



Mark Drakeford AM  
Minister for Health and Social Services  
Welsh Government  
5<sup>th</sup> Floor  
Tŷ Hywel  
CARDIFF  
CF99 1NA

Cambrian Buildings  
Mount Stuart Square  
Cardiff CF10 5FL

Adeiladau Cambrian  
Sqwâr Mount Stuart  
Caerdydd CF10 5FL

10 August 2015

Dear Minister,

### **Care Home Review: Analysis of your final response**

I am writing to thank you for providing a final response to my Requirements for Action, which I have now had an opportunity to analyse<sup>1</sup>.

In analysing the response received, I was looking for assurance, through the information provided, that my Requirements for Action will be implemented and the intended outcomes will be delivered for older people.

In a limited number of areas you have been able to provide me with a high level of assurance that the intended change will be delivered. However, in a significant number of areas the response does not provide sufficient detail or evidence that the Requirement for Action will be implemented and the associated change delivered.

---

<sup>1</sup> I am obliged by the Commissioner for Older People (Wales) Act 2006 to keep a register of responses to my Requirements for Action and therefore all of the responses from the bodies subject to my Review will be published on my website together with the analysis of each response.

My Requirements for Action clearly laid out the impact of not delivering the required change on older people's quality of life and it is therefore very disappointing that of the 21 Requirements for Action that the Welsh Government was subject to, only four responses were rated acceptable, with six rated partial and 11 rated as unacceptable. I have attached a detailed analysis of the information you have provided to me.

As I have already advised, I will be publishing an overall commentary on whether I consider that the change I expect to see on behalf of older people will be delivered across Wales and I intend to make a formal public statement in respect of this and action intended by individual bodies subject to the Review. These statements will be made on 11 August 2015. On this date, I will make public my intention to undertake a follow-up Review in 18 months' time. At this stage I will be looking for tangible evidence that the outcomes I expect to see have been consistently delivered across the care home sector.

I will, at a later stage, provide you with information on the scope and approach that I will adopt.

As the level of detail provided to me was so limited in many instances, you may wish to provide me with further information that would provide me with the assurance I need that the required action and intended outcomes will be delivered. This will help inform my 'One Year On' statement that I will be making in November.

Please do not hesitate to contact my office if you would like to discuss this further.

Yours sincerely



**Sarah Rochira**  
**Older People's Commissioner for Wales**

## Welsh Government

### Requirement for Action 1.1

#### Final Conclusion - Acceptable

1.1 A national approach to care planning in care homes should be developed and implemented across Wales. This must support:

- The full involvement of the older person to ensure they have an effective voice, including advocacy support where necessary. This may include independent advocacy or advocacy under the Mental Capacity Act.
- Ensuring the older person's personal history, social and cultural interests, occupation, achievements, likes, dislikes and aspirations are understood and reflected in their future life. This must include meeting the diverse needs of older people who are lesbian, gay, bisexual or trans, those who are Black, Asian or minority ethnic and those with or without religion or belief.
- Transitional support once a decision has been made to move to a care home to ensure that the care planning process begins prior to moving into the care home.
- Meeting the emotional needs of older people to ensure they feel safe, valued, respected, cared for and cared about.
- Meeting the communication needs of people living with dementia and/or sensory loss.
- The needs of Welsh language speakers and those for whom English is not their first language.
- Entitlements to healthcare and assessment for and referral to healthcare services.
- Individual rights versus risk management.
- Multidisciplinary assessment (across Health Boards, Local Authorities and including specialist third sector organisations) and specialist clinical assessment.

This guidance should clearly align to the new National Outcomes Framework, which underpins the Social Services and Wellbeing (Wales) Act 2014.

National reporting of the quality of care plans and care planning against the national guidance and against the intended outcomes of the National

Outcomes Framework should be undertaken annually (see action 6.10).

I welcome Welsh Government's commitment to address all of the issues that I raised in relation to care planning within the Care Home Steering Group.

