

Number: WG50123

Welsh Government

Consultation – summary of response

Raising the weekly maximum charge for adult non-residential care and support.

DECEMBER 2024

Overview

The Welsh Government undertook a Consultation seeking views on raising the weekly minimum charge for adult non-residential care and support.

Local authorities have the legal responsibility to provide social care and support to their respective assessed citizens, either within their own home, or in a residential care setting, and have the discretion to charge for those services. Noting the increasing extreme financial pressures on local authorities, the consultation document sought views on amending the regulations and Code of Practice governing local authority charging for social care and support services under the Social Services and Well-being (Wales) Act 2014. The consultation specifically sought views on a proposed increase to the non-residential maximum weekly charge, currently set at £100. It is only individuals who have the financial means to pay an increased maximum weekly charge that would do so with this being determined by the usual process, as part of the financial means test carried out by an individual's local authority. Therefore, not everyone currently paying the maximum weekly amount of £100 would be required to pay an increased amount.

Action Required

This document is for information only.

Further information and related documents

Large print, Braille and alternative language versions of this document are available on request.

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Additional copies

This summary of response and copies of all the consultation documentation are published in electronic form only and can be accessed on the Welsh Government's website.

Link to the consultation documentation: Raising the weekly maximum charge for adult non-residential care and support.

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Summary of Responses

The consultation on increasing the non-residential care maximum weekly charge was published online and it was circulated to a wide range of stakeholders from across the social care sector. All those who responded to the consultation were, to varying degrees, stakeholders in the social care sector.

We received 96 responses. Some of the responses were a collation of sector specific stakeholder comments and not all the respondents commented on every question that was posed in the consultation document. Furthermore, some respondents did not provide direct 'yes' or 'no' answers to each question. In these circumstances, every effort has been made to interpret and include the respondent's intended viewpoint in the figures quoted in this summary.

A small number of respondents chose to respond by email and not via the consultation form. Responses received via email varied in structure, with some following the structure of the consultation questions, and some providing a general commentary rather than answering each question. The responses also varied significantly in length and the amount of commentary provided, where some responded to each question, many only responded to some questions, or did not respond to any question directly but provided a general commentary. In these circumstances, where possible these responses have been included in the relevant consultation question.

Most respondents asked for their details to be withheld and will therefore be identified as 'Anonymous' to comply with the General Data Protection Regulation.

All quotations from consultation responses are in the original language unless specified otherwise.

All the responses have been considered and analysed. The respondents represented a range of individuals and interest groups, as follows:

Respondent type	Number of Responses
Individuals (members of the public)	49
People working in or representing the	24
local authorities	
People working in or representing the	20
third/voluntary sector	
People working in or representing a	3
social care provider organisation	

Background

The Welsh Government published a 12-week public consultation on a proposed change relating to raising the maximum weekly charge amount for non-residential care and support services, currently set at £100 per week. The consultation was open from 13 February 2024 to 13 May 2024. The consultation document sought views on

amending the regulations and Code of Practice, which govern local authority charging for social care and support services under the Social Services and Well-being (Wales) Act 2014. It also sought views on any impacts that would occur if the current maximum weekly charge was increased.

The Social Services and Wellbeing (Wales) Act came into force on 6 April 2016. In Wales, this changed the way social services are delivered, to meet the needs of the individual and to make services sustainable for the future.

The Act gives people voice and control over the support they require to achieve positive outcomes to their wellbeing and overcome barriers. Its focus is on early intervention to present needs becoming critical. It promotes investment of resources in the short term, to give best value. It also offers to promote the positive integration between health and social care services to ensure positive outcomes are achieved.

Under the Social Services and Well-being (Wales) Act 2014, the Care and Support (Charging) (Wales) Regulations 2015 and Social Services and Well-being (Wales) Act 2014 Part 4 and 5 Code of Practice (Charging and Financial Assessment) issued by the Welsh Government together set out the requirements that local authorities must follow when determining whether to charge for care and support services and, also when assessing the client's contribution towards those costs. An example of this:

Individuals with care and support needs and who require services, may have a financial assessment to assess how much they must pay for their care.

The Consultation

The consultation document and an easy read version were published on the consultation pages of the Welsh Government's website and a British Sign Language version was also made available.

Respondents were able to submit their views and comments online, by email or post, and in Welsh or English. The link to the consultation was emailed to a range of stakeholders including representative organisations and professional bodies for the relevant sectors.

