

4th March 2013**Agenda Item: 7****REPORT OF SERVICE DIRECTOR FOR OLDER PEOPLE****EXPENDITURE OF CARERS' FUNDING ALLOCATION – PROPOSED PLANS****Purpose of the Report**

1. To notify the ASCH Committee of the availability of an additional £1.5 million recurrent funding from NHS Nottinghamshire County to be spent on support for carers across Nottinghamshire County.
2. To notify the ASCH Committee of the availability of an additional £0.2 million non-recurrent funding from NHS Bassetlaw to be spent on support for carers across Bassetlaw.
3. To share with the Committee outline proposals for use of the funding.
4. To set out the appropriate governance arrangements to ensure robust use of monies and monitoring of the impact on outcomes for carers and the people they care for.

Information and Advice**Introduction**

5. Nottinghamshire County Council currently spends approximately £4.4 million on care and support for Carers and the people they care for. The services currently available for Carers range from one-off personal budgets (of up to £200.00), Day services and short breaks, crisis prevention schemes and the use of Assistive Technology.
6. NHS Nottinghamshire County received £1.5 million for carers, as part of its financial settlement in 2012/13, and, until this point, this amount has been held as a central reserve by the Primary Care Trust. This paper proposes that £1 million of this is transferred to Nottinghamshire County Council on a recurrent basis, £0.3 million is added to the budget for the provision of Carers' Breaks administered by the NHS and £0.2 million is allocated to the 5 Clinical Commissioning Groups for carers' initiatives.
7. NHS Bassetlaw (Primary Care Trust) has recently agreed a one-off allocation of £200,000 for carers in Bassetlaw for this year.
8. This provides us with a total of £1.2 million across Nottinghamshire. The £1.2 million is the money being transferred to Nottinghamshire County Council; the remainder will sit within the NHS. Proposals are currently being developed and consulted upon.

9. Current health expenditure on carers is principally through the funding of carers breaks – Health pay for the member of staff to administer breaks as part of the continuing health care scheme and circa £300,000 is spent each year on Carer's breaks. There are other funds, much smaller, available in individual Clinical Commissioning Group (CCG) schemes in addition to this amount.
10. Health services are continually being scrutinised to test the level of expenditure on carers, with regular questions through Freedom of Information (FOIs) requests and other channels. Given the recent emphasis on support for carers, it is important and timely to recognise the contribution that carers make in enabling the 'cared for' person to remain at home and out of more costly hospital or other health-related care or long term residential care.

What approach should we take?

11. Proposals are based on the existing Integrated Commissioning Carers' Strategy and will complement existing priority areas.
12. It is important that this additional funding is utilised to secure maximum impact on improving outcomes for both Carers and the people they are caring for. In planning for this, account should be taken of the following:
 - There is already an existing agreed Integrated Commissioning Carers' Strategy between the local NHS and Nottinghamshire County Council.
 - There is a clear connection between investment in carer services to prevent breakdown of care for the 'cared for' person, who might be at risk of admission to hospital or residential care. This is of particular concern over the winter period, when unplanned admissions to hospital increase.
 - Due to the ageing population, as well as the increase in the incidence of dementia, there is a need to consider services that are specific to the needs of those who are carers of people with dementia.
 - There are agreed and clear governance arrangements for Joint Commissioning with Nottinghamshire County Council and the Clinical Commissioning Groups.

Discussion with partners

13. The proposals described below are drawn from priorities identified in the Carers' Integrated Strategy. The proposals will be shared with partners and agreed by members of the Carers' Implementation Group which reports to the Integrated Commissioning Group for Older People.

Funding proposals

14. The following proposals are suggested for the use of an additional £1.5 million on a recurrent basis:

- Immediate increase in funding carers breaks. This budget (held by Health) is under pressure and, now we have generated interest and awareness amongst carers, they need to provide funding for the anticipated increase in demand for this service. **The proposal is for the NHS to double the current investment (an additional £300,000) on a recurrent basis.** This budget will remain within the NHS.
- Health contribute a very small amount to the overall carers spend (about £300,000). The carers' strategy and action plan has been widely consulted on with carers and other stakeholder groups. **The proposal is to transfer £1 million from Health to the Local Authority in 2012/13 and then year on year.**
- The Carers' Implementation Group, which has CCG representation, will develop a prioritised list of recurrent and non-recurrent schemes for use of this investment for approval by the CCG Accountable Officers and the Cares lead for the County Council. **The proposal is that the existing integrated Commissioning Group for Older People, which also has CCG representation, will oversee the use of the funding and account to the CCGs and the County Council for its appropriate use.** The transfer agreement will enshrine these as the appropriate governance arrangements for oversight of this funding.

15. The Carers' Implementation Group will seek to prioritise 'winter' schemes, such as targeted support for carers of frail elderly and those with dementia. (Around 60% of the referrals for Carers Breaks are for Carers looking after those living with Dementia or other memory related conditions). Many of the carers are elderly or have a long term conditions themselves.

