



Gofal Cymdeithasol **Cymru**
Social Care **Wales**

Providing public confidence:

A report on the professional
regulatory work of Social Care Wales
2017 to 2018

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Other formats:

This document is also available in Welsh. Copies of this document are available in large print or other formats, if required.

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Registration summary

The Register is largely stable. The highest number of new registered persons were residential child care workers.

11,570 number of registered persons on the Register of Social Care Workers at **31 March 2018** (11,272 at 31 March 2017)

1,237 (**10.69%**) of registered persons removed from the Register, a **decrease of 239** compared to the previous year

99.91%
of applications for renewal
were received online



99.95%
of applications to register
were received online

Fitness to practise summary

158
the number of active
investigations on registered
persons (about 1.4% of the Register)
where allegations called their
fitness to practise into question

1%
of all social workers registered
were referred. This a downward
trend from previous years
(2% in 2016-17; 1.7% in 2015-16;
1.8% in 2014-15).

111
(70%) of referrals related to
registered persons who were
subject to disciplinary processes

46%
of the referrals were from the
residential child care workforce

Hearings summary

22
final hearings held with
12 registered persons
removed from the Register
(0.1% of the Register)

Of the 12 who
appeared before a final
hearing and were removed
from the Register:

6
were residential
child care workers

3
were social workers



2
were adult care
home managers

1
was a residential
child care manager

1. Introduction

Our purpose is to protect, promote and maintain the safety and well-being of the public in Wales. This report outlines how we provide public confidence to ensure that social care workers are of good character, confident and competent to provide safe care to the people of Wales and support for their families.

Keeping a Register of Social Care Workers (the Register) is part of this process. It provides those on the Register with professional recognition, as well as access to training and development resources. It also provides public assurance to those using care and support services as they can be sure that a registered worker is suitably qualified and has agreed to meet the professional standards we have set for the sector.

The transition from the Care Council for Wales to Social Care Wales has been seamless for our regulatory role as we have maintained a stable Register of workers, started to realise the benefits of our new legal powers and prepared for more workers registering with us.

There is a very small proportion of registered persons who appear before a final fitness to practise hearing, indicating that the majority are working to the required standards of conduct and practice outlined in the *Code of Professional Practice for Social Care*.

Our fitness to practise process aims to protect the public from those who are not fit to practise. If a worker is not fit to practise they can be removed from the Register, which means they will be unable to practise in Wales. We take appropriate action to make this happen as is highlighted in this report. In every case we aim to reach the outcome that best protects the public at the earliest opportunity.

The nature of the fitness to practise referrals we receive can range from misuse of social media, medication errors, and failures to assess, record or visit people using care and support. Our investigations over the past year have identified concerns in residential child care, and therefore in the quality and suitability of individuals working with our most vulnerable children. We've actively shared this information with the Welsh Government, Care Inspectorate Wales and our colleagues in our improvement and development department to find a better way forward.

Involving people is central to our public protection role. Our Board is mostly made up of members of the public, people who use care and support, and carers. Our Board, through the Regulation and Standards Committee, scrutinises our work to make sure we are upholding and improving standards in the social care sector, and providing services of the highest quality to protect vulnerable people who depend on social care.

We know there is a need to support the workforce to help it become more skilled and ensure it is able to respond to complex care and support needs. By using evidence of good practice to set and maintain standards for the workforce, we can attract and retain the right people in the sector and ensure we have a workforce that is skilled enough to meet the challenges of the future. Our combined efforts in partnership will help us realise our ambition for every person who needs support to live the life that matters to them.

2. Setting and improving standards

The Code of Professional Practice for Social Care and the Code of Practice for Social Care Employers

The *Code of Professional Practice for Social Care* (the Code) forms the basis of our work, providing the standards the registered workforce must meet. Everyone who applies to register with us must agree to follow it when they register and if they are found to have failed to meet its standards they may be subject to fitness to practise proceedings.

This year, to make sure we have a safe, skilled social care workforce that has the support it needs, we worked with the sector to develop the *Code of Practice for Social Care Employers* (Employers' Code). Available from April 2018, it sets clear standards and guidelines for employers to make sure they support their employees. The Employers' Code will be enforced by Care Inspectorate Wales who can take action if employers fail to comply.

Transforming care in the 21st Century

In January 2018, the Welsh Government confirmed that domiciliary care workers must register with us by 2020 and the adult care home workforce by 2022. This will grow the numbers on the Register from 12,000 to an additional 40,000 over the next four years. This extension of the Register is a result of a long-term commitment by the Welsh Government to support and value the social care workforce.

