

REPORT TO:	ADULT SOCIAL SERVICES REVIEW PANEL 25 JANUARY 2012
AGENDA ITEM:	6
SUBJECT:	CARERS STRATEGY IMPLEMENTATION
LEAD OFFICER:	HANNAH MILLER, EXECUTIVE DIRECTOR FOR ADULT SERVICES, HEALTH AND HOUSING (DASHH) PAUL GREENHALGH, EXECUTIVE DIRECTOR FOR CHILDREN, FAMILY AND LEARNERS (CFL)
CABINET MEMBER:	CLLR MARGARET MEAD, CABINET MEMBER FOR HEALTH AND ADULT SOCIAL CARE CLLR TIM POLLARD, DEPUTY LEADER (REGENERATION AND ECONOMIC DEVELOPMENT) AND CABINET MEMBER FOR CHILDREN, YOUNG PEOPLE & LEARNERS
WARDS:	ALL

CORPORATE PRIORITY/POLICY CONTEXT:

The Croydon carers strategy of 2011-16 (see appendix 1 to this report on the Council website <http://intranet.croydon.net/dash/Carers/carers.asp>) contributes to Croydon Council's vision of:

An Enterprising City

- Encourage carers to get involved with setting up social enterprises such as support and caring organisations
- Work together with private, voluntary and community sectors to drive new schemes forward and ensure carers are included and their opportunities are maximized for the benefit of the community

A Learning City

- Give children the best possible start in life through early intervention
- Provide the help and support needed so young children, especially those who are vulnerable, are supported to maintain or improve their wellbeing, including physical, social and emotional development
- Learning throughout life – infusing a culture of life long learning for all

A Caring City

- Different neighbourhoods with a distinct identity and responsive mix of services and facilities that meet local needs
- Support carers to lead independent, healthy, productive lives, active and social lives
- Encourage high levels of community involvement and enable carers to become involved
- Empower and motivate carers to get involved in shaping what happens locally and

- manage their local public spaces and community facilities
- Give everyone including carers the opportunities to influence local decision-making
- Give vulnerable people support and opportunities to develop and contribute to society

FINANCIAL IMPACT

- The carers strategy 2011-16 and related budget will help avert a false economy. Carers are the backbone of the health and social care system and they need to be supported if they are to continue caring. Currently they save the Council and local health services £541 million a year.
- The related budgets, set out in section 5 of this report, show that sufficient funds exist to cover anticipated costs.

FORWARD PLAN KEY DECISION REFERENCE NO: This is not a key decision

1. RECOMMENDATIONS

- 1.1. That the Adult Social Services Review Panel notes the new Croydon Carers Strategy 2011 -16 and the related draft Carers Strategy Action Plan (Appendix 2). The Croydon Carers Strategy 2011-16 can be viewed by following the link [to strategy](http://intranet.croydon.net/dash/Carers/carers.asp)
<http://intranet.croydon.net/dash/Carers/carers.asp>
- 1.2. Strategy Action Plan will be taken to the multi-agency Cares Partnership Group for final approval

2. EXECUTIVE SUMMARY

- 2.1. The carers strategy of 2011-2016 (the strategy) updates the previous strategy of 2008 -11 and is aligned with the Coalition Government's 2011 refresh of the National Carers Strategy, '*Recognised, valued and supported: next steps for the Carers Strategy*'. The Government's refresh recognises the value of preventative services which save the Council/health services from increased expenditure in the long term on the person cared for and the carer. Preventative services which save statutory services from further expenditure are especially important in the current financial climate.
- 2.2. The strategy has been the subject of consultation with all known stakeholders and their responses have been incorporated into it.
- 2.3. The strategy is being used as a basis for commissioning preventative as well as personalised carers services which are cost-effective. All commissioning plans will ensure that funds are targeted to meet the carers' needs directly as opposed to funds being locked within providers' costs. Evaluation of local services has indicated some specific areas where there is identified duplication / overlap of provision.

- 2.4. The strategy will be implemented via the final strategy's action plan, currently in draft. (See appendix 2).

3. DEVELOPMENT OF THE CARERS STRATEGY

- 3.1. Local needs analysis together with local and national feedback in relation to carers' issues show that carers continue to have the same needs as highlighted in the previous strategy of 2008-11. They continue to have needs under the following headings listed in the draft strategy: carers' assessments; breaks and emergency respite; advice, information and advocacy; health, wellbeing and support; recognition and involvement and support to young carers. The strategy sets out recommendations under these headings, which seek to minimise the impact of caring.
- 3.2. A joint report by the Princess Royal Trust for Carers and ADASS (directors of adult social care) called, '*Supporting carers – early Interventions and better outcomes, May 2010*', highlighted that those who have no carer are more likely to be admitted to care homes. Carer-related reasons for admission to nursing or residential care are common, with carer stress the reason for admission in 38% of cases and family breakdown (including loss of the carer) the reason in a further 8%. A number of support, housing, financial and employment factors can contribute to the practical and emotional viability of caring roles and lower rates of admission to care homes - which can be highly expensive and costly.
- 3.3. The strategy has been developed jointly by DASHH ,CFL and the NHS and takes account of all relevant client groups. It has been circulated for consultation to a wide range of stakeholders including South West London NHS Croydon, carers and carers organisations within the Carers Partnership Group, South London and Maudsley NHS Foundation Trust and commissioners. Comments received have been incorporated into the strategy.