This document summarises the responses to the 10 consultation questions. Whilst it cannot capture every comment, it tries to convey the key messages. The consultation response form consisted of 10 questions, 8 questions on the subject matter of raising the weekly charge and its impacts, and two questions on the effects of this proposed change on the Welsh language.

A thematic approach has been taken to outline respondent's key comments in response to the questions. An approach was taken to consider a 'theme' as a comment mentioned more than once in the responses. It is important to note that the frequency of key themes cannot be used to interpret the balance of views in the same way that a closed question can. It should also be noted that where a proportion of respondents have commented in support of parts of a proposal, it does not necessarily follow that

those not making these comments are opposed to those parts of the proposals. This document aims to present the broad views and themes that were provided in response to the consultation, rather than to summarise every individual response.

The consultation applied to Wales only.

Question 1.1:

The maximum weekly charge increase during the 2024/25 financial year is proposed to account for the increased rates of inflation seen across the UK and beyond, and to ensure local authorities have sufficient funding to maintain the care and support services they provide, and the quality of it. To what extent do you agree or disagree that the proposal to increase the non-residential maximum weekly charge balances the need to help raise additional income for local authorities to meet increasing cost pressures with being fair and affordable for people in receipt of non-residential care and support services?

Consultation Responses

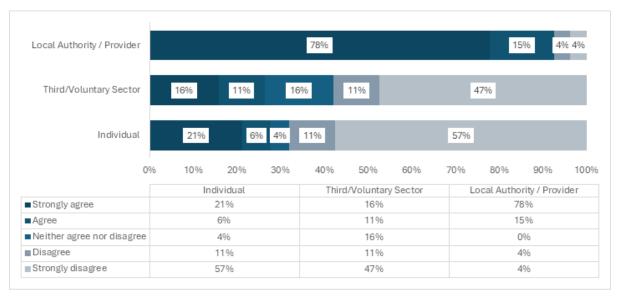
Summary of Responses

Of those who submitted a consultation response to the question of whether they agree or disagree with the increase;

- 27% of individuals agreed and 68% disagreed
- 27% of third sector agreed and 58% disagreed
- 93% of Local Authorities agreed and 8% disagreed

Figure 1 demonstrates that 47 members of the public, 24 people working in a local authority, 19 people working in or representing the third/voluntary sector and three people from a social care provider organisation answered the question. 47% either agreed or strongly agreed that the proposal to increase the non-residential maximum weekly charge should go ahead, with the majority sitting in those responding from local authority or social care provider representatives. 49% either disagreed or strongly disagreed, and the majority of these were individuals or those from the third/voluntary sector.

Figure 1: Agreement with the proposal to increase the non-residential maximum weekly charge



As the graph Figure 1 shows, there is considerable variation between groups. A higher proportion of local authority and social care provider representatives agreed to the proposal than members of the public or those representing the third/voluntary sector.

Question 1.2:

■£20 uplift

■£25 uplift

10%

33%

We would like to know your views on the appropriate amount by which to raise the maximum weekly charge for non-residential care and support services. The amount is currently set at £100 per week. What amount, if any, would you increase this by per recipient?

Summary of Responses

Whether someone agreed with the proposal (as outlined in Question 1.1 above) to raise the maximum weekly charge for non-residential care and support services greatly influenced their responses to Question 1.2 relating to the level of increase. Of the 93 people that responded to question 1.1, only 51 of those responded to question 1.2. Of the 40 members of the public who responded, 35 of them either disagreed or strongly disagreed with the proposal, and so did not support any uplift. Of the remaining 53 members of the public who responded, 63% were in favour of a £25 uplift.

People representing local authorities or providers were those who supported the higher uplift whereas members of the public or those representing third/voluntary sector did not. However, a higher proportion of local authority representatives responded to question 1.2 as they were generally more in favour of the proposal. These results are shown in Figure 2.

92% Local Authority / Provider 29% 29% 43% Third/Voluntary Sector Individual 57% 10% 33% 0% 10% 70% Individual Third/Voluntary Sector Local Authority / Provider ■£15 uplift 57% 29% 8%

29%

43%

0%

92%

Fig 2: The selected increases to the maximum weekly charge

Question 1.3:

We would like to know your views on the proposed change to the code of practice on charging for social care services. For clarity to the reader, we propose to update paragraph 5.1 of the Code to add reference to the amendment regulations that we propose to bring into force in 2024. Any revision to the Code is dependent on amendment regulations being made in 2024, following this consultation process. Please indicate if you agree or disagree with the proposed change to the Code and describe why you feel that way.

