Citizens' Assembly

FOR NORTHERN IRELAND

RECOMMENDATIONS FOR REFORMING SOCIAL CARE FOR OLDER PEOPLE FROM THE FIRST CITIZENS' ASSEMBLY FOR NORTHERN IRELAND

involve
people at the heart of decision-making

QUEEN'S UNIVERSITY BELFAST

WHO ARE THE CITIZENS' ASSEMBLY?

The Citizens' Assembly for Northern Ireland are a group of 75 citizens from across Northern Ireland who came together over two weekends to consider how the social care system for older people should be reformed to be fit for the future. The Citizens' Assembly for Northern Ireland members are:

Adrian, South Down
Alison, East Londonderry
Alison, South Belfast
Anne, West Belfast
Barbara, Lagan Valley
Barry, East Antrim
Bernie, Foyle
Blanaid, Fermanagh And South Tyrone
Brenda, South Belfast
Brenda, Newry-Armagh
Brendan, Mid-Ulster
Brian, South Down
Carolyn, North Belfast
Catherine, North Down
Christopher, East Belfast
Cillian, Newry-Armagh
Conor, South Down
Declan, Strangford
Desmond, South Belfast
Emma, East Antrim
Enda, West Tyrone
Eugene, North Antrim
Francis, South Antrim
Gary, North Belfast
Gavin, South Belfast
Gemma, Newry-Armagh
Gerard, Foyle
Gerard, West Belfast
Harry, Strangford
Iona, Strangford
Irene, South Belfast
Iris, North Antrim
Iris, Strangford

Jackie, Lagan Valley
Jacqueline, Foyle
Jake, Upper Bann
Jarlath, East Londonderry
Jenny, Fermanagh And South Tyrone
Jenny, West Tyrone
Jeremy, East Londonderry
John, East Antrim
John, East Londonderry
Jonathan, South Antrim
Jonathan, Mid-ulster
Karl, Strangford
Kevin, Mid-ulster
Laura, Lagan Valley
Lisa, West Belfast
Marie, Newry-armagh
Marie, East Belfast
Mark, East Antrim
Mark, Newry-Armagh
Mary, West Belfast
Michael, South Antrim
Nicole, South Belfast

Nuala, Foyle
Paddy, Fermanagh And South Tyrone
Patricia, North Down
Richard, Strangford
Robyn, Lagan Valley
Rosemary, Strangford
Ruairí, Fermanagh And South Tyrone
Ruth, Upper Bann
Sally, East Antrim
Sandra, West Tyrone
Sandra, South Belfast
Sarah, North Down
Simon, South Belfast
Siobhan, South Down
Stephen, Mid-Ulster
Thomas, South Antrim
Una, Lagan Valley
Victor, South Antrim
Wendy, North Antrim
William, East Antrim

WHO WAS INVOLVED?

INVOLVE

The Citizens' Assembly for Northern Ireland was developed, designed and delivered by Involve. We are the UK's leading public participation charity, on a mission to put people at the heart of decision-making. We bring citizens and decision-makers together to solve our biggest challenges. www.involve.org.uk

ADVISORY GROUP

The development and delivery of the Citizens' Assembly for Northern Ireland was overseen and supported by a voluntary advisory group:

- David McBurney, Northern Ireland Open Government Network;
- Grainne Walsh, Stratagem;
- Jamie Pow, Queen's University Belfast;
- Jess Blair, Electoral Reform Society;
- Lyn Carvill, WOMEN'STEC;
- Paul Nolan, Independent Researcher;
- Paul Braithwaite, Building Change Trust;
- Robin Wilson, Independent Researcher;
- Roslyn Fuller, Solonian Democracy Institute.

BUILDING CHANGE TRUST

The Building Change Trust was established in 2008 by the Big Lottery Fund with a National Lottery grant of £10 million as an investment for community capacity building and promotion of the voluntary, community and social enterprise (VCSE) sector in Northern Ireland.

COMMUNITY FOUNDATION FOR NORTHERN IRELAND

The Community Foundation for Northern Ireland was established in 1979 as the Northern Ireland Voluntary Trust, before changing to its current name in 2002. Throughout its history, the Foundation has been committed to addressing the challenges of peacebuilding, social justice and effective community development. The organisation works in partnership with communities, encouraging them to be proud of who they are and what they have achieved. With donors, both local and international, the Foundation helps connect them to people and projects who are transforming their communities.

OPEN SOCIETY FOUNDATIONS

The Open Society Foundations work to build vibrant and tolerant societies whose governments are accountable and open to the participation of all people. Working in every part of the world, the Open Society Foundations place a high priority on protecting and improving the lives of people in marginalised communities.

PAUL HAMLYN FOUNDATION

Paul Hamlyn Foundation was established by Paul Hamlyn in 1987. Upon his death in 2001, he left most of his estate to the Foundation, creating one of the largest independent grant-making foundations in the UK. Their mission is to help people overcome disadvantage and lack of opportunity so that they can realise their potential and enjoy fulfilling and creative lives

ACKNOWLEDGEMENTS

Thank you to everyone who was involved in making the Citizens' Assembly for Northern Ireland happen, including the citizens' assembly members, expert leads, guest speakers, facilitators, helpers, funders and the Advisory Group.

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FOREWORD

I was delighted to attend the Citizens' Assembly for Northern Ireland last year, where I witnessed people from a diverse range of backgrounds take part in a meaningful conversation about the facts and perceptions of Health and Social Care here.

Social care for older people is a key issue for our society. Much of my work throughout my term as Commissioner for Older People has focused on the topic of Health and Social Care – it is one of the biggest challenges we face in terms of planning for the future. I have presented concerns to Government at the highest levels, and responded to relevant Health and Social Care (HSC) initiatives which include, among others, the Bengoa Review, the review of Adult Social Care and Support, and the Programme for Government. I have repeatedly called for Adult Safeguarding Legislation to be implemented in Northern Ireland and have made 59 Recommendations to improve the standard of care provided to older people following my investigation into the poor standards of care provided at Dunmurry Manor Care Home. Whilst work around this investigation continues, my priority remains the same – to ensure that older people in Northern Ireland are better protected and are able to access to high quality Health and Social Care, both now and in the future.

As I highlighted when I spoke at the Citizens' Assembly, older people experience a range of barriers to accessing Health and Social Care services, from difficulties accessing hospitals through available public transport, to a lack of clarity over who to make complaints to, to the inability of health and social care staff to devote adequate time to be able to provide person-centred care. Cuts to ancillary transport services have made it even harder for older people to access these services.

With life expectancy rising, there have been increases in the number of people with comorbidities, and this is a particular problem in the 75 and over age bracket. Older people are more at risk of having one or more chronic conditions, which will negatively impact their health and quality of life. They have increasingly complex comorbidities like dementia, diabetes, cardiac diseases, pulmonary diseases and musculoskeletal pain. These can affect quality of life and lead to more permanent reliance on the provision of Health and Social Care services.

The funding of social care has not kept pace with health care funding, nor has it increased in line with demographic changes, resulting in greater overall demand for services. This has most seriously affected older people who need ancillary services, for example to stay at home. Substantive aspects of long term care now have been categorised as social care rather than health care provision. This can be viewed as an attempt to limit the cost of health care because certain key elements of social care are means-tested.

I welcome innovation, reform and co-production when it comes to developing plans for important issues such as Health and Social Care and I believe the voices of Northern Ireland's citizens should be captured. The Citizens' Assembly provides a unique opportunity for people across Northern Ireland, from all ages, and all backgrounds, to bring together and discuss their ideas and broad spectrum of knowledge and experiences. Harnessing the imagination of the Citizens' Assembly is a positive and innovative step and I welcome this approach for other important issues.

I hope everyone will read and consider the ideas put forward in this report and either agree, disagree, debate them, challenge them, but at least discuss them. That way, people from a wide range of communities are not only involved but they are aware of the issues and choices they will face in their future when it comes to their Health and Social Care.

Eddie Lynch,
Commissioner for Older
People for Northern Ireland.

EXECUTIVE SUMMARY

The Citizens' Assembly for Northern Ireland met over two weekends in October/November 2018 to consider how the social care system for older people should be reformed to be fit for the future. It brought together a group of 75 citizens from across Northern Ireland to learn about the issue and deliberate, before reaching recommendations.

The citizens' assembly was set the task to:

- Explore aspirations for social care for older people, including the role the health service, communities and individuals need to play.

- Develop useful, realistic recommendations for delivering a sustainable, fit-for-purpose social care system for older people, future-proofed to cope with the needs of the next generations (within the context of finite resources).

Members of the Citizens' Assembly for Northern Ireland agreed 3 high-level resolutions, which reflect the core themes of their discussions throughout the first weekend. These resolutions relate to: 1) the **need for more funding for social care for older people**; 2) the **need for transformational change**; and 3) the **need for strong leadership**. These resolutions were intended to provide context for the subsequent recommendations made by the members.
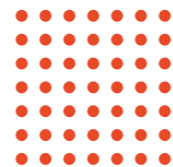
The Citizens' Assembly for Northern Ireland developed and agreed **27 recommendations** across three themes:

1. **The care needs of individuals** – focussing on person-centred social care for older people, able to be responsive to individual circumstances and choices;

2. **Social care systems and structures** – including how care needs are assessed, commissioned and provided; and

3. **Care providers** – focusing on what needed to be done to develop the care workforce and support unpaid carers.

The recommendations set out the range of measures that the members prioritised as needing to take place in order to deliver a sustainable, fit-for-purpose social care system for older people now and in the future. The recommendations of the Citizens' Assembly for Northern Ireland have been passed to the Department of Health for consideration. They form a compelling agenda for transformational reforms and deserve to be carefully considered by politicians, policy-makers and anyone interested in reforming the social care system for older people.

The Citizens' Assembly for Northern Ireland demonstrated that members of the public, when given the time, information and support, are able to consider complex issues and make detailed recommendations. A survey of MLAs found that 52% agreed (compared to 19% who disagreed) that "A future Executive should pay close attention to the findings of the Citizens' Assembly for Northern Ireland pilot on social care".

Citizens' assemblies are one of many approaches that can be adopted in Northern Ireland to involve citizens in policy-making. They offer particular value in addressing some of the complex and contested issues that face Northern Ireland now and in the future. They should be adopted by institutions in Northern Ireland to understand informed public opinion and help to break the political deadlock on important issues.

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INTRODUCTION

The Citizens' Assembly for Northern Ireland is a democratic innovation to put people at the heart of decision-making in Northern Ireland. Citizens' assemblies bring together groups of randomly selected but demographically representative members of the public to learn about and discuss an issue, before reaching conclusions on what should be done. Citizens' assemblies put the trade-offs faced by decision-makers in front of citizens and ask them to arrive at workable recommendations.

Citizens' assemblies, and similar deliberative methods, have been used in the UK, the Republic of Ireland and around the world to address a wide range of complex and challenging issues. For example, the UK Parliament commissioned its first ever citizens' assembly in Spring 2018 to consider how to fund social care sustainably, and the citizens' assembly in the Republic of Ireland met during 2016/17 to consider a number of important constitutional and policy issues facing Irish society.

The Citizens' Assembly for Northern Ireland pilot was established to demonstrate the role that the people of Northern Ireland can play in addressing contested issues in the region. It met over two weekends in October/ November 2018, bringing together a representative group of 75 citizens from across Northern Ireland to consider how the social care system for older people should be reformed to be fit for the future.

