



Adult Social Care Select Committee
30 November 2012

Supporting Carers

Purpose of the report: Scrutiny of Services/Policy Development

In May 2012, Adult Social Care Select Committee agreed to continue to monitor Adult Social Care's performance in relation to assessment and personal outcomes being achieved for carers. This report provides an account, at the request of Select Committee, of the progress of Adult Social Care in relation to the recommendations and new carer performance measures agreed by Select Committee in May 2012. It will also provide a brief account of some of the main changes and implications of the newly published Draft Social Care Bill.

Introduction:

1. In 2011, at the recommendation of the Adult Social Care Select Committee a time limited Carer Task and Finish (Officer) Group and Carers Member Reference Group were established to address Adult Social Care's performance in relation to the completion of Carer Assessments. This was brought about because carer assessment numbers had remained low over a prolonged period of time.
2. The Task and Finish Group was tasked with looking at bringing about improvement in all services to carers including carers assessments.
3. Whilst there was acknowledgement that Adult Social Care was well known for providing excellent services for carers, particularly those commissioned from the voluntary sector, a systemic approach to improving services for carers was needed.
4. In May 2012 the Carers Member Reference Group and Officers Carers Task and Finish Group reported to Adult Social Care Select Committee on the actions taken to improve practice and performance in relation to assessment and support for carers.

5. These reports made recommendations endorsed by Select Committee in relation to improvements in the assessment and support of carers which are addressed in this report.
6. Select Committee recognised the work of the Task and Finish Group and Members Reference Group and improvements accomplished to that point.
7. Information that follows in this report will give an account of ongoing progress relating to these recommendations.

Carers Practice and Performance Group

8. The Carers Practice and Performance Groups was established in June 2012 comprising of the recommended membership (to include representation from Select Committee). Annex 1 outlines terms of reference of this group and the membership.
9. A quarterly meeting is chaired by the Assistant Director for Personal Care and Support.
10. The function of the group is to consider and respond to feedback from group members, particularly that of carers, via local carer support organisations, and agree with partners the priorities on which to focus activity in relation to improving support and outcomes for carers.

Assistant Practitioner Level 2 (Carers) Posts

11. Personal Care and Support is committed to improving performance by embedding good practice in the activity carried out by front line teams.
12. The role of Assistant Practitioner Level 2 (Carers) was created to provide capacity within each front line team within Personal Care and Support to bring about the above. The role provides support to practitioners on improving how carers are identified, engaged and supported to achieve their personal outcomes (including young carers).
13. The role will also develop links with local voluntary organisations that support carers.
14. In total, 13 Posts have been created: one in each of the 11 Locality Teams, the County Transition Team, and an additional role covering the five Hospital Teams and Contact Centre.

An example of the activity already being carried out by this role is as follows:

“I have had 1:1 sessions on carers and AP2 - Carers role with all new starters; we talked about the role, what is in and out of scope with case examples; about what training is available on carers; what carers support organisations there are in Runnymede and what they offer to carers; we touched on recording carers, carers involvements and reasons and outcomes including personal outcomes and reviews; we have also discussed young carers, offered all new practitioners assistance with recording, especially when they get to the point when the case is ready for authorisation, they will notify me and I will check with them how things are recorded, but also whether and how they offered an assessment to the carer, what support they are going to provide to the carer, etc.”

Recruitment

15. Nine of the 13 Assistant Practitioner Level 2 (Carers) posts have been recruited to.
16. Vacancies remain in the following Teams:
 - Mid Surrey: Elmbridge, Epsom & Ewell and Mole Valley Locality Teams
 - East Surrey: Reigate and Banstead Locality Team
 - South West: Waverley Locality Team
17. Recruitment to the remaining positions remains a priority. Posts are being re-advertised.