Through my membership of the Care Home Steering Group as a participant observer, I will be actively monitoring how the model terms and conditions for the provision of residential care through nationally agreed standards will facilitate improved care planning for older people. Of particular note is my response to the Code of Practice on Advocacy under Part 10 of the Social Services and Well Being (Wales) Act 2014, where I have outlined my expectations for the provision of independent advocacy, including during the care planning process.

I also welcome Welsh Government's commitment to work with stakeholders and individuals in receipt of services to produce nationally agreed model standards/specification which will be issued to the sector. My expectation is that older people in care homes will be consulted as part of Welsh Government's work in this area; to ensure that any future changes to the care planning system are based on the real feedback and experiences of older people.

There is a timeline and named accountable individual for the delivery of this Requirement for Action.

## **Requirement for Action 1.2**

### **Final Conclusion – Partial**

1.2 All older people, or their advocates, receive a standard 'Welcome Pack' upon arrival in a care home that states how the care home manager and owner will ensure that their needs are met, their rights are upheld and they have the best possible quality of life. The Welcome Pack will make explicit reference to:

- How the care home manager will support the resident as they move into their new home.
- Standard information about their human rights in line with the

Welsh Declaration of the Rights of Older People.\*

- A Statement of Entitlement to health care support.\*
- Support to sustain and promote independence, continence, mobility and physical and emotional wellbeing.
- Ensuring their communication needs are met, including people with sensory loss.
- Maintaining friendship and social contact.
- Support to help them maintain their independence and to continue to be able to do the things that matter to them.
- The development and maintenance of their care and support plan and what will be included in it.\*
- Ensuring a culture of dignity and respect and choice and control over day-to-day life.
- The skills and training of staff.
- Their right to independent advocacy and how to raise concerns. \*

(The areas marked with \* should be standard in format to ensure consistency across Wales)

I welcome Welsh Government's commitment to consider how a standardised approach to information for older people moving into a care home should be developed. I am particularly pleased that the Care Home Steering Group will be scoping this based on the findings of my Review and Required Actions, and I will be actively monitoring how this develops through my membership of the Care Home Steering Group as a participant observer.

However, while there is a timeline and named accountable individual for the delivery of this Requirement for Action, there is too little detail at present for me to be fully assured that the actions identified in this response will result in the Requirement for Action being met in full.

### **Requirement for Action 1.3**

#### **Final Conclusion - Acceptable**

1.3 Specialist Care Home continence support in care homes should be available to all care homes to support best practice in continence care,

underpinned by clear national guidelines for the use of continence aids and dignity.

There are a number of positive commitments that the Welsh Government has made stating actions that it will take to support best practice in continence care across the care home sector. I welcome that these commitments and actions which have the potential to better support older people to maintain their continence and independent use of the toilet.

I am pleased that the All Wales Continence Bundle Guidance, which was previously issued to the NHS, will be reviewed and adapted to form the basis of Welsh Government guidance for the care home sector.

I also welcome that Welsh Government will be asking Health Boards to explore what access care homes can have to expert advice by the specialist continence advisors. All Health Boards have demonstrated a positive commitment to ensuring best practice in continence care for older people living in care homes in their individual responses to my Review, this demonstration of clear leadership from Welsh Government should also ensure that the continence needs of older people in care homes are not neglected in the future.

Welsh Government state that the Regulation and Inspection of Social Care (Wales) Bill will provide a set of standards for care homes that will 'set out what is expected in a range of areas'. However, the response falls short of offering an explicit statement about whether there will be standards on continence care. I would expect for standards on continence care to be included and as a result, to be placed on a statutory footing which expects older people to be supported to maintain their continence and independent use of the toilet, and have their privacy, dignity and respect accorded to them at all times.

There is a timeline for implementation and named accountable individual for the delivery of this Requirement for Action.

## **Requirement for Action 1.4**

### **Final Conclusion - Acceptable**

1.4 National good practice guidance should be developed and implemented in relation to mealtimes and the dining experience, including for those living with dementia.