To support the registration of the domiciliary care workforce, we worked with the sector to gain their views on the fee levels, qualification requirements and the Employers' Code. We have been preparing online responses to frequently asked questions about fees, qualifications and timescales to help workers and employers through the process. We've also prepared short films featuring workers, people who use care and support, and their carers who share why domiciliary care is crucial and why it is important to register, professionalise and raise the status of the workforce.

Practice guidance and explanatory guidance

There is published practice guidance for each registered role:

- *The Residential Child Care Worker*
- *The Social Worker*
- *The Social Care Manager*.

We published the first explanatory guidance on the *Duty to report Female Genital Mutilation* in 2016 and *Openness and honesty when things go wrong, the professional duty of candour* in 2017. We also worked with the sector to develop *The Domiciliary Care Worker*, which was available in April 2018, to support the opening of the Register to this group of workers.

Our guidance documents are intended to be a practical tool that aid social care workers in their practice and contribute to good outcomes for individuals. They may also be used to illustrate a potential failure to uphold the standards in the Code. All the guidance is available to registered persons online and via SCWonline.

Development and implementation of the Regulation and Inspection of Social Care (Wales) Act 2016

We introduced a new set of registration, fitness to practise and hearings rules in April 2017. This was to reflect the implementation of the Regulation and Inspection of Social Care (Wales) Act 2016 and the launch of Social Care Wales.

In autumn 2017, we consulted on, and developed, another new set of rules for our registration, fitness to practise and hearings teams that took effect in April 2018. We did this in preparation for extending the Register to domiciliary care workers and adult care home workers.

Information sharing protocols

We updated our memorandum of understanding and information sharing protocol with the Nursing and Midwifery Council, and continued work on information sharing arrangements with Care Inspectorate Wales, the police and ACRO (the National Criminal Records Organisation). These agreements help us in our fitness to practise investigations and enable us to fulfil our other information sharing objectives set out in the Regulation and Inspection of Social Care (Wales) Act 2016.

2.1. The Register of Social Care Workers

Registration is part of our continuing commitment to professionalise the social care workforce and raise the status of workers. It gives people using care and support, and their families, reassurance that workers have the skills and qualifications they need to do their job in a professional, compassionate way.

Registration is currently compulsory in Wales for social work students (from 2004), social workers (from 2005), residential child care managers and workers (from 2007 and 2008), adult care home managers (from 2011) and domiciliary care managers (from 2013).

The Register will open for domiciliary care workers in April 2018. Registration will be voluntary for two years and become mandatory for all domiciliary care workers practising in Wales from April 2020. There were 11,570 registered persons on the Register of Social Care Workers (the Register) at 31 March 2018 (11,272 at 31 March 2017).

The number on the Register has increased slightly in the last year. The main reason for this is the number of new residential child care workers coming into post. Since March 2016 we have seen a year-on-



year increase of residential child care workers on the Register. However, on the whole, the Register is stable with only small fluctuations within the other registered groups.

There is a continuing rise in the numbers of domiciliary care managers and residential child care managers, with the majority of these working in the private sector. Domiciliary care managers tend to outnumber the amount of services registered, showing that there are possibly several deputies registered to promote sustainable provision, while there are fewer registered managers in adult care than there are services. This suggests there are managers managing more than one service and that there are possibly vacancies to fill.

You can find figures and trends for each registered group on our website.

Table 1: Number on the Register at 31 March in roles where registration is mandatory

	31 March 2014	31 March 2015	31 March 2016	31 March 2017	31 March 2018	Change since 31 March 2017	% of mandatory Register
Adult care home managers	1,265	1,243	1,253	1,234	1,213	-21	10%
Domiciliary care managers	533	610	611	628	643	15	6%
Residential child care managers	179	174	185	189	206	17	2%
Residential child care workers	2,222	2,142	2,186	2,436	2,676	240	23%
Social workers	5,987	5,967	6,030	6,050	6,138	88	53%
Social work students	761	733	731	735	694	-41	6%
Total	10,947	10,869	10,996	11,272	11,570	298	100%

Applications from social workers qualified outside the UK

Table 2: Queries and applications 2015-16 to 2017-18

Outcome of application	Total 2015-16	Total 2016-17	Total 2017-18
Query only	7	27	33
Incomplete application cancelled	5	12	13
Transferred from other UK council	4	8	4
Applying, awaiting information	11	7	4
Shortfall, compensation measures required	3	1	2
Registered	16	19	11
Registered as compensation measures completed	0	1	0

The number of applications from outside the UK reduced for the first time in 2017-18. While there has been an increase in the number of queries we received, the number of applications has dropped

because individuals now have to confirm they intend to practise in Wales before we can register them. Previously anybody could apply, even if they intended to practise elsewhere in the UK. But since the introduction of the Regulation and Inspection of Social Care (Wales) Act 2016 this is no longer allowed.