The citizens' assembly was set the task to:

- Explore aspirations for social care for older people, including the role the health service, communities and individuals need to play.
- Develop useful, realistic recommendations for delivering a sustainable, fit-for-purpose social care system for older people, future-proofed to cope with the needs of the next generations (within the context of finite resources).

This report sets out the background, resolutions and recommendations of the Citizens' Assembly for Northern Ireland.

BACKGROUND

The initiative to establish a Citizens' Assembly for Northern Ireland grew out of a meeting convened by the Building Change Trust in June 2017 to explore how civil society could deepen democracy in Northern Ireland. A working group, made up of representatives from a number of civil society organisations and academic institutions, was established to develop the idea of a citizens' assembly. In October 2017, Involve was asked by other members of the working group to take the lead on developing and fundraising to establish the citizens' assembly.

Seed funding was provided by the Building Change Trust to develop the idea and an Advisory Group, made up of some members of the working group and new members identified to bring specific expertise, was established to provide advice and oversight. During the first half of 2018, we developed plans for the citizens' assembly, conducted outreach with political parties and the VCSE sector, fundraised and selected the topic. The funding target was met in September 2018 and preparations were completed to run the citizens' assembly in October and November 2018.

TOPIC SELECTION

There are many contested issues in Northern Ireland that might be considered suitable to be addressed by a citizens' assembly. The topic of social care reform was chosen by the Advisory Group from a shortlist of 12 potential topics following research and consultation with the VCSE sector and political parties. This shortlist included topics ranging from social issues such as education reform, justice issues such as the minimum age of criminal responsibility, and constitutional issues such as the Petition of Concern and other outworkings of the Good Friday Agreement.

The shortlisted topics were judged by the Advisory Group against a set of pre-approved criteria to establish which one was best suited to be put to a citizens' assembly in the current climate:

- Political support is likely or possible, and parties are unlikely to brief against it;
- Popular support is likely or possible, and participants unlikely to come under pressure from their communities on the issue;
- Traditional political processes have failed to find a solution;
- A citizens' assembly has a reasonable likelihood of success (i.e. it arrives at a specific recommendation);
- The issue is significant enough to attract political and media attention.

Once the topic of health and social care reform was identified, we undertook a further scoping exercise to establish what the key issues impacting the sector were and what was preventing progress from being made. This entailed speaking to a range of experts, including academics, service delivery organisations, special interest groups and senior staff within the Department of Health and Social Care. From that exercise, the broader theme of health and social care reform was narrowed down to the topic of how the social care system for older people should be reformed to be fit for the future.
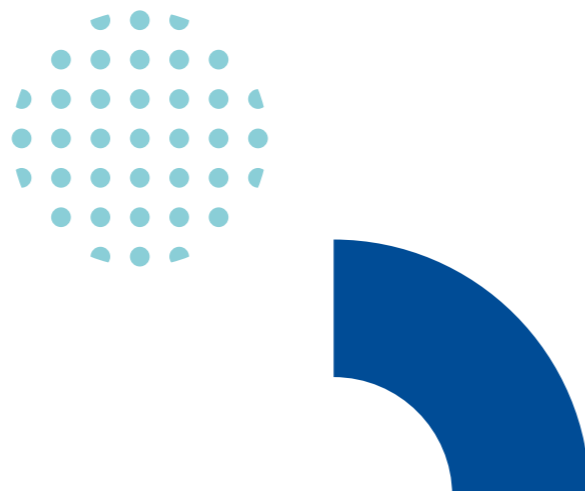
CITIZENS' ASSEMBLY MEMBERS

The members of the Citizens' Assembly for Northern Ireland were recruited with the help of the polling company LucidTalk to be broadly representative of the Northern Ireland population in terms of age, gender, ethnicity, regional spread, community back and socio-economic status – otherwise known as a 'mini-public'.

LucidTalk used a dual method to recruit 80 participants to the citizens' assembly. The main methodology used the established 'opted-in' LT NI Opinion Panel of 11,000 members. A subset of approximately 1,500 members of this panel were targeted, representative of the Northern Ireland population across a range of demographic characteristics. This sample was supplemented with telephone recruitment (approximately 10% of the sample) to reach demographic groups who are underrepresented in the LT NI Opinion Panel. The final sample of 80 participants matched Northern Ireland's demographics to within an error of +/-1.3%. People who held elected office or who held senior decision-making roles within the Health and Social Care sector in Northern Ireland were excluded from participating as members of the citizens' assembly.

**CITIZENS' ASSEMBLY OF NORTHERN IRELAND
2018: 80 MEMBERS - RECRUITMENT DEMOGRAPHICS**

STRATIFICATION CRITERIA		NI POPULATION	ASSEMBLY MEMBERS	COMPARISON
AGE	18–34	20.7%	18.8%	-1.9 %
	35–54	41.9%	44.9%	+3.0%
	55 +	37.4%	36.3%	-1.1%
GENDER	Male	49.3%	51.2%	+1.9%
	Female	50.7%	48.8%	-1.9%
COMMUNITY BACKGROUND	Protestant	44.0%	34.0%	-10.0%
	Catholic	41.0%	35.0%	-6.0%
	Other/Prefer not to say	15.0%	31.0%	+16%
NI REGION BY NI WESTMINSTER CONSTITUENCY I.E. TOTAL OF 18	Belfast	21.4%	23.8%	+2.4%
	SW N. Ireland	16.3%	15.0%	-1.3%
	NW N. Ireland	11.1%	10.0%	-1.1%
	NE N. Ireland	16.6%	16.3%	-0.4%
	SE N. Ireland	22.9%	25.0%	+2.1%
	S N. Ireland	11.7%	10.0%	-1.7%
SOCIAL GRADE	ABC1	56.3%	58.0%	+1.7%
	C2DE	43.7%	42.0%	-1.7%
INVOLVEMENT WITH NI SOCIAL CARE SYSTEM	Low involvement	44.6%	42.5%	-2.1%
	Medium involvement	26.7%	26.3%	-0.5%
	High involvement	28.7%	31.3%	+2.6%

THE WORK OF THE CITIZENS' ASSEMBLY

The Citizens' Assembly for Northern Ireland worked through a three-step process of learning, deliberation and decision-making. A team of trained facilitators supported this process, with two lead facilitators and nine table facilitators at each weekend.

Anonymous feedback collected through surveys shows that the members of the citizens' assembly judged the process to be well executed. For example, almost all members agreed with the statements:

"I believe that good arguments were brought to the discussion" (98% agreed)

"I was given plenty of speaking opportunities during the table discussions" (93% agreed)

"The table facilitators made sure that opposing arguments were considered" (95% agreed)

"My fellow table members respected what I had to say, even when they didn't agree" (92% agreed)

Further details of members' perspectives on the citizens' assembly can be found in the Summary of Participant Evaluations produced by Queen's University Belfast.[1]

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[1] Pow, J; & Garry, J. (2019) Citizens' Assembly for Northern Ireland: Summary of Participant Evaluations. Belfast: Queen's University Belfast & Involve. Available from: https://citizensassemblyni.org/

Weekend one: Learning and deliberation

The first weekend of the citizens' assembly focused on learning and deliberation. It was designed to give all members of the citizens' assembly a grounding in the topic, an understanding of the key considerations related to delivering social care for older people in Northern Ireland, and an overview of the differing perspectives on what could be done to overcome current and future challenges.

Each session was structured around a series of short presentations, interspersed with opportunities for members to reflect on what they'd heard, discuss its implications with their peers, and pose questions to the speakers.

The 'learning' was kicked-off by a scene setting presentation from Dr Alexandra Chapman from Ulster University. It introduced what social care is and how the demographic shifts in our population are changing the context for the delivery of social

care for older people. Dr Chapman was part of the team of academic experts, led by Professor Ann Marie Gray, who worked with members throughout both weekends. Rather than presenting their own views on what is needed to improve the system, their role was to be neutral advisors, assisting the citizens' assembly members to make sense of the different arguments they were presented with, get to grips with the challenges and hone in on opportunities to do things differently.

The first panel of guest speakers to address the citizens' assembly included Sean Holland, Chief Social Worker from the Department of Health, and Eddie Lynch, Commissioner for Older People. Together they presented a high level overview of the challenges around delivering social care for older people. Throughout the remainder of the weekend, members heard from a further 9 guest speakers bringing the perspectives of service users, voluntary sector advocacy groups, academia and service providers to help citizens' assembly members dig

down into what these challenges mean for service delivery on the ground:[2]

- Dr Gemma Carney, Queen's University Belfast;
- Eithne Gilligan and Paschal McKeown, Age NI;
- Clare-Anne Magee, Carers NI;
- Emma Weaver, Inspire Wellbeing;
- Charlotte McArdle, Department of Health;
- Pauline Shepherd, Independent Health and Care Providers;
- Patricia Higgins, Northern Ireland Social Care Council; and,
- Martin and Robert, two users of social care services.

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[2] The presentations of all guest speakers are available at: https://citizensassemblyni.org/resources/

Weekend two: Deliberation and decision-making

The second weekend began with three short videos to inspire creative thinking about how social care for older people could be delivered differently:

- Older people and quality of life: better life in residential care;
- McAuley Place; and,
- Personalisation for older people.

Professor Ann Marie Gray (the academic expert lead) presented an overview of how social care is delivered in Northern Ireland, as a reminder to members of the wider context of their deliberations. This was followed by a presentation from Professor Derek Birrell, who gave more detail about how social care is funded in Northern Ireland, including comparative information from other parts of the UK, which had been requested by members at the end of the first weekend.

The second weekend of the citizens' assembly shifted attention from learning to decision-making. An analysis conducted between the weekends of the things that members identified as the 'important things to bear in mind' identified 3 key themes that, while wider than the scope of the citizens' assembly itself, were fundamental contextual considerations for the recommendations the citizens' assembly would later develop.

The first weekend wrapped up with an opportunity for the citizens' assembly membes to begin identifying what they felt were the most important points, arguments and considerations they had heard over the weekend. This was used to help frame how the citizens' assembly approached the task of drawing conclusions and making recommendations during the second weekend.

Ahead of the second weekend of the citizens' assembly, we prepared a briefing paper to help members get back on-track. This drew out the cross-cutting themes that the citizens' assembly members themselves had identified as the important issues to consider when they came back together again.

Drawing on this, 3 overarching resolutions were developed and proposed to the citizens' assembly members at the beginning of weekend 2:

Resolution 1
We the members of the Citizens' Assembly for Northern Ireland recognise that more funding is needed to resource the provision of social care. We urge Ministers to take decisive action to address this under-investment

Resolution 2
We the members of the Citizens' Assembly for Northern Ireland recognise that the existing service models for delivering social care for older people do not meet the needs and aspirations of current and future service users. We support the call for a comprehensive transformation programme, with public and user engagement at its heart, to design a system fit for the 21st century.

Resolution 3
We the members of the Citizens' Assembly for Northern Ireland call for strong, cross-party collaborative leadership on social care for older people in Northern Ireland. We call on decision-makers to look beyond their party political interests and make the difficult decisions needed to enable long term transformational change.

Members discussed the wording and content of the proposed resolutions in small groups, before suggestions for rewording were taken in plenary. Following a collective process of negotiating and adapting the wording of these resolutions (either accepted or rejected by a show-of-hands vote within the room) each proposed resolution was put to a private paper ballot by the citizens' assembly members. The final wording of the resolutions, and the results of the ballots, are presented in section 2 of this report. Together these set the scene for moving on to the decision-making phase of the process.