There are a number of positive commitments that the Welsh Government has made and actions that it will take that should enable the Welsh Government to support best practice in mealtimes and the dining experience including for those living with dementia. I welcome that these commitments and actions which have the potential to better support older people to enjoy a positive and nourishing dining experience.

I very much welcome Welsh Government's commitment to provide guidance on the importance of mealtimes and the dining experience as a social activity in care homes for older people, that will underpin the standards laid out in the Regulation and Inspection of Social Care (Wales) Bill. This has the potential to place the mealtime and dining experience of older people within a statutory framework, which goes beyond the current National Minimum Standards to ensure that mealtimes are a social and dignified experience for older people.

I am pleased that the Care Home Steering Group will be asked to take this forward as part of their work programme and I will be actively monitoring how this develops through my membership of the Care Home Steering Group as a participant observer.

I am also pleased to note other actions in relation to transferring learning from the NHS in terms of hydration and nutritional pathways. However this focus must not dilute the importance of the mealtime experience particularly for people living with dementia, where research has shown that the impact of social participation and meaningful interactions around meals considerably increases appetite, food intake and people's sense of personal identity and wellbeing.

## **Requirement for Action 2.1**

### **Final Conclusion - Partial**

2.1 A National Plan for physical health and mental wellbeing promotion and improvement in care homes is developed and implemented. This draws together wider health promotion priorities, as well as particular risk factors linked to care homes, such as loneliness and isolation, falls, depression, a loss of physical dexterity and mobility.

The Welsh Government has made a positive statement that it will discuss a National Plan for physical and mental wellbeing promotion and improvement with Public Health Wales in order to establish Welsh Government's response to this in the context of the '1,000 Lives Plus' programme. The Welsh Government has also made a clear commitment to produce standards of care for integrated and coordinated physical care under the Regulation and Inspection of Social Care (Wales) Bill. These will include social interaction, preventative care, mental health, physical exercise, dietary wellbeing, oral health.

I welcome these statements, which if realised, should enable the Welsh Government to ensure that a National Plan for physical and mental wellbeing in care homes is developed and implemented. However, if Welsh Government is to ensure that older people benefit from a national and systematic approach to health promotion that enables them to sustain and improve their physical health and mental wellbeing, then further clarity and detail are needed about how Welsh Government will achieve this Requirement in reality.

I will therefore be tracking the progress of this Requirement to ensure that it is deliverable against wider health promotion priorities as well as particular risk factors linked to care homes such as loneliness and isolation, falls, depression, a loss of physical dexterity and mobility.



## Requirement for Action 2.3

### Final Conclusion - Partial

2.3 A National Falls Prevention Programme for care homes is developed and implemented. This should include:

- Enabling people to stay active in a safe way
- Up-skilling all care home staff in understanding and minimising the risk factors associated with falls
- The balance of risk management against the concept of quality of life and the human rights of older people, to ensure that risk-averse action taken by care staff does not lead to restrictive care.

National reporting on falls in care homes is undertaken on an annual basis (see action 6.8).

I recognise and welcome the joint work that is already underway in respect of a partnership approach to falls prevention, and that work is already underway to develop national indicators for inpatient falls and health and care standards on falls prevention. I agree with Welsh Government that there could be potential to explore how this national campaign could be extended to the care home environment, particularly in relation to the management of risk versus quality of life experience for older people in care homes.

However, in order to fully address this Requirement for Action, it is vital that this work provides sufficient focus on the care home environment, is not simply an add-on to the inpatient environment for it to make a real difference to the lives of older people living in care homes. While there is a timeline and named accountable individual for the delivery of this Required Action, there is too little detail at present for me to be fully assured that the circumstances of older people in care homes have been fully explored, and that my Requirement will be met in full.

## **Requirement for Action 2.4**

### **Final Conclusion – Unacceptable**

2.4 The development and publication of national best practice guidance on the care home environment and aids to daily living, such as hearing loops and noise management, with which all new homes should comply. This guidance should also include mandatory small changes that can be made to care homes and outdoor spaces to enable older people with sensory loss and / or dementia to maximise their independence and quality of life.