16. **The proposal is to allocate the remaining funding (£200,000) on a capitation basis to CCGs.** This will facilitate the development and uptake of a Local Enhanced Service (LES) for GP practices to provide early identification of carers and signposting into support services that currently exist. Many carers do not consider or see themselves as carers. They see looking after the person 'cared for' as just something they have to or want to do. The introduction of a LES and practice register with a commitment to health checks for carers would incentivise the involvement of a wide range of professionals in becoming aware of carer issues and risks. This would mean that an additional 2000 carers could be identified and the associated risks managed. The approximate funding split across the 5 CCGs is shown below:

Mansfield & Ashfield	Newark Sherwood &	Nottingham North & East	Nottingham West	Rushcliffe
30.27%	18.67%	21.66%	13.63%	15.77%
(£60,540)	(£37,340)	(£43,320)	(£27,260)	(£31,540)

Specific suggestions currently are:

a. Dementia 'Compass' Support Workers

17. Supporting carers of people with working age dementia is a priority identified by the LINK (Local Involvement Network) and by carers at the Newark Dementia Summit.
18. One proposal is to employ Compass support workers i.e. specialist workers support carers of people with dementia and especially working age dementia. These workers would work along similar lines to 'Admiral Nurses'.
19. Admiral Nurses are all qualified mental health nurses who have specialised, and often have additional qualifications, in dementia care. The purpose of Admiral Nursing is to support the carers and families of people with dementia. To fulfil this aim they work in two main ways:
- Direct casework with family carers, offering, assessment, problem identification, information, signposting, psychological interventions and or support.
 - Offer supportive education to other professionals involved in a caring capacity but lacking in expertise on dementia related topics. These might include, care home staff, district nurses, general hospital staff and even G.P's.
20. The proposal is to appoint 7.5 Compass workers – Mansfield and Ashfield to have 1.5 FTE because of the size of the population). The cost is based on the NHS Band 5 (top of scale full time with on costs) at £33,521. This has been rounded up to £35,000 (for travel and possible pay increase next year).

For south of the county = £35,000 x 6.5 = £227,500.
For Bassetlaw = £35,000

The total for the whole county is therefore = £262,500

b. End of Life Carers Support Service

21. This is a proposal to commission a service for all carers who are looking after someone at the end of their life. Nottinghamshire's Clinical Commissioning Groups (apart from Bassetlaw) have already passed this proposal through the PCT's procurement panel to be commissioned recurrently.

For south of the county = £120,000
For Bassetlaw = £24,000

22. The proposal for the whole county is therefore = £144,000

c. Care and Support Centres

23. Nottinghamshire County Council currently owns 6 care homes which have been renamed as Care and Support Centres.

24. The 6 Care and Support Centres are located across the county:

- St Michaels, Retford (**Bassetlaw**)
- James Hince Court, Carlton in Lindrick (**Bassetlaw**)
- Kirklands, Kirkby in Ashfield (**Ashfield**)

- Leivers Court, Gedling (**Gedling**)
- Bishops Court, Boughton (**Newark and Sherwood**)
- Woods Court, Newark (**Newark and Sherwood**)

25. As part of the 'Living at Home' programme, there are proposals to expand and develop the use of the buildings as resources for the local community. It is also anticipated that Care and Support Centres can be altered to better meet the needs of carers; e.g. funding for the Care and Support Centres which could give carers a short break.

26. Other proposals include funding home-based provision overnight and at weekends when carer relationships break down due to illness/injury, through use of outreach from Care and Support Centres and/or crisis prevention scheme. This would prevent emergency admissions to care out of hours.

27. The costs below are based on the initial phase; if the plans are then applied to all 6 care and support centres, the cost rises to **£150,700**.

These proposals include:

• Reminiscence Therapy Workshops	£10,000
• Community Link workers	£22,000
• Carers' rooms	£10,800
• Bathing service	£1,950
• Ad hoc drop-in	£72,000
• Outreach work	0
• Assistive Technology Equipment	£12,000
• TOTAL	£128,750

For south of the county = £100,467

For Bassetlaw = £50,233

The total for the whole county = £150,700

d. Carers' Personal Budgets

28. In a paper "Progressing Personalisation: A review of personal budgets and direct payments for carers", produced by the Carers Trust in December 2012, it reports on a survey conducted with Local Authorities. The survey showed wide variation from a maximum of £150 for a carers' personal budget, to more than £1,501.

29. Five local Authorities reported maximum amounts of £1,000, £1,500, £1,560, £2,100 and £4,680 and 19 out of 30 authorities reported a maximum of between £250 and £500. Eleven authorities did not have a maximum. 1 area had a flat budget of £300 per carer.

Current activity

30. Currently Nottinghamshire County Council awards:

- £150 to carers assessed at substantial level

- £200 to carers assessed at critical level.

31. Based on activity from 1 April 2012 and 31 August 2012, an average of 118 adult (over 18) carers received a Carers' Personal Budget per month (using an average of £175).

