



16th January 2013

Agenda Item: 6

**REPORT OF THE CORPORATE DIRECTOR FOR ADULT SOCIAL CARE,
HEALTH AND PUBLIC PROTECTION**

**EXPENDITURE OF CARERS FUNDING ALLOCATION - PROPOSED PLANS -
NOTTINGHAMSHIRE CLINICAL COMMISSIONING GROUPS (CCGS)**

Purpose of the Report

1. To notify the Health and Wellbeing Board of the availability of an additional £1.5million recurrent funding from Health to be spent on support for Carers across Nottinghamshire County.
2. To share with the Board outline proposals for use of the funding; and
3. To set out the appropriate Governance arrangements to ensure appropriate use of monies and monitoring of the impact on outcomes for Carers and the people they care for.

Information and Advice

4. Nottinghamshire County Council currently spends £4.4m 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.
5. NHS Nottinghamshire County received, as part of its financial settlement in 2012/13, a hypothecated sum for carers. This amounts to £1.5 million and, until this point, this amount has been held as a central reserve by the Primary Care Trust.
6. 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.
7. 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.

8. This paper proposes plans for the use of this funding (an additional £1.5 million) on carers this year and recurrently.

What approach should we take?

9. 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 joint carers strategy between Health and Nottinghamshire County Council.(see **Appendix 1**)
 - 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 aging 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 CCGs.

Funding proposals

10. The following proposals are suggested for the use of an additional £1.5million 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, we need to provide funding for the anticipated increase in demand for this service. **The proposal is to double the current investment (an additional £300k) on a recurrent basis.**
 - Health contribute a very small amount to the overall carers spend (about £300k). The carers strategy and action plan has been widely consulted on with carers and other stakeholder groups. **The proposal is to transfer one 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.

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.

- **The proposal is to allocate the remaining funding (£200k) 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%
(£60,000)	(£37,000)	(£45,000)	(£27,000)	(£32,000)

Other Considerations

11. Nottinghamshire County Council has, in the past, found it difficult to engage with the Primary Care Trust and more recently the CCGs to progress the issues related to the carers agenda as there is no identified lead for Carers across Health.
12. Given the growing focus on this area and the requirement to have robust governance arrangements for the use of joint funding, 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.

Recommendations already agreed by CCGs

13. Support the recommendations for allocation of the £1.5m funding set out in this paper:
 - a. £1.0m be transferred to the County Council on a recurrent basis
 - b. £0.3m be added to the budget for the provision of Carers breaks administered by the CCGs
 - c. £0.2m be allocated to the 5 CCGS for use on Carers initiatives.
14. 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.
15. Ask the finance team (Health) to enact the necessary funding transfer.

16. 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.
17. Agree to the identification of a Carers lead for CCGs.

Statutory and Policy Implications

18. 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.

RECOMMENDATION/S

- 1) Note and support the recommendations for proposed expenditure of the additional £1.5m 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.

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Constitutional Comments (SG 07/01/2013)

19. The Board is the appropriate body to consider the issues set out in this report.

Financial Comments (NDR 07/01/2013)

20. The financial implications are set out in the report.

Background Papers

None.

Electoral Division(s) and Member(s) Affected

All.

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