SCWOnline

Our online portal, SCWOnline, has been upgraded in preparation for opening the Register to domiciliary care workers. The development and testing of the system happened between summer 2017 and March 2018, and went live in April 2018.

The new system allows applicants, registered persons and employers to manage all their registration functions online. The system is secure and is available 24/7 and on a number of devices. To support new and existing users of the site, we have organised face-to-face events, along with step-by-step how-to videos and tutorials, which will be distributed early next year.

To date almost all the application and renewal forms we receive are through SCWOnline, and the majority of employers also use the system.



Total qualified in the EU

2015-16 **24**

2016-17 **22**

2017-18 **16**

Total qualified outside the EU

2015-16 **22**

2016-17 **53**

2017-18 **51**

Total qualified

2015-16 **64**

2016-17 **75**

2017-18 **67**

Table 3: Number of applications received online

Applications	2014-15		2015-16		2016-17		2017-18	
Sub-part	Online	% Online	Online	% Online	Online	% Online	Online	% Online
Adult care home manager	165	86%	198	100%	189	100%	265	100%
Adult care home worker	33	89%	70	96%	54	100%	0	0
Domiciliary care manager	108	89%	106	100%	128	100%	155	100%
Domiciliary care worker	43	84%	38	100%	21	100%	0	0
Residential child care manager	8	100%	17	100%	12	100%	15	100%
Residential child care worker	481	89%	614	100%	846	100%	837	100%
Social worker	440	98%	491	99.6%	474	100%	514	99.8%
Social work student	313	100%	308	100%	307	100%	294	100%
Total	1,591	93%	1,842	99.7%	2,031	100%	2,080	99.5%

Between 2014-15 and 2016-017, domiciliary care workers and adult care home workers could register on a voluntary basis. The voluntary register closed for these groups on 31 March 2017, in preparation for them to reapply under the new regulations from April 2018.

Table 4: Number of renewals received online by registered role

Renewals	2014-15		2015-16		2016-17		2017-18	
Registered role	Online	% Online	Online	% Online	Online	% Online	Online	% Online
Adult care home manager	430	86%	145	98%	298	100%	374	100%
Adult care home worker	34	44%	18	53%	7	87.5%	0	0
Domiciliary care manager	43	98%	157	98%	152	100%	97	100%
Domiciliary care worker	66	45%	88	82%	17	89.5	0	0
Residential child care manager	49	96%	20	95%	74	100%	47	100%
Residential child care worker	405	84%	246	97%	461	100%	433	100%
Social worker	1,075	89%	1,191	100%	2,529	99.8%	1,251	99.8%
Total	2,102	84%	1,865	97%	3,538	99.8%	2,202	99.91%

Although almost all the applications and renewals we receive are online, we will always have a small number of paper applications for accessibility reasons and so paper applications are available on request.

3. Maintaining standards

3.1. Assessing suitability for registration

The registration process includes a careful assessment of the evidence provided to make sure applicants and registered persons meet the registration criteria. This year we introduced a case conference process to make registration decisions, which has replaced the registration committees.

The type of cases a registration case conference can consider includes:

- post-registration training and learning (PRTL) shortfall
- failure to complete a qualification
- failure to complete the Continuing Professional Education and Learning Consolidation Programme
- return to practise
- fitness to practise recommendation to refuse registration

This year we held 11 registration case conferences. Four of these were based on a fitness to practise team recommendation to refuse registration, four were because of a failure to complete a qualification before renewal and three were due to a PRTL shortfall. In nine of these cases, registration/renewal was granted, the other two were refused.

Declarations

In applying for, and to maintain their registration, individuals must declare that they are of good character, as well as any health conditions that may affect their ability to work.

