MUNICIPAL YEAR 2012/2013 REPORT NO. 141A

Agenda – Part: 1	**Item: 10**
Subject: Enfield Joint Carers Strategy 2013-16 **Wards: ALL**	
Cabinet Member consulted: **Councillor Don McGowan**	

MEETING TITLE AND DATE:
Cabinet - 23rd January 2013
Council – 30 January 2013

REPORT OF:
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1. EXECUTIVE SUMMARY

1.1 This report proposes the agreement of a joint Enfield Carers Strategy between Enfield Council and NHS Enfield.

1.2 The Enfield Joint Carers Strategy is available for reference in the Members' Library and Group Offices and on the Council's website (an executive summary of the strategy is attached at appendix 1) and has been prepared and been subject to a 3 month period of consultation with carers, key partners and the voluntary and community sector (VCS).

1.3 The Enfield Joint Carers Strategy 2005-2010 established some excellent work benefiting the 29,000 carers in Enfield and led our strategic direction to the establishment of a new resource, Enfield Carers Centre which gives carers a 'hub' in which to receive support, information and counselling.

1.4 The Enfield Joint Carers Strategy 2013-16 builds on this good work and looks to further develop services for carers and to quality assess and monitor Carers Assessments, support plans and reviews and ensure Enfield staff are trained appropriately to treat carers with respect and dignity and involve them as key partners.

1.5 The strategy sets out how Enfield will develop and deliver carers services to implement the National Carers Strategy, the 'Caring for the Future' white paper and Care and Support Bill.

2. RECOMMENDATIONS

2.1. Council is asked to:

- Note the contents of this report;

and

- Approve the Enfield Joint Carers Strategy 2013-16 and associated delivery plan.

3. BACKGROUND

3.1 The Enfield Carers Strategy 2005-2010 established some excellent work benefiting carers and led our strategic direction to the establishment of a new resource, Enfield Carers Centre which gives carers a 'hub' in which to receive support, information and counselling. The Enfield Joint Carers Strategy 2013-16 builds on this good work and looks to further develop services for carers and to quality assess and monitor Carers Assessments, support plans and reviews and ensure Enfield staff are trained appropriately to treat carers with respect and dignity and involve them as key partners.

3.2 Enfield currently has approximately 29,000 adult carers within the Borough, with another 1000 young carers (those aged under 18). An Enfield survey undertaken in 2009 highlighted that 51 percent of carers said their caring role meant they sometimes can't look after themselves well enough with 20% of those saying they neglected themselves. Of these carers almost 25% said their caring role meant they were unable to access basic health services such as going to the GP or dentist. Research undertaken by Carers UK in 2004 showed that those caring for more than 50 hours a week - 4959 carers are in Enfield – are twice more likely to be in poor health than those not caring.

3.3. The Strategy has been developed to respond to the National Carers Strategy and to build on the previous Carers Strategy for Enfield. It responds to the Care and Support Bill which is due for implementation as the Act in 2015. This legislation gives carers similar rights to assessment and services as the person they care for. The preventative approach offers a cost effective and planned approach to the needs of carers to support their wellbeing and to enable them to continue to care.

3.4 Consultation on the Strategy

3.5 Formal public consultation on the draft Carers Strategy was undertaken over a 3 month period from 14th June to the 14th September 2012. Stakeholder and public views on the strategy were sought through an e-questionnaire on the Enfield Council website and a link on NHS North Central London's website,

Partnership Boards and Scrutiny Panels and NHS/Health Boards and Panels

3.6 Live consultation events were held including an open Workshop held at the Civic Centre attended by carers, professionals and VCS representation, presentations throughout Carers Week, Enfield Town Show and the Carers Hub meeting with the VCS carers organisations represented.

3.7 The consultation was publicised through the HHASC Communications Team, emails to staff in NHS Enfield, Health and Adult Social Care staff, acute trusts, voluntary and community sector providers, Staff Matters, Our Enfield magazine and an article in the Carers Voice newsletter

3.8 We received a total of 18 responses to the questionnaire from the online consultation. A total of 52 individuals attended either the workshops or presentations and verbal feedback was received from those attending.

3.9 In addition written feedback was received from The Chief Executive of Enfield Carers Centre, Representatives from the Carers Partnership Board, individual carers, the NHS Primary Care Strategy Team, Children's Services and interested colleagues within the Council and Health

3.10 Verbal feedback was given from the Departmental Management Team chaired by Ray James, the Learning Disability Partnership Board, Professional Executive Committee, NHS North Central London, commissioning colleagues within the Council and The Carers Hub meeting.

