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Report of Director of Adults and Health

Report to Executive Board

Date: 27 June 2018

Subject: Short Break services

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	☐ Yes	⊠ No
Are there implications for equality and diversity and cohesion and integration?	⊠ Yes	☐ No
Is the decision eligible for Call-In?	⊠ Yes	☐ No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number:	☐ Yes	⊠ No

Summary of main issues

- The purpose of this report is to inform Executive Board of the outcome of consultation on current short break arrangements. The report seeks Executive Board approval for putting in place new arrangements that ensure, going forward, that the Council's short breaks offer is fair, equitable and gives proper weighting to those with the greatest caring responsibility.
- 2. Unpaid carers make a vital contribution to health and care in Leeds through the support they give to people who, because of long term illness, mental illness, impairment or old age, are not able to care for themselves. The Adults and Health Directorate recognise that having a short break is important both for the carer and the cared-for person. We also recognise that the number of carers who care for over 20 hours a week is growing.
- 3. A review of short break services has identified that current arrangements are inconsistent, and present anomalies in terms of how people access a short break. The review also found that there are differences in how support needs are assessed, how eligibility is determined and whether people are asked to make a contribution to the cost of their service. This report makes proposals to resolve those issues.

4. The report also proposes further consultation on a revised specification for the Community-based Respite service including the referral pathway and criteria for the service.

Recommendations

Executive Board is asked to approve:

- 1. The expansion of the in-house Short Breaks service so it can offer short breaks to a greater variety of people and for a wider range of needs.
- 2. The three tier approach to having a short break which supports a range of carer needs.
- 3. A gradual withdrawal of the Outreach Service over time, to facilitate recommendation 2 above, noting that people's short break will be maintained through alternative arrangements when their sessional worker leaves/ retires.
- 4. That further consultation is undertaken on a revised service specification for the Community-based Respite service including referral pathway and service criteria.
- 5. To note that the Community-based Respite Service and the Outreach Service are not the only way that people with eligible social care needs may have a break. People may choose to have a personal budget to arrange a short break that suits them and the cared-for person.

To note that the Director of Adults and Health is responsible for implementing these recommendations.

1. Purpose of this report

1.1 The purpose of this report is to inform Executive Board of the outcome of consultation on short break arrangements. The report seeks Executive Board approval for putting in place new arrangements that ensure, going forward, that the Council's short breaks offer is fair, equitable and gives proper weighting to those with the greatest caring responsibility.

2. Background information

- 2.1 The provision of unpaid care is an important issue because it not only makes a vital contribution to the support of people with care needs, but can also affect the health and wellbeing, employment opportunities, finances and social and leisure activities of those providing it. The number of carers in Leeds has increased between the two Censuses of 2001 and 2011. However most notable is that the amount of unpaid care provided by carers has increased, with 36% of all carers caring for over 20 hours per week compared to 31% in 2001.
- 2.2 Having a break from caring can provide positive outcomes for unpaid carers as well as the people they care for and short breaks should be seen as a key component in our approach to supporting both. Having a break from caring has been a consistent priority raised by carers in previous surveys and in particular increasing and varying the range of breaks available.
- 2.3 The most common way of providing a short break is for someone else to take over caring on a temporary basis for anything from a couple of hours to a couple of weeks. Where this is provided by a care agency it is sometimes called 'replacement care' or 'respite care'. In that sense, short breaks, replacement care and respite care all refer to the same thing.
- A replacement care service provided in a person's own home, usually for a couple of hours, has traditionally being known as a 'sitting service'. This is because a worker or volunteer 'sits' with the person with care needs while the carer has a break. In some cases, the worker or volunteer may take the person with care needs out rather than sit with them.
- 2.5 A review of short break services undertaken by Adults & Health in December 2016 indicated that current arrangements are inconsistent and present anomalies in terms of how people access a short break, how their support needs are assessed, how their eligibility is determined and whether they are asked to make a contribution to the cost of their service.
- 2.6 We need to consider the impact of the Care Act 2014 on the offer we make to carers and how we need to continue to develop services that are personalised to individuals. The proposal is therefore to transform the short breaks offer across Adults & Health which will include identifying, developing and making best use of strengths and assets that exist in people's local networks and communities.
- 2.7 The report set out a three tier approach which can be summarised as:

