does not hold or collect information about individual pupil or school experiences of the PDG all 22 authorities have been consulted for their views and experiences. There is no doubt that schools value the additional resources provided by the PDG in the current financial climate of continuing austerity, but it is far more difficult to assess fully and effectively the impact of the funding. Assessing the impact of targeted resources is more problematic as it is difficult to establish a causal relationship between any educational intervention and outcomes. The WLGA has therefore always advocated a whole system approach and a holistic strategy to addressing the impact of poverty on attainment. Such strategies need to be part of a whole authority approach to school improvement and raising standards and a fully integrated part of service delivery and financial planning.