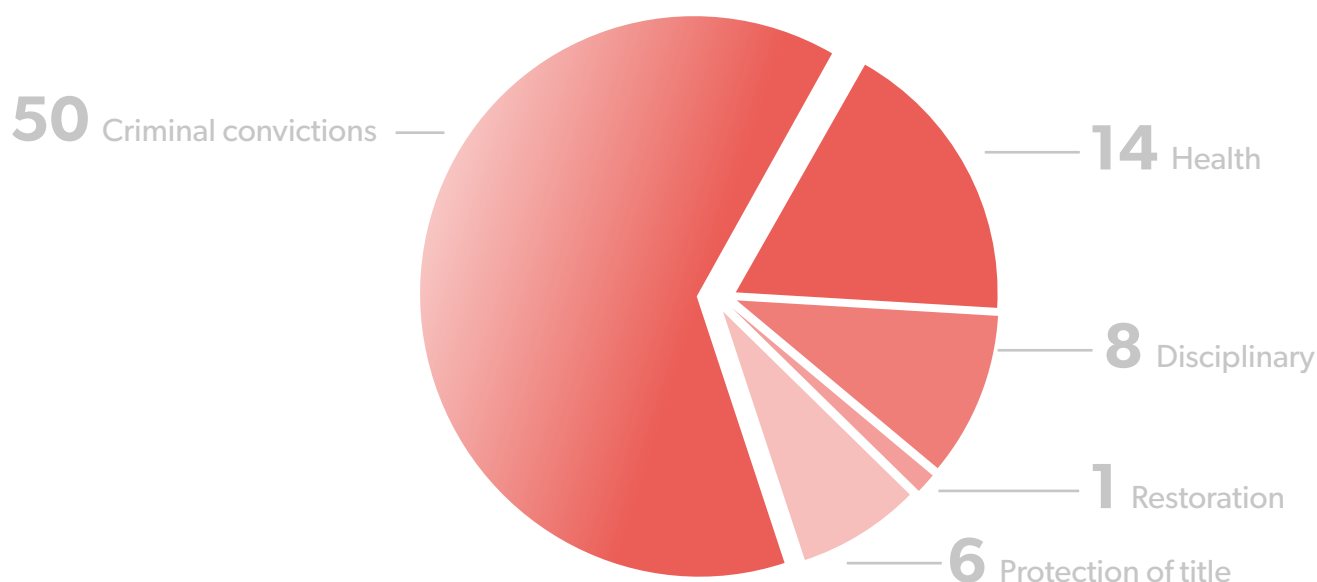
We deal with health declarations as suitability issues rather than as fitness to practise issues, and we will look at whether the health condition affects the individual's ability to carry out their work and their suitability to be on the Register.

Registered persons must declare any changes to their health, character and/or conduct. The applicant/registered person's current or most recent social care employer or equivalent must also provide them with an endorsement of good character.

This year, applicants and registered persons made 79 declarations that met our criteria for further investigation.

Nature of the declarations made

Where we decide not to grant an application for registration, we will refer the application and its supporting evidence to a registration case conference.



3.2. Maintaining registration requirements

Registered persons who fail to renew their registration, or who submit an incomplete application to renew their registration by their renewal date, are removed from the Register by our officers. If our officers are inclined to grant a renewal with a recommendation, or to remove a registered person, the case is referred to a registration case conference for consideration.

Table 6: Removal from the Register by year

A total of 1,237 registered persons were removed from the Register this year. The majority were removed because of a failure to renew their registration or because they requested voluntary removal.

	Debtor	Failed to renew	Voluntary Removal	Student Removal	Removed by Conduct / Health Committee	Total number on the Register by year
2013-14	204	326	580	53	9	11,864
%	1.70%	2.70%	4.90%	0.40%	0.10%	
2014-15	353	527	617	61	11	11,544
%	3.10%	4.60%	5.30%	0.50%	0.10%	
2015-16	513	351	398	41	12	11,564
%	4.40%	3.00%	3.40%	0.40%	0.10%	
2016-17	477	390	564	29	16	11,272
%	4.20%	3.50%	5.00%	0.30%	0.10%	
2017-18	156	566	458	41	16	11,570
%	1.35%	4.89%	3.96%	0.35%	0.14%	

Total removed

2013-14

1,172

9.90%

2014-15

1,569

13.60%

2015-16

1,315

11.40%

2016-17

1,476

13.10%

2017-18

1,237

10.69%



4. Upholding standards

4.1. Referrals about social care workers

The focus of our investigations is whether a registered person is currently fit to practise and, if they have fallen short of the expected standards, how they can be supported to become competent again. Making up for poor practice may include demonstrating understanding of past actions, successfully completing appropriate training or reflective learning, and admitting their practice failings. Not all conduct can be redressed – dishonesty, willful behaviour and some criminal convictions are examples of misconduct that can't be remedied.

Source of referrals

We receive referrals from a variety of sources, including:

- past and present employers about matters that have been subject to their disciplinary processes
- the police
- higher education institutions
- personal declarations made by registered persons
- complaints from members of the public, including people who use care and support, and carers.

