

**Report of:** Service Director – Adult Social Care

Meeting of:	Date	Agenda item	Ward(s)
Health Scrutiny Committee	18 March 2014	B3	All

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## **SUBJECT: UPDATE ON CARERS SERVICES AND CHANGES TO SHORT BREAKS**

### **1. Synopsis**

- 1.1 This report provides an update to the Scrutiny Committee on the impact of a raft of changes introduced to reflect social care law and improve Islington's respite offer to people with learning disabilities and carers. The changes were implemented incrementally as part of a rolling programme, starting in July 2013. The changes to Islington's respite offer were designed to ensure: respite resources are distributed fairly and transparently to carers and people with learning disabilities; resources are able to respond to the needs of family carers in exceptional circumstances as well as provide a prevention resource; and people can choose from an expanded range of respite services which suit their personal needs and can now opt to use a personal budget.
- 1.2 The remodelled respite offer has provided capacity rather than released savings and has delivered a much improved offer to people with learning disabilities and carers.
- 1.3 The Scrutiny Panel requested an update because it was concerned that the changes could impact adversely on a significant number of family carers. A review of the financial impact indicates that only four people have been asked to increase their financial contribution to pay for respite services. This was much less than the initial forecast of 64 people being affected.
- 1.4 For people with learning disabilities, as a result of the changes, Islington has enough respite for everyone who needs it, ensuring that demographic demands can be met until 2018. Additional investment in respite services has created additional capacity and strengthened the offer to carers. This investment includes the establishment of a *Shared Lives for Short Breaks* service which will launch at the end of March 2014 and the opening of Spectrum, a new day resource service for people with learning disabilities and severe autism, which opened in December 2013.
- 1.5 The changes for people with learning disabilities have resulted in a more equitable distribution in the number of overnight stays in residential respite care people have been allocated, on the basis of assessed need. Four people have received more respite than they were allocated previously and 32 people have been allocated less respite than they were previously. Three people advised social

services that the revised respite offer was not sufficient and after a reassessment of their needs two people were allocated extra support on the basis of exceptional need. The remaining person's needs are still under review.

- 1.6 As part of the feedback from people with learning disabilities and their carers Islington has introduced a more flexible approach to using overnight residential respite stays. People are now able to carry forward up to five nights per quarter.
- 1.7 Islington has a strong *Carer's Offer* and through the changes this offer has been communicated to all carers, resulting in more carers accessing the services than previously. A total of 915 carers have accessed the Islington *Carers Hub* and 277 carers have attended carer's events, including 53 new carers. 627 carers have also accessed a personal budget.
- 1.8 The Carer's Offer and Islington Carer's Hub is promoted through commercials in the Whittington Hospital A&E, GP practices, leaflets in pharmacies, newsletters and via mail outs through GP practices to ensure as many people as possible are aware of the support that is available.

## **2 Background**

- 2.1 The changes to respite services were made following a consultation period in January 2013. The changes were to be recognised as community care services to ensure compliance with the relevant legislation, promote fairness and to enable service-users' greater involvement and control over what services people receive, for the purpose of allowing their carer to have a break and to sustain the caring relationship. Charging for respite services was implemented due to the change to community care services from November 2013.
- 2.2 For people with learning disabilities the offer of respite was extended beyond overnight residential respite stays at a residential respite centre to include evening, weekend and activity holiday breaks (via direct payment from July 2013). Those who were eligible for direct payments in lieu of provision of respite services were offered one.
- 2.3 The changes for people with learning disabilities also included:
  - The development of a new short breaks (respite) scheme, building on the Shared Lives (Adult Carer) scheme to include short breaks.
  - The offer of respite was extended beyond overnight residential respite stays at a residential respite centre to include evening and weekend breaks and activity holiday breaks (via direct payments). (From July 2013)
  - Those who were eligible for a direct payment in lieu of provision of respite services were offered one.
  - The development of a new short breaks scheme, building on the Shared Lives (Adult Carer) scheme to include short breaks.
  - The introduction of a new respite allocation system to ensure there is consistency and fairness and all allocations are based on assessed needs.
  - The introduction of two indicative bandings for respite (26 nights and 52 nights per year), changing from the previous three banding systems (36, 56 and 70 nights per year).
  - The additional provision for families in exceptional circumstances to have additional respite with no upper limit.
  - The offer of respite includes the ability to "mix and match" short breaks, such as direct payments and overnights stays at King Henry's Walk – to ensure that there is a wider range of choice.
- 2.4 These changes were introduced from July 2013, with the final change being to the indicative bandings (amount of nights) of respite for people with learning disabilities in January 2014.

