

**Report of:** Director of Adults and Health  
**Report to:** Executive Board  
**Date:** 19<sup>th</sup> December 2018  
**Subject:** Community Based Respite Service

Are specific electoral wards affected? If yes, name(s) of ward(s):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is the decision eligible for call-in?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, access to information procedure rule number: Appendix number:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

### Summary of main issues

- The number of carers in Leeds is growing and the number of carers who provide more than 20 hours of unpaid care per week is also growing. Within that context, the Adults and Health directorate set out a three tiered approach to carers' short breaks which was approved by Executive Board on 27<sup>th</sup> June 2018. This can be summarised as:
  - Tier 1: Universal short breaks**  
*Open access, community-based, may be free or may have a small charge*
  - Tier 2: Targeted short breaks**  
*Open access but targeted for a specific group of people (e.g. dementia), may be free or may have a small charge*
  - Tier 3: Eligibility-based short breaks**  
*Accessed via a Care Act assessment, for people with significant needs, subject to a financial assessment in line with the Council's policy on charging for non-residential services so may be free or may have a charge depending on individual circumstances*
- This report focuses on proposals relating to a commissioned service with four independent sector providers. The community based respite service is currently an

open access service and provided free of charge. In these respects, the service differs from other commissioned adult social care short break services. It is proposed that, going forward, the community based respite service is prioritised for people who have significant care and support needs as defined by the Care Act and that a charge is applied based on people's ability to contribute towards the cost of their service.

3. The Adults and Health Directorate has undertaken further consultation about the community based respite service in order to help inform the decision on the changes that are proposed.
4. The consultation was based around three questions:
  - Do you agree that the service should be targeted to those with significant care and support needs as defined by the Care Act?
  - Do you agree that the person with care needs should contribute to the cost of their care according to what they are assessed as being able to afford?
  - Do you agree that the name of the service should be changed to the Community Based Short Breaks Service?
5. The majority of respondents agreed that the service should only be provided for people with eligible needs. However, more respondents did not agree that people should be charged than respondents who agreed. The majority of respondents agreed that the name of the service should be changed.
6. The Adults and Health directorate notes the feedback from the consultation and recognises both the huge contribution that carers make and the need for carers to have a break from caring. In proposing to target the service for people with eligible needs and applying the council's policy on charging for non-residential services, Adults and Health directorate will ensure that there is an equitable system in place that it is in line with other commissioned adult social care short break services.

## **Recommendations**

Executive Board is asked to:

1. Note the outcome of the consultation and the potential impact on current customers of the community based respite services arising from the proposed changes being implemented.
2. Approve that from April 2019:
  - 2.1 Access to the commissioned community based short break service will be via a needs assessment or carer's assessment as laid out in the Care and Support (Assessment) Regulations 2014, and will be prioritised for people who meet the eligibility criteria for care and support as laid out in Care and Support (Eligibility Criteria) Regulations 2014.
  - 2.2 The person with care needs will be charged the amount they are assessed as being able to afford as laid out in the Care and Support (Charging and Assessment of Resources) Regulations 2014.

- 2.3 People who are deemed not to have eligible needs will be supported to find other ways to have a break.
- 2.4 The name of the service be changed to the Community Based Short Break Service.
3. Agree an investment of a further £170k per annum be added to the contract value of the community-based respite service thereby providing an additional 11,296 hours of support per year/ 217 hours per week
4. Agree a further investment of £30K be made for Tier 2 Targeted Short Break services
5. Note an investment of £40k on a non-recurrent basis be made to Carers Leeds to provide (a) £8845 for additional carer support worker capacity at Leeds Teaching Hospital Trust over the winter period and (b) £31,155 to provide a one-off payment to carers of up to £200 as a contribution to increased costs of caring over the winter months.
6. The Director of Adults and Health is responsible for implementation of the recommendations in this report.

## **1. Purpose of this report**

- 1.1 The purpose of this report is to inform Executive Board of the outcome of further consultation, and to seek Executive Board approval of recommendations, in respect of the community based respite service.

## **2. Background information**

- 2.1 The Director of Adults and Health presented a report (Short Break Services) to Executive Board in June 2018 that recommended further consultation be undertaken on a revised service specification for the 'Community Based Respite Service', including referral pathway and service criteria.
- 2.2 The purpose of a community based respite service is to provide support for a disabled or frail older person so that their carer can have a break from caring. This is achieved by providing a replacement care service to the person with care needs.
- 2.3 The community- based respite service is currently provided to 174 people by Mears Care Ltd, Allied Healthcare, Moorcare and 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 needs.
- 2.4 The community-based respite service is provided free of charge and access to the service has not been subject to a needs assessment or to the application of statutory eligibility criteria. In these respects, the service differs from other short break services commissioned by adult social care.