The majority of the referrals we received were from current and past employers, and usually related to disciplinary action taken in the workplace.

158

Registered
persons
investigated

1.4%

of the workers
registered with
us



138

cases being
investigated at
31 March 2018

17

cases were
open over an
18-month period

Table 7: Source of referrals – general

	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18
Current employer	88	121	93	121	135	142	100
Past employer	14	34	17	15	5	17	22
Police	5	11	5	1	2	1	1
Personal declaration	48	43	39	48	28	27	16
Other	2	21	15	7	3	4	2
Member of public	30	44	14	6	4	5	4
Higher education institution	7	8	4	5	9	19	11
Other regulators	0	0	0	7	7	9	2
Total	194	282	187	210	193	224	158

There has been a 30 per cent decrease in the number of referrals received this year compared to last year. This decrease appears to be in the number of referrals from employers, although the percentage of referrals from employers (63 per cent) remains at same as last year.

As in the previous year, we only received one referral from the police, which was investigated through our fitness to practise process. The numbers of police referrals have decreased significantly under the Common Law Police Disclosure Scheme. We are working to improve this relationship.

This drop in the level of referrals suggests we need to do some more work to look at the reasons for this reduction, which could be down to more matters being dealt with appropriately by employers. Or if referrals aren't being made as they should be, we may need to carry out more engagement with employers to explain our fitness to practise processes.



Nature of referrals

Table 8: Nature of referrals

	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18
Convictions / Cautions	20	29	15	18	15	13	10
Disciplinaries	116	182	117	136	148	151	111
Complaints	33	53	40	50	4	0	3
Personal disclosures of health conditions	18	18	15	6	6	6	5
Suitability	n/a	n/a	n/a	n/a	10	23	9
Other regulator	n/a	n/a	n/a	n/a	9	6	1
Other – safeguarding	n/a	n/a	n/a	n/a	1	25	19

As in previous years, most of the referrals we received (70 per cent) related to registered persons who were the subject of an employer disciplinary procedure.

The nature of referrals received can range from plagiarism (usually in relation to social work students) to more serious allegations of sexual abuse. The referrals we received also included cases about social media, medication errors, and failures to assess, record or visit people using care and support.

Our investigations over the past year have identified concerns in residential child care, and in the quality and suitability of individuals working with the most vulnerable children. Our evidence tells us that the majority of referrals about residential child care workers were about:

- inappropriate language to, or in front of, children and young people who receive care and support
- inappropriate restraints
- medication errors
- leaving young people unsupervised and at risk of harm
- forming inappropriate (sometimes abusive) relationships with children and young people.

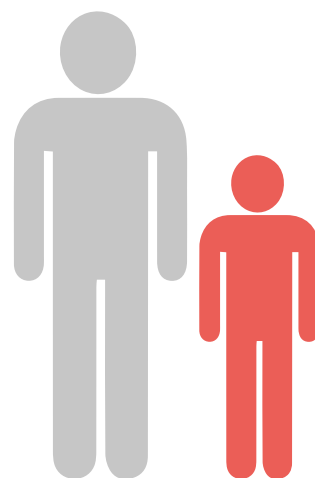
This is concerning when coupled with information from the Register, as we have seen a decrease since 2014 in the number of residential child care workers holding a recognised qualification, with only 53 per cent of the registered workforce holding them in 2017. There is also a high turnover of staff, which affects the numbers undertaking or completing the required qualifications for their registration renewal after three years. Overall, we see a turnover of residential child care workers of approximately 20 per cent every year, and this has been consistent since 2014.

Research shows that stable relationships with adults leads to resilience and better outcomes for children. We also know that children who are living away from their families are likely to have experienced trauma or abuse. Our statistics have led to growing concerns about the stability of the workforce and how equipped they are to support this group of children.

Where we identify patterns of poor practice or concerns, we share this information with Care Inspectorate Wales and our colleagues in our Improvement and Development department. We continue to work closely with the Welsh Government's Ministerial Advisory Group for improving the outcomes of looked after children and we have alerted partners of these disappointing trends. The Inspectorate has built upon our information with a thematic review into residential child care, which is due to be published in 2018-19.

We need to do more work to understand why so many workers choose not to remain in their roles. We will then use this information to try to raise the status of the social care profession, aiming to improve career opportunities to attract and retain more workers to this group.