During the first weekend of the citizens' assembly, members had been asked to identify the values and principles that should underpin a social care system for older people in Northern Ireland that was fit-for-purpose for the 21st century. The members were asked to consider how the values and principles they had identified might be realised in practice. Following these discussions members of the

citizens' assembly were asked to rank the relative importance of each of these sets of values and principles (in a private paper ballot) in preparation for developing more specific recommendations.

Three themes were identified by the facilitation and academic team, selected to focus on the topics and issues prioritised by members at the end of the first weekend:

1. **The care needs of individuals** – focussing on person-centred social care for older people, able to be responsive to individual circumstances and choices;
2. **Social care systems and structures** – including how care needs are assessed, commissioned and provided; and
3. **Care providers** – focusing on what needed to be done to develop the care workforce and support unpaid carers.

Each citizens' assembly member was asked to choose one of the three themes to develop ideas for recommendations. Approximately half of the members chose to focus on 'the system', a quarter on 'the care needs of individuals' and a quarter on 'care providers'. Working in these smaller self-selected groups, members spent the Saturday afternoon in discussion and deliberation about the types of recommendations that should be put forward for a vote by the full citizens' assembly on the Sunday.

Overnight, the facilitation and academic team took the ideas for recommendations from each table discussion and consolidated them into 27 recommendations. These were presented back to the citizens' assembly on the Sunday morning. The citizens' assembly members considered the wording of each recommendation in small groups and, where necessary, proposed alternative wording. To do this, a 'traffic light' system was introduced where each member of the citizens' assembly had the opportunity to indicate whether they were happy with the recommendation: either by 'green lighting' that they were happy with the wording, 'amber lighting' to indicate that they could live with the wording or 'red lighting' to identify that they wanted a significant change to wording.

All 'red light' concerns were fed back to the facilitation and academic team for revision to the proposed recommendation. While this feedback was being processed, the citizens'

assembly members had the chance to discuss the implications of the proposed recommendations, including any reasons they had for, or against, why the recommendation should be passed.

The proposed revisions to the wording of the recommendations were then presented back to the citizens' assembly in turn, and a show-of-hands vote was used to accept or reject the changes. The recommendations, subject to any revision agreed in the room, were then put to a private paper ballot of citizens' assembly members. The final wording of the recommendations, and the results of the ballots, are presented in sections 3, 4 and 5 of this report.

Recommendations from the Citizens' Assembly for Northern Ireland were passed if they received support from more than 50% of the ballot papers cast. In voting, however, members were given the option of strongly agreeing, agreeing, disagreeing or strongly disagreeing. A breakdown of the levels of support for each recommendation is included in Annex A.

The recommendations made by the Citizens' Assembly for Northern Ireland are not directed towards a particular department or institution. Instead they collectively set out the range of measures that the members prioritised as needing to take place in Northern Ireland in order to deliver a sustainable, fit-for-purpose social care system for older people now and in the future.

02

RESOLUTIONS OF THE CITIZENS' ASSEMBLY FOR NORTHERN IRELAND

The Citizens' Assembly for Northern Ireland agreed 3 high-level resolutions that reflect the core themes of their discussions throughout the first weekend. These resolutions were intended to provide context for the subsequent recommendations made by the members.

RESOLUTION ON THE NEED FOR MORE FUNDING FOR SOCIAL CARE FOR OLDER PEOPLE
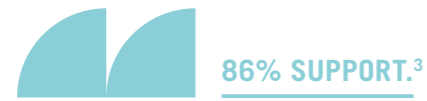
86% SUPPORT.[3]

WE THE MEMBERS OF THE CITIZENS' ASSEMBLY FOR NORTHERN IRELAND RECOGNISE THAT MUCH MORE DEDICATED FUNDING IS NEEDED TO REFLECT DEMAND AND RESOURCE THE APPROPRIATE PROVISION OF IMPROVED SOCIAL CARE FOR OLDER PEOPLE. WE URGE MINISTERS AND DECISION-MAKERS TO TAKE DECISIVE AND ACCOUNTABLE ACTION TO ADDRESS THIS UNDER-INVESTMENT AND THE POOR MANAGEMENT OF RESOURCES.

Throughout the citizens' assembly, in both the presentations made to the members and in their own deliberations, the need for additional resources to meet rising demands was a topic continually returned to. It was also widely acknowledged that this was not simply a challenge facing Northern Ireland but one applicable across the UK, and much of the developed western world.

The focus of the Citizens' Assembly for Northern Ireland was not to explore how social care for older people should be funded, however there was clear frustration from members that this known issue was not being effectively addressed by government.

"It's not just about chucking more money at the system"

"Having critically analysed the need for effective use of resources for social care we urge ministers to stave off this impending crisis within the sector"

"We need to support ring-fencing expenditure on social care – as opposed to it disappearing into the pot."

"We need innovative ways of looking at funding social care for older people"

This resolution was formulated within the context of continued uncertainty about the reinstatement of Stormont, the simultaneous Northern Ireland Affairs Committee inquiry into 'Funding priorities in the 2018-19 Budget: Health' which had a specific focus on what levels of funding are needed to support the effective provision of social care in Northern Ireland, and the UK Select Committee Inquiry into the future funding of adult social care. The call for decisive action made in this resolution was therefore addressed to Ministers (at all levels of government) and others with a potential decision-making role.

A related preferential vote was also taken to give members the chance to record where they thought the additional resources required to deliver social care for older people in the future should come from. The results of this ballot are displayed below.[4] However, as this topic had not been the focus of significant deliberation throughout the weekends, it should be read as indicative of the members' general positions only.

PREFERENCES FOR HOW SOCIAL CARE FOR OLDER PEOPLE SHOULD BE FUNDED IN THE FUTURE

Category	Value
Entirely publicly funded (recognising that it is likely to mean paying higher taxes).	~146
Provided by a mix of public and private funding - but the weighting should be more towards public funding.	~170
A mix of private and public funding - but weighted more towards private funding.	~66
Entirely privately funded by individuals and their families.	~10

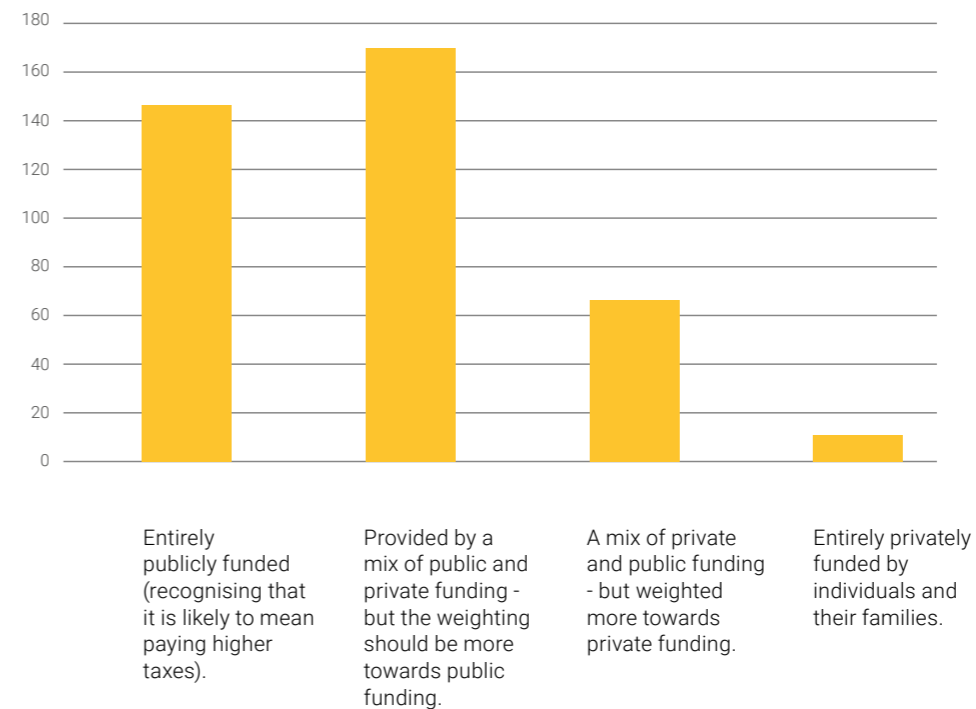[3] Several of those who did not support the resolution noted on their ballot paper that the addition of the words 'and the poor management of resources' added a secondary element to the resolution and made it one they could no longer support.

[4] The graph shows the results of the vote counted using a linear borda count method (i.e. 1st preference weighted at 3, 2nd preference weighted at 2, etc).

RESOLUTION ON THE NEED FOR TRANSFORMATIONAL CHANGE

During the first weekend of the citizens' assembly, many members identified in their 'important things to bear in mind' that the way social care for older people is delivered in Northern Ireland does not meet the needs of many older people at present, and is unlikely to deliver what future generations want in their older age.

Deficiencies in the system were identified by the citizens' assembly members as stemming not simply from limited resources, but more importantly the fact that the nature of people's needs, the shape of society (e.g. families having fewer children, more women in the workforce, more intergenerational dispersion) and individual expectations and aspirations for how people want to live in their older age, have changed since the delivery models were established. It was, however, also acknowledged that, despite its faults, the system is not entirely failing current users, as many older people are satisfied with their care and circumstances.

There was a strong feeling among members of the citizens' assembly at the end of the first weekend that there was a need to radically rethink the system, rather than 'tinkering around the edges'. This led to the resolution supporting a comprehensive, inclusive transformation process to redesign how social care for older people is offered and understood.

> *"Most people do not realise the service failings until they need the service."*

> *"We need to change the thinking of service delivery and look at innovative ways of delivery."*

> *"Social care cannot be changed in isolation. Health model needs changed urgently back to a preventative model. And ultimately long term reductions in social support."*

The members, however, were also quite clear that engagement on this needed to reach beyond existing users of social care services for older people and include the wider public and experts, if the results were to be fit-for-purpose for future generations of care users and reflect wider social changes and expectations.

> *"Need to be listening to the professionals and the users and their families"*

> *"You cannot effectively transform this system without input from informal carers who carry a massive burden of work."*

> *"To design a fit-for-purpose system you need input not just from users, but from 'us' the future users of these services."*

97% SUPPORT

WE THE MEMBERS OF THE CITIZENS' ASSEMBLY FOR NORTHERN IRELAND RECOGNISE THAT THE EXISTING SERVICE MODELS FOR DELIVERING SOCIAL CARE FOR OLDER PEOPLE DO NOT MEET THE NEEDS AND EXPECTATIONS OF CURRENT AND FUTURE SERVICE USERS. WE CALL FOR A COMPREHENSIVE TRANSFORMATION PROGRAMME, WITH PUBLIC AND USER ENGAGEMENT AT ITS HEART, TO DESIGN A SYSTEM FIT FOR PURPOSE.

RESOLUTION ON THE NEED FOR STRONG LEADERSHIP

Throughout the first weekend of the citizens' assembly, the members consistently questioned the speakers about why the system seemed to have stagnated despite there appearing to be a high degree of consensus from experts about the type of changes needed.

81% SUPPORT

WE THE MEMBERS OF THE CITIZENS' ASSEMBLY FOR NORTHERN IRELAND CALL FOR STRONG, CROSS-PARTY COLLABORATIVE LEADERSHIP ON SOCIAL CARE FOR OLDER PEOPLE IN NORTHERN IRELAND. WE CALL ON DECISION-MAKERS TO LOOK BEYOND THEIR PARTY-POLITICAL INTERESTS AND MAKE THE DECISIONS NEEDED TO DELIVER TRANSFORMATIONAL CHANGE.