3.11 As a result of feedback received during this consultation the strategy was revised to strengthen guidance and training regarding carers identification and assessments, to strengthen training for practitioners, to promote assistive technology, introduced transitions frameworks, to provide more support regarding transport and parking provisions, increased support for working carers, to work with schools to support young carers and to work with GPs to increase identification, referral and support to carers.

3.12 Current and Future Funding

3.13 Services to carers which are commissioned to VCS organisations through the former Carers Grant total £884,674.13. In addition, NHS Enfield spends £580,988.55 on services to carers.

3.14 Where funding is required for new services, funding will be identified through partnership working (the Council and Health); with

Enfield Carers Centre to identify alternative funding streams through fundraising and grant bodies and through review of existing services to remove duplication or services which do not meet the agreed strategic objectives.

3.15 Strategic Objectives

3.16 The Strategy sets out how Enfield will develop and deliver carers services over the next 3 years (2013-16). It outlines 5 key Strategic objectives which were taken from the National Carers Strategy as follows:

Strategic Objective	Commissioning Intentions
Carers will be respected as expert care partners and will have access to the integrated and personalised services they need to support them in their caring role	• Ensuring carers have access to high quality literature which is accessible and appropriate • Ensuring carers and carer representation involvement in shaping services and policy • Carers Assessment, Support and Training • Personalised and flexible services
Carers will have a life of their own alongside their caring role	• Development of Peer and Community support • Carers have access to breaks that are appropriate and accessible • Emergency support • Support at change and transition
Carers will be supported so that they are not forced into financial hardship by their caring role	• Housing Support • Access to benefits • Access to employment and training
Carers will be supported to stay mentally and physically well and treated with dignity	• Safeguarding against harm • Access to health and wellbeing services • Access to emotional support and counselling
Children and young people will be protected from inappropriate caring and have the support they need to learn, develop and thrive, to enjoy positive childhoods and to achieve against the Enfield Children and Young People's Plan outcomes	• Whole family support • Educational support for young carers • Activities and club

4. ALTERNATIVE OPTIONS CONSIDERED

4.1 The Strategy sets out the delivery of services and support to carers and how the Council and NHS Enfield will work in partnership to identify carers. It proposes an approach to

commissioning Carers Services that is consistent with forthcoming legislation, current legislation and guidance and is in line with existing Council and NHS Enfield strategies.

5. REASONS FOR RECOMMENDATIONS

5.1 The strategy is intended to meet the government's key objectives for the delivery of services to meet the needs of carers and meet the requirements to assess and support carers as specified in the 'Caring for the Future' and the draft Care and Support Bill.

5.2 The support of carers is a long term cost effective option for the Council and Health. Research has shown that a carer, on average, will provide the equivalent of £18,473 in care costs. With the 29,000 carers in Enfield this equates a saving of £535,717,000.00 per annum. The business case to support carers through preventive services, low level services and respite provides clear cost efficiency.

6. COMMENTS OF THE DIRECTOR OF FINANCE, RESOURCES AND CUSTOMER SERVICES AND OTHER DEPARTMENTS

6.1 Financial Implications

The total Carers budget for 2012/13 is £1,000,530, of which £315,000 relates on one off funding from project carry forwards. The projected outturn for 2012/13 against the Carers budget is a balanced position.

As mentioned in paragraph 3.13 the 2011/12 LBE actual adult spend was £884,674.13 (see Appendix I of the Carers Strategy 2013-16) and the NHS actual spend was £580,988.55 (see Appendix J of the Carers Strategy 2013-16).

LBE will continue to meet its Carers commitments from existing HASC resources. At time of writing the exact monetary commitments for 2013 - 16 are still to be finalised.

There are no planned saving targets to be met from HASC Carers resources over the medium term financial plan 2013-17.

6.2 Legal Implications

The Strategy recognises the rights afforded and responsibilities owed towards to carers under recent legislation such as Equal Opportunities Act 2004, Work and Families Act 2006 and Carers Recognition and Services Act 1995. Further

the Equalities Act 2010 notes that carers can experience discrimination in society and in work as a result of their association with disabled or older people; Social Service Authorities must therefore consider the impact of their policies in their impact assessments. Further the Care and Social Support Bill aims to strengthen the rights of carers to ensure the 5 outcomes set out in the National Carers Strategy are advanced.

