



ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE:
10 JUNE 2014

STRATEGIC REVIEW OF CARER SUPPORT SERVICES IN
LEICESTERSHIRE

REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of Report

1. The purpose of this report is to ask the Committee to note the outcome of the strategic review of carer support services and invite comments from the Committee as part of a three month public consultation on the proposed commissioning options for the future of carer support services outlined in this report.

Policy Framework and Previous Decisions

2. The relevant policy framework includes:
 - The Carers' (Recognition and Services) Act 1995;
 - The Children's Act 2004;
 - The Carers' (Equal Opportunities) Act 2004;
 - Our Health, Our Care, Our Say 2006;
 - The National Carers' Strategy "Carers at the Heart of 21st Century, Families and Communities" (2008);
 - Next Steps for the Carers Strategy (2010);
 - Supporting the Health and Wellbeing of Carers in Leicester, Leicestershire and Rutland – Strategy and Delivery Action Plan 2012-2015;
 - The Care Bill 2013.
3. In June 2013, the Cabinet approved a request to extend the contracts for the existing carer support services up to a maximum of the end of September 2015.
4. The Cabinet agreed to an additional extension to a range of prevention related contracts in June 2013, to allow for further work on developing a new more holistic early intervention and prevention offer, including carer support services.
5. A strategic review of carer support services in Leicestershire has been undertaken by the Strategic Planning and Commissioning Team. The review forms part of the wider review of a new approach to prevention services commissioned by the Department (as detailed in a report presented to Cabinet in June 2013).
6. The review considered the following types of carer support services which are currently commissioned by the Adults and Communities Department:
 - Home Based Carer Respite services;

- Emergency Carer Respite service;
 - Specialist Advice, Information and Support services – including carers of Adults with Learning Disabilities Support Services;
 - GP Carer Health and Wellbeing service;
 - Carers Education Training Programme;
 - Carer Support Fund (CSF).
7. As part of the strategic review and service modelling process, engagement was undertaken with carers, existing providers, customers, stakeholders and departmental commissioning staff. Findings from the review process have informed the development of the proposed commissioning options.
 8. The new commissioning options, proposed for a three month public consultation, for carer support services in Leicestershire have been developed to provide services that meet demand, offer equitable access (both demographically and geographically), have a focus on positive outcomes for carers and customers, give value for money and ensure that the Department complies with the new Care Bill.
 9. On the 1 April 2014, the Cabinet noted the outcome of the strategic review of carer support services and gave approval to commence a three month public consultation on the proposed commissioning options for the future of carer support services in Leicestershire.

Background

10. A strategic review of carer support services in Leicestershire has been undertaken by the Adults and Communities Department between May 2013 and January 2014.
11. A total of 11 commissioned carer support services were included in the review, in addition to the CSF (a one off annual financial payment made to some carers).
12. These services reflect the provision of both universal support services for carers and also targeted support for carers as identified through the completion of a carers' assessment, although some support for carers is also accessed through the personal budget of the person they are caring for.
13. It is acknowledged that the carer support services form part of the Adults and Communities Department's wider early intervention and prevention offer to customers. The model outlined in this report has therefore sought to be consistent with the development of the Department's wider early intervention and prevention offer.

Carer Support Services

Current Service Provision and Challenges

14. Many of the current carer support services have been established for a number of years (see Appendix A to this report).
15. There were several challenges in the context of the current provision of carer support services including:

- A diverse range of services being reviewed that are tailored for different client groups, in order to meet a range of outcomes (for example, at present, the Department only commissions home based respite services for carers of people with dementia or mental ill health);
- A lack of clarity in outcomes achieved;
- Inequity in current service provision;
- A lack of equity due to geographical limitations of some services;
- Unco-ordinated referral routes into services;
- Financially unsustainable levels of service provision for certain services, whilst other services are significantly under-utilised.

Service Demand

16. In the Government's 2011 Census, 70,708 people in Leicestershire identified themselves as unpaid carers; this equates to 10.8% of the resident population of the County. The Census also highlighted a growth of 21% in people aged over 65 in Leicestershire. The percentage of carers aged 65 and over providing 50+ hours of care per week in Leicestershire was 35%; significantly higher than the national figure of 24%, and older carers will have issues around their own health and wellbeing. In 2012/13 there were 2,472 carer assessments carried out; 28% were carers aged 75 and over, indicating a necessity to ensure that services can meet the specific needs of older carers in addition to working age carers.