## **3. Main issues**

### **3.1 Adults and Health proposal**

- 3.1.1 Adults and Health believe that the community based respite service should be prioritised for people who meet the national eligibility criteria for adult care and support<sup>1</sup>, and therefore propose that access to the service be via a needs assessment or a carer's assessment.
- 3.1.2 The person with care needs would then have a financial assessment and, depending on the outcome of that financial assessment, may be required to contribute towards the costs of the service.<sup>2</sup>

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<sup>1</sup> The national eligibility criteria set a minimum threshold for adult care and support needs and carer support needs which local authorities must meet. All local authorities must comply with this national threshold. Authorities can also decide to meet needs that are not deemed to be eligible if they chose to do so.

<sup>2</sup> The Care Act provides a single legal framework for charging for care and support under sections 14 and 17. It enables a local authority to decide whether or not to charge a person when it is arranging to meet a person's care and support needs or a carer's support needs. Where a local authority arranges care and support to meet a person's needs, it may charge the adult, except where the local authority is required to arrange care and support free of charge. The new framework is intended to make charging fairer and more clearly understood by everyone. The overarching principle is that people should only be required to pay what they can afford.

3.1.3 The name of the service should be changed to the Community Based Short Break service.

## 3.2 Consultation

3.2.1 The community based respite service consultation opened on Monday 3<sup>rd</sup> September 2018 and ended on Friday 9<sup>th</sup> November 2018. Correspondence relating to the consultation was shared with Carers Leeds for their advice and feedback prior to being made available to service-users, carers, staff and the general public.

3.2.2 The consultation focussed on three questions:

- Do you agree that the service should be targeted to those with significant care and support needs as defined by the Care Act?
- Do you agree that the person with care needs should contribute to the cost of their care according to what they are assessed as being able to afford?
- Do you agree that the name of the service should be changed to the Community Based Short Break Service?

3.2.3 Letters and a copy of the consultation questions were sent to each of the 174 people who, at the time the consultation commenced, were in receipt of a community based respite service. 68 were completed and returned and a further 11 responses received meaning the total number of respondents to the consultation was 79.

## 3.3 Feedback from the consultation

### Eligibility

3.3.1 82.3% of respondents agreed that the service should only be provided when either the person with care needs has eligible needs or when the carer has eligible needs and the person with care needs agrees to receive the service. 3.8% disagreed and 13.9% neither agreed nor disagreed.

3.3.2 Where people did not agree, comments tended to be around:

- *Thought it already was*
- *What about cared-for people who lack capacity?*
- *Depends on how eligibility is interpreted*
- *Everyone's needs should be considered*
- *Assessor only sees people for a short time – what if they see people on a 'good day'?*

### Charging

3.3.3 30.4% of respondents agreed that the person with care needs should be charged the amount that they are assessed as being able to afford. 44.3% disagreed and 25.3% neither agreed nor disagreed.

3.3.4 Where people did not agree, comments tended to be around:

- *Can't afford to pay so will cancel it there's a charge*
- *People should not be penalised financially for illness or disability*
- *Means testing always fails some people who sit too close to an arbitrary limit*

- *Have paid in all my life through tax system – have had the good sense to have some savings – not fair that people who didn't work/save etc will get it for free*
- *Carers save the council and NHS millions – the system would collapse without carers*

#### Name of the service

- 3.3.5 70.31% of respondents agreed that the name of the service should be changed to the Community Based Short Break Service. 12.5% disagreed and 17.19% neither agreed nor disagreed.
- 3.3.6 Where people did not agree, comments tended to be around:
- *Why bother changing the name*
  - *Call it what it is – Home Based Sitting Service*
  - *Changing the name will add to the confusion*

### **3.4 Adults and Health response to the consultation**

#### Eligibility

- 3.4.1 A majority of respondents agreed with the proposal that community based services should be provided when either the person with care needs has eligible needs or the carer has eligible needs and the person with care needs agrees to receive the service.
- 3.4.2 Adults and Health believe that this will ensure that the service supports those who need it the most.
- 3.4.3 Adults and Health propose that access to a community based respite service will be via a needs assessment or carer's assessment as laid out in the Care and Support (Assessment) Regulations 2014, and will be prioritised for people who meet the eligibility criteria for care and support as laid out in Care and Support (Eligibility Criteria) Regulations 2014.
- 3.4.4 Where an individual would have substantial difficulty in being fully involved in the needs assessment, and where there is no appropriate individual to support and represent that person's wishes, Adults and Health will arrange an independent advocate to facilitate their involvement as laid out in the Care and Support (Independent Advocacy) Regulations 2014.
- 3.4.5 It is proposed that the Council invests a further £30k per annum in Tier 2 Targeted Short Break services to support carers, such as through the provision of dementia cafes. The aim will be to ensure that people who currently access the community based respite service but who do not meet the eligibility criteria for these services, will be able to access alternative on-going support.
- 3.4.6 It is also proposed that a further £170K is added to the contract value of the community based respite services providing an additional 11,296 hours of support per year / 217 hours of support per week to those carers with the highest needs.
- 3.4.7 The Council has received one-off winter pressure funding and will make available an additional £40k on a non-recurrent basis to Carers Leeds to provide (a) £8845