Through discussion, citizens' assembly members identified that one of the key obstacles preventing change and modernisation in the social care system was a lack of sustained, long-term leadership.

"Change is needed for new ways of doing social care for older people."

"It's much too important to leave with our unstable government"

The role of party politics was identified by members of the citizens' assembly as a concern, particularly as electoral cycles tends to support decision-making geared towards achieving results within the course of a traditional electoral cycle, rather than long-term transformation change. This led to the resolution calling for strong, cross-party, strategic leadership, willing and able to make difficult (and perhaps unpopular) decisions on social care in the short-term in order to deliver long-term gains.

"Party politics should have no place in deciding the care of the elderly"

"Take it out of politics so it can be protected."

The resolution was underpinned by a sense from members that, if the public were more aware of the crisis in the system and had the information to enable them to understand the need for change, then the public would grant their elected members the 'permission' to make the decisions needed.

"All people are affected by the delivery of a social care policy. We need bi-partisan leadership, inclusive of everyone's needs, and not just one section of community."

"Perhaps an independent group could be appointed consisting of political, financial, and social care etc experts to make the decisions"

03

RECOMMENDATIONS FOR A MORE PERSON-CENTRED SOCIAL CARE SYSTEM

The aspiration that social care for older people should be planned and delivered in a more person-centred way (i.e. in ways that were more responsive to the needs of an individual and enhanced their quality of life) featured heavily in discussions throughout the Citizens' Assembly for Northern Ireland.

A series of values that should underpin a person-centred approach to delivering social care for older people were developed by the members. These are presented below in the order they were prioritised by the citizens' assembly.[5]

These values helped inform the recommendations developed by the members of the citizens' assembly under this theme.

VALUES THAT SHOULD UNDERPIN A PERSON-CENTRED APPROACH TO SOCIAL CARE FOR OLDER PEOPLE

1. Address a person's holistic needs

When exploring what this value would mean in practice, members focussed on the assessment process for social care provision, noting that assessment should "not just be about physical incapacity" but also "to evaluate where the person sits in their family, and community, and how this relates to their needs."

The citizens' assembly's aspirations for a holistic approach to the assessment of social care needs was that it should "include emotional, physical, mental and psychological aspects… [and be] an inclusive and continued (on-going) assessment process".

2. Be tailored to an individual's priorities for their life (outcomes focussed)

An outcomes focussed approach was described by citizens' assembly members as one that focussed on what an individual wants and needs in order to have a 'fulfilling' life. This translated into an approach to the assessment process that would be "about more than what a person needs to survive (as is currently the case) – people need to be able to do more than 'existing' rather they need to be 'living'." Comparisons were drawn with the 'statementing' system currently used annually for people with disabilities, which allows them to identify their priorities, and suggestions were made that a similar process should underpin planning for social care provision for older people.

3. Preserve the dignity of the individual

Members of the citizens' assembly emphasised that the way social care is provided in Northern Ireland needs to ensure that it respects the dignity of both the cared for and their carers (paid and un-paid).

> "Care should reflect the diverse cultures and identities of users."

> "Respect and dignity drive the others – if these are lived the other [values] will fall into place."

4. Offers genuine choice

When discussing the importance of choice, members' balanced this with an appreciation of what was a reasonable expectation – focusing specifically on the importance of the choice of 'offer' regarding the type of home-help required (including the option of having needs met outside the state run system) and the choice of location of residential accommodation if/when required.

> "Genuine choice lets the individual enjoy their life while having their care needs met"

5. Be 'rights' based

For most of the members a 'rights' based approach equated with being entitled to the same standards of care regardless of wherever you live:

> "Postcode shouldn't dictate service."

There were, however, a number of other 'rights' discussed relating to this value, including the need for care homes be able to accommodate older gay people and ensure their ability to maintain their relationships, the ability to bring pets into care homes when this may have been an important relationship for the individual, and the 'right to a family life' and how this can be delivered for those without family nearby through integration into the wider local community.

6. Focus on integration into the community

The idea that there needed to be a system of social care that kept people within their communities was expressed strongly throughout the citizens' assembly:

> "Do not remove the elderly from our communities and store them in nursing homes."

Alongside this was also the recognition that communities themselves needed to do more to support this to "avoid people being left in communities without support."

7. Involve family and friends

This was seen by the citizens' assembly members as being particularly important when the individual requiring care may no longer have the capacity to make choices regarding their own wellbeing, as family and friends were the most likely to understand, and be able to advocate for, the things that would be important to that individual.

Involving family and friends, however, was also seen to be an essential element of understanding what support and links to the wider community an individual already had, so that assessment processes could more realistically determine the person's social care needs.

8. Focus on independence

The desire to maintain an older person's independence was balanced by members of the citizens' assembly with valuing a person's social needs: i.e. " not leaving people isolated in their homes just to maintain their independence." This accounts for its lower overall ranking among the values identified as important for the social care system.

9. Be respectful

The idea of respectful social care delivery focussed on the relationship between the care provider and service user and included principles of choice, boundaries and standards. Many members felt t hat this would be a by-product of some of the other values identified, which accounts for its relatively low ranking.

10. Be flexible

The essence of what members hoped for, when prioritising this value, was greater flexibility in how social care for older people was currently provided, and much more focus on an iterative, needs-based approach to meeting care needs.

[5] The values were prioritised using a preferential voting system, where each member was asked to rank their top 6 values.

RECOMMENDATIONS ON MOVING TOWARDS A MORE PERSON-CENTRED SOCIAL CARE SYSTEM

Recommendation 1

To review the assessment process to move towards continuous assessments which are needs based and not resource led. The process of assessment and service allocation should be transparent.

97% SUPPORT

The need to tailor assessments and service offers more towards the needs of the individual was seen as vital to ensuring that the delivery of social care was more person-centred. A key principle behind this recommendation was that people should have more choice in the type of care package they received (rather than the nature of their package being driven by the availability of a particular model of care delivery) and the flexibility to adapt this as their needs changed.

"Make the assessment process more focussed on what is needed rather than what resources are available"

"Broader approach intended and not just the current model of how care is designed and delivered"

"Gives a more accurate record of need – whether being met or unmet"

"Would help to accurately project future needs and prepare for them"

This was considered by members to be a "forward thinking" model of assessing care needs that could also "improve a person's quality of life" by increasing choice and flexibility. It was, however, also acknowledged in most of the discussions that this also "needs a programme that is able to meet the needs identified" and that this could, particularly in the short-term, increase demand on resources.

"Assessments [would] still need to have a focused point and not be indefinite in all cases as this would raise costs."

Although not explicitly mentioned in the recommendation, central to much of the discussion about this was the opportunity that

Direct Payments provided as a route to enable greater choice, particularly in relation to creating flexibility in the delivery of personal / domiciliary care. Expanding the range of services that Direct Payments could be used for was also seen as a key way of allowing social care to be more user-led, as people could choose the types of support they most wanted and which best met their own needs.

"Direct payments put the money with the person who needs the care."

"Our table would have liked [a recommendation on] personal budgets i.e. a commitment to making funding available directly to people needing case – in as flexible and non-bureaucratic manner as possible."

It was, however, also recognised that, in order to increase uptake of Direct Payments, consideration needs to be given to how individuals and/or their families can be supported to best utilise the flexibility this provides. There was interest in seeing whether similar support models to those used in England could be introduced to help increase uptake in Northern Ireland.

"The responsibility for and administration of insurance and national insurance etc. is a barrier and should be simplified."

"In England people use personal budgets to pay carers who are self-employed and the administration can be taken care of by an agency - a centre for Independent Living [should be established in NI] to provide support."

Recommendation 2

To implement a social care approach which targets early intervention and prevention for those with moderate and low level needs which takes into account individual needs and choices.

94% SUPPORT

Recommendation 3

That the health and social care system should develop a holistic model of care that considers an individual across their life course, with a specific emphasis on tackling poverty & inequality, & educating individuals on healthy choices to help reduce future pressures on the social care system.

90% SUPPORT

Early intervention and prevention were seen as very important in "helping people to help themselves" and allowing scarce resources to be dedicated to those with more critical needs.

"Increased focus of resources at low and moderate levels would reduce the overall costs as fewer people's first point of contact would be at crisis stage."

"It's always got a cost: 1) not following through with [supporting low level needs] because of funding will impact on acute services at some point 2) more cost effective to be preventative."

Recommendation 2 focused on where there may be opportunities to take a more preventative and supportive approach to the way care is provided. At several of the tables the discussions also identified that early contact with the social care system and regular assessment would also ensure that support needs could be identified at a point where they could also operate as a way of helping to reduce the likelihood of future, more severe needs.

"People fall through the cracks and then need acute care"

"Investing to save i.e. early intervention costs less than something becoming a critical need e.g. a ramp installed will cost less than treating a fall"

Some discussions also particularly emphasised that

an approach centred on reablement for those with low to moderate care needs could be important for helping people to be able to continue doing the things that are important to them, improve their quality of life and support people to live safely, and as independently as possible, in their own homes for longer.

It was argued that these types of approaches would contribute to reducing the demands on the social care system in the short and longer term. Recommendation 3 therefore focuses on how an emphasis on education and prevention across the wider health and social care system could help change patterns of future need – particularly if they were targeted towards those living in poverty[6] and facing inequalities now.

"Cradle to grave care model approach is vital."

"Prevention and education at a young age will reduce the strain on the future system."

"Better awareness [in] how we live now might lessen the type of care we need in later life."

"Addressing and recognising child poverty is vital to effective management of elderly care."

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[6] There was considerable debate between members of the citizens' assembly when determining the wording of this recommendation about the need to explicitly refer to 'child poverty' – given the evidence they had been given suggesting clear links between disadvantage in early childhood and the complexity of later care needs. A vote in the room however determined the recommendation would use the word 'poverty', as it should be understood as an overarching term that includes past and present child poverty.

❝❝ **Recommendation 4**

To improve the use of technology in social care, including in the assessment process and in people's homes to support independent living.

92% SUPPORT

Technology is now an integral part of most people's lives, including many older people. There were a number of suggestions of how simple uses of technology could replace some of the roles carried out by domiciliary care workers, including reminders to take medication and of meal times, monitoring ongoing conditions and activity (e.g. through the use of networked 'Fitbit' type sensors) and increasing opportunities to socialise (e.g. via Skype) to reduce isolation.

"Forecasts show massive requirements in demand. Technology will progress with this upward trend, let's utilise it!"

"Introduce evidence based technology to support independent living within their community and all areas of service provision – assessments, support, therapies."

"Assistive technology e.g. for visual impairment can augment independent living."

"It could make a big difference e.g. keeping people in touch with family who have had to move away – see grandkids grow up etc."

At almost every table, however, there were concerns recorded that, while the greater use of technology to support the delivery of social care for older people might be helpful, it should not be considered as an alternative to the provision of high quality personal care.

"Support this as long as human interaction is not replaced by technology"

"Tech should supplement, not replace, human contact"

There was also some scepticism expressed about how much impact a greater use of technology would be able to have on the care for the current generation of older people – including questions of whether they would want to, or be able to, engage with technological innovations.

"[You] would need to educate the older people of today about the technology to ensure they understand the opportunities and risks."

❝❝ **Recommendation 5**

To adopt policy & provision which promotes the integration of older people with the wider community. This should include a range of housing options (including intergenerational sharing), access to transport, and community spaces where older people & others can interact.