The Strategic Review Process

17. The review of the carer support services has followed a strategic process established by the Strategic Planning and Commissioning Team. It involves several phases, including:
- Detailed local needs assessment;
 - Service demand analysis;
 - Review of relevant research including good practice;
 - Assessment of strategic fit;
 - Equalities considerations;
 - Engagement with providers and current service users.
18. Due to new duties as set out in the Care Bill, specific analysis was also conducted to ensure that the review and subsequent recommendations were aligned to the new legislation.

Customer and Stakeholder Views

19. Two phases of customer and stakeholder engagement were undertaken as part of the review process. During the first stage, a total of 708 questionnaires were issued to current providers for them to distribute to a random sample of carers currently accessing services. There were 168 completed questionnaires returned. It was felt that overall this was not a sufficient level of customer returns in order to robustly measure the effectiveness of the services although these results have informed the review process.
20. A further 198 questionnaires were issued to a sample of carers who had accessed the CSF during 2012/13; 20% of the total number of carers accessing the CSF. Of

the 82 (41.5%) completed questionnaires, 92% of respondents were White British and the majority cared for people over the age of 75.

21. The Department's engagement provider, Communities in Partnership (CIP) hosted three carer-only participation events. Carers informed us that access to relevant advice and information early on remains a priority. In many instances carers reported contacting their GP at the start of their caring role in order to access help and support. A further priority identified was access to a choice of reliable and good quality home based services, including breaks for carers.

Equality Impact Assessment (EIA)

22. The strategic review and EIA identified the following key issues:
 - Future provision should aim to be more equitable across all geographic areas;
 - Services should not be limited to certain groups of carers (ie those caring for a person with a specific condition);
 - Services should have more co-ordinated and easier to access referral routes;
 - Services should be accessible to people with any protected characteristic.
23. The EIA questionnaire was approved by the Departmental Equalities Group (DEG) in August 2013 (See Appendix B) and a full Equality and Human Rights Impact Assessment (EHRIA) will also be completed for the proposed changes to carer support services. This is currently being prepared based on the findings of the review questionnaires and will be further informed by the public consultation outcomes.
24. In summary, the review process has identified the following key issues which are relevant in the context of the carers review and the development of commissioning options for future carer support services in Leicestershire:
 - Future carer support services in Leicestershire must be compliant with the Care Bill;
 - Carers need to feel supported in order to continue in their caring role;
 - Equitable access and availability of services;
 - Ensuring equality and fair access to carer support for all groups covered by the Equalities Act – particularly Black and Minority Ethnic (BME) groups (as highlighted in the local Carers Strategy);
 - Ensure that good quality, up to date, timely information and advice is easily available particularly at the start of the caring journey;
 - Older carers will remain a priority for good quality carer support services in order to support them to maintain their caring role.

Proposals for consultation on the future commissioning of Carer Support Services across Leicestershire

25. The proposal is to consult on the commissioning of a new model of carer support services. There are two options for how this model may look. Each option is made up of a combination of elements (A, B, C and D). Accordingly, Option 1 comprises of elements A, B, C and D; Option 2 comprises elements A, B and D only.

26. For both options it will be necessary to decommission all current carer services with the exception of the GP Health and Wellbeing Service, Support for Carers and the re-modelled Carer Respite Services. The outline of the proposed Carers Pathway is set out in Appendix C.

27. The four elements (A, B, C and D) are described below:

A Universal and Preventative Support for Carers - Following identification and recognition of their caring role, a carers initial contact and assessment to determine their eligibility will be undertaken at a Single Point of Access; the Customer Service Centre. Carers will receive general advice, information and signposting about caring issues from various sources including the Council Website (although this is currently under review), Health and Social Care settings, the Customer Service Centre, libraries and various Voluntary Organisations. Carers will also be identified by front line staff carrying out assessments for the person they are caring for and signposted to appropriate services. Carers will benefit from value added services such as the Memory Support Service, the Advocacy Service and the Advice Services. Carers who are not eligible for support services will be signposted to such services as the new Advice Service or the existing First Contact Scheme.