To take this forward, we are engaging with residential child care providers, workers and managers to help us develop our targeted improvement activities with the sector. This information will also feed into the review of our practice guidance documents, which is due to take place in 2018-19. For example, social media misuse is becoming increasingly common in cases where professional boundaries are crossed and so we will be strengthening our guidance around this to help workers avoid these situations.



Roles of registered persons who've been referred to us

Table 9: Roles of registered persons who've been referred to us

	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	% of each group registered (2017-18)	% of Register (2017-18)
Social worker	95	117	66	64	48	58	39	0.96%	0.51%
Adult care home manager	5	28	22	30	27	31	25	2.51%	0.28%
Adult care home worker	2	10	5	0	2	1	0	n/a	0.01%
Residential child care manager	5	10	5	5	8	5	6	2.65%	0.04%
Residential child care worker	66	89	60	93	85	101	72	4.15%	0.90%
Domiciliary care manager	1	3	4	6	8	4	6	0.64%	0.04%
Domiciliary care worker	5	10	11	3	3	4	0	n/a	0.04%
Social work students	13	15	14	9	12	20	10	2.72%	0.18%

This year the number of social workers and residential child care workers referred to us decreased from 2016-17.

There has also been a 50 per cent decrease in social work student referrals. The reason for this may be that in 2016-17 we received lots of referrals about minor issues such as incorrect referencing. We regularly meet with universities providing social work degree and master's courses in Wales, and we discuss questions about the appropriateness of

referrals in that forum. This likely accounts for the lower rate of referrals as universities are bringing more relevant matters to our attention, while dealing with other matters themselves or during practice placements.

The residential child care workforce made up the largest percentage of referrals, comprising 46 per cent of the referrals made to us in 2017-18. This is consistent with 2016-17 when they accounted for 45 per cent of the referrals.

Outcome of referrals

In 2017-18 we closed **153** cases which included cases referred to us before April 2017.

Our officers closed **120** cases at an internal case conference and **66** of these were older cases.

We closed **55** of the **158** referrals we received in 2017-18. Our officers closed **54** of them at an internal case conference following an investigation. Of these, **35** cases were closed with the registered persons involved being reminded about the *Code of Professional Practice for Social Care*.

Throughout the year, we reported a random sample of these closed cases to our Regulation and Standards Committee, providing them with reasons for the closures to make sure we properly maintained the thresholds and that we received the Committee's approval.

There were **24** final hearings held in 2017-18, **23** of which fell under Social Care Wales (Fitness to Practise) Rules 2014 (referred before 1 April 2017) and **1** under the 2017 rules.



Warnings

Warnings can be given to registered persons where their conduct or practice is at the lower end of the seriousness spectrum or there is considerable insight and remorse. Warnings between six months to three years can be placed on a worker's registration and the reason for this will be given on the public facing register. Registered workers can request an oral hearing with a panel if they don't accept the warning. There is also a two-year period in which we can review the warning. In 2017-18, we issued seven warnings to registered persons.

Undertakings

An undertaking is an agreement between us and the registered person in relation to their work practices. It allows a registered person to continue working and is agreed between the registered person and our fitness to practise officers without being referred to a panel. Undertakings can consist of training, reflective practice or an agreement to complete a particular action.

Undertakings usually need to be completed within a specific timescale and the registered persons must provide evidence that they have complied with them. If they don't comply, their case will be referred to a hearing and the failure to comply will be added as an extra charge. This year, two offers of undertakings were accepted by registered persons – one was accepted by a social worker, the other by an adult care home manager.

Removal by agreement

Removal by agreement allows registered persons to apply to be removed from the Register without being referred to a panel. As part of this process, they admit the allegations and facts of the case in an agreed statement of fact. If an application for removal by agreement is granted, the registered person won't be able to make an application to be restored to the Register for five years. We publish the outcome of a removal under this process on our website. There were four removals by agreement in 2017-18 – one for an adult care home manager, the other three for social workers.

5. The role of our panels

Panel members

Panel members who sit on our hearings will decide whether a registered person is fit to practise, in a fair and open way, to protect public confidence. We have a diverse pool of members from all over Wales, with many who can communicate through the Welsh language. We have 35 lay members and 20 social care members.

Our lay members come from various backgrounds including HR, business, legal, farming, trade union, the third sector, local government, education and research. Lay members have no background or experience in working in social care, but may have experience of using care and support services.

Most of our social care members are either registered with us and currently working in social care or individuals who are not currently registered with us or working in social care but who have vast experience in the field. We have social workers with backgrounds in mental health, adults' services and children's services; individuals with experience of domiciliary care, safeguarding and social work practice teaching; and others with professional backgrounds such as nursing, and care home management and inspection.