97% SUPPORT

❝❝ **Recommendation 6**

To ensure policy and provision to facilitate intergenerational skills sharing and support which can be therapeutic (including gardening, arts, music, sport, reading, cookery and the use of support animals).

93% SUPPORT

The importance that the members of the citizens' assembly placed on older people remaining part of the community is emphasised in Recommendations 5 and 6.

"This is important as the current system seems to 'box off' older people too much"

"Benefits everyone in society."

"Integration of older people will reduce isolation and may lead to greater respect for them"

While there are some larger infrastructure issues included here (for example, the need to think about creating a housing stock that enables multiple generations to live together should they choose) the real focus of these recommendations is on what local communities, and the community and voluntary sector, can do.

"Good – this is 'big picture' thinking."

"A more cross-sectoral approach to policy development could eliminate problems developing down the line."

These recommendations were designed to encourage creative thinking from the sector about ways to enhance integration and quality of life for older people who may require support, but may not get what they need from traditional care packages. Initiatives like Dementia Friendly Towns were highlighted as ways the community itself could take a lead in ensuring that people were supported to live independently [7]. Other suggestions included 'talking tables' at key retail locations (e.g. supermarkets) that provide a space to just stop and feel part of the community.

Members were also inspired by the example shared with them of McAuley Place [8], which provides an inclusive environment for older people by also offering a wide range of services to other people within the community. Other voluntary

sector examples raised by members included nursery visits to care homes, Duke of Edinburgh schemes which supported befriending activities between young people and older people and social prescribing models through which health and care services could link older people to activities within their communities, which could be of benefit to their positive mental health.

"Encouraging a culture change where older people are enabled to retain active roles in their community and contribute to their area."

"Keeps people engaged both mentally and physically which then might lessen potential professional care need."

"Results in older people not feeling isolated and are able to share their life skills."

"Synergy between youth and elderly provision can save resources and build skills."

"Recognises the positive impact of different generations socialising together."

Some tables, however, were also at pains to acknowledge that the success of a policy like this would require a culture change within the way the sector operates: "has to be all encompassing – getting departments to work together." Members of the citizens' assembly also noted that this could be a challenging change for communities themselves (to negotiate "who provides what and at what cost") and that it may also fuel issues around a 'postcode lottery', particularly in more rural areas.

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[7] https://www.alzheimers.org.uk/get-involved/dementia-friendly-communities/what-dementia-friendly-community

[8] https://mcauleyplace.ie/

04

RECOMMENDATIONS FOR AN EFFECTIVE AND SUSTAINABLE SOCIAL CARE SYSTEM

Overall, members of the Citizens' Assembly for Northern Ireland were very interested in the systems and structures that deliver social care for older people in Northern Ireland. Attempting to understand these was the basis of the majority of the questions put to the speakers throughout the first weekend, particularly in relation to commissioning, contracting and the independent delivery of services within a mixed economy model of provision.

Members developed a list of the principles that they felt should be at the heart of an effective and sustainable social care system for older people. Unlike the values developed around person-centred care, these principles are not necessarily all complementary, reflecting instead the range of viewpoints and priorities of the members of the citizens' assembly. The principles are presented below in the order they were prioritised by the members.

The weighting that members gave to these principles, alongside the information they had received from the speakers, helped inform the recommendations they developed relating to delivering an effective and sustainable social care system and developing the care workforce.

PRINCIPLES THAT ARE MOST IMPORTANT FOR DELIVERING AN EFFECTIVE AND SUSTAINABLE SOCIAL CARE SYSTEM FOR OLDER PEOPLE

1. Guarantee minimum standards of care

Central to the discussions around this principle was the need to ensure a baseline standard of care that would be applicable everywhere, regardless of location or who care was provided by: "need to avoid disparities in care across NI, rural and urban and the care given by private agencies." While some members suggested that the use of the word 'minimum' might set a dangerous precedent, by suggesting an 'absolute minimum', it was still ranked as the most important principle by a clear margin.

2. Value care staff by improving pay progression

There was an overwhelming sense from members of the citizens' assembly that improving the pay and conditions of care workers would improve standards of care, reduce staff turnover and attract more (and more diverse) people into the sector.

"Care staff are currently grossly undervalued and overworked – burger flippers in McDonalds get paid more."

For members, the principle of valuing care staff more was not just about improving pay, but also just as importantly about training and "using registration to ensure continued professional development as part of progression".

3. Guarantee equity of access

While the idea of a 'postcode lottery' came into the discussions, for members of the citizens' assembly this principle was more strongly linked to the wider aspects of a 'rights based approach', identified in the values that should underpin person-centred care, and ensuring that "no one slips through the safety net."

"About a universal standard of care which ensures equity of access and standards where no one is discriminated against or treated worse on any grounds – postcode, social status, sexuality, ethnicity etc."

4. Be accountable to regulators, users and wider society

Members of the citizens' assembly suggested that there needed to be greater monitoring of the social care system to ensure it is fit-for-purpose. There was also considerable interest expressed in ensuring that private providers were held accountable for how they spent public money. Achieving this, members noted, would require clearer lines of accountability, mandatory levels of training for staff and a rigorous inspection regime, including unannounced inspections and talking to end users.

5. Be integrated and joined up with local services within the community

For members of the citizens' assembly, being integrated with local services in the community (including "church, community, family [and] 3rd sector") was primarily about ensuring that all areas and aspects of care that are needed can be delivered locally. It was also about ensuring that public financing was spent on the aspects of care provision that were most critical, with these services supplemented by other sectors: for example the "state can't afford to cover companionship issues but these other sectors can."

6. Be affordable for all

While recognising that there are real costs associated with providing high quality social care for older people, members of the citizens' assembly were generally opposed to wealth being a determinant of the quality of care that an individual received. Members demonstrating a strong preference for social care being free at the point of delivery like healthcare. Affordability for individuals, it was maintained, needed to be attained by investment in the system.

7. Value the role of family carers

In defining this principle further, members of the citizens' assembly emphasised the vital role that family carers play within the care system, not just as alternative providers but often as a way of supporting greater choice for those requiring care. The discussions further emphasised that 'valuing' this requires not just recognition but financial support: there is a "danger that family carers can be seen as the 'cheap option'."

8. Be efficient and cost-effective

Concerns were raised by members that the system for care provision in Northern Ireland was too fragmented ("Do we need 5 trusts?") and involved too many separate agencies as providers. This, it was felt, produced inefficiencies. It led to questions like "Is the system 'constipated by being overly bureaucratic and complex' – are we using a hammer to crack a nut?"

There was also a value expressed by many that "profit and healthcare can't go together", leading to concern that the prevalence of private sector providers in the sector was detrimental to cost-effectiveness.

9. Be evidence based

For members of the citizens' assembly, evidenced based planning for social care was principally "about being proactive instead of reactive" and learning from elsewhere (i.e. about "knowing what works and what doesn't"). A wider distrust of expertise and formal evidence, however, may have resulted in this principle being amongst the lower ranking: "the people receiving the care should be the ones deciding what their care needs are – not 'evidence'."

10. Take a systems based approach which is inter-departmental and cross-sectoral

Discussions around this principle tended to emphasise the need for new ways of working, breaking down silos and more joined-up thinking about service provision. While the low ranking of this principle may seem to contradict priorities expressed above, comments from the discussions and the ballot paper show that for many members this option was encompassed within their understanding of the other principles, and thus not included among their preferences.

RECOMMENDATIONS ON DELIVERING AN EFFECTIVE AND SUSTAINABLE SOCIAL CARE SYSTEM

❝ Recommendation 7

To improve regulation to ensure a consistent provision and quality of care, to a minimum standard, across all providers

96% SUPPORT

❝ Recommendation 8

To adopt an Older Persons' Charter committing to rights, purposes, roles and entitlements underpinned by publicly agreed values and principles.

90% SUPPORT

Members of the Citizens' Assembly for Northern Ireland felt that guaranteed minimum standards of care was not was sufficiently covered by existing planning and regulatory structures. Almost all members agreed there was a need for further regulation to protect vulnerable older people and ensure that they were provided with quality care.

"Minimum standards will give older people a basic care safety net and guarantee."

A popular suggestion was the need for a charter to establish shared baseline expectations and standards between society and service providers. The idea was that this charter should be based on publicly agreed values and principles, developed

through a process of engagement with service providers, advocacy groups and the wider public of all ages (although potentially informed by an assessment of the 'asks' and 'demands' of advocacy groups already working within the sector).

Commenting on the need for a charter members noted that, if agreed and publicised, it would offer:

"A visible commitment to meeting older people's needs."

"[A way to ensure] everyone knows what they are entitled to - demystifies the process."

❝ Recommendation 9

To ensure equitable access to comparable social care provision across all areas of Northern Ireland for older people.

97% SUPPORT

❝ Recommendation 10

To ring-fence a percentage of the regional rate to be used in a transparent and accountable way for social care.

79% SUPPORT

Recommendations 9 and 10 are a direct response to the perceived 'postcode lottery' in relation to how social care for older people is provided in different parts of Northern Ireland.

"There is a need to have a uniformity of quality of services across Northern Ireland."

"Reduces disparities and introduces fairness by avoiding a postcode lottery."

Of all of the recommendations made by the Citizens' Assembly for Northern Ireland, recommendation 9, which called for the assurance of 'equitable access to comparable social care provision across all areas', received the highest level of overall support with 76% of members 'strongly agreeing' with the recommendation.

While at first reading this may seem to be at odds with the recommendations made under the previous theme calling for flexibility and individual / local responsiveness, the discussions that preceded the vote on these recommendations focussed on bringing areas that were seen as underperforming up to a common baseline standard.

Recommendation 10 was explicitly designed to help counter that problem. While calling for ring-fenced spending, this recommendation demands transparency and accountability, but leaves space for choices about delivery models to be responsive to local needs and circumstances.

Members of the citizens' assembly expressed the views that this:

"Would address lack of transparency and clarity"

"Would address post-code lottery."

"Would guarantee a pot of money [for social care] from existing streams as opposed to extra tax."

Lower levels of support for this recommendation, however, reveal that, for some members, this was considered "not realistic", "not deliverable" or a move that would potentially "leave a gap" in the funding of other services.
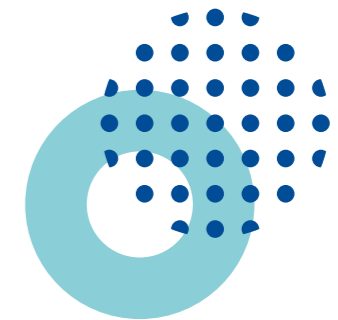
Recommendation 11

That the health & social care system should be streamlined to eliminate duplication (fewer organisations) and ensure collaboration.

93% SUPPORT

Recommendation 12

That users should be able to access an integrated range of services, including housing and transport

92% SUPPORT

Members of the citizens' assembly were generally surprised by the number of providers operating across Northern Ireland, with many concluding that this must necessarily lead to duplication and inefficiencies. There were also concerns raised about the number of Trusts, particularly relevant to recommendation 11, and suggestions made that streamlining these would lead to a more efficient and 'better' care offering to older people.