B Targeted, low level Support for carers - Our targeted, low level support for carers will fall into four areas of service provision:

- *Carer support service* - There will be a new service specification for this service with a greater emphasis on targeted advice, information and support to older carers and specialist groups of carers through peer support. It will facilitate the Countywide Carers Forums and Support Groups and offer advice and information around welfare benefit entitlements.
- *GP Health and Wellbeing Service* - Currently this service is only available in two localities; Oadby and Wigston and North West Leicestershire. The service will be re-procured and will become a countywide service operating within Primary Care. This will be subject to Better Care Funding beyond 2015/16.
- *Carers Training Services* - Carers will be able to access low level awareness training to enable them to feel confident in seeking support in areas such as stress management, personal budgets, and coping strategies. Furthermore, specialist one day training around specific areas and conditions will be provided as requested by carers. This could include training around mental health and long term health conditions.
- *Advice Service* - A new provider has been recently appointed to facilitate the countywide Advice Service, a specific element of their service provision will be targeted for carers.

C Carer Support Fund

A one off annual grant of £100-£250 (dependent on assessed impact of caring) for carers to access a break which is non-chargeable. This will be accessed through the Customer Service Centre.

D Carer Personal Budget

The carer will have the option of having a joint assessment alongside the person they care for. The carer will be able to receive support through the personal budget of the person they are caring for (e.g. if the cared for person accesses a day activity, this will provide respite for the carer). In circumstances where a carer is caring for someone who is not eligible for social care support or that person refuses an assessment, the carer may choose to access the Carer Support Fund or to have a full carer assessment and support plan (including a financial assessment) for a chargeable personal budget. Carer Respite Services will be commissioned for carers to purchase with their personal budget allocation

28. As stated above, the two options are therefore made up of a mixture of these elements. These are re-summarised overleaf:

Element	Option 1	Option 2
A	✓	✓
B	✓	✓
C	✓	
D	✓	✓

29. It is important to note the following caveats about the two options:

- **Option 1** takes into account the fact that there are significant costs associated with conducting full and detailed (including financial) assessments. The CSF will provide a limited level of support, but support which is easier to access and will ensure as much of the allocated funding as possible is provided directly to the carer.
- It should be noted that with **Option 1** in the event of a carer receiving a Carer Personal Budget (element D) they will not receive the CSF.
- **Option 2** means that carers will only be able to access a personal budget through a full assessment and support provided will be chargeable, although carers will still be able to opt for a joint assessment with the cared for person. The CSF will not be available under this option.

30. Carers Emergency Care is currently provided by Housing 21 but is both significantly underutilised and expensive; the current cost is £121,800 per annum. The proposal will be that this service is de-commissioned. Under the new pathway, emergency provision will be provided by the in house Crisis Response Team. Between 10.00pm - 7.00am the Emergency Duty Team will decide how best to care for the cared for person should a carer emergency arise.

Consultations

Engagement to Date

31. Throughout the review process opportunities have been taken to engage with as many key partners and stakeholders as possible. Engagement undertaken to date includes:
- Meetings of the Carer Project Board;
 - Carer Champion Network meetings;
 - Meetings with key stakeholders including: Public Health; CYPS; Clinical Commissioning Groups (CCG) representatives; Chief Executive's Department; and, operational team managers;
 - Specific providers or teams where an important interdependency has been identified; First Contact scheme; Customer Service Centre; Efficiencies and Service Reduction Team;
 - Engagement events with both current providers and carers during 2013 as part of the review process;
 - 1-1 meetings with current providers involved in the reviews;
 - Meetings with Healthwatch Leicestershire Carers Forum;
 - Use of existing consultation from Preventative Adult Mental Health Review and, Information and Advice project;
 - Attendance at various events and forums considered relevant to the review;
 - Briefings with Members.
32. Further stakeholder and carer engagement is recognised as essential in the on-going development of carer support services.