Level 1: Universal Short Breaks

- Universal short breaks are available through resources that are available in the local community and that anyone can access. This could include activities at leisure centres, community centres, faith groups etc.
- There will be no requirement for either the carer or the cared-for person to be eligible for support from Adult Social Care
- The organisation who provide the activity or break may charge while others may be free of charge

Level 2: Targeted (Open Access) Short Breaks

- Targeted short breaks are usually available through resources that have been designed specifically to meet the needs of particular groups of people, for example Neighbourhood Networks, Dementia Cafes, Peer Support Groups, Luncheon Clubs etc.
- As with universal short breaks, there will be no requirement for either the carer or the cared-for person to be eligible for support from Adult Social Care
- Targeted short breaks will often be funded by grants from the Council or the NHS. Some breaks may be free while others may charge.

Level 3: Eligibility Based Short Breaks

- Eligibility based short breaks are for people who have care and support needs which cannot be met by universal or targeted short breaks,
- The cared-for person will usually be eligible for support from Adult Social Care although it may be that the carer is eligible for support and the cared-for person agrees that a short break is the best way to meet their needs
- The cared-for person will have a personal budget which can be provided as a Direct Payment or a Local Authority managed payment
- The cared-for person will usually have a financial assessment and may be required to contribute towards the cost of the break in line with the Council's Charging Policy (this is not the case in relation to Shared Lives Short Breaks where a banded flat rate is charged)
- There will be a range of ways of providing an eligibility based short break, for example employing a personal assistant or sitter, day care, Shared Lives Short Break, or a short stay in a residential or nursing home

3. Main issues

3.1 The Adults and Health review of Short Break services identified changes to two specific services which needed to be consulted on. These were:

Community Based Respite services are currently commissioned from Mears Care Ltd, Allied Healthcare, Moorcare and Sevacare (also known as Synergy):

- A paid worker employed by one of these four agencies takes over caring for between two and eight hours per week in the home of the person with care and support needs
- Currently supporting around 350 people
- The service is provided free of charge and access to the service is not subject to a Care Act assessment and the application of statutory eligibility criteria
- It therefore supports people with a range of caring responsibilities

The Outreach Service is similar to community based respite but the worker is engaged on a sessional basis and the scheme is administrated by the in-house Shared Lives service.

- The sessional worker may sit with the person with care needs while the carer goes out or may take the person with care needs out
- Currently supporting around 190 people
- As this service is already provided for people with eligible social care needs, the person with care needs maybe making a contribution to the cost of their care depending on the outcome of their financial assessment.
- This service is targeted to those with a greater caring responsibility
- The profile of the 64 sessional workers is outlined in an Equality Impact Assessment which has been conducted.
- 3.2 The Care Act 2014 makes it clear that local authorities should apply charging rules equally so those with similar needs or services are treated the same. The Act is also clear in recognising that where a service is provided to support a person with care needs in order that a carer can have a break, that the service is regarded as a service provided directly to the person with care and support needs, even though the need may have been identified through a carer's assessment. In such cases any charges should be made to the person with care and support needs and should be based on the local authority's policy on charging for non-residential care and support.
- 3.3 The proposed short breaks offer may lead to a change in circumstance for some people and as such, a period of consultation in order for stakeholders to influence future decisions has been held and the issues raised during the consultation have been used to shape the proposed new model for short breaks in the city. The consultation took place between 12th June and 31st August 2017 and involved all key stakeholders including current service users, carers, shared lives staff and sessional workers. The consultation sought people's views on:
 - The three tier approach
 - A proposal to assess all service users of the Community-based respite service to determine if they have eligible social care needs and, if so, if they need to contribute to the cost of their care
 - If they don't have eligible social care needs, a proposal that they are supported to find a different way to have a break through Tier One and Tier Two services
 - A proposal to operate the Outreach Service through an arrangement with a voluntary sector organisation rather than the Council's Shared Lives service
 - Whether people considered the proposals as fair
 - Whether they had any specific concerns
 - What sort of short break opportunities they would like to see