I welcome that Welsh Government have stated that they will continue to work in partnership with Care Forum Wales and older people living in care homes to promote best practice, and that the Care Home Review Group will lead on scoping this work. I note that the response to another Requirement for Action (3.1) states that proposals relating to how the physical environment in care/nursing homes could be made more dementia friendly were submitted to the Minister in February. However, no further information is provided regarding the progress of these proposals.

It is disappointing that Welsh Government has fallen short of making a clear commitment to produce guidance about the importance of the care home environment for people living with dementia, and sensory loss. My Review has found that such guidance would be of huge benefit for the sector, as many care homes that were visited by my team of social care rapporteurs were simply unaware of how they could better support people living with dementia and / or sensory loss to live more fully through simple adaptations to the care home environment.

The publication of national best practice on the care home environment could help providers to identify where design support may be of benefit to residents to help them engage more meaningfully in their daily lives through stimulating conversation, activities, relationships and enhancing an individual's ability to move around the care home safely and independently. However, a lack of national guidance that could be cascaded across the sector will continue to perpetuate the current difficulties that older people experience in care homes, such as struggling

to communicate with each other and staff, which is known to lead to isolation, withdrawal and depression.

I am unclear what work has been carried out previously with Care Forum Wales and older people living in care homes to accomplish this Requirement, therefore there is insufficient information in Welsh Government's response for me to be fully assured that my Requirement will be met in full. This is disappointing given the wealth of knowledge and expertise that exists in Wales.

### **Requirement for Action 3.1**

#### **Final Conclusion – Unacceptable**

3.1 A national standardised values and evidence based dementia training programme is developed that covers basic, intermediate, and advanced levels of training, which draws on the physical and emotional realities of people living with dementia to enable care staff to better understand the needs of people with dementia.

I welcome that Welsh Government is taking clear action in this area through the investment of £240k for the training of staff and diagnosis of dementia to be improved in Wales, and the ongoing promotion of best practice with Care Forum Wales. I recognise that this funding will support four 'link nurses' who will provide training to care home staff. However the information provided does not provide me with adequate assurance that this action will constitute the development and implementation of a 'national standardised, values and evidence based dementia training programme'.

The response also states that a Welsh Government's Welsh Health Circular requires that at least 50% of staff who have contact with patients have a specific training in dementia. However, it is not clear whether this training could be accessed by non NHS, care home staff. Other than reference to the Social Care Workforce Development Programme, there is no commitment to ensure a national standardised values and evidence based dementia training programme is developed.

This is disappointing as the ability of paid carers to understand the experiences of people living with dementia is fundamental to the quality of life and care that older people will receive. Without assurances that a national values based dementia training programme will be provided which consistently makes clear and supports the provision of appropriate care and support, older people will continue to be at risk of emotional neglect, as well as continuing to be misunderstood and labelled as ‘challenging’ or ‘difficult’ because the care home workforce is unaware of how to communicate and respond to their needs.

### **Requirement for Action 3.6**

#### **Final Conclusion – Acceptable**

3.6 The development of new safeguarding arrangements for older people in need of care and support in Wales should explicitly recognise emotional neglect as a form of abuse, with this reflected in guidance, practice and reporting under the new statutory arrangements

I welcome that the definition of neglect under section 197 of the Social Services and Wellbeing (Wales) Act 2014 includes the failure to meet an individual’s emotional needs, and Welsh Government demonstrates an intent to work with Social Care Wales to ensure the training that is delivered to care home staff includes identifying and tackling emotional abuse and neglect. As safeguarding is a key area in my Framework for Action, I will continue to track this area to ensure that this is reflected in guidance, practice, training and reporting under the new statutory arrangements.