## **3 Carers Support Services**

- 3.1 Islington Council and the Clinical Commissioning Group (CCG) are committed to supporting carers and

recognise that carers play a vital role in enabling a greater number of people to remain living independently in their own homes. This support locally takes the form of a number of services commissioned on behalf of the Council and CCG.

3.2 Support for carers is delivered by a wide range of organisations locally:

- Those who deliver services for all borough residents, including carers (for example the Citizens Advice Bureau and Leisure Services);
- Those who deliver services to carers as part of a broader role (for example Centre 404);
- Those who are commissioned to deliver services specifically for carers (such as Islington Carers Hub).

3.3 The Council and CCG recognise that carers circumstances and needs are diverse so our aim in commissioning services within the resources available is to ensure that their reach is as broad as possible. At the centre of our offer locally, is the Islington Carers Hub, a services delivered by Carers UK, which is the single point of access for all carers where advice, support, information and signposting to other specialist services can be obtained. The Hub has been actively promoting its services through commercials in Whittington A&E, information screens in GP practices, leaflets in pharmacies, the Hub website, newsletters and e-bulletins and via a mail-outs to carers on GP mailing lists.

#### **Islington Carers Hub**

- Membership of 915 carers
- Average of 41 new carers per month
- Carers events attracted 165 carers last year
- Aiming to attract more carers in 2014/15 to ensure everyone is aware of the wider support available.
- Administers a £30,000 flexible breaks funds supporting 150 carers who are not eligible for support from health and social care.
- Has encouraged 627 carers to access carer's personal budgets.

3.4 The Hub also plays a strategic role in bringing together a range of stakeholders, and has worked in partnership with local voluntary organisations, GP practices and hospitals to establish carers advice surgeries in a range of venues including: St Luke's Community Centre, Mildmay Centre, Age UK - Drovers Centre, Islington Chinese Association, Northern and Holloway Medical Centre, Whittington Hospital and University College Hospital.

3.5 The Hub administers a £30,000 flexible breaks fund offering carers and their families, who aren't eligible for health and social care funding, an opportunity to access some form of respite. In 2014/15 the fund will support 150 individual carers or 50 families, and work will be undertaken to ensure that palliative carers are provided with a clear pathway into the fund.

3.6 Aside from the Hub, we fund a number of other initiatives designed to offer direct support to carers or to improve their access to information and advice:

- the Last Years of Life Patient and Carers Group
- a carers book collection in the four main Islington libraries
- a new carers e-learning training package available to everyone living and working in the borough
- for carers of those with mental health issues we deliver a Dual Diagnosis Carers Service and a mental health carers group delivered by Islington Mind, and from May will provide a Carers Crisis Support Service to deliver training and support to those carers of people who make regular use of crisis intervention services
- a Carers Reference Group for carers of those with learning disabilities, delivered by Centre 404.
- for carers of people with substance misuse issues we provide a Families, Partners and Friends Support Group, a service that delivers awareness training on substance misuse issues and a peer led support group for abstinent service users and carers

- 3.7 The Hub, and other carers service providers encourage carers who are eligible for health and social care support to access a personal budget. The money is used by carers to support them in their caring role and to ensure their good health and wellbeing. Personal budgets are based on individual carers needs with the majority of payments falling within the £500 - £1000 per annum range. A total of 627 carers are accessing personal budgets.
- 3.8 The focus in 2014/15 is to work more closely with GP practices through the introduction of a new Carers Navigator service which will provide advice, information, support and training to GP practice staff, enabling them to accurately identify and record carers registered in their practices. By capturing information about as many carers as possible we will build a more reliable picture of carers' health needs locally which will in turn inform future planning of carers' services. To further support this work a new engagement officer post will be actively identifying hidden carers, particularly targeting minority ethnic groups.
- 3.9 The Care Bill makes a number of recommendations concerning carers. The Council and CCG are confident that we already have a strong offer for carers as outlined above and that our proactive approach to finding hidden carers is key to building on this. We have started to look at our carers assessment process and documents to ensure that they will be fit for purpose going forward and will include all of the areas recommended in the Care Bill.