For information: Part 5.1 The Authority must follow the regulations when undertaking financial assessments and determining any charges (Guidance para 5.1) and when exercising its other functions in relating to charging.

Summary of Responses

Of the 96 respondents, 89 provided a response to question 1.3. Of these, 44 were members of the public, 24 were people representing a local authority, 18 people were representing the third/voluntary sector and three people were from a social care provider. Overall, 43% of respondents agreed with the proposal to update paragraph 5.1 of the Code, i.e. to add a reference to the amendment regulations that was proposed to come into force in 2024. However, 43% of all respondents disagreed and 14% neither agreed or disagreed.

As the figure below shows (Figure 3), people representing local authorities and providers were more likely to agree to the proposal than those either representing the third/voluntary sector or individual respondents.

Local Authority / Provider 52% 30% 4% 4% 11% Third/Voluntary Sector 11% 17% 33% 33% Individual 16% 11% 11% 7% 55% 096 10% 20% 30% 40% 50% 60% 70% 80% 90% 100% Individual Third/Voluntary Sector Local Authority / Provider ■Strongly agree 16% 11% 52% 11% 17% 30% ■ Neither agree nor disagree 7% 4% Disagree 6% Strongly disagree 55% 33% 11%

Figure 3: Agreement with the proposed change to the Code

Members of the public

The qualitative findings of questions 1.1, 1.2 and 1.3 demonstrated that many members of the public did not support an uplift and many of the comments focused on the rising cost pressures on people with low incomes and the perception of a lower quality of care being provided over the last 10-20 years.

Comments focused on the increasing costs to people receiving care and support, such as food, utility bills, social activities and transport, which - is reducing the ability to pay for social care. Many members of the public expressed that it was unfair that the vulnerable people in society were being faced with increased costs, and some advocated for care which is free, rather than increasing in cost.

"I don't believe that any increase is fair to anyone whose only income is their benefits payment. The current means test is based on a MIA (minimum income Allowance) that takes no regard of the increased cost of living and therefore penalises the poorest. If the means test was changed to a fairer assessment then I would support an increase as £25 to someone with a generous income will have little effect on their standard of living but even £15 to someone who lives alone, possibly has a house to upkeep and has high care needs will be a terrible burden"

Of those that supported the uplift, several pointed to the higher cost of living and increasing cost pressures seen over the last few years, therefore, on the need to increase prices to safeguard the provision of services to the vulnerable. However, one individual proposed that if increases must be made, they should be done gradually over several years.

"The figure should rise to reflect rising inflation and costs of providing care. Whilst the Senedd should be commended for the introduction of this policy. The costs are simply not sustainable. We need to rise the uplift to around £100 a week to reflect rising costs."

However, the majority of members of the public disagreed with the proposal. It was expressed that the change would unfairly impact people who had saved for their retirement and would place an additional burden on people who are in need of care and support. It was suggested that the amount of money this change would raise would not make a substantial impact to the pressures on the social care system and that other options should be explored.

"Pensioners and disabled people are struggling to pay their bills, heat their homes and eat. Charging more for the care they need will mean they have even less money available to pay for the essentials."

Local authority representatives

Nearly all local authority and provider representatives selected the highest possible uplift of £25. Many of these described how the increase of £25 was appropriate given the rising costs of providing care. Respondents described a variety of factors which were making it increasingly difficult to meet costs.

"[Translated from Welsh] Our projections show that the age 65 population is to increase by over 50% by 2043, and this will have a further impact on our ability to

provide care and social services. It is recognised that the maximum non-residential care and support fee has not increased with inflation, and that the Consumer Price Index (CPI) provides an estimate of the relative value of goods and services, indicating that goods and services costing £100 in 2020 would cost £121.40 in October 2023. On the other hand, we find this a difficult principled and ethical debate. We're talking here about the county's most vulnerable and needy residents, and cuts with inevitable reviews to services like daycare and transportation are already having an impact on that cohort of people."

Some respondents also felt that the uplift did not go far enough, and that the funds raised through this increase will be insufficient to cover rising costs and increasing demands for care. It was suggested that to maintain and improve services, additional funding is needed. One respondent commented that an annual review may be more appropriate, potentially linked to inflation.

However, despite the general agreement for the £25 uplift, it was felt that this increase may have some unintended consequences. It was commented that currently some people waive their financial assessments, therefore should an uplift occur, there may be a rise in people requesting a financial assessment and so additional resources would be needed for that. It was also suggested that currently, some charges go unpaid, and should an uplift occur it may simply just increase the unpaid debts to local authorities. Finally, one respondent did feel no increase was appropriate.