## Requirement for Action 4.1

### Final Conclusion – Unacceptable

4.1 A clear National Statement of Entitlement to primary and specialist healthcare for older people in care homes is developed and made available to older people, including:

- Access to regular eye health, sight and hearing checks
- Dietetic advice and support
- Access to podiatry and dentistry services
- Access to specialist nursing services
- GP access and medicines support
- Specialist mental health support
- Health promotion and reablement support

This must cover both residential and nursing care. Care home providers ensure older people receive information about their healthcare entitlements as part of their 'Welcome Pack' (see action 1.2).

I recognise and welcome the progress that Welsh Government has made in terms of strategic leadership and placing requirements on GPs and Health Boards to improve access to primary and specialist care services for older people in care homes. This has been through, for example, National Directed Enhanced Services, the new Primary Health Plans and Oral Health in Care Home Guidance published in February 2015.

I am however, disappointed that Welsh Government have failed to understand the importance of a National Statement of Entitlement for older people living in care homes, their family members, advocates and care home staff as a means to hold Health Boards to account when older people fail to receive their healthcare entitlements. This undermines the promotion of voice and control, and overall wellbeing of older people who may not be receiving their national entitlements to healthcare.

## **Requirement for Action 4.5**

### **Final Conclusion – Unacceptable**

4.5 Community Health Councils implement a rolling programme of spot checks in residential and nursing care homes to report on compliance with the National Statement of Entitlement and Fundamentals of Care.

While the future role and responsibilities of Community Health Councils are referenced within the Welsh Government Green Paper on NHS quality and governance ('Our Health, Our Health Service'), there is no reference within this to extending their remit to the care home sector. Nor is there currently any explicit reference to the use of lay assessors (and the Community Health Council) in the inspection process within the proposed Regulation and Inspection of Social Care (Wales) Bill, which would have been an appropriate inclusion. Therefore, there is insufficient detail to provide the assurances that I need in relation to the CHC role in care homes in Wales.

## **Requirement for Action 5.2**

### **Final Conclusion – Partial**

5.2 The development and implementation of a national standard acuity tool to include guidelines on staffing levels and skills required to meet both the physical and emotional needs of older people.

Welsh Government state that they are developing a Healthcare Standards Framework; however it is unclear whether this will provide care home managers with the tools needed to make an accurate assessment about the level, and skills of staff required to promote quality of life, and care for residents. While I welcome proposals to develop guidance on staffing and the potential of a pilot in Cwm Taf, the response lacks the specificity that I require to be fully assured that the scope of the proposed staffing guidance and pilot delivery will be equal to my Required Action.

It is essential that any guidance recognises the emotional investment needed, and the time that it takes, to deliver quality of care and life outcomes for residents including, the importance of nurturing social participation, and involvement for resident wellbeing as well as staff wellbeing and sustainability.

## **Requirement for Action 5.6**

### **Final Conclusion – Partial**

5.6 A National Improvement Service is established to improve care homes where Local Authorities, Health Boards, and CSSIW have identified significant and / ongoing risk factors concerning the quality of life or care provided to residents and / or potential breaches of human rights.

The national improvement team should utilise the skills of experienced Care Home Managers, as well as other practitioners to provide intensive and transformational support to drive up the standards of quality of life and care for residents as well as to prevent and mitigate future safeguarding risks.

This service should also develop a range of resources and training materials to assist care homes that wish to improve in self-development and on-going improvement

I am pleased that Welsh Government acknowledges the need for a national improvement approach, and highlights the strategic role of the Care Home Steering Group. I recognise that Social Care Wales will have a role in promoting best practice and collating and analysing data about the sector as a whole, and I welcome the idea of a virtual team that can give practical support. However, there is insufficient further information in respect of how this will operate in practice, and the extent to which it will provide intensive and transformational support that will improve the standard of care and quality of life.

A lack of practical support for care home providers and managers that want, and need, to improve the quality of life and care of older people, can result in care homes where poor practice continues and where the resources of commissioning teams continue to be diverted. Given the clear support articulated by Local Authorities, Health Boards and Independent Care Providers for a National Improvement Service, it is essential that this Requirement is an explicit priority within the work programme for Social Care Wales.