> *"Reducing duplication should release more resources for 'frontline' spending."*

> *"Fewer trusts, fewer big bosses, fewer demographic disparities of service."*

> *"NI: the place is too small for all the structures we currently have."*

Some members raised concern that 'eliminating duplication' should not simply be about there being fewer organisations involved in the sector: "reducing duplication should not mean killing smaller organisations doing very valuable work and strengthening big 'monopolising' organisations/corporations." Overall the real focus of this recommendation was on "increasing efficiency, [through the] better use of limited resources."

> *"Really about reducing bureaucracy."*

> *"Flatter hierarchy and fewer silos."*

In the discussions across the tables, considerable emphasis was given to the need for collaboration and a cross-sectoral approach: on the basis that social care for older people shouldn't be looked at in isolation but rather considered alongside a range of other public service sectors. Recommendation 12 therefore, in essence, proposes a 'one-stop-shop' where older people can access information and support services across a range of sectors in a coordinated way – whether they need adaptations to their homes, access to community transport schemes, domiciliary care or signposting to other support/activities within their community.

> *"A good and practical idea that will make sense to the public"*

> *"One place for advice and support."*

> *"Removes stress and worry putting people off claiming other entitlements."*

Recommendation 13

To establish new, and strengthen existing mechanisms, to ensure that the voice and influence of users and the wider public is at the heart of the design and reviews of services.

99% SUPPORT

Recommendation 14

To present the public with clear information on social care need and initiate public engagement about funding models.

96% SUPPORT

Recommendation 15

To provide more accessible information about Health and Social Care Trusts, including lines of accountability, duties and authority, and membership of each Trust's Board.

89% SUPPORT

Over the two weekends of the citizens' assembly, the members repeatedly reflected on how much they had learnt about the social care system, and how little the wider public generally understood about the current crisis in social care and the need to adapt the system in order to meet future demands. Recommendations 13 to 15, therefore, reflect the members' growing awareness of the challenges facing the system, and belief that there needs to be an informed on-going public 'conversation' about the situation.

This led to calls from members to ensure a greater public awareness of how the system works (as recommendation 14 proposes) – both to enable the public at large to think about systemic issues and to allow people to more effectively plan for their own / their family's future needs.

> *"Encourage awareness of the projected funding shortfall and awareness that social care is not free."*

> *"Better informed public taking greater ownership of care delivery,"*

> *"Raises awareness of the extent of the problem and allows people to plan."*

> *"It's vital for a public debate to begin as social care is NOT on the political agenda."*

Recommendation 13 also specifically recognises that, while there are a number of mechanisms already established to bring the voices of older people, social care users, their carers and civil society organisations advocating on their behalf into policy discussions, it is also important to involve the wider (younger) public in these discussions. This is because social care for older people is something that will have a direct impact on the majority of the population at some point in their lives and future planning must also respond to changing social expectations and circumstances.

> *"Need to ensure a diversity of voices and that under-represented groups are heard."*

> *"PCC [Patient and Client Council] at the moment is not well known and the voice of users and civic society needs more mainstream involvement in re-design."*

While a number of the members of the citizens' assembly argued that the information requested in recommendation 15 was already available, 39% of members 'strongly agreed' with the need for this recommendation, largely on the basis that information needed to be more readily available. The recommendation was therefore carried on the basis that information needed to be made available in more user-friendly ways: "*different resources for different audiences.*"

Recommendation 16

To address the need for high quality data (including on unmet needs) to ensure policy decisions are consistently based on evidence.

Several speakers at the citizens' assembly gave the members figures relating to projected needs and demands on the social care system, but there was little consistency between them. At various points, it was also suggested that there was a current lack of data relating to 'hidden needs' within the older population (i.e. those whose care needs were being informally met by family and friends, those who had opted out of existing service packages as they did not meet their needs, and/or those who were simply just not in contact with the system). Further, it was made clear to members that different approaches to interpreting existing data and population projections could lead to differing conclusions about future demands on social care services.

Recommendation 17

That there needs to be a rebalancing of funding between Health and Social Care to ensure greater prioritisation of social care services.

To many members of the citizens' assembly, the integrated system of health and social care provision in place in Northern Ireland, while designed to support more streamlined service provision, placed social care in a secondary position. Many members were therefore keen to see greater parity of attention given to the priorities of each service area.

> "Maybe the social care budget needs to be increased substantially for a few years to unblock the log jam in hospital beds."

> "Rebalancing funding in health is important with acute services taking too much resources that could help social need."

While this recommendation was passed by a clear majority, the notes from the discussions show that, while members were in favour of giving greater

92% SUPPORT

> "Data collection is important for evidenced-based decision making."

> "We need facts, not fake news."

> "Planning is required: Accurate planning requires data and current information."

This, combined with a sense that things were just continuing to be done the way they always had been, rather than responding to changing patterns of demand is at the root of this recommendation.

> "Real evidence would make the system fit-for-purpose."

> "Accurate info and data… [could help] future proofing and reflecting change.

77% SUPPORT

funding priority to social care provision, there was hesitancy about whether this should be at the expense of other health care services (with 43% 'agreeing' with the recommendation, compared to 34% 'strongly agreeing').

> "Funding for social care should not be taken from health funding."

> "Would deny resources to other critical care needs."

> "If you 'rebalance' between Health and Social Care what Health services are we going to lose? Should seek to raise additional funds."

While the future funding of social care was explicitly outside the remit of the citizens' assembly, these comments from members help to re-focus attention on Resolution 1 and the overall need for

more resources to be given to social care provision in Northern Ireland.

> "The bigger question is the need to bring more funding into the system for social care,"

> "Self-interest is human nature and people will be more willing to pay for a higher level of care for themselves than higher taxes for a better level for everyone."

Recommendation 18

That there should be a separate Minister with responsibility for social care within the current department.
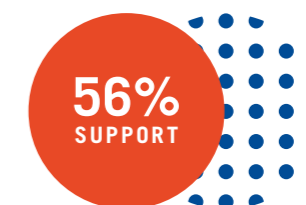
Recommendation 19

That a Social Care Commission should be established with a remit to: 1. Collect analyse & share information; 2. Consult with users, workers, voluntary sector organisations, academics & providers; and 3. Make recommendations to the Department and have sufficient power to hold the Department to account.

The final 2 recommendations within this theme offer specific ideas about how a greater focus on social care could be implemented.

While ultimately supported by a majority of members of the citizens' assembly, the relative levels of support they each received serves to highlight that there was clear differences in opinions among the members. That said, recommendations 18 and 19 do reflect the wider feeling expressed by members (in Resolution 3) that greater leadership and authority is needed, either from an individual or a group, to advocate for the better resourcing and delivery of social care.

Recommendation 18 was passed on the basis that the number of members who indicated that they 'agreed' was over 50%. It is, however, worth noting that more people 'strongly disagreed' with this recommendation (30%) than the number who 'strongly agreed' (18%).

The reasons given for supporting this recommendation included:

56% SUPPORT

55% SUPPORT

> "A Minister for [social] care draws attention to, and focus to, the issue,"

> "A dedicated minister = a dedicated budget."

> "Greater visibility and accountability."

> "Leads to greater focus in government on social care,"

> "Someone specifically responsible."

Some of the reasons given for not supporting this recommendation were:

> "It is integrated for a reason. Is it a good idea to dismantle it?"

> "Fragmentation of service provision > divide and rule. System results in inefficiencies and failures in provision."

> "Splitting Ministers creates political rivalry and reduces joined up working."

> "More government layers which could slow down decision making."

"Separate Minister might reduce co-operation and lead to more competition for resources."

Other ideas advanced during the discussions suggested that the role of advocating for a greater focus on social care shout not be Ministerial, but instead should be one for a new Permanent Secretary for Social Care.

For some within the membership of the citizens' assembly, however, the absence of an opportunity to vote on a recommendation for separating the Health and Social Care systems entirely was seen as the greater problem.

"The recommendation should actually be to carry out a feasibility study into splitting Health and Social Care and creating a Minister with [their] own department."

Recommendation 19 was passed by the citizens' assembly on the basis that more than 50% of the members supported it (although again, marginally more people 'strongly disagreed' than 'strongly agreed').

Some of the reasons given for supporting this recommendation included:

"Empowers service users."

"A Social Care Commission linked to the Commissioner for Older People could be effective."

"Power to hold departments to account outside electoral cycle."

Reasons given for opposing the recommendation included:

"There too many Commissions / Commissioners already?"

"Another quango / talking shop which would have resources implications."

"An older people's charter is sufficient – [this is a] waste of money."
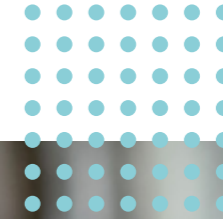
05

RECOMMENDATIONS FOR DEVELOPING THE CARE WORKFORCE AND SUPPORTING UNPAID CARERS

The recommendations developed under this theme by the members of the Citizens' Assembly for Northern Ireland expand upon the key principles identified for delivering an efficient and sustainable system of social care in Northern Ireland by particularly focusing on the principles of:

• Valuing care staff by improving pay and progression; and

• Valuing the role of family carers.

There was broad consensus from the members of the citizens' assembly that a valued, trained and professionalised social care workforce is central to getting social care provision for older people 'right'. When considering the principles that should underpin an effective and sustainable social care system for older people, "valuing care staff by improving pay and progression" was ranked 2nd highest by the members. This priority is reflected in a number of their recommendations.

WORKFORCE AND SUPPORTING UNPAID CARERS

❝ Recommendation 20

To make caring a more attractive profession by improving working conditions: including the identification of clear career pathways, providing emotional support for staff, paying for travel time & mileage & expenses in addition to salary, ending the use of compulsory zero-hour contracts.

100% SUPPORT

❝ Recommendation 21

To launch a campaign to attract more people into the caring professions and achieve a more diverse workforce.

96% SUPPORT

Members of the citizens' assembly believed that fundamental changes to working conditions for domiciliary care providers, particularly, would stop the provision of personal care being considered an 'unskilled' job and help make social care a more attractive employment option.

"Making the care industry more attractive will lead to more staff retention and attract better quality candidates which will improve care."

This in turn, they hoped, would help reduce the high staffing turnover, which had been highlighted to them by a number of speakers, and help attract a more diverse workforce (including more men and mature workers).

"Could use similar methods to existing campaigns e.g. nursing / teaching."

"Attracting more men helps those who might be uncomfortable with opposite gender in intimate care'"

"Could this be a workforce area that could attract more older people (including 'retired' people) who may be able to continue contributing in this way?"

❝ Recommendation 22

To link pay & progression to skills, experience and qualifications.

97% SUPPORT

❝ Recommendation 23

To commit, within a specific timeframe, to resourcing a well-trained & professional workforce, with annual mandatory training and professional development.

94% SUPPORT

❝ Recommendation 24

To pay all care workers according to public sector pay-bands.

89% SUPPORT

Improved pay and opportunities for progression for staff were identified as key mechanisms for ensuring that older people were provided with high quality care by trained and experienced staff.

"Essential if we are to improve the care worker role,"

"Well trained staff = quality service."

"Makes it a more attractive career proposition / encourages the right people."

While the advances made by NISCC (Northern Ireland Social Care Council) in relation to the registration and improved training of care workers were acknowledged, it was not seen as going far enough yet to secure a sustainable workforce.

"This is about dignity for care workers."

"NISCC to take a greater role in continuing professional development.

[There is a need to] "standardise qualifications to get national recognition and equivalence and transferable skills."

The issue of 'pay bands' (raised in recommendation 24) did, however, attract some conflicting opinions – including whether the private sector could be compelled to follow this, and whether, given the public sector pay cap since 2010, this was actually an attractive offer.