Induction

18. An induction programme has been developed and has been implemented by Carers Practice Development Manager. This is supported by Adult Social Care Data Quality and Business Intelligence Teams as well as Action for Carers Surrey. The programme will be repeated regularly to ensure new appointees and their Team Managers are clear about the expectations of the role.
19. An important part of the induction programme is the Assistant Practitioner Level 2 (Carer) role identifying and connecting with their local carer networks. In some areas this has already shown dividends in building working relationships that foster better outcomes for carers.

Practice Example: *“Since networking with other agencies e.g. East Surrey Carers Support, Alzheimer’s Society, Crossroads, Age UK, many more referrals have been made to provide support for carers within the voluntary sector.”*

Ongoing Practice Development of Role

20. Carers Practice Development Manager is providing support to AP2 (Carer) role through regular Best Practice Development Meetings. Meetings are scheduled to take place at least monthly.
21. From January 2013, Carer Liaison Workers working in Surrey and Borders Partnership NHS Foundation Trust will be joining the Best

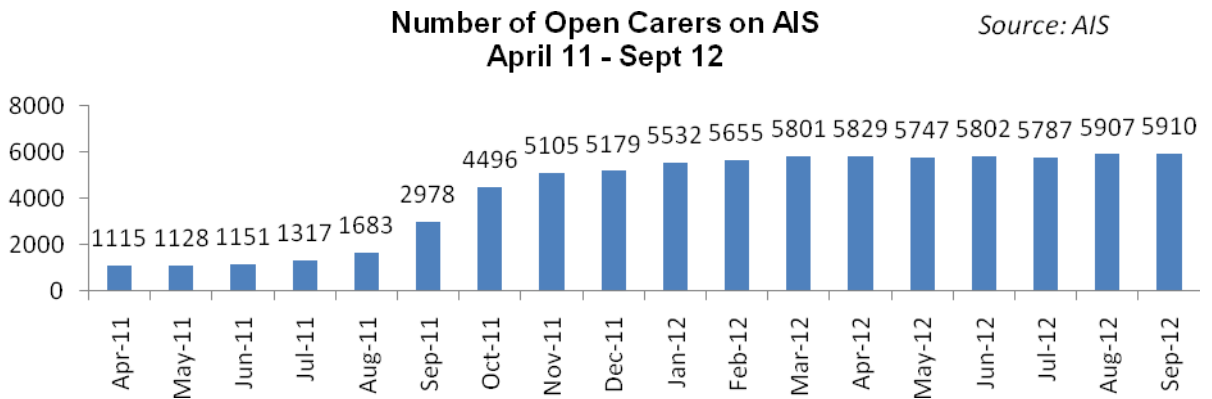
Practice Development Meetings forming a network of practitioners with specialist knowledge and skills.

Performance Measures

22. In May 2012 Select Committee endorsed the following six performance measures relating to Adult Social Care’s assessment and support for Carers:
- Number of Open Carers on AIS
 - Number of Carers with a Supported Self Assessment recorded
 - Details of carer personal outcomes [numbers of carers with a recorded personal outcome and carer personal outcome (category) as a percentage of all recorded carer personal outcomes]
 - Number of young carers helped either through Adult Social Care services or support from voluntary organisations funded by Adult Social Care.
 - Annual reporting on the budget for voluntary organisations supporting carers (including the numbers of carers supported and the difference made to those carers)
 - Annual survey of carers (to start autumn 2012)

Identification of Carers – Number of Open carers

23. Currently, 5,910 carers are open to Personal Care and Support (as at end Sept 2012). This reflects an additional 109 carers known to PC&S since May 2012. In total this represents a 450% increase in the number of identified carers open to Personal Care and Support Teams since targeted activity was initiated in July 2011.



24. Some additional growth is anticipated but growth will slow / level off as higher numbers of carers are identified.
25. In April 2012 Adult Social Care provided funding to certain voluntary organisations supporting carers with the requirement of providing Support Payments (a form of carer’s personal budget) to allow for early interventions with carers known to them but not open/known to Personal Care and Support. During the six month period (1 April – 30 September 2012) 418 carers have received a support payment through this initiative.