The best way to help people find out about short breaks

Feedback from the consultation

- 3.4 A total of 879 questionnaires were sent out and 221 completed questionnaires were returned. This represents a response rate of 25%. The largest group of responders to the questionnaire were carers of people receiving community based respite (65). The next largest groups were carers of people receiving the Outreach service (39) followed by people who are engaged as sessional outreach workers (39).
- The majority of responders (96) said that they agreed with our proposals while 77 responders said they disagreed with our proposals. The majority of responders (99) said they thought our proposals were fair, with 71 responders saying that they thought our proposals were not fair. Most respondents (116) did not think that the proposal was unfair to any particular group of people
- 3.6 Where concerns were raised they tended to be that the proposal was driven by saving money and that it would lead to people losing support. People were also concerned that even if they continued to receive some support it may be from a different agency and that quality, consistency and trust would be lost. Some people did not think that it was fair that they might have to pay for a service that has previously been free. However, some people also commented that it is unfair that some people with the same needs get a free service while others have to pay.
- 3.7 People were asked what type of short breaks services they would like to see more of in the future. Sitting services (highlighted by 142 people) and services that take the person with care needs out of the home for a few hours (highlighted by 102 people) were the most cited responses.
- 3.8 People identified a number of ways that they think Adults and Health could promote short breaks including via the local carers centre, on-line directory, information held in GP surgeries and community centres.
- 3.9 41% of attendees at the five consultation events were workers including Shared Lives staff and sessional outreach workers and carers of people receiving an outreach service. As such, much of the discussion was around attendees not wanting the Outreach Service to transfer to the Third Sector. Key reasons given for this were:
 - The importance of matching people with care and support needs and their carers to outreach workers
 - The advantage of using the home of people with care and support needs particularly if they have adaptations or if they are unable/unwilling to leave their own home
 - Concern from some people that if someone other than the council provided the service it would be of inferior quality or that a new provider would be more focussed on profit than quality

Response to the consultation

- 3.10 **Community-based respite services:** enable carers to have a short break by providing a service directly to the person with care needs. However, as access to this service has been organised outside adult social care assessment and eligibility procedures, there may be some people who are receiving this service who do not have eligible needs.
- 3.11 Adults and Health believe that service should be prioritised for people with eligible needs and therefore it is proposed that this service be ring-fenced for carers with the most significant caring responsibility and accessed via a formal assessment of need. Where people with care and support needs and/or carers have eligible needs and where it is agreed that the best way to meet those needs is by a replacement care service then they can either continue to receive a short break from one of the four main contractors or have a different short break arranged by Adults and Health. The person with care and support needs will have a financial assessment and may be required to contribute towards the costs of the service. As this represents a change from the current arrangements it is proposed that further consultation on a revised specification, referral pathway and service criteria is undertaken. There will be no change to anyone's service while this consultation is undertaken.
- 3.12 Additionally people who have eligible needs could receive a Direct Payment to organise their own support. If this is the case, Leeds Centre for Independent Living can support the management of that Direct Payment. This will ensure that people will have a choice about who provides their short breaks service. The intention is also that more people with high level care and support needs will be able to access the community based respite service.
- 3.13 Where people do not have eligible needs or where people do not wish to have a replacement care service arranged by Adults and Health, Adults and Health will signpost them to support available in local communities. Leeds is, of course, well known for its vibrant Third Sector which includes the 37 Neighbourhood Networks, a network of over 40 dementia cafes and a wide range of services and support groups run by voluntary and community groups including singing groups, walking groups, luncheon clubs etc. There are also wide range of organisations listed in the Leeds Directory who state that they can provide a sitting service. Organisations include private home care agencies, charities and community interest companies. The Leeds Directory operates the Green Tick symbol which, although it does not constitute a recommendation of a provider, can provide a degree of peace of mind that the organisation has been checked and vetted.
- 3.14 In addition, through funding streams such as *Time to Shine*, there are a wide range of unique and innovative projects across the city supporting older people, for example:

Cara	Volunteers visit older people of Irish heritage in their homes to make sure they can stay connected as they reach later
	life. Support is offered to help people get involved in social and cultural activities and to meet old and new friends.