4. IMPLEMENTATION OF THE CARERS STRATEGY

- 4.1 Implementation of the new strategy, which received Cabinet approval on the 10 of October 2011, has already begun. Details of this can be found in the carers strategy draft action plan at appendix 2. The action plan itself is at consultation stage and will be finalised at the Carers Partnership Group in March 2012. Key actions, towards implementation taken so far, are highlighted in the paragraphs below.
- 4.2. The new strategy is now being used as the basis for de-commissioning current funded services and re-commissioning carers' services which are both preventative and personalised and offer the Council best value. (Please see section 5 for budget details). All commissioning plans for carers services (adult carers and young carers) have an emphasis on reducing the overall funding of 'overhead' and organisational costs, thus unlocking a larger percentage of the funding to increase direct personal budgets for carers, who can then choose how to purchase their support.
- 4.3. Good Safeguarding practice has been a strong feature for the new re-commissioning exercise for carers services. For example, at the re-commissioning workshops which were organised for potential bidders in the community, the Safeguarding team was also present to offer information and good practice guidance.

- 4.4. A range of carers' services are being commissioned using the hub and spoke service delivery model. Broadly, this would see the hub delivering information and general carers' services from a central point, with the spokes leading to, and linking in, with other specialist carers' services. Along with the re-commissioning exercise, the Council has developed an outcomes framework for carers for funded services which will prepare the Council to better respond to national performance requirements.
- 4.5. Within this model, all commissioned services will be required to come together to form the Croydon Carers Support Network. The Network, as part of its work programme, will aim towards developing a carers' register, an information sharing protocol, signposting and referrals protocol, a common initial assessment form (to be used by all funded services within the Network), the use of one common website for carers, a common leaflet and joint service plans. Introducing a common initial assessment form will have the effect of assessing all carers in the community in a consistent way and pave the way for the Council to respond to further possible changes in legislation and practice. Positive feedback on the hub and spoke model has been received from stakeholders including the Carers Partnership Group.
- 4.6. CFL has begun their implementation of the strategy by completing a fresh re-commissioning exercise for the delivery of young carers services, preparing to track the progress of young carers in Croydon's schools via recruiting primary and secondary Schools Improvement Officers and raising awareness of young carers issues via relevant safeguarding officers. CFL has also been at the forefront in supporting the launch of the young carers conference, scheduled for March 2012. This should help raise awareness of young carers' issues to a number of diverse professionals.
- 4.7. DASHH, through care management practice, has stepped up the screening of all identified carers through the self assessment questionnaire. This should lead to an offer of a more detailed carer's assessment, if relevant. All identified carers will continue to be eligible to receive information and support, if needed, through our commissioned services in the community.

4. CONSULTATION

- 4.1 The process of updating the strategy and hence the strategy's action plan began in December 2010. This has been through engagement with relevant stakeholders listed below and whose views largely shaped the strategy. Engagement was by organising and attending relevant consultation meetings as well as receiving feedback from carers directly and indirectly from service providers:

- The Carers Partnership Group
- Carers
- Care management team – health and social care
- Commissioners – health and social care
- Equalities Minority Communities Advisory Group (EQUA Group)
- Departmental Management Teams
- Corporate Management Team
- GP Consortia

- Service providers from voluntary sector and statutory sector

5. FINANCIAL AND RISK ASSESSMENT CONSIDERATIONS

5.1 Revenue and Capital consequences of report recommendations

	Current year	Medium Term Financial Strategy – 3 year forecast		
	2011/12	2012/13	2013/14	2014/15
	£	£	£	£
Revenue Budget available	585,000	523,000	523,000 ¹	523,000 ²
Expenditure	585,000	523,000	523,000*	523,000
Effect of decision from report	0	0	0	0
Remaining budget	0	0	0	0

- ¹This assumes no further reductions and no inflationary growth
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Please note the following:

5.1.a. The above budgets are based on 2011/12 expenditure.

5.1.b. the budget for preventative services is currently £585,000

5.1.c. the 10% reduction for 2012/13 is the agreed sum for Recommissioning services in advance of final budget agreements by Cabinet.

5.2. The effect of the decision

Implementation of the strategy will enable the council to meet its duty to assist carers to carry on caring and to prevent them from ill health and hence dependency on statutory services, will and commit expenditure of £523,000 in each of 2012/13, 2013/14 and 2014/15.

