**Consultation Response Form**

Your name: UNISON Cymru Wales

Organisation (if applicable): As above

Email / telephone number: (Alastair Gittins) [a.gittins@unison.co.uk](mailto:a.gittins@unison.co.uk) 07816 53 83 97

Your address: UNISON House, Custom House Street, Cardiff CF10 1AP

**Responses to consultations are likely to be made public, on the internet or in a report. If you would prefer your response to remain anonymous, please place a tick in the box:**

**Proposal 1: to revoke coronavirus-related amendments made by the Regulated Services (Service Provider and Responsible Individuals) (Wales) (Amendment) Regulations 2020**

**Question 1:** Do you agree that regulation 4 (exception from the scope of care home services) of the Regulated Services (Service Provider and Responsible Individuals) (Wales) (Amendment) Regulations 2020 should be revoked on 31 October 2022?

**Agree X**

**Tend to agree**

**Tend to disagree**

**Disagree**

If you disagree, please set out your reasons as to why it should not be revoked at this time:

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| It is sensible that emergency measures introduced during Covid are now removed. |

**Question 2:** Do you agree that regulation 5 (exception from the scope of domiciliary support services) of the Regulated Services (Service Provider and Responsible Individuals) (Wales) (Amendment) Regulations 2020 should be revoked on 31 October 2022?

**Agree X**

**Tend to agree**

**Tend to disagree**

**Disagree**

If you disagree, please set out your reasons as to why it should not be revoked at this time:

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| As with regulation 4, it is sensible that emergency measures introduced during Covid are now removed. |

**Question 3:** Do you agree that regulation 6 (fitness of staff) of the Regulated Services (Service Provider and Responsible Individuals) (Wales) (Amendment) Regulations 2020 should be revoked on 31 October 2022?

(Regulation 6 applies to service providers who provide a care home services, wholly or mainly for adults, or domiciliary support services to adults)

**Agree X**

**Tend to agree**

**Tend to disagree**

**Disagree**

If you disagree, please set out your reasons as to why it should not be revoked at this time:

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| We agree this change should take place, but this is an opportunity to do things much better to the benefit of care workers and those receiving their support.  The change was made in the belief it would “accelerate the recruitment of staff in exceptional services”. As the consultation document points out, “Some providers report difficulties in recruiting generally, but not in undertaking and documenting pre-employment checks,” (p.11). In fact, there is a significant recruitment problem with thousands of vacancies in the sector which these temporary changes did not alleviate.  Social care is a very low paid sector where the responsibilities and workload placed on care workers is inverse to the reward they receive. Until rates of pay are significantly boosted and care workers have parity of esteem with NHS colleagues, there will be continue to real shortages of staff, with the consequent impact on quality of care for clients and completely unreasonable workloads for current staff.  Welsh government has made a concerted push to professionalise the sector with the setting of professional standards and registration of care workers. If care workers are now classed as professionals, they should be recompensed as such, yet many of the mainly female workforce remain trapped in in-work poverty and employment conditions are equally poor.  We know of care workers receiving a fuel allowance of 15p per mile from their employer, when petrol at the pump costs around £1.90 a gallon. They are in effect, paying to do their job.  Training for care workers has been cut, with most private employers providing only the bare minimum required. Some providers pack all the training into two days. Many care workers must pay for their own training or must undertake the training in their own time. Health and safety of all should be paramount and there are wider questions here about the need to raise sector standards (see also our response to Q.10).  Dealing with the documentation people need to register to be care workers in isolation, will not help resolve the recruitment crisis. Pay and improved employment conditions are key. More detail is provided in our response to Q.10 on why care workers and their clients need a National Care Service in Wales.  In the immediate term, UNISON believes employers should pay for DBS checks for their staff when workers haven’t got them and pay care worker registration fees. When registration fees were introduced for teaching assistants, UNISON was able to secure the agreement of local authorities to pay the fees for this group of low paid workers. Unfortunately, most private sector care employers will not negotiate with trade unions. |

**Question 4:** Do you agree that regulation 7 (shared rooms) of the Regulated Services (Service Provider and Responsible Individuals) (Wales) (Amendment) Regulations 2020 should be revoked on 31 October 2022?

(Regulation 7 applies to the provision of accommodation for adults, in shared rooms)

**Agree X**

**Tend to agree**

**Tend to disagree**

**Disagree**

If you disagree, please set out your reasons as to why it should not be revoked at this time:

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| This is a sensible change. We need a social care service we can all be proud of and one where care is person-centred. This is unlikely to be fulfilled by them having to share bedrooms in residential care homes. Individuals requiring care should be treated with dignity and respect and that means we need to investing in the quality of their accommodation.  More detail is provided in our response to question 10 on why private care and the need to generate a profit, undermines the quality of care provided to clients. |

**Question 5:** Do you think there will be any unintended consequences and/or financial implications of revoking any of the amendments made by the Regulated Services (Service Provider and Responsible Individuals) (Wales) (Amendment) Regulations 2020?