Many of the local authority and provider representatives felt that the proposed changes are clear, simple and make sense. It was expressed that this is a fair change given the current economic climate and is needed to maintain services and that any determined changes would require a change in the current Code of Practice and the Regulations.

Third sector representatives

Compared to members of the public and local authority representatives, people responding on behalf of third/voluntary sector organisations presented mixed views regarding the uplift. Seven out of the 19 respondents gave a proposed uplift, which varied between £15 and £25. Of those that did propose an uplift amount, they referred to the increasing costs of care due to inflation and needing sufficient funding to cover provider and local authority service provision.

It was felt by some that an increase in charges is the opposite direction to Welsh Government policy, and is not in keeping with the Social Services and Wellbeing (2014) Act. It was suggested that this is unethical and a short-term solution, which will not make a noticeable difference to service provision in the long run, but could potentially lead to people not accessing or receiving the support that they need. It was felt that some people may be pushed into crisis by an uplift which results in a higher need for support down-stream and elsewhere in the care system.

"Although we agree that the dual pressures created by increasing demands for support, alongside increasing costs to deliver mean a social care system that's creaking under pressure, require a solution to be found...this is not the answer."

Of the 18 third sector representatives that responded to this question, five either agreed or strongly agreed and seven either disagreed or strongly disagreed. Of

those that agreed with the proposal, it was accepted that any change in policy would require a change in the Code of Practice and Regulations.

However, some felt that if the Code of Practice and Regulations are to be changing, there are other changes which would benefit people. The main change described is the way disability benefits are counted as income within financial assessments and means testing. It was suggested that due to the limited options for people on disability benefits, the proposed change could potentially result in people receiving or needing care that they cannot afford.

"We are wary of any increase to the weekly charge for non-residential care in its current means-tested form as elements of disability benefits such as PIP (Daily Living Component) and Attendance Allowance are counted as income. We do not believe that any part of disability benefit should be counted as income as these benefits are awarded in recognition of the increased costs associated with living with a disability."

It was also expressed by some that the proposal is not in keeping with the ambitions of the National Care and Support Service. Questions were raised around the conflict between the proposal and the recommendations to make non-residential care free at the point of need.

Finally, some third sector representatives wanted to make sure that any changes introduced did not result in the issues around financial assessments to replace the principles of co-production and the importance of focusing on the 'what matters' conversations. Respondents stated that regardless of the outcome of the consultation, any change needs to make sure people's rights and entitlements are upheld.

Question 2.1:

We would like to know your views on Section 1 of the Integrated Impact Assessment. Are there any specific areas where you feel further detail is required, or any specific issues you wish to highlight which may have an impact on a specific group?

Summary of Responses

Members of the public

32 members of the public answered this question, with 17 choosing to skip the question, and 10 who provided no further comment or detail that they wished to highlight regarding section 1 of the integrated impact assessment. Members of the public who had answered question 2.1 in the consultation were generally opposed to the increased uplift. There were some concerns around how the uplift increase would be implemented and what would be included within the financial assessments.

"This will only have impact on those over the capital limits but still doesn't take into account personal responsibilities ie bills, debt etc."

"Currently some people are paying the maximum charge when they do not have the means to pay as the financial assessment includes all benefits including the care component of PIP which is need to pay for other genuine support needs, not provided by the local authority."

There were also concerns on the impact that this would have on service users and their finances. There was additional concern about what this could mean for their carers as well.

"I think more needs to be done to mitigate the impact of charging on disabled people and those needing care and support. It's obvious how much these groups are struggling already and this is going to compound their poverty."

"I fundamentally disagree with charging for non-residential care and support. The majority of those receiving these services are already at the lower end of the income spectrum. At a time of general increases in the cost of living this is a section of our society who are least well positioned to absorb any new pressures."

Local authority representatives

There was general support for the uplift from local authorities and social care providers. This was due to explaining how the financial assessments would ensure that those who could not afford the uplift would not have to pay, as well as understanding that due to financial constraints within local authorities that this uplift is needed to support the funding of high-quality social care. It was also felt that Section 1 of the Integrated Impact Assessment also clearly explained this, as well as there being information available to service users if they needed it.

While it was felt that there was sufficient information and a general support for the increase, it was felt that it would be increasingly important to communicate what the

change means and how those receiving care would feel the effects of the change.

Local authorities and providers felt that good communication would be essential as a lack of communication around any proposed change could lead to those needing care delaying seeking it.