Investigating Committees / Interim Order Panels

We are currently working to more than one set of rules, which govern our fitness to practise processes (2014 and 2017). This means we have the following committees or panels that consider allegations of impaired fitness to practise, including considering whether or not to suspend someone from the Register while we investigate allegations.

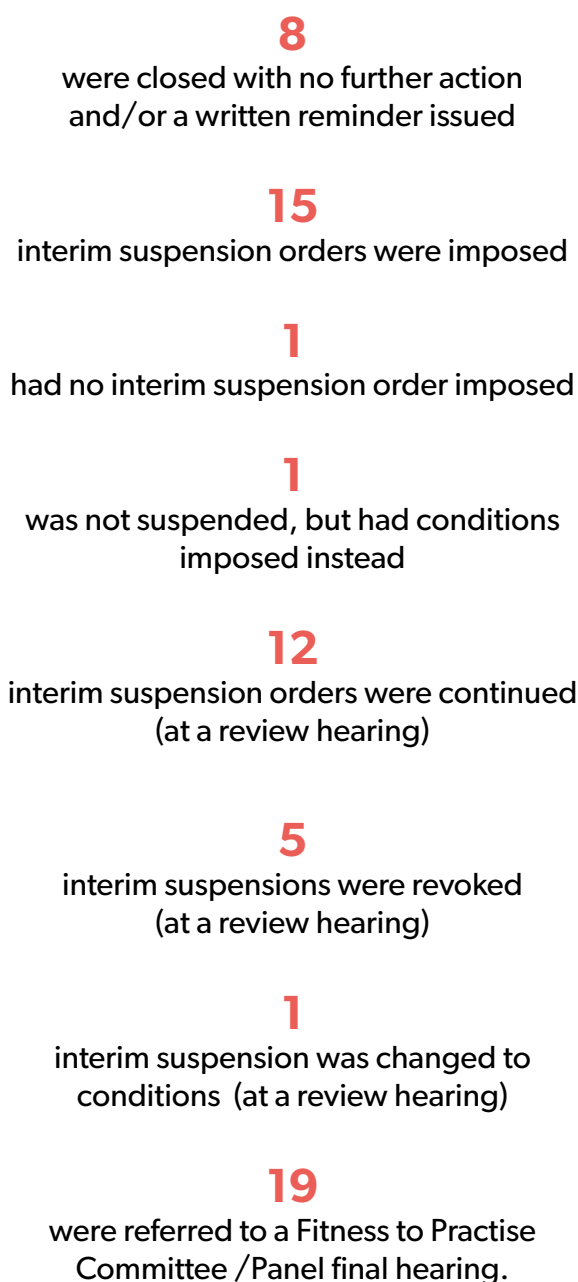
We have:

- Investigating Committee (2014 Rules) – which can suspend or put conditions on a registered person while we investigate allegations. The Committee can also formally refer a case to a final hearing (Conduct Committee and Fitness to Practise Committee, see page 17)

- Interim Orders Panel (2017 Rules) – as above, this Panel can suspend or impose conditions on a registered worker while we investigate allegations.

This year, 48 cases were considered – with 38 cases considered by the Investigating Committee (2014 Rules) and 10 cases by the Interim Orders Panel (2017 Rules).

Here are the outcomes of all the cases referred to Investigating Committee and Interim Orders Panels this year (some would have had two outcomes):



Interim Orders

Interim Orders are imposed without prejudice after assessing the potential risk to the health, safety and well-being of the public, the registered person or a wider public interest if the person continued to work in a registered role while the investigation into an allegation is carried out. Investigating Committees or Interim Orders Panels consider whether to suspend a worker or impose conditions on their registration while investigations are carried out. The Investigating Committee (under 2014 Rules) also considers whether the matter should be forwarded to a final hearing.

There are two types of Interim Orders:

- Interim Suspension Order (ISO) – this can be imposed for up to two years. It suspends a registered person's registration for a set period of time, which means they cannot work in a registered role while they are suspended. The suspension will be reviewed and the registered person can appeal this decision by making an application to the Care Standards Tribunal (CST)
- Interim Conditions of Practice Order (ICPO) or, under the 2017 Rules, Interim Conditional Registration Order (ICRO) – this allows a registered person to continue working in their registered role with conditions. They will have to show us evidence of meeting the conditions. The conditions will be reviewed and they can appeal the decision by making an application to the CST.