6.3 **Property Implications**

Not applicable.

7. KEY RISKS

7.1 There are no significant risks identified as a result of this strategy and its implementation.

7.2 Any risks identified whilst implementing the strategy will be included on the Carers Partnership Board risk register and managed by the Implementation Group through existing risk management arrangements.

8. IMPACT ON COUNCIL PRIORITIES

8.1 **Fairness for All**

Through this Strategy the Council and the NHS highlights its commitment to ensure that those who care for others are protected from inequalities. National research from Carers UK shows that carers are:

- Significantly worse off financially due to their caring role
- Almost half of all carers cut back on essentials such as food and heating to cope financially
- 82% say caring has had a negative impact on their physical health
- 87% say caring has had a negative impact on their mental health
- 2 in 5 carers have put off their own medical treatment or appointments due to their caring role
- 66% of carers state caring has negatively affected their friendships and 58% said caring negatively affected their relationships with family members
- 1 in 6 carers have given up work, or reduced their hours, in order to meet their caring responsibilities

By providing a clear strategic direction for the sustainability and development of carers support Enfield Council and the NHS will be greatly contributing to the reduction of these inequalities for carers. By acting as integral part of Enfield's strategies and policy, the Joint Carers Strategy is in a prime position to influence change within Enfield's society and culture.

8.2 **Growth and Sustainability**

A significant part of the new Joint Carers Strategy highlights the need for support for carers who are in employment and need support to balance caring and work, or to support carers who wish to re-enter the job market. By working in partnership with Jobcentre Plus, Enfield Carers Centre and other providers the Council and NHS will implement the Strategy to provide opportunities for training, skills workshops, employment advice and information.

8.3 **Strong Communities**

The Strategy introduces a strategy of increased carer engagement and consultation and the introduction of Carers Forums will represent carers views and feedback to Council and Health colleagues. The continued commitment to Enfield Carers Centre provides carers a safe place where they are able to speak freely without fear of judgment or criticism. In addition, Enfield Carers Centre has had a number of carers who volunteer within the Centre, giving them valuable job skills such as administration and/or reception duties and building carers self esteem and confidence.

The Strategy also commits to increase care representation on the Carers Partnership Board, other Partnership Boards and for 'Carers Champions' within care teams, health, the mental health trust and the Clinical Commissioning Group.

9. EQUALITIES IMPACT IMPLICATIONS

9.1 No significant equalities impact arose whilst undertaken the Predictive Equalities Impact Assessment

9.2 It is acknowledged that to ensure equal access to information, partnership working is required between the Council, Health, Enfield Carers Centre and BAME specific groups in the community to minimise cultural and language barriers.

10. PERFORMANCE MANAGEMENT IMPLICATIONS

10.1 There are two key indicators relevant to Health and Adult Social Care:

- Carers receiving needs assessment or review and a specific carer's service, or advice and information.
- Number of Social Care clients receiving Self Directed Support (Direct Payments and Individual Budgets)

10.2 The implementation of the Strategy and the performance against the outcomes will be monitored by the Carers Partnership

Board. In order to deliver these outcomes a partnership Implementation Group will be established with four specialist sub-groups focusing on young carers, operational practice, mental health and the VCS.

11. HUMAN RESOURCES IMPLICATIONS

11.1 Establishment of the Carers Employee Support Scheme and a Carers Action Group will result in HR policies and procedures being reviewed to ensure they are 'carer friendly' and encourage carers to remain in employment. Support and training on carers issues will be given to HR if required.

12. PUBLIC HEALTH IMPLICATIONS

12.1 This Strategy is designed to maintain, and improve, the health and wellbeing of the 29,000 carers within Enfield. Carers, without support, can experiences higher levels of ill health, stress and depression than their demographic equivalents.

12.2 By committing to providing information, support and advice, carers will be able to plan and prepare for the future better and able to relive some of the tensions that caring brings. By increasing awareness and identification of carers, preventative services can be offered before carers reach crisis point, affecting their physical and mental health. Peer support and meeting other carers will decrease isolation and give carers a chance to build their support networks and friendships.

12.3 The Strategy also focuses on enabling easy access to health services to complement the preventative services including health checks and access to Health Trainers.

Background Papers

None.