## 4 Impact of Changes for Carers Services

- 4.1 The changes regarding changing respite from a service users service to a carer's service was implemented in July 2013. For people with learning disabilities the changes were implemented from July 2013 for new service users, with new bandings commencing from January 1st 2014 for current users.
- 4.2 The review of the changes has shown the main impacts are:
- 4.3 Increased awareness of Islington's Carers Offer**
- 4.4 A written outline of the Carers Offer has been sent to all family carers as part of this, increasing increased awareness of the broader offer of carers services available within Islington. This has been evidenced by the Carers Hub reporting an increase in the number of carers who were previously unknown attending events and making contact.

### Carer Feedback

"I use the Alzheimer's society for support as find them very useful for my emotional support."

One carer reported that she saves her carers direct payment for a holiday to go abroad to meet extended family members. She was please to learn this would not change.

- 4.5 Only four people have been impacted by the changes to the respite policy, therefore incurring a charge for respite services.**
- 4.6 The initial consultation involved a total of 119 service users and carers as of January 2013. This number reduced to 94 in July 2013, due to reasons not associated with the changes including a change in circumstances including moving into long term care. **See Appendix 1: Charging Impacts, for more information.**
- 4.7 Prior to the changes it was forecast that 48% of current service users may be impacted by the change

in the policy and therefore incur a charge or an increase in charge as a result of receiving respite services. Currently 85% of service users have not incurred any additional charges due to the change. Only 4% or four service users have been required to make an increased financial contribution based on Islington's Fairer Charging policy.

- 4.8 Three service users cancelled their respite services after being informed of the changes. One service user did not want to complete a new financial assessment that was required, one service user was a self-funder and refused a review and one user stopped accessing respite services due to other circumstances. All of these service users and carers were offered reviews and had been sent Islington's Carers Offer as well as being told about the Offer over the telephone to ensure that they were aware of the wider support that is available to them.

#### **4.9 More personalised and flexible respite support is being organised with direct payments**

- 4.10 Prior to the policy change Islington Adult Social Services did not have a clear policy on how direct payments could be used for respite support and services. The direct payments policy was updated and clarified that direct payments can be used to purchase residential support in a home of someone's choice or support based at home or elsewhere in the community or a mixture of these options.

#### **Carer Feedback**

"I am happy with my Direct Payments as it allows more freedom in going out with my mother and family."

A carer reported that Direct Payments mean that she can leave her mother in her own home with someone who she is familiar caring for her rather than a residential respite home where she does not know the staff.

#### **4.11 For people with learning disabilities, Islington has enough respite for everyone who needs it, ensuring that demographic demand can be met until 2018.**

- 4.12 The changes have created additional capacity at the in-house residential respite service that is now able to serve more families with respite needs. Through the additional capacity it also means that the service is able to cope with emergency break down situations where as before some of these cases would have been placed out of area at a considerable cost and away from their families and friends.
- 4.13 The development of the Shared Lives for Short Breaks scheme means that there is another alternative to residential respite where family carers are able to build up trust with the person that will be caring for their son or daughter. The scheme will launch in March 2014 and is being run jointly between Camden and Islington. The scheme has generated interest from 4 potential shared lives carers and two families who are interested in the scheme.
- #### **4.14 Fairness in the allocation (number of nights) of respite for people with learning disabilities.**
- 4.15 The changes to respite have resulted in fairness of the allocation of respite. All current users of the service have had their cases reviewed using the new allocation tool, resulting in people with the higher care needs receiving more indicative respite than those with lesser needs.
- 4.16 The changes to the allocation of respite resulted in 4 people having their indicative allocation of respite increased from 36 nights to 52 nights. The new allocation tool highlighted demonstrated that they had greater needs for respite.