Formal Consultation Exercise

33. On 1 April 2014 a paper was presented to the Cabinet asking for permission to undertake a formal consultation exercise. As permission was granted, a formal consultation on the proposed changes to carer support services commenced on 14 April 2014 and will run until 13 July 2014 (inclusive).
34. The consultation will clarify the Department's offer of carer support services and make clear which contracts subject to review are proposed to cease on 31 March 2015. It is a process which will enable the Department to be sure that it has a detailed understanding of risks associated with the commissioning process and provides an opportunity to check that people agree with approach being proposed and to gather together and consider any alternative ideas.
35. The consultation period will be used to further inform:
- Methods for the identification of carers and referral processes;
 - Outcomes to be achieved by new carer support services;
 - Detailed delivery mechanisms through working with providers and carers;
 - Which combination of carer support elements carers prefer;
 - Risk and Impact assessments.
36. The approach to the consultation is varied and is intended to enable the greatest amount of people (including carers and families, stakeholders, providers and

members of the general public) to be involved and provide feedback and comments on the carer support proposals. The approach includes the following:

- Wide promotion of the consultation, including an article in Leicestershire Matters, and posters advertising events distributed to various community locations
- Information to support participation in the consultation available on-line and in hard copy format upon request.
- Online questionnaires available to all to complete. Hard copy versions available upon request
- A workshop for providers (of existing carer support services).
- A series of workshops for carers including those currently accessing existing carer support services
- Promotion through the existing carers' forums and support groups
- Attendance at various stakeholder meetings
- Wide distribution of information relating to the review to key stakeholders

37. Active participation in consultation will be sought from all key stakeholders as listed within Appendix D.

Initial Comments Arising from Formal Consultation

38. Although the consultation period only commenced on 14 April 2014 the following can be reported:

- Ten carers forums have taken place (including one specifically for carers of people with mental ill health) outlining the two options. Carers were able to give detailed feedback and comments on the two proposals.
- A Healthwatch Carers Forum meeting outlining the two options has taken place and gained further support from Healthwatch to actively promote the consultation to their members on our behalf.
- 446 unique visits to the Carers Support Services consultation landing page (www.leics.gov.uk/haveyoursay/carersupport) by 23 May 2014 (39 days into the consultation period).
- A total of 72 questionnaires had been completed by the 23 May 2014). These include questionnaires completed online or hard copies completed and returned.
- Meetings have been held with a number of external stakeholders to get feedback on the commissioning proposals and to explore further options for the development of carer support services. These have included meetings with representatives from: Public Health, East Leicestershire and Rutland and West Leicestershire CCG's and Borough Councils.
- Further discussions have been held with internal stakeholders, including meetings with locality managers and Heads of Service (for specific areas, such as reablement and mental health services) in order to highlight the carer support service options, to capture initial feedback and to consider alternatives.

Future Work/Steps

39. It is expected that the key milestones of the review will be as follows:

Timescales	
Formal consultation Papers presented to Adults and Communities Overview and Scrutiny Committee and for information to the Health Overview and Scrutiny Committee	April – July 2014 June 2014
Revision of Carer Support Services	August 2014
Cabinet – outcome of consultation and confirmation of model from 2015 onwards	Autumn 2014
De-commissioning of services undertaken and new commissioned services procured (dependent on Cabinet decision).	Contracts ending by 1 April 2015

40. Following the end of the formal consultation period the preferred option for future commissioning of the Department's carer support offer will be established.

Resources Implications

41. The cost of the current contracts for carer support services to the Adults and Communities Department is £1,199,000 (based on annual contract values for 2012/13) including:

- CSF: £270,000;
- Home Based Carer Respite services: £510,000;
- Emergency Carer Respite service: £121,000;
- Specialist Advice, Information and Support services – including Carers of Adults with Learning Disabilities Support Services: £277,000;
- Carers Education Training Programme: £21,000 (Jointly funded with East Leicestershire and Rutland Clinical Commissioning Group).
- Health Transfer funds also contribute towards carer services totalling £335,000 (including sole funding for a Pilot GP Carer Health and Wellbeing Service).