This includes 116 support payments being made to support a young carer.

26. Adult Social Care operates a Carers Emergency Registration Scheme. This allows carers supporting someone who is not known to Adult Social Care to log their and the person they care for's details, describing their collective situation, and giving an indication of what they think should happen should the carer not be able to continue their role in an emergency situation. The scheme is valued by carers giving them a peace of mind should something happen to them.
27. The Multi Agency Carers Commissioning Strategy includes a range of preventative support services that provide support to over 13,000 carers every year. Information received through new bi-annual contract monitoring arrangements will be reported on in future reports.

Identification of Young Carers

28. Currently, 21 young carers are open to Personal Care and Support (as at end September 2012).
29. Carers Practice and Performance Group have agreed the need to target activity in relation to the identification of young carers within the whole family assessment process.
30. Targeted activity within teams that have appointed to their Assistant Practitioner Level 2 (Carer) role has been initiated. Impact of this will be monitored through monthly performance reporting as above.

Practice Example: Assistant Practitioner Level 2 (Carer) emailed their team asking about details of young carers practitioners were aware of on their caseloads. This resulted in four young carers not previously open to the team being identified and are now reflected within the whole family recording process.

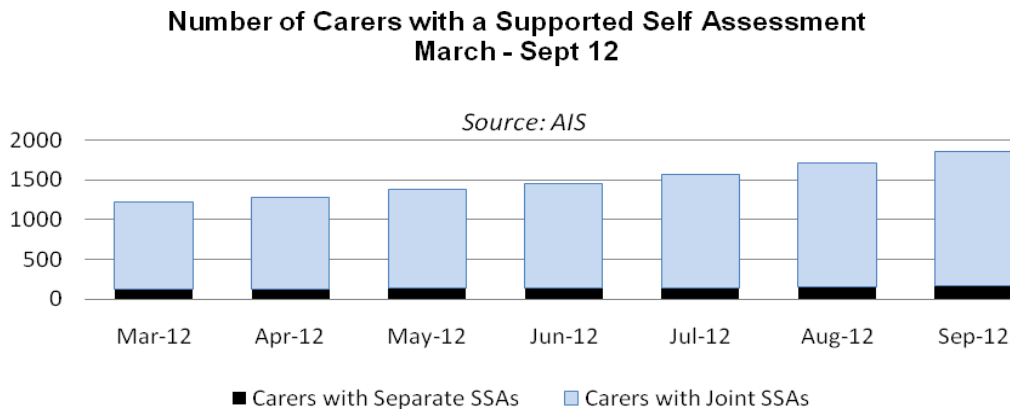
31. Surrey Joint Carers Commissioning Group has commissioned Young Carer Aware E-Learning course which was developed in June 2012. This innovative package is the first of its kind in the Country. Young carers in Surrey were engaged and contributed substantially to both content and delivery of the package. (This training is available to anyone wanting to improve their awareness of carer and young carers issues. Follow this link if you'd like to complete the course. [Carer Aware E-Learning](http://surreycc.elumos.net/public/) http://surreycc.elumos.net/public/)
32. Young Carer Aware E-Learning course has been launched in Personal Care and Support. All staff are expected to complete this and the Carer Aware E-Learning course by the end of December 2012. Progress will be monitored through Carers Practice and Performance Group.

Practice Example: Assistant Practitioner Level 2 (Carer) reports "Staff are in the process of completing Carers Aware e-learning and there has been discussion in the office regarding the training content indicating that awareness of carers/young carers has increased - Two practitioners have identified a Young Carer in their caseload."

33. Action for Carers Surrey's – Surrey Young Carers Service provides support to over 1200 young carers each year. Additional investment has been provided for increased support to young carers (including young carers in transition to adulthood, the 18 – 25 age group). More detail about this area of provision will be provided in future reports in line with new voluntary organisation monitoring arrangements.