Previous Allocation	New indicative allocation	
36 nights per year	Ceased accessing respite services	3
	26 nights per year	13
	52 nights per year	4
	<b>TOTAL</b>	<b>23</b>
56 nights per year	Ceased accessing respite services	2
	26 nights per year	4
	52 nights per year	6
	<b>TOTAL</b>	<b>12</b>
70 nights per year	Ceased accessing respite service	5
	26 nights per year	1
	52 nights per year	8
	<b>TOTAL</b>	<b>14</b>

4.17 The changes have resulted in 32 of the 36 people who are still accessing respite services having their indicative allocation reduced. This is due to the new indicative bandings, but also the new allocation tool that is based on needs of the service and the needs of the carer. There has been 3 people who have had their allocation reduced who have said they want more respite. Two people have been allocated additional respite and the other case is still under consideration.

**4.18 Investment in local accommodation means that people with learning disabilities are able to move out of the family home into local accommodation.**

4.19 The initial consultation involved a total of 46 service users with learning disabilities and their carers as of January 2013. This number has reduced to 36 as of February 2013. This is due to reasons not associated with the changes to respite. The majority of people moved of the family home in new local accommodation as part of a planned move. Continual investment in local accommodation for people with learning disabilities over the next 5 years will enable more people to move out of the family home.

## 5 Environmental Implications

N/A

## 6 Equality Impact Assessment

6.1 The council must, in the exercise of its functions, have due regard to the need to eliminate discrimination, harassment and victimisation, and to advance equality of opportunity, and foster good relations, between those who share a relevant protected characteristic and those who do not share it (section 149 Equality Act 2010). The council has a duty to have due regard to the need to remove or minimise disadvantages, take steps to meet needs, in particular steps to take account of disabled persons' disabilities, and encourage people to participate in public life. The council must have due regard to the need to tackle prejudice and promote understanding.

6.2 Equality Impact Assessments were completed prior to and at the end of the consultation and have now been updated to reflect the actual impact following implementations. The EIA's showed that there has been no disproportionate impact on any of the equality groups due to provision of respite being based on needs of the individual.

6.3 All carers were made aware of the wider support available in Islington, to ensure that they are supported in their roles as carers. This included sending copies of "Information on carers' support" document when advising of the outcome of the consultation.

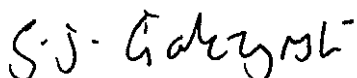
## 7 Conclusions

- 7.1 The revised respite policy and changes to respite have been implemented as planned. The changes have ensured that respite services are now provided in a way that reflects social care law, and are distributed fairly to everyone who needs them. In addition the changes have resulted in a transparent and clear offer of respite for carers and service users that is based on assessed need rather than historical allocations. Islington continues to be committed to support family carers in Islington, and recognise their vital role in supporting some of our most vulnerable residents. Islington continues to offer and develop a wide range of services and support for carers, included carers' direct payments and the Carer's Hub. Carer's services remain free of charge. The Council's performance in delivery carer's service and providing information is above the London average and is continually improving.

### Appendices

Appendix 1: Charging Impacts

#### Final report clearance:



**Signed by:** Service Director – Adult Social Care

**Date:** 10 March 2014

**Received by:** Head of Democratic Services

**Date:**

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## Charging Impacts

The new policy was implemented from July 2013 for all new service users, at the assessment stage, requiring respite services. All existing adult service users and carers in receipt of respite services have been reviewed under the new policy from July 2013.

Originally the number of existing respite recipients was recorded as 119 in January 2013 but this had decreased to 94 by July 2013. The reasons for this decrease include the death of the service user, change in circumstances meaning respite was no longer required and a move to long term care

### Implications of implementation

As a result of the changes, three service users cancelled their respite services.

One carer relayed she has only recently stopped accessing residential respite but this is was only due to the fact her mother is now 102 years old, has dementia and cannot cope with changes to her routine.

One self-funding Service user cancelled their respite services LBI without any comment and refused a review after receiving the information in the post alerting him about the proposed changes.

One Service user reported that he and his wife have decided not to use the respite service any more after receiving the information through the post about imminent changes. They also refused a review. They felt that this would be a waste of money and time for both LBI Council staff and them. They stated that they will try and cope with out it as their daughter will help. The service user was annoyed that had been sent yet another financial assessment form to fill in.

Carers fed-back on the importance of carers' services. Key points are as follows:

One carer said she only has one good holiday break every two years when she goes away abroad to meet extended family members. She said she saves her carer's health and wellbeing budget and she is very grateful for the monies she receives. She was pleased to learn this will not change.

One carer commented, "I use the Alzheimer's society for support as find them very useful for my emotional support."