42. There is £135 million set aside nationally through the Better Care Fund (BCF) to support the implementation of the Care Bill. The cost of the new proposed commissioning options for carer support services will be £1,484,000 (this includes a total of £450,000 set aside locally in the BCF for 2015/16).

43. The cost of the proposed carer support service will be broken down as follows:

- Targeted, low level support for carers £355,000;
- CSF £355,000;
- Carer Personal Budgets £774,000.

44. This represents a saving of £165,000 in 2015/16 to the authority which will contribute to the reduction target for prevention services as detailed in the Medium Term

Financial Strategy (MTFS). £275,000 has been set aside in the BCF to meet the expected increase in demand for carers' assessments due to the Care Bill.

45. The Director of Corporate Resources and County Solicitor have been consulted on the contents of this report.

Timetable for Decisions (including Scrutiny)

46. The three month consultation commenced on the 14 April 2014 and will run until the 13 July 2014. This allows sufficient time for the procurement of carer support services and for the new carer pathway to be in place by April 2015 and ensures that the Department is compliant with new statutory duties for carers under the proposals within the Care Bill. Significant changes to the Care Bill are not expected at this stage. Once the detailed requirements of the Care Bill are clarified when the draft guidance is published, the recommendations from this review will be adapted as necessary.
47. This report will also be presented, for information, to the Health Overview and Scrutiny Committee on the 11 June 2014.
48. The consultation outcomes and finalised commissioning options will be reported to the Cabinet in autumn 2014, including proposed timelines for the decommissioning of existing services and procurement timelines for new services.

Conclusions

49. The strategic review process and carer engagement have confirmed support for the proposed commissioning models for carer support services.
50. The commissioning options will constantly be reviewed throughout the consultation period to ensure adherence to the Care Bill.
51. The Cabinet will be informed of the outcomes of the consultation in the autumn of 2014, with a view to seeking approval for the implementation of the new model of carer support in April 2015.

Background Papers

- The National Carers' Strategy 'Carers at the Heart of 21st Century, Families and Communities' (2008)
http://image.guardian.co.uk/sys-iles/Society/documents/2008/06/10/carers_strategy.pdf
- Supporting the Health and Wellbeing of Carers in Leicester, Leicestershire and Rutland Strategy and Delivery Action Plan 2012-2015
http://www.leics.gov.uk/carers_strategy_2012_2015.pdf
- Leicestershire Joint Strategic Needs Assessment (JSNA)
<http://www.lsr-online.org/reports/categories/JSNA>
- Report to Cabinet: 12 June 2013 - Request for Exception to Contract Procedure Rules – Voluntary Sector and Housing Related Support Services
[http://politics.leics.gov.uk/Published/C00000135/M00003392/AI00031503/\\$IRequestforExceptiontoContractProcedureRulesVolSectorandHsgRelatedSupport120612.doc.pdf](http://politics.leics.gov.uk/Published/C00000135/M00003392/AI00031503/$IRequestforExceptiontoContractProcedureRulesVolSectorandHsgRelatedSupport120612.doc.pdf)
- Report to Cabinet: 1 April 2014 – Strategic Review of Carer Support Services in Leicestershire
[http://politics.leics.gov.uk/Published/C00000135/M00003989/AI00037767/\\$8StrategicReviewofCarerSupportServicesinLeicestershire.docxA.ps.pdf](http://politics.leics.gov.uk/Published/C00000135/M00003989/AI00037767/$8StrategicReviewofCarerSupportServicesinLeicestershire.docxA.ps.pdf)

Circulation Under Local Issues Alert Procedure

52. This report has been circulated to all Members of the County Council via the Members' News in Brief.

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List of Appendices

Appendix A – Current Carer Support Services

Appendix B – Equality Impact Questionnaire

Appendix C – Proposed Carers Pathway

Appendix D – List of Key Stakeholders to be alerted of the consultation

Relevant Impact Assessments**Equal Opportunities Implications**

53. The Equality Impact questionnaire is attached as Appendix B. A full Equality and Human Rights Impact Assessment (EHRIA) will also be completed for the proposed changes to carer support services. Further details of equal opportunities implications arising from this report are contained in paragraphs 22-24 above.

