

AGENDA ITEM NO: 6

21 April 2016

Report To: Health and Social Care Date:

Committee

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Subject: CARERS (SCOTLAND) ACT 2016

1.0 PURPOSE

1.1 To advise the Health and Social Care Committee on legislative developments relating to the Carers Scotland Act 2016 and the potential financial impact.

1.2 To advise of the progress with Inverclyde's Carers Strategy for 2016 – 2022.

2.0 SUMMARY

2.1 The Carers (Scotland) Act was passed by the Scottish Parliament in February 2016. It details a range of powers and duties for local authorities and the HSCP in relation to Carers and Young Carers. Officers of the HSCP are currently working with Inverclyde Carers Centre and carers to develop a Carers Strategy for 2016-22 which will look at implementing the new Act within Inverclyde.

3.0 RECOMMENDATIONS

- 3.1 That the Committee note the passing of the Carers (Scotland) Act 2016 and its new powers and duties placed on local authorities.
- 3.2 That the Committee request a further report that will identify the potential resource implications of implementation, and to continue to feedback on the negotiations regarding the financial memorandum between COSLA and the Scottish Government.
- 3.3 That the Committee note the progress made around the Inverclyde Carers Strategy and request a further report, including a final draft, following a public consultation exercise in June and July 2016.

4.0 BACKGROUND

- 4.1 The Carers (Scotland) Bill passed its third and final stage in the Scottish Parliament on 4 February 2016.
- 4.2 The Carers (Scotland) Bill is a key piece of new legislation that promises to 'promote, defend and extend the rights' of adult and young carers across Scotland. Further regulations and guidance will be drafted to support the implementation of the Act. The Carers (Scotland) Act will become law in April 2017.
- 4.3 The principle behind the Act is to enhance and extend the rights of carers and young carers to improve their individual outcomes whilst adopting a more consistent approach across Scotland. The Act requires to be taken account of when preparing health and social care services as well as within the context of other social care and health legislation such as the Social Carer (Self Directed Support) (Scotland) Act 2013.

5.0 PROPOSALS

5.1 Carers (Scotland) Act

The Act usefully offers a definition of the term 'Carer' taking account of both adults and young carers:-

- It excludes the parental role which would be expected and appropriate for any child to receive, emphasising the additional support needs of the child;
- It also explicitly excludes paid carers and volunteers;
- The definition removes the regular and substantial test; and
- The requirement that the cared-for person must access community care services in their own right.

These changes allow for a focus on the impact caring has on the individual and that their assessed needs are acknowledged as separate from the needs of the cared for person.

The Act also stipulates a range of new duties and powers; these include some that will be met by existing services and others that will require changes in how services are provided.

5.2 Information and Advice Service

There is now a duty on local authorities to establish and maintain information and advice service for carers in their area. This service would provide access to:-

- welfare rights advice
- income maximisation
- education and training
- advocacy
- advice around the provision of short breaks
- advice around health and wellbeing, including access to counselling

Inverclyde HSCP provides either directly or via a third party a range of advice and support services to carers. The principal organisation is Inverclyde Carers Centre who

link with statutory and third sector organisations to provide a range of advice and support including HSCP welfare rights service and financial fitness.

5.3 <u>Involving Carers in Hospital Discharge</u>

There is a duty on health boards to inform and involve carers in hospital discharge of the person they care for. Discharge planning is a joint responsibility between the HSCP and the Acute sector. Inverclyde has a good record in terms of performance around facilitating discharge from hospital and has in place guidance that ensures carers and family members are included in the discharge process. This area will be raised at the regular Inverclyde Strategic Discharge Meeting with colleagues from Acute to ensure this practice is further developed.

An issue where there are concerns is when the cared-for person denies their consent to share this information around discharge. This is not thought to be a frequent occurrence and current practice is to gain consent of the cared-for person.

5.4 Adult Carer Support Plans (ACSP) and Young Carers Statements (YCS)

The Act introduces Adult Carer Support Plans (ACSP) and Young Carers Statements (YCS) to replace carers' assessments.

The legislation directs that ACSP must consider a range of areas that impact upon the carers' wellbeing including personal outcomes, impact of caring on the carer, the requirement for contingency and future planning. There is also a requirement to set clear timescales for the completion of ACSP in particular for those people caring for someone with a terminal illness.

The requirements for a Young Carers Statement cover similar grounds as that for ACSP. The YCS also needs to cover consideration of the appropriateness of the service, any links to a child plan to cover wellbeing and the requirement for targeted intervention. The regulations when published will also cover the need to pass on information within a YCS to the child's named person.

There is likely to be an impact on local resources and budgets. In 2015 the HSCP carried out an exercise which highlighted a projected increase in potential demand. This is based on the existing known number of carers living within Inverclyde. We currently have 2142 informal carers for whom the cared-for person has an active social care involvement or is in receipt of a service. It is a fair assumption to make that this equates to the number of ACSP and YCS that will be required to be completed. This would require additional staff to implement and maintain a regular review of the carer support plans.

The 2011 census suggests the prevalence of informal carers living in Inverclyde could be closer to 8,000 though we are not able to determine what level of support this group would benefit from.

We are currently discussing with the Carers Centre how the extension of the current self-assessment process will alleviate these pressures as well as ensuring quicker access to advice and information for carers.

5.5 Eligibility Criteria

Local Authorities have a duty to publicise their eligibility criteria for access to social care services. The Act determines that there is now a responsibility to set local eligibility criteria in terms of carers' access to services and to consult with carers and carer organisations as preparation for this.

In relation to young carers, this links into Getting It Right For Every Child (GIRFEC), with its emphasis on early intervention and wellbeing. It would be proposed that any young carer eligibility criteria would be part of the GIRFEC strategy.