This year, 17 cases were referred to a Committee or Panel with a recommendation to impose an ISO. Of these, it was decided not to impose an ISO on one registered person, conditions were imposed on two registered persons and five ISOs were revoked at a

review hearing. The main reason for revoking ISOs at a review hearing is that new information comes to light that reduces the potential risk and therefore the need for suspension.

The types of conduct that warranted suspensions were:

- allegations of serious concerns regarding management of care homes, including allegations of neglect and bullying
- inappropriate language, to or in front of, people who use care and support and their families
- Safeguarding issues – such as leaving young people unsupervised and at risk of harm.

Final hearings

Twenty-six cases were referred to a final hearing this year but only 22 were held, which is comparable with the previous year's 26 and 25 in 2015-16. This shows that the number of final hearings remains steady, equating to 0.2 per cent of the Register, which is again consistent with previous years.

This figure, and those in Table 11 below, show that only a very small proportion of registered persons appear before a final hearing, indicating that the majority of registered persons are working to the standards of conduct and practice required by the *Code of Professional Practice for Social Care*.

This year saw a rise in the number of residential child care workers who appeared before a final hearing from seven to 11, with a slight drop in the number of social workers and adult care home managers.

Table 10: Roles of registered persons before a final hearing

	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18
Social workers	9	17	9	11	8	9	6
Adult care home manager	0	3	6	7	7	7	4
Residential child care manager	4	0	0	0	0	2	1
Residential child care worker	8	3	1	5	6	7	10
Domiciliary care manager	0	0	0	2	2	0	1
Social work students	0	1	0	0	0	0	0
Total	23	25	18	26	25	26	22

Final hearing outcomes

Removal Orders	Case closed with no further action	Hearings postponed / adjourned	Suspension Orders – with conditions	Suspension Orders – without conditions
12	4	3	2	2
	1	1	1	
	Conditions of Practice Order / Conditional Registration Order	Hearing cancelled	Admonishment	

Table 12: Final hearing outcome by role

	Case closed (no further action taken)	Admonishment	Conditions of Practice Order	Suspension Order – with condition	Suspension Order – without condition	Removal
Social worker (6)	0	0	1	1	1	3
Adult care home manager (4)	1	1	0	0	0	2
Residential child care manager (1)	0	0	0	0	0	1
Residential child care worker (10)	3	0	0	0	1	6
Domiciliary care manager (1)	0	0	0	1	0	0
Social work students (0)						0
Total	4	1	1	2	2	12

Removal orders were imposed in the majority of the hearings with 60 per cent of the residential child care workers removed and 50 per cent of the social workers removed.

Last year eight per cent of registered persons received an admonishment (caution), which meant

they could carry on working in their registered role while the admonishment was in place. However this year, only one admonishment was imposed.

This year, panels found the fitness to practise of four registered persons wasn't impaired and closed their cases with no further action.

Appeals

If a registered person wants to challenge a hearing outcome, they can appeal to the First-tier Tribunal (Care Standards). They can appeal against decisions made to impose Interim Orders, registration and renewal of registration refusals, and final hearing outcomes.

The Tribunal is able to uphold the Panel's decision or direct that it does not have effect. The Tribunal can also vary or revoke a decision or impose conditions.

During the year, no appeals were made against a decision taken by the Registrar or a panel hearing.

Registration Appeals Panel

This Panel considers appeals by people whose application for registration or renewal of registration was refused, or from those who were removed from the Register by a final hearing who apply to come back on the Register after five years.

One application for appeal against the decision to refuse registration was received during this year and the hearing was held in April 2018.

6. Looking ahead 2018-19

Looking forward to our organisation's work programme in 2018-19, we will further develop our new improvement, research and data role, as well as maintaining our regulatory and workforce development activities.

We will continue to work with people who use care and support, and organisations, to lead and support improvement in social care. We're committed to working in a way that's collaborative and inclusive.

Some of our main priorities will be:

- extending the Register to new groups and expanding our regulation team to make sure we have sufficient capacity within the organisation to manage this growth
- developing a joint workforce strategy for health and social care, in partnership with Health Education and Improvement Wales
- developing a national workforce strategy for the social care and early years sector with regional and local partners
- developing an attraction and recruitment campaign with regional and national partners
- developing our approaches to improvement and progressing the national priorities
- sharing good practice with the sector
- progressing the development of new early years and social care qualifications with Qualifications Wales, learning centres and awarding bodies.

Throughout the year we will further refine our measures and indicators to help us clearly show the impact of regulation, standards and workforce development on improving the social care and early years workforce. It will also allow us to highlight how our service improvement activities contribute to safeguarding and improving the well-being of people and their communities.