Carers with a Supported Self Assessment

34. In total, 1849 carers have undergone a Supported Self Assessment (as at end September 2012).

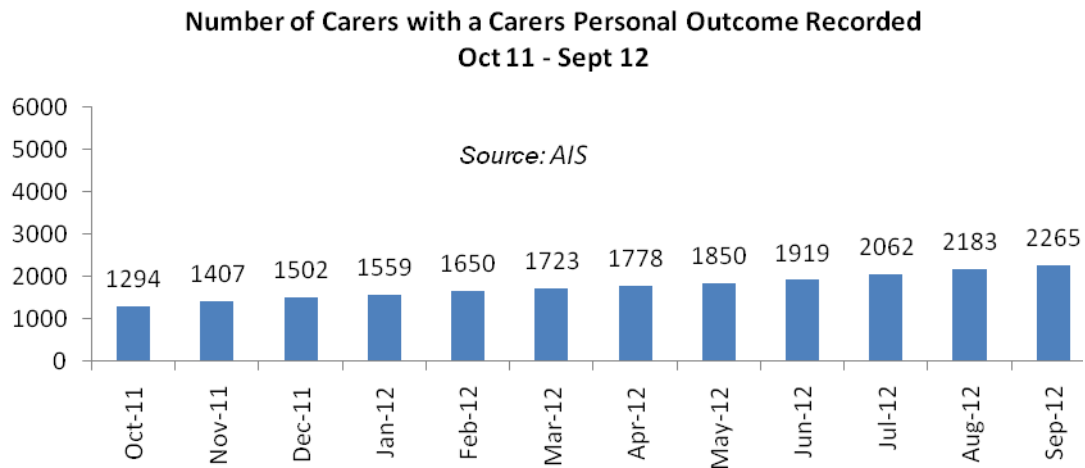


35. Of this, 1684 (91%) of these assessments have been as a part of a whole family assessment (reflected on the graph as Carers with a Joint Assessment). The high proportion joint Carers Supported Self Assessments is a positive indicator that whole family approach is bedding down in practice.

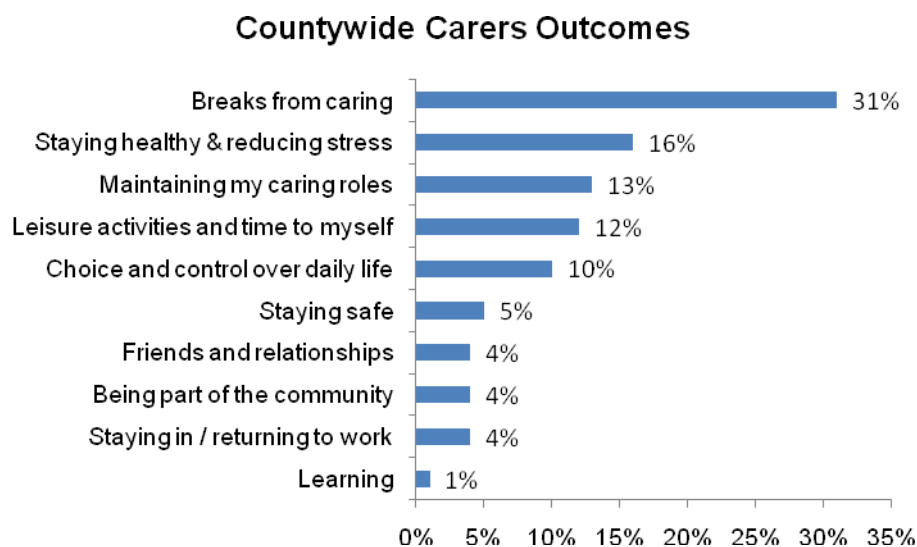
Carers Personal Outcomes

36. Support provided to a carer (either by care being provided to the person they care for and/ or by support being provided directly to themselves as carer) will usually have a positive outcome personal to that carer.
37. The Care Quality Commission defines themes to what carers have identified they would like to experience. These are as follows:
- Carer being a part of the community
 - Carer having Breaks from Caring
 - Choice and control over their daily life
 - Carer having friends and relationships
 - Carer being able to take part in leisure activities and have time to themselves
 - Carer being able to maintain their caring role
 - Carer being able to stay healthy and reduce their stress
 - Carer being able to stay in or return to work
 - Carer staying safe