While a virtual network would be helpful; the identification and subsequent use of leading practitioners and organisations that are driving good practice is essential. As Social Care Wales will be funded to champion the social care workforce under new legislation; a practitioner hub that is directly attached to Social Care Wales could deliver real and measurable improvement in the quality of life, and care for older people in care homes in Wales.

### **Requirement for Action 5.7**

#### **Final Conclusion – Unacceptable**

5.7 The Regulation and Inspection Bill should strengthen the regulatory framework for care staff to ensure that a robust regulation of the care home workforce is implemented for the protection of older people

I see no evidence in the Regulation and Inspection of Social Care (Wales) Bill, as currently drafted, that robust regulation of the care home workforce will be implemented for the protection of older people. My Review makes clear the impact upon the individual and the sector of not doing so. I recognise and welcome the National Assembly for Wales Health and Social Care Committee Stage 1 report into the Bill<sup>2</sup>, which endorses my Requirement for Action and would expect the Welsh Government to take this forward as an urgent priority.

---

<sup>2</sup> National Assembly for Wales, Health and Social Care Committee, Regulation and Inspection of Social Care (Wales) Bill, Stage 1 Committee Report, 2015



## **Requirement for Action 5.8**

### **Final Conclusion – Unacceptable**

5.8 A cost-benefit analysis is undertaken into the terms and conditions of care staff. This analysis should include the impact of the introduction of a living wage and / or standard employment benefits, such as holiday pay, contracted hours and enhancements.

I welcome that the Welsh Government will continue to work with the sector to improve their terms and conditions, and the improvement functions that Social Care Wales will have under the Regulation and Inspection of Social Care (Wales) Bill. However, other than a commitment to improve data collection and analysis about the terms and conditions of the social care workforce, there is nothing in this response which indicates whether a costs benefits analysis will be completed or not.

The fact that Welsh Government states that ‘Local Authorities and providers have a more direct interest in this’ does not appear to demonstrate leadership in terms of ensuring that the true value of delivering care is recognised and understood. Of particular note is Welsh Government’s recent commitment to undertake similar work in relation to ‘conducting research on key issues in the home care workforce’<sup>3</sup>.

## **Requirement for Action 6.1**

### **Final Conclusion – Unacceptable**

6.1 A single outcomes framework of quality of life and care, and standard specification, is developed for use by all bodies involved in the regulation, provision and commissioning, and inspection of care homes and should flow through to become a defining standard within the future Regulation and Inspection Act. It must include references to the following\*:

1. Independence and autonomy
2. Control over daily life
3. Rights, relationships and positive interactions

---

<sup>3</sup> <http://gov.wales/about/cabinet/cabinetstatements/2015/homecare/?lang=en>

4. Ambitions (to fulfil, maintain, learn and improve skills)
5. Physical health and emotional wellbeing (to maintain and improve)
6. Safety and security (freedom from discrimination and harassment)
7. Dignity and respect
8. Protection from financial abuse
9. Receipt of high quality services

\*Source: Flintshire Outcomes Framework

One of the most significant failings in the current system is the inconsistency across, or in some instances the insufficient focus on, the key domains that underpin high quality care and quality of life. Whilst I have publicly welcomed the new National Outcomes Framework and its link to the development of CSSIW's Quality Judgement Framework, the response proposes no tangible ways in which a single model will also be embedded within commissioning practice, provider reporting or wider public awareness about that to which they're entitled.

#### **Requirement for Action 6.4**

#### **Final Conclusion – Unacceptable**

6.4 An integrated system of health and social care inspection must be developed and implemented to provide effective scrutiny in respect of the quality of life and healthcare of older people in nursing homes

My Review demonstrated that scrutiny of the healthcare of older people in nursing homes is currently insufficient. If poor practice is not identified then older people will be at continued risk of harm.