for additional carer support worker capacity at Leeds Teaching Hospital Trust over the winter period and (b) £31,155 to provide a one-off payment to carers of up to £200 as a contribution to increased costs of caring over the winter months (e.g. fuel) recognising that winter can have dramatic effects on everyday life, especially for those who are caring for an already vulnerable person because of age, illness or disability.

### Charging

- 3.4.8 The Council has in place a charging policy for non-residential care services in line with the Care Act 2014. This means that people who are currently receiving a community-based short break through a direct payment or council-managed budget are assessed as to whether they should make a contribution to the cost of their care. In the consultation, fewer respondents agreed with the proposal to charge the person with care needs the amount that they are assessed as being able to afford than respondents who disagreed.
- 3.4.9 Adults and Health directorate notes the feedback from the consultation and recognises both the huge contribution that carers make and the need for carers to have a break from caring.
- 3.4.10 Adults and Health propose that where a community based respite service is to be arranged as a result of a needs assessment or a carer's assessment, that the person with care needs will be charged the amount they are assessed as being able to afford as laid out in the Care and Support (Charging and Assessment of Resources) Regulations 2014. This is because the community based respite service is a service provided direct to the person with care needs, even though it may meet the needs of both the person with care needs and the carer, and may have been identified through the carer's assessment.
- 3.4.11 The introduction of a charge for this service will make sure that there is an equitable system in place and that, like other social care services, people who can afford to pay will do so.

### Name of the service

- 3.4.12 The majority of respondents agreed that the name of the service should be changed to the Community Based Short Break Service.
- 3.4.13 Adults and Health therefore propose that the name of the service be changed to the Community Based Short Break Service.

## **3.5 Impact for current customers**

- 3.5.1 Adults and Health have undertaken work to understand the potential impact upon people who currently receive a community based respite service. This has focussed on whether people:
- Are known to Adults and Health
  - Have previously had a needs assessment
  - Are assessed as having eligible needs
  - Are in receipt of other social care services
  - Have had a financial assessment and what the outcome of that assessment is

3.5.2 If the proposed changes are made, the impact for the 174 individuals currently receiving the service would be:

- 58 people have eligible care and support needs and would be able to continue to receive the service and will not be required to contribute towards the cost of the service as they have had a financial assessment and are either assessed as not having to pay or are already paying their maximum assessed charge.
- A further 54 people have eligible care and support needs and would be able to continue to receive the service but would be required to contribute towards the cost of the service as they have had a financial assessment but are not paying their maximum assessed charge
- 62 people would require further assessment to identify whether they have eligible care and support needs and whether they can afford to contribute towards the cost of the service

3.5.3 As indicated in paragraph 3.4.5 above, where people are assessed and deemed as not having eligible needs, they will be offered alternative support services including services commissioned by additional Council investment in Tier 2 targeted short break services.

## **4. Corporate considerations**

### **4.1 Consultation and engagement**

4.1.1 A range of methods were used to gather the views of service users, carers and staff. The methods used are outlined below:

- Consultation events
- Questionnaire
- A dedicated telephone line
- A dedicated email address

4.1.2 Three consultation events took place which were arranged on different days of the week and at different times of the day.

4.1.3 People had the opportunity to complete the questionnaire in electronic or hard copy format.

4.1.4 Although attendance at the events was low, 79 questionnaires were returned.

### **4.2 Equality and diversity / cohesion and integration**

4.2.1 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 Community based respite services support the Best Council Plan priority on Health and Wellbeing and Leeds' Best City Ambition of a Strong Economy and a Compassionate City, by setting out how the council will meet the needs of carers. 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 service 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 strategy's ambitions can have a positive impact across all the projects.

#### **4.4 Resources and value for money**

4.4.1 The four providers all currently charge Adults and Health different hourly rates for community based respite. The average hourly rate is £15.05 and the highest hourly rate is £17.00. A procurement process will seek to achieve a fair price for the service that is consistent with the principles in the Ethical Care Charter and which provides best value for the Council.