38. As a part of the support planning process, carers are asked to identify what they wish to achieve to help them achieve a balance between their caring role and maintaining their independence and desired quality of life.
39. In total, 2265 (approximately 33%) of open carers (paragraph 23) have a personal outcome recorded. There has been a steady growth in this aspect of practice.



40. Carers are likely to experience more than one of the outcomes outlined in paragraph 39. The graph below reflects the spread of outcomes as a proportion of all the outcomes chosen by carers.



41. The three most common personal outcomes to be achieved chosen by carers are as follows:
- Breaks from caring (31%)
 - Staying healthy and reducing stress (16%)
 - Maintaining my caring role (13%)

Voluntary Sector Financial Spend

42. New bi-annual contract monitoring arrangements were initiated on 1 April 2012 aligned to a three-year funding commitment for voluntary organisations. An analysis of the first return within the new arrangements will be available to report on by the end of December 2012.

Carers Survey

43. The first statutory Carers Survey has been completed (November 2012). In total, 1630 postal questionnaires were sent to an identified carer sample. The results of the survey will be collated and reported on in coming months.

Integrated Mental Health Service

44. Surrey and Borders Partnership NHS Foundation Trust has nominated a Senior Manager to represent the Trust on the Carer's Practice and Performance Group. This involvement will progress a consistent approach to both good practice and performance reporting across all services.
45. Self Directed Support is being implemented within the Trust, the implementation programme not yet complete. Once operational in all Teams, the whole family approach to assessment and support of carers will embed, delivering better support and outcomes for carers.
46. It is anticipated that on completion of the implementation of Self Directed Support, the Trust's practices will be aligned to deliver on the new performance measures.
47. Surrey and Borders Partnership NHS Foundation Trust has published results of a Carer Survey carried out December 2011 – February 2012. There were 168 respondents to the survey.
48. Highlights of the Carer Survey are as follows:
- 98 (61%) of carers were caring for people who use Community Mental Health Services. Other services included Older Adult Services, Learning Disability and Children and Young People Mental Health Services.
 - 125 out of 168 (74%) carers were offered a carers needs assessment
 - 61 (49%) of carers received an assessment within one month
 - The average time that carers are caring for someone is 8 years.
 - The main age group of the person they are caring for is 18-64 years.
49. Carers were asked about what help or support did they receive after the Carers assessment:
- 56 (59%) of carers received help with Choice and control over day to day life
 - 61 (65%) of carers received support to make friendships and relationships
 - 63 (61%) of carers were offered leisure activities/time to myself

- 68 (56%) of carers received support with maintaining caring roles (including parenting).