APPENDIX A – Current Carer Support Services

Provider	Service Name	Description of Service	Contract Value 12/13
Housing 21	Emergency Respite Service	Emergency Contact Card and home-based short term, emergency carer replacement service.	£121,806
Alzheimer's Society	Side by Side	Volunteers providing weekly (up to 4hrs) befriending support for cared for younger people in the early stages of dementia.	£18,362
East Midlands Crossroads	Caring For Carers	50/50 fund split with East CCG. Immediate response to medical, terminal situation or social crisis for carers.	£21,752 (LCC funds £10,876)
East Midlands Crossroads	Mental Health Carer Respite	Provides either community or home based breaks for carers of people in receipt of secondary mental health services in the South of the County. This is through carer replacement.	£83,396
Voluntary Action South Leics (VASL)	Mental Health Carer Respite	Acts as a broker by commissioning breaks for carers of people in receipt of secondary mental health services. This is through carer replacement.	£24,119
Voluntary Action South Leics (VASL)	Support For Carers	Carer Development Workers, who support forums & groups, offer advice & information, support consultation and administer the Carer Support Fund.	£190,000
Voluntary Action South Leics (VASL)	Carer Education Training Programme	A Mental Health Education Programme for carers designed to help carers safeguard their own health and wellbeing. 50/50 health funded.	£41,188 (LCC funds £20,594)
Royal Mencap	Carers of Adults with Learning Disabilities	Range of services for carers of people with learning disabilities. Provides advice, future planning & signposting to service users and carers.	£69,184
LCPT & The Carers	GP Carer Health &	Supporting GP practices in 2 localities areas to identify and	

Centre	Wellbeing Service	support patients who are carers at the early stages of the caring role.	£75,065
Age UK	Dementia Carer Respite Service	Respite Provided in the home & community for carers of adults with dementia (up to 8 hours per week).	£450,000
Rethink	Mental Health Carer Respite	Provides either community or home based breaks for carers of people in receipt of secondary mental health services in the north of the County. This is through carer replacement.	£104,379
Carer Support Fund	Annual Financial Payment for Carers	A grant of £100 - £250 per year per person which enables carers to have a break from caring and reduces the impact of caring on their health & well-being.	£355,000

APPENDIX B – Equality Impact Questionnaire

This questionnaire is a pre Equality Impact Assessment tool which will enable you to decide whether or not the **new, proposed or significantly changed** policy/ practice/ procedure/ function/ service needs to go through a full Equality Impact Assessment. For further information on the equality questionnaire see the [guidance](#).

Name of policy/ practice/ procedure/ function/ service being assessed:	Carer's Services – Carer Mental Health Respite Services, GP Health & Wellbeing Service, Carer Support Fund, Carer Support, Emergency Support & Advice & Information
Department and Section:	Adults & Communities Department Strategic Planning & Commissioning Team
Name of lead officer and others completing this assessment:	Jane Robins – Carer Project Officer
Contact telephone numbers:	0116 3057096
Date EIA assessment completed:	20 September 2013
1.	<p>What is its purpose?</p> <p>As part of on-going work with carers and the implementation of the Department's Joint Carers Strategy 2012 - 2015, there is a desire to look at the departmental offer of services for Carers as part of the overall Early Intervention and Prevention offer . Furthermore, due to the impending end dates of a number of Carer service contracts it has been necessary for the Strategic Planning and Commissioning Team to undertake a strategic review of this group of services. The services that are currently being reviewed are:</p> <p>The Emergency Carer Respite Service - Provided by Housing 21. The Side by Side Project – Respite for Carers of Adults under 65 who have Mental ill Health – Provided by The Alzheimer's Society. Caring for Carers – Immediate Response Respite for Carers in the Blaby Locality – Provided by East Midlands Crossroads Care. The Carer Mental Health Respite Service for Carers of Adults over 65 – Provided by Voluntary Action South Leicestershire, East Midlands Crossroads Care and Rethink. The Carers Dementia Respite Scheme – Provided by Age UK The Older Carers (40+) of Adults with Learning Disabilities Support Service – Provided by Mencap. The GP Pilot Carer Health & Wellbeing Service – Provided by The Carers Centre and Leicestershire Community Projects Trust. The Carer Support Fund – An annual one off payment of up to £250 for carers who are eiligible – Administered by both LCC and some Voluntary Sector Organisations.</p> <p>The pupose of the review is to further analyse need, building on the recently refreshed JSNA (2012), using new evidence derived from an on-going analysis (or 'deep dive') of carers services in Leicestershire, map the current supply of carer services available from an early intervention and prevention perspective and consider service models which offer the greatest flexibility, equity and support to help carers mainitain their caring role and to prevent crisis. This is being identified through co-production with providers, key stakeholders, carers, commissioing staff and customers. The review will highlight commissioning options aimed at preventing carers and their cared for from requiring intensive support from Health and Social Care Services, promote/retain carers independence and prevent deterioration. The review will also consider opportunities for better alignment with other local service provided, potential for joint investment and highlight potential risks assoicated with recommendations made.</p>
2.	<p>What are its main objectives?</p>