The balance between ensuring that vulnerable service users are able to pay enough without finding themselves in financial difficulty, as well as the need for local authorities and providers to be funded effectively is demonstrated by a representative from a local authority: "Local Authorities must be able to afford to provide care and support for people with disabilities, which we believe can be made more sustainable by the introduction of an increase to the non-residential care cap. We believe that cost of living issues impacting on disabled people and carers are much wider than the question as to whether the care cap should be increased by £25. It is incumbent on LAs to ensure that there is a positive offer of community-based support and availability of care for people with disabilities and unpaid carers, and that an increase in the care cap will have a positive impact on this."

Third sector representatives

Respondents representing third sector organisations felt that there could be additional information within Section 1 of the Integrated Impact Assessment, and that additional investigation into potential wider impacts needed to be considered.

"We are concerned there has not been enough consideration put into this policy's wider impacts. Until issues are resolved on how charging is explained and applied, no changes should be considered."

"The issue is wider than whether the Integrated Impact Assessment needs further detail as the current mechanisms for fairer charging do not take into account the nuances of increased costs to many older people across Wales, as stated elsewhere within this consultation response."

More specifically, there were concerns around the impact of the uplift to both service users and unpaid carers. It was also noted that service users were likely to be in relative poverty and potentially economically inactive and as a result they would have to make choices around how much care they could receive, with the potential of delaying the care they need.

Third sector respondents also commented on the assessment and means testing that are used to determine how much service users would pay. They felt that there are inconsistencies with how the assessment was conducted between the different local authorities. There was also concern raised around what is currently included within the financial assessment and how this may affect service users, for example topping up fees not being included, and the cost of living.

"In principle, if the financial assessment is done fairly and the impact on the person is taken into account, then this should not be an issue. However we know from our members lived experiences and our own experience of observing the outcomes of other legislation, there is often inconsistencies of approach across local authorities in Wales where policy and legislation has 'discretionary powers' or caveats."

"In the experience of [organisation], people with care and support needs wish to keep good staff and reduce turnover, and have had to pay 'top up' fees to carers who receive a low hourly rate form the local authority. This cost is not always reflected in means testing and could inadvertently lead to people being placed into hardship if they then have to pay an uplift."

Similar to local authorities, one third sector organisation felt that the change will need additional communication to try to prevent service users delaying seeking care. This included messaging in Welsh language.

"Effective communication with the public will be key to mitigating those risks including making it clear that a person cannot be charged for assessment; that the increase meets the 'fair and reasonable' test; and that only those who can afford it will be required to pay the increased maximum charge."

"Clear messaging will also help to avoid any confusion following an uplift in the cap and allow more time for service-users and their carers to seek further information and guidance in advance of a financial assessment as part of advanced planning."

Despite the concerns around the uplift, there were third sector organisations which understood the reasoning for the increase to be introduced.

"Through our ongoing engagement with older people across Wales we know they do appreciate that the charging regime in Wales is fairer than it is in England."

"The sustainability of social care and support services is paramount and this adds further weight behind the need to ensure that the changes made to current arrangements also build in the ability to review the maximum weekly charge on an annual basis."

Question 2.2:

We would like to know your views on Section 4 of the Integrated Impact Assessment. Are there any specific areas where you feel further detail is required, or any specific issues you wish to highlight which may have an impact on a specific group?

Summary of Responses

Members of the public

Members of the public who had answered question 2.2 in the consultation were generally opposed to the increased uplift. This was due to feeling that this would affect 'the most vulnerable' and that this may then have consequences on the care they receive. This could include having to delay seeking care, or look to care arrangements which may not be suitable for them.

"You are already victimizing and their family by making them pay 100. Increasing the threshold stops me having help. I would need to put my Mum into a care home."

"The cost of living crises has had a devastating effect on our elderly and rising costs for care will only isolate them further and put them further into poverty."

"I agree with the Disability Wales report which "identifies some disabled people in Wales have had to "cut back on impairment-related expenses" which are often essential" PIP is supposed to pay for these additional needs but increasing care costs will take away the ability to pay with the very benefit that is supposed to cover these costs."

Some members of the public used this question to raise their concerns about social care more generally, which while not directly related to the consultation questions demonstrates the concern that the public has with social care in Wales.

"There is a lack of joined up support between the health service, mental health, social care and other support providers. The evidence points to this resulting in disabled people slipping through the cracks and struggling on their own."

Local authority representatives

A few local authorities did find that more information may be needed on the link between disregard and ordinary living costs being included, as well as for evidence on the impact to those who may live on their own and cannot claim benefits, as well as people under 65 where it was felt there may be a disproportionate impact.