5.3 Risks

This is a demand-led service and officers will ensure adherence to criteria for eligibility of services and will monitor expenditure on a monthly basis. The service commissioned through this strategy will seek to contain the growth in demand in particular by changing the way the funding is committed.

5.4. Options

Funding is through the existing budgets. There are no alternative funding streams available. No other options are therefore under consideration.

5.5. Future savings/efficiencies

Savings and efficiencies have already been achieved in 2010/11. Further savings of 10% have been agreed.

(Approved by: Paul Heynes, Head of Finance, DASH on behalf of the Director of Finance)

6. COMMENTS OF THE COUNCIL SOLICITOR AND MONITORING OFFICER

- 6.1. The Council Solicitor comments that as referred to above, there are a number of statutory duties in relation to carers which this strategy will support delivery of. These include:-
- 6.1.1. The Carers (Recognition and Services) Act 1995 - under the Act carers providing regular and substantial care have the right to request an assessment of their needs as carers and that assessment has to be taken into account when planning services for the person in need of care.
- 6.1.2. The Carers and Disabled Children Act 2000 – this Act reinforces carers' rights to request an assessment of their own needs, and be provided directly with services, including where the cared for has refused a community care assessment or services as a result of an assessment.
- 6.1.3. Community Care (Delayed Discharges) Act 2003 (England) – this gives a carer who requests an assessment, a right to be assessed and have any necessary services provided, before the patient leaves hospital.
- 6.1.4. The Carers (Equal Opportunities Act) 2004 – places a duty on local authorities to inform carers of their right to a carers assessment, which must take account of whether the carer works, is in education, training or is involved in any leisure activity or would like the opportunity to be. Under the Act, local authorities also have the power to request assistance from other statutory bodies in planning services for carers.
- 6.1.5. The Mental Health Act 1983 (as amended by the Mental Health Act 1997) gives carers (if they are the nearest relative) of people with a mental health problem the right to ask for an assessment of the person they are caring for.
- 6.2 In respect of the Council's public sector equalities duty and when considering the proposals in this report, Cabinet must have 'due regard' to the protected characteristics and the specific needs of those within these groups that may arise. Insofar as this decision may affect numbers of people, many of whom have one or more of the protected characteristics, the 'due regard' necessary is very high. Where this report and the EqIA identify an adverse impact, consideration must be given to measures to avoid that impact before fixing on a particular solution.

(Approved by: Gabriel MacGregor, Head of Corporate Law on behalf of the Council Solicitor and Monitoring Officer)

7. HUMAN RESOURCES IMPACT

The carers support contract will be coming to an end in March 2012 and the services within it are planned to be re-commissioned. This may invoke Regulation 3(1)(b) TUPE. However, the transfer of staff will be from the existing to the new provider (should the existing provider not be successful) and there is no impact on council employees or on the Local Government Pension Scheme other than the compliance with and facilitation of the process.

Approved by: Michael Pichamuthu, HR Business Partner DASHH on behalf of Pam Parkes, Director of Workforce, Equalities and Community Resources)

8. EQUALITIES IMPACT

An equalities impact assessment has been completed as part of the development of the strategy and hence action plan. Carers are protected under the Equality Act 2010 by association to the people they care for and carers themselves can be sick, disabled or frail. Officers are satisfied that the implementation of the strategy supported by a reasonable level of budget, will not have any adverse impacts on protected groups under 2010 Act. Officers are also satisfied that the carers strategy 2011-16 and related actions identified in the EIA, if supported by a reasonable level of budget, will have a positive impact on carers and the people they care for.

9. ENVIRONMENTAL IMPACT

As part of the planned re-commissioning process which will be based on the strategy, all potential providers will be asked to send in a copy of their environmental policy. This will be assessed as part of the evaluation process of all bids.

Approved by Muhammad Ali, on behalf of Bob Fiddik, Head of Sustainable Development Service.

10. CRIME AND DISORDER REDUCTION IMPACT

There are no crime and disorder reduction impacts arising from the 2011-2012 strategy.

11. HUMAN RIGHTS IMPACT

- 11.1 Adoption of the strategy will support the Council in its delivery of the Convention Rights and particularly, insofar as the Strategy will help ensure the needs of carers and the cared for are met in their own homes and environments, Article 8 – the right to respect for private and family life.

CONTACT OFFICERS: Trevor Mosses, Head of Commissioning, Older People, Long Term Conditions and End of Life Care, extension 62869/Harsha Ganatra, Carers Commissioning Manager, extension 62470

Appendix 1 – the Carers Strategy 2011-2016

<http://intranet.croydon.net/dash/Carers/carers.asp>)

Appendix 2 – the Carers Strategy Action Plan is attached to this report.