Seniors	Active community members and community connectors chat	
Network	to older neighbours and help them to find common interests,	
(Gipton)	share skills and assets, and set up new social activities.	
Raat di Roti	Raat di Roti means "evening meal" in Punjabi. Volunteers	
	invite an older person to share their evening meal and,	
	through the ritual of eating together, exchange stories and	
	wisdom and develop a stronger sense of community.	
More than a mealtime	Volunteers visit older people in their own homes to make and	
	share a meal. Single people who can travel independently	
	are invited to share a table at a local restaurant for a self-	
	funded meal. An older volunteer greets people and helps	
	conversations to flow.	
Lychee Red	Chinese elders come together to share a meal and then stay	
	on for social activities, games, exercise and entertainment,	
Chinese	supported by a team of bilingual volunteers from local	
Seniors	Chinese communities.	
	Offers company and conversation to older people who are	
Farnley Friendly	isolated because of dementia or memory loss and can no	
Faces	longer get out and about independently. A member of staff	
	mentors and supports all volunteer befrienders.	
Walk & Talk	Volunteers are trained as dementia-friendly walk leaders.	
	They organise woodland and park walks for older people	
	with dementia, and their carers, to enjoy the benefits of	
	nature and being outdoors away from the stresses of home	
	life.	

- 3.15 The intention of this proposed change is to ensure that the community based respite service is targeted at those people who need it the most. The funding allocated to this service will be protected and it is anticipated that a greater number of people will higher levels of needs will be able to access the service over time as those people with lower level needs will be supported to access a range of other community support services as detailed in paragraphs 3.13 and 3.14 above. In the meantime, those people currently accessing the service will continue to do so. The City Council continues to invest in Third Sector organisations to enable them to provide locally developed services to the different communities across Leeds. These changes will result in more people being supported.
- 3.16 Any income that is received from service users who are eligible to make a contribution towards the cost of the service will enable the service to support those in need.
- 3.17 **The Outreach Service:** as is the case with Community-based Respite Services, the Outreach Service enables carers to have a short break by providing a service directly to the person with care needs. Access to the outreach service is through a needs assessment and as such people who receive an outreach service have established eligible needs and may, following a financial assessment, be contributing towards the costs of their service.
- 3.18 Sessional workers are currently supported by a small team of social workers attached to the Shared Lives Team in Adults and Health. Adults and Health are committed to developing new and innovative Shared Lives short break services to

a greater number of people and believe the best use of the social work resource would be focussed on supporting that expansion. The key feature of Shared Lives Short Breaks is that they are provided by self-employed shared lives carers who use their own home to provide support.

- 3.19 However, and in order to respect and maintain the relationship between the sessional outreach worker and the person with care and support needs, a gradual withdrawal from providing an outreach service is recommended. In practical terms this means that there will be no further recruitment of sessional outreach workers and no new referrals will be accepted, but that current customers will continue to receive a service.
- 3.20 New customers to Adults and Health will be supported in the first instance to identify support in their own communities and where this is not available or appropriate and where the person with care and support needs and/or their carer have eligible needs, a replacement care service can be arranged in the same way as set out in paragraphs 3.13 to 3.14
- 3.21 We want to expand the Shared Lives Short Break service over-time by attracting more Shared Lives carers and offer a service to more people, including more people from Black, Asian and Minority Ethnic communities and who are reflective of the communities they are active in. We want to be proactive and attract carers who can cater for people with complex needs, including support to more older people including people who would otherwise face unnecessarily prolonged hospital stays or inappropriate admission to acute inpatient care, long term residential or nursing care. The service also has aspirations to support people leaving prison and disabled people including those with mental health needs.
- 3.22 In order to achieve these aspirations the service has a plan to deliver and coordinate services which:
 - are built around individuals, their strengths and potential
 - promote equality and value diversity
 - are safe but support people to take risks to
 - are cost-effective, with consistently better outcomes

By taking this approach the service can enable people to be in control of their lives, pursue ordinary lives within their chosen families and relationships and be valued by their communities and feeling like they belong.