It also prompted a number of conversations about whether the involvement of 'for-profit' organisations was a benefit, or detriment, for the provision of social care in Northern Ireland, with very divergent views being expressed:

"The for-profit element of social care must be eliminated and replaced by a public, voluntary and co-operative system."

"The point of using the private sector is to save money and be more efficient."

The members of the citizens' assembly, however, also recognised that trying to deliver changes to employment and pay conditions for care workers, within an already stretched system, might be difficult. However, the sense from their discussions was that, without a commitment to placing a higher value on the role of care staff, the overall system could not be improved in a sustainable way.

The five strongly supported recommendations presented above give a clear indication that members felt that any additional resources brought into the system should go towards the improving the pay, conditions and opportunities for training and progression for frontline staff.

Recommendation 25

To value unpaid carers by assessing their needs and funding and delivering appropriate support & advice to meet financial, psychological & social needs of unpaid carers (including a 24hr advice line).

96% SUPPORT

Recommendation 26

To strengthen and enhance the right to access respite care: Unpaid Carers should have access to appropriate and adequate respite services, including information about entitlement.

99% SUPPORT

Recommendation 27

To demonstrate the value society places on unpaid carers by significantly increasing the Carer's Allowance.

89% SUPPORT

The important role played by unpaid carers in reducing the demand on the social care system and being able to provide the type of care the person they care for might choose, featured strongly in discussions throughout the Citizens' Assembly for Northern Ireland. Members, however, repeatedly noted that, while this is a choice some friends and family members are more than happy to make in relation to a loved one, it is not something that should be expected from families, or relied on as a solution to top-up increasing demand for care in the home during social care assessments.

The economic contribution that unpaid carers make to the social care system (whether formally recognised as a carer or just someone helping out) was also recognised as invaluable to the sustainability of the system. Without the support given to older people by unpaid carers the system would be unable to cope. The citizens' assembly members strongly agreed that these carers

also need to be supported mentally, emotionally and financially in order to sustain their roles. Recommendation 25 therefore is intended to ensure that "that carers also remain physically and mentally well."

Recommendations 26 and 27 identify some of the things that could be done to demonstrate that the role of unpaid carers is valued (e.g. raising the carer's allowance from being the lowest benefit offered, providing more information to help carer's know what support is available, extending opportunities for respite care and establishing a 24 hour advice line for carers to seek support).

"Challenges the notion that social care can be provided 'on the cheap'."

"Extends the value of opportunity to a family member – CHOICE"

06

A MODEL FOR THE FUTURE?

As well as helping to break the deadlock around the issue of social care, the Citizens' Assembly for Northern Ireland was intended to pilot a model of deliberative engagement that may be adopted by the Northern Ireland Executive, the Northern Ireland Assembly and/or the Northern Ireland Office, to address further contested issues in the future.

PARTICIPANT VIEWS ON CITIZENS' ASSEMBLIES IN NORTHERN IRELAND

An independent evaluation of members' views, conducted by Queen's University Belfast, found significant support for adopting the model in the future[9]. This extract from the evaluation report summarises the views of the citizens' assembly members:

'After the first weekend, the vast majority of participants (97%) said they felt encouraged to continue as a Citizens' Assembly member. The extremely high level of enthusiasm is noteworthy: 85% completely agreed with the statement. After the second weekend, 99% said they felt encouraged to participate in future initiatives like the Citizens' Assembly. Only one member took a contrary view.

In open-ended responses, participants expressed their firm hope that the outcomes of the Citizens' Assembly would have an impact. As one member put it, "I feel I have made a positive contribution to future social care if it is taken onboard by relevant people." Another wrote: "I felt I was actually contributing to Northern Ireland policy-making and democracy."

Meanwhile, by the end of the second weekend, almost every participant (97% of them) agreed that citizens' assemblies should be used more often to inform politicians in decision-making. Again, the level of enthusiasm is noteworthy: 86% of members completely agreed. The vast majority of members appeared to walk away with a sense that citizens' assemblies can make a constructive contribution to political decision-making: "It has been very positive to be part of such a large group who feel so passionately about the issue," reflected one participant, adding: "It restores my faith in Northern Ireland being able to take things forward positively." Another wrote: "More of this sort of thing! Anything to give the regular person on the street an opportunity to express their views – but government needs to listen. The anger in the room at the lack of political leadership was evident."

Finally, at the end of the second weekend, participants were asked to give the Citizens' Assembly an overall rating on a scale of 1–10, ranging from 'very poor' to 'very good'. The mean score was 9.2. Three members (4%) gave the Citizens' Assembly an overall score lower than 8; the remaining 96% gave it a score of 8 or higher. The most common score was 10, awarded by 47% of the members. "It has raised my hopes for a better Northern Ireland," reflected one participant.[10]

Members of the citizens' assembly were therefore incredibly enthusiastic about their experience of taking part and the role that citizens' assemblies could play in Northern Ireland in the future. This again demonstrates the common finding that participants in deliberative engagement processes enjoy and value the experience of taking part and, if given the opportunity, would want to do so again.

MLA VIEWS ON CITIZENS' ASSEMBLIES IN NORTHERN IRELAND

A survey of the views of MLAs by Stratagem and ComRes found a more cautious, but still overall positive, reaction to further citizens' assemblies being carried out. The survey was conducted following the Citizens' Assembly for Northern Ireland (during February and March 2019) and was completed by 34 MLAs from six parties, covering all community designations. MLAs were asked to say if they "strongly agree", "agree", "neither agree nor disagree", "disagree", or "strongly disagree" with five statements about citizens' assemblies in Northern Ireland. A breakdown of the full results can be found in Annex B.

The survey found a high level awareness of the Citizens' Assembly for Northern Ireland, with 74% of MLAs agreeing (compared with 12% disagreeing) with the statement "I am aware of the Citizens' Assembly for Northern Ireland pilot on social care that took place at the end of 2018". A smaller majority also supported the recommendations of the citizens' assembly being taken on board, with 52% agreeing (compared with 19% disagreeing) with the statement "A future Executive should pay close attention to the findings of the Citizens' Assembly for Northern Ireland pilot on social care".

The survey found a high level of support for greater citizen involvement in policy-making, with 61% agreeing (compared with 13% disagreeing) with the statement: "there should be more opportunities for citizens to be involved in policy-making in Northern Ireland".

A majority of MLAs also felt that citizens' assemblies could offer useful insight into public views, with 56% agreeing (compared with 21% disagreeing) with the statement: "Citizens' assemblies could provide decision-makers with useful insight into public preferences on complex issues". Only 36% agreed (compared with 40% who disagreed) with the statement "Citizens' assemblies are not appropriate for use in Northern Ireland".

However, MLA opinion was more negative on the role of citizens' assemblies in tackling contested issues, with only 27% agreeing (compared with 46% disagreeing) with the statement: "Citizens' assemblies should be used in Northern Ireland to help break the deadlock on other contested issues".

MLAs, therefore, appear positive towards the Citizens' Assembly for Northern Ireland and the role that further citizens' assemblies could play to involve citizens in policy making and provide insight into public preferences. However, they still need convincing of their value in helping to address political deadlock on contested issues.

[9] The full evaluation report is available at: https://citizensassemblyni.org/resources/

[10] Pow, J; & Garry, J. (2019) Citizens' Assembly for Northern Ireland: Summary of Participant Evaluations. Belfast: Queen's University Belfast & Involve. Available from: https://citizensassemblyni.org/

07

CONCLUSION

The Citizens' Assembly for Northern Ireland brought together 75 citizens from across Northern Ireland over two weekends in October/November 2018 to consider how the social care system for older people should be reformed.

The 3 resolutions and 27 recommendations developed and agreed by the citizens' assembly form a compelling agenda for transformational reforms to deliver a sustainable, fit-for-purpose social care
system for older people now, and in the future.

The Citizens' Assembly for Northern Ireland has once again demonstrated that members of the public, when given the time, information and support, are able to consider complex issues and make detailed recommendations. The recommendations deserve to be carefully considered by politicians, policy-makers and anyone interested in reforming the social care system for older people.

Citizens' assemblies are one of many approaches that can be adopted in Northern Ireland to involve citizens in policy-making[11].

They offer particular value in addressing some of the complex and contested issues that face Northern Ireland now and in the future. We believe, therefore, that they should be adopted by institutions in Northern Ireland to understand informed public opinion and help to break the political deadlock on important issues.

We'll leave the final word with some of the citizens' assembly members...

———

[11] For a toolkit of different participatory and deliberative methods, see: https://www.involve.org.uk/resources/methods

"I BELIEVE THAT EVERYONE SHOULD HAVE THE OPPORTUNITY TO BE INVOLVED IN SHAPING THEIR COMMUNITY. POLITICS SHOULD BE AN ACTIVE PART OF EVERYONE'S LIFE NOT JUST A PASSIVE OCCASIONAL VISIT TO THE POLLING STATION." - Adrian

"THE MOST REFRESHING ASPECT TO ME HAS BEEN THAT IT SHOWS HOW DEMOCRATIC MEANS CAN BE EFFECTIVELY USED TO PUSH FORWARD DECISION MAKING ON VITAL ISSUES. A POLITICAL IMPASSE DOES NOT PREVENT CITIZENS FROM COMING TOGETHER." - Sandra

"ENGAGING WITH OTHERS FROM DIFFERENT BACKGROUNDS AND EXPERIENCES HAS BEEN THE HIGHLIGHT FOR ME. THERE HAS BEEN SOME INTENSE THOUGHT PROVOKING DISCUSSIONS BUT THE DEBATES AND PROCESS HAS BEEN WELL-STRUCTURED." - Nicole

"I THINK THERE SHOULD BE FURTHER ASSEMBLIES AS IT WOULD GIVE THE PEOPLE IN POWER MAKING DECISIONS AN INSIGHT INTO WHAT ORDINARY PEOPLE THINK AND FEEL." - Iris

"THE MORE PEOPLE THAT ARE INVOLVED IN DECISION MAKING THEN THE MORE THEY UNDERSTAND HOW DIFFICULT IT CAN BE TO SOLVE SOCIAL ISSUES. THIS KNOWLEDGE CAN HELP IN CREATING COHESIVE SOCIETIES" - Francis

"I CAME WITH A DEGREE OF TREPIDATION BUT QUICKLY RELAXED. THERE WAS SPACE FOR EVERYONE TO SPEAK AND TO HAVE THEIR FAIR SHARE OF 'AIR TIME' AND NOT TOO MUCH." - John

"I THINK I WAS SURPRISED BY HOW QUICKLY A GROUP OF 70 STRANGERS BONDED AND FORMED AN ENTITY WITH A SENSE OF PURPOSE" - Barbara

"I HAVE A VOICE AND WELCOME THE OPPORTUNITY TO USE IT BECAUSE OF THE DEMOCRATIC DEFICIT IN NI CURRENTLY. THE RESPECTFUL ATMOSPHERE WHERE WE CAN DISCUSS ISSUES WITHOUT FALLING OUT IS REFRESHING." - Wendy
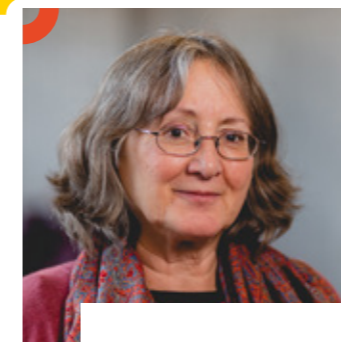
"THE GROUP OF PEOPLE INVOLVED IN THE DELIBERATIONS AND DISCUSSIONS ON THE ISSUE WERE ENERGETIC, PASSIONATE AND COMMITTED TO MAKING A DIFFERENCE. IT SHOWS THAT THERE IS THE POSSIBILITY OF PEOPLE COMING TOGETHER." - Jenny

"I HAVE REALLY ENJOYED IT AND FOUND IT VERY INFORMATIVE... I THINK THERE SHOULD BE MORE BECAUSE IT TAKES AWAY PARTY POLITICAL/ SECTARIANISM FROM DISCUSSIONS." - Jarleth

A

RESULTS OF THE CITIZENS' ASSEMBLY FOR NORTHERN IRELAND IN FULL

RESOLUTIONS

▟▟ **Resolution on the need for more funding for social care for older people**

We the members of the Citizens' Assembly for Northern Ireland recognise that much more dedicated funding is needed to reflect demand and resource the appropriate provision of improved social care for older people. We urge Ministers and decision makers to take decisive and accountable action to address this under-investment and the poor management of resources.

