

**12 May 2014****Agenda Item: 6****REPORT OF THE SERVICE DIRECTOR OF NORTH AND MID  
NOTTINGHAMSHIRE****CARER TRIAGE SERVICE****Purpose of the Report**

1. To seek approval for the continuation of the Carer Triage Service within the Social Care Adult Access Service.

**Information and Advice**

2. The Carer Triage Service was established in May 2013 with a Social Worker, and latterly a Community Care Officer, to provide information, advice and signposting to carers calling the Customer Service Centre.
3. The aim of piloting the Carer Triage Service was to ensure that carers contacting the Adult Social Care and Health Department would access timely and accurate information, and services to support them in their caring role. Whilst people requesting social care support are 'triaged' through the Adult Access Service (AAS), carers were not. Prior to the pilot, they were either provided with brief advice/information from Customer Service Advisors or referred to district teams for a carer assessment. The Carer Triage Service pilot has considered options for the most effective use of Council staff time to support this work.
4. A snapshot survey in 2013 showed that the system and priorities for allocating the high number of referrals into the district teams, were resulting in carers having to be contacted and if appropriate, assessed. The Carer Triage Service was put in place to address this, and also to understand and address any issues leading to the limited uptake of the Crisis Prevention Service for carers (also known as Carers' Emergency Respite).
5. Carers requesting social care support are now 'triaged' through the Adult Access Service. The pilot team was established with a full time Social Worker and a full time Community Care Officer. Following a carer's telephone assessment, carers are provided with advice/information and/or referred on to other agencies. If appropriate, a full carer assessment is completed over the telephone with the carer and if they are eligible, a one off personal budget can be arranged for either £150 or £200.
6. The telephone assessment takes an average of 20-30 minutes to complete. If there are communication issues or other complexities identified, such as a cognitive or hearing impairment, the referral will be sent to the district team for a face to face assessment.

7. The Carer Triage Service also ensures that carers receive information regarding training, prevention and direct access services; for example local support groups in their area. It also identifies whether carers would benefit from other preventative support such as the Carers' Emergency Card, the Carers Universal Information and Advice Service, and the Crisis Prevention Service.
8. The Carer Triage Service pilot has been available across all older people's teams, but not younger adult teams. It is therefore proposed to extend the service - to offer it to carers of younger adults and evaluate the benefits of this. An additional 2 Community Care Officer posts would be required to undertake this, which would also enable joint work with Clinical Commissioning Groups on ways to best manage the significant number of carer referrals received from GPs.

## **Evaluation**

9. The Carer Triage Service has been evaluated using information from carers receiving the service and by staff in the district teams. Public Health completed a Qualitative Evaluation of the impact on district teams in January 2014.
10. In summary, the Carer Triage Service is viewed as very successful both by staff and carers. The process is a leaner and more efficient way of meeting carers' needs. The service has developed positive relationships with, and relieved pressure on, the district teams.
11. In the "Report of Findings from the Personal Social Services Survey of Adult Carers in Nottinghamshire, 2012-13", 66% of carers said that information was very easy or fairly easy to find. 34% said that it was fairly or very difficult to find. The Carer Triage Service is supporting improvements for carers to get better information more quickly and from one place.
12. To date, the Carer Triage Service has completed 411 assessments over the telephone. From 17 May 2013 to 7 February 2014, only 50 referrals (12%) have been forwarded to district teams. These referrals were made because workers were already involved and/or the assessment had started, or a telephone assessment was not feasible due to the carer having communication issues or other complexities e.g. a cognitive or hearing impairment.
13. The Team manager for the service supported the evaluation recommendations that a Social Work grade post was not required to undertake the work, which could be completed by Community Care Officers. It is therefore recommended that the Carer Triage Service is extended for one year, provided by 3 Community Care Officers.

## **Other Options Considered**

14. Retaining a social work post (as included in the pilot structure) was considered, but is not appropriate due to higher costs and it not being required to complete the work. The option to cease the service was also considered, however, it is likely that waiting lists and times would again build up.

15. The option of two CCO posts focusing only on older adults was considered. This would not, however, enable the potential benefit of extending the service to younger adults to be evaluated.