4. Corporate considerations

4.1 Consultation and engagement

- 4.1.1 A wide range of methods were used to gather the views of service users, carers, staff, sessional staff, Trade Unions, Third Sector and community organisations. The methods used are outlined below:
 - Community consultation events
 - Questionnaires both in electronic and hard copy formats, with pre-paid envelope provided
 - One to one meetings with service users and carers

- A dedicated telephone line
- Letters
- A dedicated email address
- Staff engagement session
- Meetings with Trade Unions
- 4.1.2 Five community consultation events took place and were arranged on different days of the week and at different times of the day to allow as many service users, carers and Third Sector and community organisations to attend as possible. In total 39 people attended the events. Attendees included: 11 carers, 3 service users, 9 members of Third Sector or community organisations, 15 workers including Shared Lives staff, sessional staff and 1 trade union representative.
- 4.1.3 People had the opportunity to complete the questionnaires in electronic or hard copy format. Hard copy questionnaires were sent to 879 individuals along with prepaid envelopes, 223 questionnaires were returned, 8 of which were submitted using the electronic survey response system. In total this is a response rate of 25%.
- 4.1.4 There was an initial response, particularly from carers, that the information in the questionnaire did not make it clear enough as to what was actually being proposed. Officers worked with Carers Leeds to complete a Frequently Asked Questions (FAQ) document which was sent to everyone who had received the initial correspondence. Feedback received after the circulation of this FAQ document indicated that the information was helpful and provided a clearer understanding of the proposal.

4.2 Equality and diversity / cohesion and integration

- 4.2.1 The majority of people who are supported by a community based respite or outreach service are older people. Of those people who responded to the consultation, a significant number were aged 65 and above. Twice as many women as men responded and around 90% of respondents described themselves as English or British.
- 4.2.2 Short breaks can reduce health inequalities experienced by unpaid carers by providing opportunities to maintain social contacts, to pursue personal and leisure interests and to fulfil their educational and employment potential. It is important therefore, that there is equity of access to short breaks. Current users of the service will continue to receive the service.
- 4.2.3 An equality and cohesion screening tool has been completed and is appended to this report.

4.3 Council policies and Best Council plan

- 4.3.1 Transforming Short Breaks supports Leeds' Best City Ambition of a Strong Economy and a Compassionate City by setting out how the council will meet the needs of carers through its strategic approach to the provision of short breaks.
 - It also contributes to delivering the vision of the Health and Well-being Strategy including such key elements as:
 - An age friendly city where people age well

- Strong, engaged and well connected communities
- Maximise the benefits from information and technology
- Promote mental and physical equality
- The best care, in the right place and the right time
- 4.3.2 The strategy also supports the Council's Breakthrough projects, notably Making Leeds the Best City to Grow Old In and Reducing Health Inequalities but the approach and the strategies ambitions can have a positive impact across all the projects.

4.4 Resources and value for money

- 4.4.1 In 2018/19 the Council has budgeted for net expenditure of £1.2m on the Community Based Respite Service to support approximately 300 people and £0.2m on the Shared Lives Short Outreach Service which supported an estimated 360 people throughout the year. Further short breaks are given through the award of personal budgets.
- 4.4.2 Historically, the recipients of the Community Based Respite Service have not been charged by the Council for the service they received. Shared Lives recouped approximately 8% of the costs of running the service provided through client contributions.
- 4.4.3 Those customers who currently receive a free community based respite service may, subject to their financial assessment, be required to contribute towards the costs of their care in the future.
- 4.4.4 It is difficult to estimate the likely impact on service users if the Community Based Respite Service became a chargeable service as each financial assessment is based on personal circumstances. However some preliminary analysis has been undertaken using social care records for recipients who receive community based respite as well as other social care services from the Council.
- 4.4.5 Although not conclusive this analysis does give an insight into the possible impact on customers if community based respite were to become a chargeable service. The analysis focussed upon 101 people who were identified as having a financial assessment and were in receipt of other social care services. The main conclusions were that:
 - 33% of people who had received a financial assessment were not required to pay anything towards their care so would be unaffected by making the community based respite service chargeable
 - 15% of people were assessed to pay the maximum level so could be deemed likely to be affected directly if the service became chargeable
 - 52% of people did make a financial contribution for the services that they
 received, but the majority would be unlikely to be required to pay more if the
 community based respite service became chargeable
 - 251 people received community based respite but did not appear to receive any other chargeable social care services. If it were assumed that the financial circumstances of these people were similar to the group in receipt of other social care services, then approximately one third of this group would