Draft Care and Support Bill

50. In July 2012 the Draft Care and Support Bill was published with the consultation period concluding at the end of October 2012.
51. The main anticipated implications for Local Authorities in relation to supporting carers which if adopted will need to be implemented by 2015 are as follows:
- A whole family approach to assessment when assessing individuals and carers.
 - A carers entitlement to request an assessment of their own needs will not be predicated on them providing regular and substantial care (current legislative requirement), but rather an assessment of carer should be entered into whenever a carer is identified as having needs (using the assessment process to determine entitlement to a response to those needs).
 - A need for increased focus on supporting young carers in the transition to adulthood.
 - Local Authorities will have a duty to respond to a carer's eligible needs, providing a solution, (rather than a power which is the case at the moment.)
 - Requirement to provide better information services for carers
 - Local Authorities will have a statutory obligation to provide a range of preventative services including to Carers
 - Local Authorities will be required to provide more breaks (including residential and nursing care and support in people's own homes).
52. Adult Social Care already delivers on many of the above anticipated changes, and is well placed to develop further where necessary. Examples of this are:
- A whole family assessment underpins our Self Directed Support assessment and support planning model which is reflected in the Carers Policy and Procedure.
 - Adult Social Care's Carers Policy and Procedure already commits Adult Social Care to meeting eligible needs of a carer in line with SCC's Eligibility Policy.
 - An inclusive approach to carers assessment is promoted to ensure carers are identified in the assessment process, their contribution recognised and are supported to continue their caring role for as long as they are willing and able to do so.
 - SCC Adult Social Care's strong national reputation for the provision of independent carer support including for young carers which will help the Council respond to the new requirements around prevention and provision of advice and information.
 - Investment in 2012/13 in an early intervention scheme administered through Local Carer Support organisations, aimed at supporting carers who are not known to Adult Social Care, enabling them to create balance between their caring role and their life away from it. (Carer Support Payments, a form of personal budget enable carers to arrange support for themselves that helps them

continue caring, minimising the impact of that role on their own health and well-being).

53. Government acknowledge that duties and implications of the new Act will have an associated financial cost to deliver. The Government's Impact Assessment suggests a net increased cost to Local Authorities of £150 million a year for additional services for carers and £25 million for additional assessment costs. The cost in Surrey is estimated by the County Council to be £3.4 million per annum with further assessment costs to be added.
54. A partnership event lead by Adult Social Care will take place in January 2012 to co-design next steps needed to respond to the likely requirements of the Bill. The new Act provides an opportunity for Adult Social Care to consider with partner organisations (Mental Health, Health and Voluntary and Carers) how best to deliver on these new requirements.

Conclusions:

55. Adult Social Care continues in its improvement in how it supports carers to achieve a balance between their caring role and their life away from caring.

Financial Implications

56. None to report at this time.

Equalities Implications

57. None to report at this time.

Risk Management Implications

58. There are no risk management implications identified within the content of this report

Implications for the Council's Priorities or Community Strategy

59. Continued improvement will contribute to Surrey County Council's ambition that every child or adult in need of support (including carers) is protected and supported to lead an independent life.
60. Ongoing practice and performance improvement as highlighted in this report will also support Adult Social Care priorities for 2012/13:
 - Developing staff with the values, attitude, motivation, confidence, training, supervision and tools to facilitate the outcomes people who use services and carers want.
 - Embedding personalisation by working towards personal budgets for everyone eligible for ongoing social care
 - Providing clear signposting for all Surrey residents, irrespective of their ability to pay, to social care and support services, so they can lead more independent and fulfilled lives.

Recommendations:

61. For Committee to endorse continued progress in relation practice and performance improvement achieved by Personal Care and Support.
62. For Committee to continue in its scrutiny of ASC performance in relation to assessment and support of carers.
63. For Committee to request a report on performance areas not reported on in this report (i.e. Voluntary Sector Financial Spend, Outcome of Carer Survey).
64. Select Committee to recommend a member(s) to represent the Committee at the Co-design event in January 2013 and to receive a report providing information on conclusions and proposals for future development in line with the new Bill.

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Sources/background papers:

- Carers Member Group Report to Select Committee - 18th May 2012
- Officer's report to Select Committee reporting on Carers Task and Finish Group – 18th May 2012
- Legislative Context - Carers Policy and Procedure
- Terms of Reference: Adult Social Care – Personal Care and Support Carers Practice and Performance Group
- Surrey and Borders Partnership NHS Foundation Trust: Carers Survey (December 2011 – February 2012) – A report on Carers Views on the support and services that they and the person they care for have received.

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