32. Therefore, it is expected that 1,416 carers will have received a Personal Budget by 31 March 2013 at a cost of **£247,800 for the 2012-2013** financial year.

Projected spend options

33. In light of the Carers Trust findings, it would be reasonable to increase the maximum / minimum levels of Personal Budgets (PB) in line with other authorities. This would require topping up the Community Care budget for each locality / service area accordingly.

34. If the maximum level was increased to **£300** and the minimum was **£250**, this would equate to **1,416** carers receiving a maximum Personal Budget costing £300 = **£424,800**. The additional £177,000 is to be funded as follows:

For south of the county = £146,910

For Bassetlaw = £30,090

The total for the whole county = £177,000

e. Carer resilience

35. This is a proposal to fund research into dementia carer resilience in Bassetlaw and in the Newark and Sherwood area.

For south of the county = £21,000

For Bassetlaw = £12,500

The total for the whole county = £33,500

f. Consultation with Black and Minority Ethnic (BME) communities

36. Investigate access to, and suitability of Social Care services for BME carers. This has been identified in the Carers' Strategy and the Day Services review.

For south of the county = £8,333

For Bassetlaw = £1,667

The total for the whole county = £10,000.

g. 'Looking After Me' carers' courses

Currently the course 'Looking After Me' is being offered throughout Nottinghamshire except for the Bassetlaw area. To ensure equity throughout the county this proposal is to extend the offer to Bassetlaw.

The Looking After Me course is delivered along the same lines as the generic course i.e. two and a half hours once per week for six weeks.

For Bassetlaw only = £16,924

h. Evaluation

This is a significant amount of money and all stakeholders will be interested in the impact and cost effectiveness of these initiatives. It is therefore proposed that some money is committed to fund an in house evaluation, which we estimate the costs to be in the region of:

For south of the County = £16,667

For Bassetlaw = £3,333

The total for the whole County = £20,000

Other Options Considered

37. To improve CCGs engagement with the carers agenda, the CCGs are recommended to appoint a **carers' lead** and ask that this responsibility is recognised in the revised memorandum of understanding between the CCGs. Whilst there is not a requirement to have an additional post, the governance arrangements need to ensure that all CCGs are appraised of Carers developments and proposals regarding future expenditure of this recurrent funding.

Reason/s for Recommendation/s

38. Support the recommendations for allocation of the £1.7 million funding set out in this paper:

- a. £1.2 million be transferred to the County Council
- b. £0.3 million be added to the budget for the provision of Carers breaks administered by the CCGs
- c. £0.2 million be allocated to the 5 CCGs for use on Carers initiatives.

39. Agree that the existing governance arrangements will be sufficient to oversee the use of the joint funding on an on-going basis and that these should be set out in the section 256 agreement. However, request, on a one-off basis, the Accountable Officers to 'sign off' the plan when it has been produced by the Carers Implementation Group.

40. Ask the finance team (Health) to enact the necessary funding transfer.

41. To further improve governance, agree the nomination of a Carers Lead in one of the CCGs on behalf of all and tie this in to a revised memorandum of understanding.

42. Agree to the identification of a Carers' lead for CCGs.

Statutory and Policy Implications

43. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Implications for Service Users

44. The extra funding of £1.7 million will have a positive impact on both carers and by implication on the service users they are looking after as carers will be receiving more support, advice and information to assist them in their role as a carer.

Financial Implications

45. The total amount of the proposals listed here = £814,624

	NHS Notts County	Bassetlaw	Total
a. Compass	227,500	35,000	262,500
b. End of Life	120,000	24,000	144,000
c. Care & Support Centres	100,467	50,233	150,700
d. Personal Budgets	146,910	30,090	177,000
e. Carer Resilience	21,000	12,500	33,500
f. BME	8,333	1,667	10,000
g. Looking After Me		16,924	16,924
h. Evaluation	16,667	3,333	20,000
TOTALS	640,877	173,747	814,624

46. As the Bassetlaw money is non-recurrent, ongoing commitments will be funded from the NHS Support for Social Care Funding.

Equalities Implications

47. The remaining funds will be used to fund any additional initiatives identified through further consultation with Carers.

RECOMMENDATION/S

It is recommended that the Committee:

- 1) Approve the recommendations for proposed expenditure of the additional £1.5 million funding.
- 2) Receive a further report in April 2013 updating on the Carers Strategy and how the additional funding will be used across Health and Social Care.

David Hamilton
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Constitutional Comments (LM 22.02.13)

48. The Adult Social Care and Health Committee has delegated authority to approve the recommendations in the report.

Financial Comments (CLK 22.02.13)

49. The financial implications are contained in paragraphs 45 and 46.

Background Papers

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- a. Carers' Strategy and Action Plan 2012-2013
- b. Proposals for extra funding for Carers: Discussion paper February 2013

Electoral Division(s) and Member(s) Affected

All

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