- not have to pay anything, approximately one third would make a contribution towards the cost of the care received and approximately one third would be required to pay in full.
- 4.4.6 The Council is committed to expanding the range and amount of carers' support services available to carers in Leeds. Whilst ensuring existing people who use the service are supported to continue to do so.
- 4.4.7 There is a risk that assessing people's needs may identify needs which are currently not being met which could result in additional costs to Adults and Health.

4.5 Legal implications, access to information, and call-in

- 4.5.1 This decision is eligible for call-in in accordance with Part 4(b), Paragraph 5.1.2 of the Procedure Rules. A further decision will be required following the outcome of consultation.
- 4.5.2 The report does not contain any exempt or confidential information.
- 4.5.3 Any potential legal implications relating to concern from sessional workers about their individual positions will be addressed by the proposed phased cessation of the service and by full engagement with the sessional workers and trade unions.

4.6 Risk management

- 4.6.1 Where people with care and support needs and/or carers have eligible needs and where it is agreed that the best way to meet those needs is by a replacement care service, then this is arranged. Carer breakdown is a very real risk and short breaks are a positive way of mitigating the risk of carer breakdown. Where people do not have eligible needs, Adults and Health will signpost them to alternative ways of having a break available in local communities
- 4.6.2 Although the proposal is that the Outreach Service is gradually withdrawn, the intention is that no service users or sessional workers will be disadvantaged. Capacity for short breaks will be increased by attracting more Shared Lives carers.
- 4.6.3 A Steering Group, chaired by the Head of Service for Care Delivery, will continue to oversee the project using approved governance and risk management arrangements.

5 Conclusion

- 5.1 Adults and Health recognise the vital contribution that unpaid carers make to health and care in Leeds and the benefits that having a short break can provide both for carers and for the people they care for.
- 5.2 Although Adults and Health recognise that Community-based Respite Services and the Outreach Service can provide positive outcomes for carers and the people they care for, current arrangements are considered inconsistent and present anomalies in terms of how people are assessed, how their eligibility is determined and whether they are charged.
- 5.3 In order to address these inconsistencies and anomalies it is proposed that in the future the Community-based Respite Service is ring-fenced to those carers with higher needs as determined by a needs assessment. This will require further

consultation on a revised service specification covering referral pathways and service criteria. This would mean that those who are assessed as having eligible social care needs would also need to be assessed as to whether a personal contribution should be made to the cost of their care. Those who do not have eligible social care needs would be supported to have a break through universal or targeted open access short break services.

- A gradual withdrawal from providing an outreach service is recommended. In practical terms this means that there will be no further recruitment of sessional outreach workers and no new referrals will be accepted, but that current customers will continue to receive support.
- The gradual withdrawal from the outreach service will free up social worker capacity to focus on expansion of Shared Lives Short Breaks. The current budget from both elements of the service (outreach and short breaks) will be protected and used to attract new carers who are willing to open up their home and family life to include an adult with support needs.

6 Recommendations

Executive Board is asked to approve:

- The expansion of the in-house Short Breaks service so it can offer short breaks to a greater variety of people and for a wider range of needs.
- 6.2 The three tier approach to having a short break which supports a range of carer needs
- 6.3 A gradual withdrawal of the Outreach Service over time, to facilitate recommendation 2 above, noting that people's short break will be maintained through alternative arrangements when their sessional worker leaves/ retires.
- 6.4 That further consultation is undertaken on a revised service specification for the Community-based Respite service including referral pathway and service criteria.
- To note that the Community-based respite service and the Outreach Service are not the only way that people with eligible social care needs may have a break. People may choose to have a personal budget to arrange a short break that suits them and the cared-for person

To note that the Director of Adults and Health is responsible for implementing these recommendations.

Background documents¹

7.1 None

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¹ The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.