"It might help if the link between the overall disregard and ordinary living costs is more clearly demonstrated."

Third sector representatives

Third sector organisations who answered this question were concerned that service users would delay seeking care or reduce the care they were currently receiving due to the increased uplift.

"Section 4 of the Integrated Impact Assessment specifically highlights the findings of Disability Wales' Barely Surviving report and the experience of one of our members who had to stop their social care because of the costs. We can confirm that this is not an issue isolated to that member, we have had many reports since of a lack of access to social care because of costs, or that other forms of care and support had to be cut to pay for social care."

"[Organisation] agrees with the concerns raised about further charges for people who need care and support services; this demographic already tends to have lower income and fewer opportunities to increase income, by example through work or training."

Third sector organisations were concerned about the knock-on impact from delaying or stopping their care which would then affect social care down the line, for example the need to seek more intensive forms of care, as well as the impact that it could have on unpaid carers.

There were also questions around the financial assessments used to determine how much service users are charged for their care, arguing that it needed to be 'reflective of the true cost of living', as well as having questions around what is included such as unpaid carers and different benefits.

"The means test needs to be robust enough to ensure a minimum income guarantee is reflective of the true cost of living including the recent inflationary rises in essential costs such as food and utility bills."

"Under fairer charging, disability related benefits such as Attendance Allowance, the care component of Disability Living Allowance, the daily living component of Personal Independence Payments, the additional amount for severe disability in Pension Credit Guarantee Credit and Employment and Support Allowance are all incomes that can be means tested. Though many entitlements have increased in line with inflation, inflation is calculated using formulae that masks the increased costs for the most vulnerable."

Question 2.3:

We would like to know your views on Section 8 of the Integrated Impact Assessment. Are there any specific areas where you feel further detail is required, or any specific issues you wish to highlight which may have an impact on a specific group?

Summary of Responses

Members of the public

While many members of the public did not provide specific feedback on Section 8 of the integrated impact assessment, many communicated concerns around the quality of social care within Wales. These issues were across a wide range of areas within social care.

"Autism lack of services all round or we could use to get advice too. I have a LD so they sometimes buy pass that and I have physical and health needs hard to cover all my care needs."

"The elderly have limited support, feeling isolated, vulnerable without having increases in what they pay for care."

"There is a shortage of home care carers they won't get an increase in pay to cover extra car insurance and travel costs if they had pay increase more would take up care provision that would unblock hospital and ambulance service."

There were additional concerns raised regarding the proposal and the assessments used when deciding care charges, with an individual stating that they would want additional information within Section 8. Unless the basis of the financial assessment is changed then the requirement for "The local authorities, when charging for non-residential care, will need to carry out a financial assessment in line with the relevant regulations and code of practice, will be meaningless."

Local authority representatives

Of the local authorities and social care providers who answered this question, 10 local authorities and providers skipped the question, and 9 either left no additional comments or felt there was enough detail provided, commenting that there was enough opportunity to provide feedback. There were some that felt perhaps further consultation could be done, mainly on those in receipt of benefits, older people and non-disclosures.

"This proposal will affect some of the most vulnerable and marginalised citizens in Wales including older, frail people; carers; people with disabilities and long-term illnesses including mental ill-health, neuro-divergence and people with substance-misuse."

Third sector representatives

There were concerns from the third sector that the increase in the cap may work against wider Welsh Government commitments and goals, such as the Wellbeing of

Future Generations (Wales) Act 2015, as well as providing care which is free at the point of need.

There were concerns around the impact that the uplift would have on older people in particular.

"The top three areas older people said they had cut back on were: Energy (84%), Food shopping (83%) and Social activities (65%)... The Commissioner believes that increasing the weekly maximum charge would mean that, as the draft Integrated Impact Assessment suggests, more older people would struggle to meet the costs of daily living as well as the cost of care and that more older people would be forced to hand back or not take up care packages. The Commissioner therefore does not support it."

Question 2.4:

We would like to know your views on the initial Regulatory Impact Assessment. Are there any specific costs and / or benefits where you feel further detail is required, or any specific issues you wish to highlight which may have an impact on a specific group?

Summary of Responses

Members of the public

Whilst over half of members of the public did not provide comments on the initial regulatory impact assessment, all of the members of the public that responded had negative comments and raised concerns regarding the affordability of care and how the cost of living is not being considered. Financial issues was a common theme throughout.

Concerns were also raised about the standard of care provided and how prices are rising despite "not providing a service that fits the elderly and disabled".