### **Reason/s for Recommendation/s**

- 19 The Carer Triage Service is a cost effective way to respond promptly to requests for information and assessments from carers and therefore better assist them to sustain their caring roles. The Care Bill will make it a duty for carers to receive an assessment, regardless of their needs for support or their financial resources, or those of the adult they care for. This places carers' rights to an assessment on an equal legal footing to those they care for based on the appearance of need, with the previous requirement to be providing 'substantial' and 'regular' care removed. This could lead to significant additional contacts and assessments for the Council to respond to.

The Carer Triage Service supports the Corporate strategy of 'channel shifting' away from face to face contact towards telephone and online interactions where appropriate and as such will both make best use of staff time, as well as delivering a better service to more carers. The extension of the Carer Triage Service to May 2015 would enable a robust evaluation of the Service in advance of the Better Care Fund, which will oversee the S256 carers' monies from April 2015.

### **Statutory and Policy Implications**

16. This report has been compiled after consideration of implications in respect of finance, the public sector equality duty, 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**

17. Evaluation of the Carer Triage Service has demonstrated a significant impact on improving the carer experience. Outcomes reported are that carers:
- receive accurate information and immediate support to enable them to continue caring longer and avoid crises
  - can be assessed over the telephone and have reduced waiting times, with cases being assessed within an average of a 7 day period
  - experience fewer handovers and an improved customer journey
  - have emergency respite arranged quickly and appropriately
  - are referred for a carers' break provided by the NHS when appropriate
  - are referred and signposted to relevant organisations, supporting prevention
  - are promptly assessed regarding a carers' personal budget (this will then be referred to a manager for authorisation)
  - are reviewed over the phone where appropriate

## **Financial Implications**

18. The cost of the current model is £71,177. The restructuring of the service to three Community Care Officer posts would cost £89,229 per annum, for which funding is available from within existing ASCH carer budgets to May 2015.
19. The Council receives a high proportion of carer referrals from GPs and other health professionals. In 2014-15 it is planned to explore best pathways for the service to respond to these and consider with CCGs whether it would be appropriate for Carers NHS monies to part fund the service in the future.

## **Human Resources Implications**

20. This report proposes to:

- Extend for 12 months from 1<sup>st</sup> June 2014 to 31<sup>st</sup> May 2015, 1 FTE Community Care Officer post, NJE Grade 5, scp 24-28, £26,065 - £29,743 including on-costs
- Establish on a temporary basis to 31<sup>st</sup> May 2015, 2 FTE Community Care Officer posts, NJE Grade 5, scp 24-28, (£26,065 - £29,743 including on-costs for 1 post), £52,130 - £59,486 including on-costs for 2 posts.

21. The existing social work post was a fixed term contract which ended on 31<sup>st</sup> March 2014.

## **Ways of Working Implications**

22. Existing staff will remain in the same location. Office accommodation will be required for the extra post.

## **Equalities Implications**

23. The Carer Triage Service currently is only available to carers of older people across the County. The recommended option will extend the service to carers of younger adults.

## **RECOMMENDATION/S**

It is recommended that the Adult Social Care and Health Committee:

- 1) Agree to a continuation of the Carer Triage Service to May 2015.
- 2) Agree to the following changes to the establishment:

Extend for 12 months from 1<sup>st</sup> June 2014 to 31<sup>st</sup> May 2015, 1 FTE Community Care Officer post, NJE Grade 5, scp 24-28, £26,065 - £29,743 including on-costs

Establish on a temporary basis to 31<sup>st</sup> May 2015, 2 FTE Community Care Officer posts, NJE Grade 5, scp 24-28, (£26,065 - £29,743 including on-costs for 1 post), £52,130 - £59,486 including on-costs for 2 posts.

**DAVID HAMILTON**

**Service Director for Personal Care and Support – Older Adults**

**For any enquiries about this report please contact:**

Sue Batty

Strategic Commissioning, Group Manager

Email: [sue.batty@nottscc.gov.uk](mailto:sue.batty@nottscc.gov.uk)

**Constitutional Comments**

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

**Financial Comments**

25. The financial implications are contained in paragraph 18 and 20 of this report.

**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. Report to the Adult Social Care and Health Committee – Carers’ Strategy 2013-2014 – 6 January 2014

**Electoral Division(s) and Member(s) Affected**

All