There is a requirement to consult with carers and young carers about any local eligibility criteria and it is proposed that this would form part of the consultation of the Inverclyde Carers Strategy.

5.6 Carer Involvement

Inverciyde HSCP recognises that carers and young carers' involvement can improve the quality of health and social care services. Carers often have insights about their role and the needs of the person they care for which providers and policymakers may lack, therefore it is important that they are included and involved in the future planning and shaping of services.

There is now a duty to involve carers in the development of carer services. The Public Bodies Act 2014 determines how carers require to be involved on a strategic level through strategic planning groups and representation on Integration Joint Boards. There is also the requirement to consult on an individual basis through preparation of ACSP and YCS, with a specific duty around planning of hospital discharge.

Inverciyed already has in place a structure that will fulfil this aspect of the Act, including work with individual carers at a care management level to involvement with the Carers Network, the HSCP Advisory Group (supported by Your Voice) and the IJB Carers sub group.

5.7 Carers Strategy

A further duty is on local authorities and health boards to publish a Carers Strategy in consultation with carers and carers' organisations in their area. Inverclyde has in line with other local authorities published a Carers Strategy for a number of years and this has assisted in shaping and developing services for carers in this area.

We are currently in the process of drafting the Inverclyde Carers Strategy for 2016-22. The Strategy will cover Adult and Young Carers and will set out how they will receive the appropriate level of advice and support to enable them to continue their caring role.

The Strategy development is led by an editorial group which is made up of a sample of carers from across Inverclyde. A survey of carers was carried out in the summer of 2015 and we received nearly 400 responses. The identified priorities will form the basis of Inverclyde's Carers Strategy.

The survey identified 8 key areas:-

What has helped in a caring role:

- Provision of Information and Advice
- Provision of short breaks from caring
- Provision of emotional support to carers
- Identification of Hidden Carers

What services could be improved:

Access to services

- Information and Advice
- Stress management
- Overnight short breaks

Whilst carers reported an overall satisfaction with the service provided, there were still concerns about how easy it is for people to access services. A key aspect of the Strategy will be to work on this particular issue with carers and services. There is already a successful outreach programme which covers Inverclyde Royal Hospital and this will continue with additional resources to fund a similar project within the primary care setting. A transition worker post has been identified to work with young adult carers as they move from education into the workplace. The Young Carers Strategy will cover the identification of young carers whilst at school and will be linked to the GIRFEC strategy.

The Inverclyde Carers Strategy will also take into account the Carers (Scotland) Act and subsequent regulations when these are published. It is the intention to complete a draft of the Strategy by June 2016 and launch a final public consultation during Carers week. This would allow for completion of the Strategy by September 2016 and will be brought back to the IJB for approval.

5.8 Financial Memorandum

Throughout the Act's progress through Parliament, COSLA has raised concerns around the impact of the provisions of the Act and resulting demand on resources. The Financial Memorandum which accompanied the Act significantly underestimated the unit costs of individual provision resulting in a substantial risk that the Act will be underfunded.

A Finance Group has been established to profile demand and unit costs of assessment and support for carers. Once this work is completed, it will inform discussions around the spending review and settlement covering the period when the Act will be enacted which will be 2017/18 onwards.

5.9 Waiving of Charges to Carers

The Social Care (Self Directed Support) (Scotland) Act 2011 introduced regulations requiring councils to waive charges to carers for support provided directly to them, for example, assistance with housework.

During the consultation linked to the Social Care (Self Directed Support) (Scotland) Act 2011, councils were concerned that this waiving of charges should not be extended to replacement care, such as a short break in a residential home. This was primarily around the impact on loss of income from charges that could reduce the available provision of such respite.

When the regulations were published in 2014 the waiving of charges did extend to replacement care costs with no associated financial memorandum to provide extra funding to cover the costs of this new power. The Scottish Government view is that this regulation is a power and not a duty and so should be funded through existing budgets if the authority decides to implement the waiving of charges.

COSLA are continuing discussions with government in the following three areas:-

- The requirement for funding in 2016/17
- The amount of funding required for waiving of charges when the power to support carers becomes a duty
- The need for clarified guidance on the existing regulations in relation to how respite support is classified as to benefit the carer or the cared-for, and what

charging regime should therefore apply.

6.0 SUMMARY

6.1 The HSCP and their partners recognise the enormous value of the care provided by unpaid carers and the need to invest in more innovative forms of support.

The powers and duties outlined in the Act are welcomed and will help to consolidate the progress made in Inverclyde. There are concerns however that the Carers Act could be underfunded with a detrimental impact on the level of service that could be provided.

6.2 We aim to:-

- Continue, in consultation with carers and young carers, to produce the Inverclyde Carers Strategy 2016-2022 and to report back to the Health and Social Care Committee on progress and seek final approval of the completed Strategy.
- Calculate the resource implications of the Carers (Scotland) Act 2016 and the regulations relating to waiving of charges for carers based on the performance data from 2015-16.
- Continue to work with COSLA in its discussions with the Scottish Government around the implications of the Act.

7.0 IMPLICATIONS

Finance

7.1 Financial Implications:

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
N/A					

Annually Recurring Costs/ (Savings)

Cost Centre	_	With Effect from	Annual Net Impact £000	Virement From (If Applicable)	Other Comments
N/A					

Legal

7.2 There are no legal issues within this report.

Human Resources

7.3 There are no human resources issues within this report.

Equalities

7.4 There are no equality issues within this report.

Has an Equality Impact Assessment been carried out?

	YES (see attached appendix)
V	NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

Repopulation

7.5 There are no repopulation issues within this report.

8.0 CONSULTATION

8.1 None.

9.0 BACKGROUND PAPERS

9.1 None.