**Agree**

**Tend to agree**

**Tend to disagree**

**Disagree**

If you agree, please explain these below:

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**Question 6:** Do you think the revocation of any of the amendments made by the Regulated Services (Service Provider and Responsible Individuals) (Wales) (Amendment) Regulations 2020 will have any positive or any negative impacts on groups with protected characteristics?

Protected characteristics are: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex, and sexual orientation.

1. What effects do you think there would be and on which characteristics?
2. How could positive effects be increased, or negative effects be mitigated?

Please explain below:

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**Question 7:** We would like to know your views on the effects that revoking any of the amendments made by the Regulated Services (Service Provider and Responsible Individuals) (Wales) (Amendment) Regulations 2020 would have on the Welsh language. Specifically on opportunities for people to use Welsh and on treating the Welsh language no less favourably than English.

i. What effects do you think there would be?

ii. How could positive effects be increased, or negative effects be mitigated

Please explain below:

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**Question 8:** Please also explain how you believe the proposal to revoke the amendments made by the Regulated Services (Service Provider and Responsible Individuals) (Wales) (Amendment) Regulations 2020 could be formulated or changed so as to have positive effects or increased positive effects on opportunities for people to use the Welsh language and on treating the Welsh language no less favourably than the English language, and no adverse effects on opportunities for people to use the Welsh language and on treating the Welsh language no less favourably than the English language.

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**Proposal 2: to clarify the description of Category C premises within regulation 49 of the Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017**

**Question 9:** In paragraphs 25 – 32 of the consultation document we have set out our intention to clarify the description of ‘Category C’ premises within regulation 49 of the Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017, and explained out our rationale for this.

Do you have any comments on this proposal or its potential impacts?

Please include any unintended consequences and/or financial implications; any positive or any negative impacts on groups with protected characteristics; and impacts on the Welsh Language.

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| This is a sensible change. As with our answer to Q.4, a social care service we can all be proud means investing in the quality of accommodation for those requiring residential care. |

**Question 10:** We have asked a number of specific questions. If you have any related issues which we have not specifically addressed, please use this space to report them.

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| UNISON represents thousands of care workers and our response is guided by their experience.  Wales is failing its thousands of social care workers and those requiring social care. The sector is in crisis after decades of chronic underfunding and outsourcing. Welsh Government has estimated that Wales will need a further 20,000 care workers by 2030 just to meet the need. It will not attract those numbers to the sector if does not address pay and that means removing private profit. The commissioning system hampers staff from delivering the best and sustainable care they can for their clients.  Corners are cut to improve profit margins and staff are forced to rush client care when allocated too many clients and many are not paid for travel time between client appointments, despite this being working time. Vulnerable people in need of care therefore often receive only 15 minutes of a care workers’ time when they should be receiving 30 minutes. This impacts on the dignity and mental health of the care recipient and the worker.  Often care workers will spend the extra time they believe their ‘client’ deserves, unpaid as their own working hours accumulate throughout the day.  Wales needs a National Care Service with the parity of esteem to the NHS and concerted investment. The experiment of mainly private and ‘voluntary’ sector delivery of care has failed and the commissioning model can only objectively be seen as wasteful and inefficient. Whereas the public sector has the power to shape, fund, direct and deliver, scrutinise and monitor a care service fit for the modern era. A National Care Service would put dignity and respect for clients and staff at its heart.  Private care provision takes money out of the sector in profit and dividend payments and out of our communities. Instead, this money should be reinvested for the public good in Wales. Care should be publicly funded, publicly accountable and delivered for people, not profit.  We would also like to use this opportunity to make a general comment about the importance of including staff in health and safety matters and listening and acting on their concerns. Unlike the other sectors in which UNISON represents public sector workers, this does not happen in social care and it would improve standards for clients as well as staff.  Workplace safety was at the forefront of people’s minds during the Covid pandemic. At this time, UNISON and sister unions in the health service and local government, illustrated the difference partnership working can make by helping Welsh government and employers resolve urgent difficulties with supplies of personal protective equipment (PPE) for their employees.  This did not happen in social care with private employers, many of whom are hostile to trade unions. Evidence shows, safer workplaces are those where trade unions are recognised by the employer. In the NHS and councils, workers had the opportunity to raise their concerns through union reps and in safety committees, or special Covid Forums as an annex of the safety committees or Partnership Forums. In private sector care workplaces, none of the members who contacted us for help with pressing Covid-related questions, had that avenue open to them.  Care workers say employers’ concerns about health and safety focus solely on those receiving care. UNISON wants current guidance to be extended to change this and to enable care inspectors able to ask for evidence providers are consulting and engaging with staff on health and safety matters. This could be achieved by changing the guidance attached to regulation 57 of the Statutory Guidance for Service Providers and Responsible Individuals for care homes, domiciliary support services, secure accommodation services and residential family centre services.  The guidance should also say ‘establish a safety committee and encourage safety representatives to contribute as described in the Safety Committees and Safety Reps Regulations 1977 (as amended) and Health and Safety (Consultation with employees) Regulations 1996 (as amended)’.  This would provide staff with the opportunity to make suggestions to improve things for residents and clients and also to raise concerns and a major improvement in standards would be delivered. |