Local authority representatives

Whilst over half of local authorities and providers did not provide comments or views on the initial regulatory impact assessment, a common theme among respondents was regarding the carrying out of additional financial assessments and how this would be an additional financial strain and a strain on staff resources.

Third sector representatives

Over half of the third sector responses received did not offer any further comments however, financial issues were again a common theme particularly regarding the affordability of care and cost of living not being factored into the financial assessment process. A common concern being the lack of affordability of care leading to a lack of access to care. Some respondents however, seemed understanding of the situation and the need to raise funds, but disagreed that this is the way to do it

Question 2.5:

What, in your opinion, would be the likely effects of the proposed increase to the maximum weekly charge for adult non-residential care and support services on the Welsh language? We are particularly interested in any likely effects on opportunities to use the Welsh language and on not treating the Welsh language less favourably than English. Do you think that there are opportunities to promote any positive effects? Do you think that there are opportunities to mitigate any adverse effects?

Summary of Responses

Members of the public

Over half of members of the public provided no commentary, while approximately a fifth of members of the public thought the proposed increase to the maximum weekly charge for adult non-residential care and support services will have no positive or negative impact on the Welsh language.

Many of the remaining respondents highlighted the importance of ensuring access to care in people's preferred language and also recruiting Welsh speaking staff to help support this.

"If service users are going to be paying an extra premium then they deserve the right to communicate in the language of their choice, this onus should not fall on the existing care givers to learn and more on the government and councils to attract Welsh speakers into these roles."

Local authority representatives

The majority of local authorities responses thought the proposed increase to the maximum weekly charge for adult non-residential care and support services will have no positive or negative impact on the Welsh language. A fifth did not provide comment.

There were some positive comments regarding the positive financial effects the changes would have for local authorities and how this may help provide more opportunities to support the Welsh language.

"The positive effect will be that Local Authorities will have more funding to address the increasing costs of care and to support those more in need. While this will not address the funding shortfall that Local Authorities are facing it will assisting with this to some extent."

Third sector representatives

Just under half of third sector organisations provided no comment, while almost a quarter of third sector organisations thought the proposed increase to the maximum weekly charge for adult non-residential care and support services will have no positive or negative impact on the Welsh language.

A common theme from the remaining third sector respondents was people receiving care in their preferred language and ensuring "Welsh speaking service-users are not vulnerable to neglect or sub-optimal care due to a linguistic barrier." Some comments

also highlighted the importance of being able to use Welsh for patients with certain conditions such as dementia, and how being able to speak their first language might help make them feel at ease.

Question 2.6:

In your opinion, could the proposed increase to the maximum weekly charge for adult non-residential care and support services be formulated or changed so as to:

- have positive effects or more positive effects on using the Welsh language and on not treating the Welsh language less favourably than English; or
- mitigate any negative effects on using the Welsh language and on not treating the Welsh language less favourably than English?

Summary of Responses

Members of the public

More than half of the members of the public that responded provided no comment while approximately a fifth commented that the changes proposed to increase the maximum weekly charge for adult non-residential care and support services would have no impact.

The main theme among the remaining respondents was that language should be a choice for people.

"Ensure that the Welsh language is involved in every discussion or development and that the linguistic choice and provision is there for each individual."

There were also a couple of comments asking the focus to be on care rather than language.

Local authority representatives

A third of the local authorities and providers that responded provided no comment while more than half of local authorities responses commented that the proposed changes to the maximum weekly charge for adult non-residential care and support services would have no impact. The remaining comments from respondents were related to how cost should not impact on choice of language.

Third sector representatives

Just under half of third sector organisations that responded provided no comment while almost a quarter of third sector organisations commented that the proposed changes to the maximum weekly charge for adult non-residential care and support services would have no impact.

The main areas of comments received were regarding, Welsh language training and Welsh speaking staff, access to care and how costs shouldn't favour a language.

Question 3.1:

Thank you for taking the time to answer our specific questions. If you have any additional thoughts on the proposal, please use this space to report them.

Summary of Responses

Members of the public

Generally, members of the public used this opportunity to present further negative views on the proposals. One of the main reasons highlighted within the comments were around how this would impact on those less able to pay, such as those on benefits. It was felt that the added pressure of any increase in care costs could have a serious effect to people's wellbeing and ability to afford care. It was acknowledged that some people could afford this increase, but those on benefits or living with a disability will be unfairly put into hardship.

"consider the difficulty disabled people already face and not increase the charges as you will put them in even more financial difficulty especially those with severe disability who have limited or no mental capacity."