One carer reported that, "I also receive monthly information from the carer's hub which is very useful and helpful".

Carers fed-back on the importance of respite. Key points are as follows;

"When my mother goes to the day centre and when she accesses respite care, I can recuperate. Without respite care I will burn out and won't be able to care for my mother."

Three carers reported they were very grateful for their current sitting service and that this offered them adequate respite.

One carer said she was so grateful for residential respite recently offered to her as was able to attend a close family wedding in Poland secure in knowledge that her father will be safe and well cared for.

"Respite Care makes a huge difference because John and I get time to ourselves. Without respite care I don't think me and John's relationship would last. Respite care gives me and my partner John time for ourselves and it also gives Michael (service user) an opportunity to mingle with other people when he goes into respite care. It is good for Michael to see different faces."



A carer stated that the respite and the sitting service have given her a life outside of caring as she is able to have regular breaks from her caring role

The change in policy was seen as an opportunity to arrange more personalised and flexible respite service and support .Feedback included;

“I am happy with my Direct Payments (DP) as it allows more freedom in going out with my mother/family”.

One carer who had a negative experience with residential respite care provision in the past felt DPs are “priceless” as she can leave her mother with someone who is familiar, that she feels safe with in a familiar environment at her own home.

One DP service user and carer applied for and received a DP pre-paid card as they prefer to have an individualised, non- prescriptive respite provision.

However, the majority of the service users reviewed preferred to stay with LBI arranged respite support as they did not want the additional responsibilities of direct payments

Two DP users said initially they were excited about the individualised care aspect but are considering switching to council managed services due to the difficulties they are having recruiting personal assistants.

Three DP Users/Carers complained that care provision in residential care homes is varied. This disparity really concerned them as the service provision impacted negatively on both the cared for person and carer and as a result they would like to use a trusted familiar residential care home of their choice\*

\*In response to this feedback LBI respite guidance was clarified;

As a general rule where residential or nursing care is to be purchased by Direct Payments in another borough, the respite budget can be agreed up to the host’s Local Authority Rate. In order to make an informed choice, service users and carers also need to be advised of the number of weeks that Islington can directly commission ( i.e. not via a DP) as homes may charge individual DP users more than the LA host rate .

Direct Payments service users can contact their preferred home to negotiate and confirm costs. The cost of the stay at the residential home via DP may be more expensive than the LA host rate as the contract is between the individual service user and the home and not with the home and LBI. Service users can put their own money towards the agreed final personal budget amount to increase the funds if they wish.

In exceptional circumstances Islington may pay additional funds to meet the cost of the home in order to ensure the assessed needs and outcomes of the service user and carer will be met.

### **Financial implications:**

Social care services are not provided free of charge to service-users in Islington. The Council has a charging policy called “Fairer Contributions”, which applies the law and guidance on charging for social care services. Service-users are subject to financial assessments and contribute to their care only what they are reasonably able to pay. Some service-users are assessed as not being liable to pay anything toward their care, depending on their financial situation.

As a result of the introduction of charging for respite services the financial impact was as follows:

Impact	Number of service users
No financial impact	80
New financial assessment completed	9
Full cost	4
Awaiting financial assessment	1
Total	94

Therefore 85% of the respite recipients have not been financially affected by the change.

A further breakdown is as follows:

No financial impact	Number of service users
Older people	38
People with learning disabilities	36
Mental Health	1
Younger people with physical disabilities (under 65 years)	5

New financial assessment completed	Number of service users
Older people	8
People with learning disabilities	1
People with Mental Health issues	0
Younger people with physical disabilities (under 65 years)	0

Full cost	Number of service users
Older people	4
People with learning disabilities	0
People with Mental Health issues	0
Younger people with physical disabilities ( under 65 years)	0

Feedback from service users and carers re charging included;

Two self-funding service users/carers complained that they will be “penalized with charges for being frugal and saving, whilst others who did not will continue to access free services”.

One self-funding service user /carer cancelled respite care services in place with LBI without any comment and refused a review after receiving the info in the post alerting him about proposed changes.

One carer reported that she is pleased with the respite care services to date and does not care about any possible contribution to respite care as has found respite service so helpful that she is happy to make any contribution.

The Council currently exercises its discretion to charge for non-residential services to disabled people, but, to date, has chosen not to charge for carers’ services.