While Welsh Government has actively pursued an agenda of integrated health and social care across local authorities and health boards, I am disappointed that this has not been identified as a priority for the Care and Social Services Inspectorate for Wales within the Regulation and Inspection of Social Care (Wales) Bill. I recognise and welcome that the National Assembly for Wales Health and Social Care Committee Stage 1

report into the Bill<sup>4</sup> also raises an integrated approach as an issue, and I expect Welsh Government to use this opportunity to take the action necessary to delivery an integrated approach to health and social care inspection.

While the Welsh Government's Green Paper on NHS quality and governance (Our Health, Our Health Service) poses a question on an integrated approach to inspection, it is disappointing that swift action is not being taken in light of the significant body evidence in relation to the need for an integrated approach to inspection, demonstrated through my Review.

### **Requirement for Action 6.5**

#### **Final Conclusion – Unacceptable**

6.5 Annual integrated reports should be published between inspectorates that provide an assessment of the quality of life and care of older people in individual nursing homes

As I stated above without explicit reference to these requirements within the Welsh Government's Green Paper on NHS quality and governance ('Our Health, Our Health Service), I have no assurance that Welsh Government will deliver this Requirement in reality.

### **Requirement for Action 6.6**

#### **Final Conclusion – Unacceptable**

6.6 Annual report on the quality of clinical care in nursing homes in Wales should be published in line with the fundamentals of care

I am disappointed by Welsh Government's response to this Requirement. There is insufficient information provided that could underpin an

---

<sup>4</sup> National Assembly for Wales, Health and Social Care Committee, Regulation and Inspection of Social Care (Wales) Bill, Stage 1 Committee Report, 2015

assurance of the quality of work that is already underway locally, which raises questions regarding the consistency of this approach and whether it will provide sufficient oversight to identify strategic themes and manage risk.

As evidenced in my Review, there is a gap in the oversight of individuals who are self-funding in nursing homes and references to contract monitoring mechanisms would exclude self-funders.

While I agree that checking compliance is the responsibility of the inspectorate, Care and Social Services Inspectorate Wales do not use the Fundamentals of Care as part of their inspection framework. I can see no action or proposed actions against this Requirement that demonstrate a commitment to ensuring that the clinical care of older people living in nursing care homes is assessed in an effective, joined-up way with clear annual reporting against the Fundamentals of Care, and that risk is being effectively assessed and identified across Wales.

## **Requirement for Action 7.1**

### **Final Conclusion – Partial**

7.1 A national plan to ensure the future supply of high quality care homes is developed, which includes:

- a national demographic projection of need, including anticipated trends in and changes to the type of provision required as a result of increasing acuity and dependency.
- a clear statement on the preferred type of provider base/ market in Wales.
- a national analysis of barriers to market entry.
- a clear statement on investment to grow social enterprise and co-operative social care sectors, particularly in areas with a low provider base.
- a clear action plan to deliver the preferred provider base/market.

I welcome the commitment in the Regulation and Inspection of Social Care (Wales) Bill for a report on a national approach to the market in Wales to be prepared by the Regulators, and a market analysis to be produced by the National Commissioning Board. I await further details to

ascertain whether these are equitable to my Requirement for Action but I am pleased with Welsh Government's direction of travel and commitment, notwithstanding my ongoing concerns in respect of the development of plans to address systemic supply constraints.

## **Requirement for Action 7.2**

### **Final Conclusion – Unacceptable**

7.2 NHS Workforce planning projections identify the current and future level of nursing required within the residential and nursing care sector; including care for older people living with mental health problems, cognitive decline and dementia.

The response from Welsh Government to this Requirement for Action simply states: 'Builds on work underway', which is not acceptable as a response to my statutory Review. Without qualified and competent nurses there is a risk that older people will be placed or left in care homes that are unable to meet their needs. This response does not evidence any knowledge of the seriousness of the current situation, which is that there are insufficient specialist nurses including mental health nurses, to deliver high quality nursing care, and quality of life outcomes for older people in nursing homes across Wales.