Related to the issue around people living with disabilities is the current approach being used by local authorities when undertaking financial assessments. Some commented on the need for making care free for all people, and that the current approach to means testing is unfair. It was felt by some that Welsh Government should be responsible for meeting the costs of care, not people receiving care. While some people accepted that care costs are going up, and additional funding is needed, it was expressed by some that the increased charges will not generate enough money to make a significant difference.

"This is not going to generate the 40million plus each council need to claw back. I cannot see why they're even doing it."

In addition to this, another of the main areas raised by members of the public were around the access to and quality of care being provided. It was commented by some that care being provided is inadequate, or that there are challenges in finding or accessing the right care. There may also be unintended consequences of the change, such as increased workload for social workers or people delaying their access to care and resulting in requiring more intensive care at a later stage.

"There are the costs to local authorities of administrating charging policies. Those who undertake the financial assessment are also those assessing, organising, and providing services. These officers are already limited in number and should be freed up to undertake their primary social work responsibilities. There are also revenue services costs including assessment, calculation, billing and debt collection. These costs to local authorities should not be underestimated."

Local authority representatives

The comments from local authority representatives were generally in favour of the uplift. Some comments described the urgent need for the uplift to meet the increasing

cost of providing care. Some even felt that the proposed changes did not go far enough, and that other charges and expenses should be considered. It was stressed that local authorities are facing increasingly challenging financial pressures, and that additional income is needed.

Some local authority representative comments also proposed an annual review process by which inflation can be accounted for. This yearly review process could also then help local authorities with planning and communicating changes to people receiving care. The comparison between England and Wales was also mentioned.

"There is also a wider point that the charging regime in Wales is far more generous than that in England, which whilst rightly this is hugely beneficial to Welsh residents, it does have the potential to encourage cross-border Health tourism which could contribute towards exacerbating the ageing population dynamic over the medium term."

The people responding on behalf of social care providers presented mixed views. While one felt urgent changes are needed to pay for staff wages and to avoid bankruptcy, the other highlighted that people may reduce the amount of care they can afford.

"My concern is that service users would have to reduce their care packages because they cannot afford the increased charge. This would be a risk for the sustainability of our business."

Third sector representatives

17 responses were on behalf of third sector organisations. Some of these organisations expressed positive views around the uplift, mostly focusing on the need for additional fundings to maintain access to services. Some responses highlighted the financial pressures on local authorities and the wider public sector, which is making delivery of social care increasingly unsustainable. It was proposed by some that a stronger investment in terms of prevention is needed to help reduce the overall cost to the public sector. However, it was also recognised that wider considerations of how social services are funded need to be had, and that the increased charge would not be enough to make a significant difference in local authority finances.

The focus of many of the responses from third sector organisation representatives was on the impact the increased charges would have on people's wellbeing and ability to pay for care. It was expressed that the increase would be an unbearable additional expense for people who are already struggling. Some specific groups were mentioned, such as disabled people.

"Disabled people in the UK are more likely to be living in poverty and thus exposed to the worst effects of the cost-of-living crisis"

In addition to this, it was felt that the current arrangements for charging for care, financial assessments and means testing were unfairly applied to some people, and that a review of the whole process is needed.

Several of the comments also focused on how the increased charge may impact people's use of and access to care. Some of the comments described how people are avoiding receiving social care due to the costs involved, and that this can potentially lead to a delay in coming to social services and presenting with more complex or progressed needs. This may result in the higher cost for providing care in the long run.

Finally, many of the comments provided also referred to the National Care and Support Service and the ambition to make social care free at the point of need. It was felt that increasing the weekly charge is in opposition to this ambition and that the time and resources spent in implementing the change could be better used elsewhere.

Government Response and Next Steps

The Welsh Government is grateful to everyone who has participated in this consultation.

With careful consideration of consultation responses and the potential impacts, we have decided, there will be three principal areas of focus as a result of the consultation.

Firstly, Welsh Ministers have agreed to maintain the maximum charge at £100 p/w, so no increase will apply at this time.

Secondly, officials will proceed to address inconsistencies in the operationalising of the charging regime across Local Authorities in Wales and consider whether a shared services approach could be undertaken at either a regional or national level.

Finally, Ministers have agreed to allocate £2.5m funding for this year to Local Authorities with £5m next year and thereafter. The additional £5m per year is to reflect that the maximum charge will not be increasing at this time. This will be included in the HLG settlement for 25/26, now agreed by Cabinet, and will be part of the RSG.