4.4.2 If Executive Board support the proposal to prioritise the community based respite service to people with eligible needs, it is proposed that the charge for the service is the same as the charge for Shared Lives Outreach Sitting Service (£8.70). This would mean that people who receive a community based respite service and people who have a council-managed budget for their short break are treated the same.

4.4.3 Based on the financial assessments of the 112 people who receive a community based respite service and who are known to meet the eligibility criteria for care and support, officers in finance estimate that the combined annual value of people's assessed personal contributions towards the cost of care would be around £78,000. This assumes that each person receives an average of 4 hours per week and that the charge is the same (£8.70 per hour) as the charge for Shared Lives Outreach Sitting Service.

4.4.5 If the financial assessments of the 62 people for whom further assessment is required is consistent with the above, the combined annual value of people's assessed personal contributions towards the cost of care would increase by around £43,000.

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

4.5.5 This decision is eligible for call-in in accordance with Part 4(b), Paragraph 5.1.2 of the Procedure Rules.

4.5.6 The report does not contain any exempt or confidential information.

#### **4.6 Risk management**

4.6.5 Designated capacity will be identified within Adults and Health social work services, to undertake needs assessments and carers' assessments where it is required for people who currently receive a community based respite service.

- 4.6.6 Designated capacity will be identified within Adults and Health, Resources and Strategy, to undertake financial assessments where it is required for people who currently receive a community based respite service. This includes a financial health check to ensure people are claiming all the benefits to which they are entitled to, for example, Attendance Allowance.
- 4.6.7 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 or where people choose not to have a service arranged by Adults and Health, (e.g. due to a charge being introduced) they will be signposted to other support available in local communities, and funded by the Council, for example:
- Neighbourhood Networks
  - Dementia cafes
  - Services and support groups run by voluntary and community groups including singing groups, walking groups, lunch clubs etc.
- 4.6.8 The Leeds Directory includes contact details for organisations 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.

## **5 Conclusions**

- 5.4 The community based respite service differs from other types of short break social care services in that it is currently provided free of charge and access to the service is not subject to a needs assessment or to the application of statutory eligibility criteria.
- 5.5 While the majority of respondents to the consultation agree that the service should only be provided for people with eligible needs, more respondents did not agree that people should be charged than respondents who agreed. The majority of respondents agree that the name of the service should be changed.
- 5.6 The Adults and Health directorate recognises both the huge contribution that carers make, the need for carers to have a break from caring. In proposing to target the service for people with eligible needs and therefore apply the charging policy for people in receipt of non-residential services, Adults and Health directorate will ensure that there is an equitable system in place that it is in line with other commissioned short break adult social care services.
- 5.7 The Council will invest a further £200k per annum in services to support carers. This will be through an additional £170K to be added to the contract value for the community based respite services and £30K for Tier 2 Targeted Support Services. The aim is to ensure we provide more support to those carers with the highest needs. The additional investment will also ensure that where people who currently access the community based respite service, but do not meet the eligibility for these services, and/or where their carers do not meet eligibility, they will be able to access alternative on-going support from within their local community.

5.8 The Council will also make an additional £40k available on a non-recurrent basis to Carers Leeds to administrate for carers support over the winter period.

## **6. Recommendations**

6.1 Executive Board is asked to note the outcome of the consultation and the potential impact on current customers of the community based respite services arising from the proposed changes being implemented.

6.2 Executive Board is asked to approve that from April 2019:

6.2.1 Access to the commissioned community based short break service will be via a needs assessment or carers' assessment as laid out in the Care and Support (Assessment) Regulations 2014, and will be prioritised for people who meet the eligibility criteria for care and support as laid out in Care and Support (Eligibility Criteria) Regulations 2014.

6.2.2 The person with care needs will be charged the amount they are assessed as being able to afford as laid out in the Care and Support (Charging and Assessment of Resources) Regulations 2014.

6.2.3 People who are deemed not to have eligible needs will be supported to find other ways to have a break.

6.2.4 The name of the service be changed to the Community Based Short Break Service.

6.3 Executive Board is asked to agree:

6.3.1 An investment of a further £170k per annum be added to the contract value of the community-based respite service thereby providing an additional 11,296 hours of support per year/ 217 hours per week.

6.3.2 A further investment of £30K be made for Tier 2 Targeted Short Break services.

6.4 Executive Board is asked to note:

6.4.1 An investment of £40k on a non-recurrent basis be made to Carers Leeds to provide (a) £8845 for additional carer support worker capacity at Leeds Teaching Hospital Trust over the winter period and (b) £31,155 to provide a one-off payment to carers of up to £200 as a contribution to increased costs of caring over the winter months.

6.5 The Director of Adults and Health is responsible for implementation of the recommendations in this report

## **7. Background documents<sup>3</sup>**

7.1 None

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<sup>3</sup> 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.