Number of votes cast	YES	NO	Spoilt	YES Result %
73	**69**	9	1	**86%**

My preference for how social care for older people should be funded in the future is:

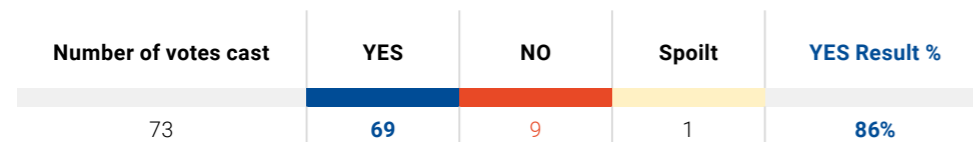| OPTIONS	FIRST PREFERENCE	PREFERENTIAL VOTE RESULTS[12]
Option A Entirely publicly funded (recognising that it is likely to mean paying higher taxes)	31	147
Option B Provided by a mix of public and private funding – but the weighting should be more towards public funding	37	168
Option C A mix of private and public funding – but weighted more towards private funding	2	70
Option D Entirely privately funded by individuals and their families	1	11

▟▟ **Resolution on the need for transformational change**

We the members of the Citizens' Assembly for Northern Ireland recognise that the existing service models for delivering social care for older people do not meet the needs and expectations of current and future service users. We call for a comprehensive transformation programme, with public and user engagement at its heart, to design a system fit for purpose.

Number of votes cast	YES	NO	Spoilt	YES Result %
73	**71**	1	1	**97%**
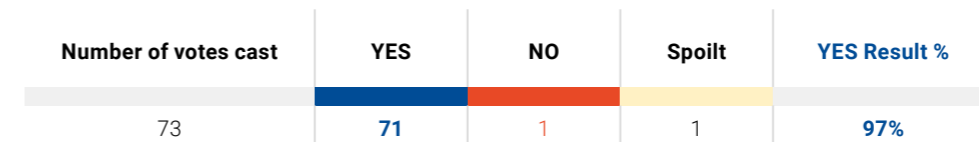
▟▟ **Resolution on the need for strong leadership**

We the members of the Citizens' Assembly for Northern Ireland call for strong, cross-party collaborative leadership on social care for older people in Northern Ireland. We call on decision-makers to look beyond their party-political interests and make the decisions needed to deliver transformational change.

Number of votes cast	YES	NO	Spoilt	YES Result %
73	**59**	10	4	**81%**

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[12] The results were calculated using a linear borda count method (i.e. 1st preference weighted at 3, 2nd preference weighted at 2, etc).

RECOMMENDATIONS ON MOVING TOWARDS A MORE PERSON-CENTRED SOCIAL CARE SYSTEM

Recommendation 01

To review the assessment process to move towards continuous assessments which are needs based and not resource led. The process of assessment and service allocation should be transparent.

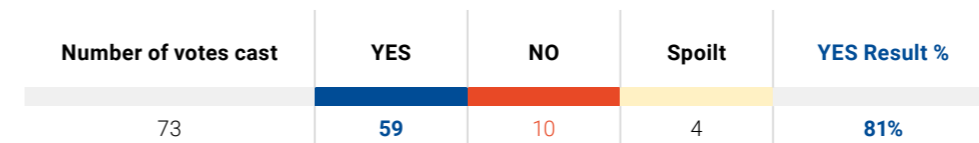| Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	1	1	30	39	0	97%

Recommendation 02

To implement a social care approach which targets early intervention and prevention for those with moderate and low level needs which takes into account individual needs and choices.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	2	2	31	36	0	94%

Recommendation 03

That the health and social care system should develop a holistic model of care that considers an individual across their life course, with a specific emphasis on tackling poverty & inequality, & educating individuals on healthy choices to help reduce future pressures on the social care system.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	4	3	34	30	0	90%

Recommendation 04

To improve the use of technology in social care, including in the assessment process and in people's homes to support independent living.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	2	4	27	38	0	92%

Recommendation 05

To adopt policy & provision which promotes the integration of older people with the wider community. This should include a range of housing options (including intergenerational sharing), access to transport & community spaces where older people & others can interact.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	2	0	35	34	0	97%

Recommendation 06

To ensure policy and provision to facilitate intergenerational skills sharing and support which can be therapeutic including, gardening, arts, Music, Sport, Reading, Cookery and the use of support animals..

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	1	4	33	33	0	93%

RECOMMENDATIONS ON MOVING TOWARDS A MORE PERSON-CENTRED SOCIAL CARE SYSTEM

Recommendation 07

To improve regulation to ensure a consistent provision and quality of care, to a minimum standard, across all providers.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	1	2	23	45	0	96%

Recommendation 08

To adopt an older persons' charter committing to rights, purposes, roles and entitlements underpinned by publicly agreed values and principles.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	3	2	30	34	2	90%

Recommendation 09

To ensure equitable access to comparable social care provision across all areas of Northern Ireland for older people.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	1	1	15	54	0	97%

Recommendation 10

To ring-fence a percentage of the regional rate to be used in a transparent and accountable way for social care.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	5	10	28	28	0	79%

Recommendation 11

That the health & social care system should be streamlined to eliminate duplication (fewer organisations) and ensure collaboration.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	2	2	14	52	1	93%

Recommendation 12

That users should be able to access an integrated range of services, including housing and transport.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	1	4	20	45	1	92%

Recommendation 13

To establish new, and strengthen existing mechanisms, to ensure that the voice & influence of users & the wider public is at the heart of the design & reviews of services.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	1	0	37	33	0	99%

Recommendation 14

To present the public with clear information on social care need & initiate public engagement about funding models.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	0	3	28	40	0	96%

Recommendation 15

To provide more accessible information about Health and Social Care Trusts, including lines of accountability, duties and authority, and membership of each Trust's Board.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	4	4	35	28	0	89%

Recommendation 16

To address the need for high quality data (including on unmet needs) to ensure policy decisions are consistently based on evidence.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	5	1	28	37	0	92%

Recommendation 17

That there needs to be a rebalancing of funding between health & social care to ensure greater prioritisation of social care services.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	8	8	31	24	0	77%

Recommendation 18

That there should be a separate Minister with responsibility for social care within the current department.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	21	9	27	13	1	56%

Recommendation 19

That a social care commission should be established with a remit to: 1) collect analyse & share information. 2) consult with users, workers, voluntary sector organisations, academics & providers. 3) Make recommendations to the Department and have sufficient power to hold the Department to account.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	13	18	27	12	1	55%

RECOMMENDATIONS ON DEVELOPING THE CARE WORKFORCE AND SUPPORTING UNPAID CARERS

Recommendation 20

To make caring a more attractive profession by improving working conditions: including the identification of clear career pathways, providing emotional support for staff, paying for travel time & mileage & expenses in addition to salary, & ending the use of compulsory zero-hour contracts.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	0	0	28	43	0	100%

Recommendation 21

To launch a campaign to attract more people into the caring professions and achieve a more diverse workforce.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	2	1	28	40	0	96%

Recommendation 22

To link pay & progression to skills, experience and qualifications.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	0	2	23	46	0	97%

Recommendation 23

To commit within a specific timeframe to resourcing a well-trained & professional workforce, with annual mandatory training and professional development.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	0	4	23	44	0	94%

▲▲ Recommendation 24

To pay all care workers according to public sector pay-bands.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	5	2	23	40	1	89%

▲▲ Recommendation 25

To value unpaid carers by assessing their needs and funding and delivering appropriate support & advice to meet financial, psychological & social needs of unpaid carers, including a 24hr advice line.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	0	3	20	48	0	96%

▲▲ Recommendation 26

To strengthen and enhance the right to access respite care: Unpaid Carers should have access to appropriate & adequate respite services, including information about entitlement.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	0	1	22	48	0	99%

▲▲ Recommendation 27

To demonstrate the value society places on unpaid carers by significantly increasing the Carer's Allowance.

Number of votes cast	Strongly disagree	Disagree	Agree	Strongly agree	Spoilt	Result % Strongly agree / Agree
71	3	5	26	37	0	89%

B

RESULTS OF THE MLA PANEL IN FULL

TO WHAT EXTENT DO YOU AGREE OR DISAGREE WITH THE FOLLOWING STATEMENTS ABOUT THE USE OF CITIZENS' ASSEMBLIES IN NORTHERN IRELAND?

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	No response	Net agree	Net Disagree	Mean
I AM AWARE OF THE CITIZENS' ASSEMBLY FOR NORTHERN IRELAND PILOT ON SOCIAL CARE THAT TOOK PLACE AT THE END OF 2018								
8	**17**	4	**1**	**3**	1	**25**	**4**	3.79
24%	**50%**	12%	**2%**	**9%**	3%	**74%**	**12%**	
THERE SHOULD BE MORE OPPORTUNITIES FOR CITIZENS TO BE INVOLVED IN POLICY-MAKING IN NORTHERN IRELAND								
5	**16**	8	**3**	**2**	1	**21**	**5**	3.58
14%	**47%**	23%	**7%**	**6%**	3%	**61%**	**13%**	
CITIZENS' ASSEMBLIES COULD PROVIDE DECISION-MAKERS WITH USEFUL INSIGHT INTO PUBLIC PREFERENCES ON COMPLEX ISSUES								
6	**13**	7	**1**	**6**	1	**19**	**7**	3.35
18%	**38%**	21%	**2%**	**19%**	3%	**56%**	**21%**	
A FUTURE EXECUTIVE SHOULD PAY CLOSE ATTENTION TO THE FINDINGS OF THE CITIZENS' ASSEMBLY FOR NORTHERN IRELAND PILOT ON SOCIAL CARE								
3	**15**	7	**3**	**6**	1	**18**	**9**	3.17
9%	**43%**	19%	**7%**	**19%**	3%	**52%**	**26%**	
CITIZENS' ASSEMBLIES ARE NOT APPROPRIATE FOR USE IN NORTHERN IRELAND								
6	**6**	8	**13**	**1**	0	**12**	**14**	3.12
19%	**17%**	24%	**37%**	**3%**	0	**36%**	**40%**	
CITIZENS' ASSEMBLIES SHOULD BE USED IN NORTHERN IRELAND TO HELP BREAK THE DEADLOCK ON OTHER CONTESTED ISSUES								
3	**6**	8	**8**	**8**	1	**9**	**16**	2.65
8%	**19%**	24%	**23%**	**23%**	3%	**27%**	**46%**	

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