	<p>The main purpose of the strategic review of carer services is to consider the effectiveness of individual services through the implementation of the 'Service Review Process' (which includes a Service Value Tool) and to consider how they fit with preferred delivery models. This will consider current service provision, including stakeholder and customer consultation and develop a new service model and service specification which can be subject to public consultation and a programme of procurement with new contracts in place by September 2014.</p>		
3.	<p>What will it achieve? Who are its beneficiaries?</p> <p>It is anticipated that the review will achieve the following objectives:</p> <ul style="list-style-type: none"> The Carer contracts will be aligned to the needs of carers, the carer pathway and the objectives in the Joint Carers Strategy 2012 -2015; these objectives are: <ul style="list-style-type: none"> The Identification and Recognition of Carers The Realising and Releasing of Carers Potential A Life Outside of Caring Staying Healthy Early Intervention & Prevention Information & Advice for Carers Ensuring Fair Access for all groups of Carers Ensure more equitable service provision Services focussed on future demand The main beneficiaries will be Leicestershire carers and the people they care for, <p>The review will benefit those carers already accessing existing carer services as well as those carers who have yet to be identified and supported.</p>		
4.	<p>Who is responsible for implementing it?</p> <p>Overall project management of the strategic review of carers' services sits with Jane Robins, Carer Project Officer. However, responsibility for service modelling and procurement of the carer services will sit with Carol Stanyard, Market Development Officer.</p>		
		Yes	No
5.	Has prior consultation on the proposal been undertaken?		✓
6.	Has this consultation indicated any dissatisfaction with it from a particular section of the community?		✓
7.	If yes to Question 6, please state what this dissatisfaction is:		
		Yes	No
8.	Is there evidence or any other reason to suggest that it could have a different effect or adverse impact on any section of the community? Or more specifically, one or more of the protected characteristics?		✓

9.	Is a system in place to monitor its impact?	✓		
10.	<p>If yes to Q9, what does this monitoring show?</p> <p>The review process has been designed to be as open, objective and transparent as possible. The Service Review Process (SRP) captures all the evidence used in the review process. This includes consultation with current providers, carers who use the services, locality commissioning staff and current stakeholders. This consultation is ongoing throughout the review process. The evidence detailed in the existing contract monitoring data, is also captured in the SRP toolkit. Furthermore, there is a clear governance structure for the commencement of reviews and the authorisation of key decisions about existing and future service delivery (including authorisation from service managers, DMT and if required Cabinet). Existing carers have been consulted as part of the review process and further public consultation will be undertaken in respect of any service modelling and changes to future service delivery in line with the Department's Engagement Framework.</p> <p>There is also monitoring data supplied by current providers for the existing services which has been submitted on a quarterly basis to the Adults & Communities Compliance Team. This monitoring data, though sometimes not of the highest quality (which is not necessarily the providers fault) allows some crude statements to be made about existing users of these services in terms of Equality & Diversity. The data shows that the carers accessing our existing services (including the Carer Support Fund) are aged between 18 and 85+, represent both genders (although a higher proportion of female carers is recorded) and a range of ethnicities (including British, White Other Background, Indian, Pakistani, Black Caribbean and Other Ethnic Group); and a limited range of religions (Christian, Hindu, Sikh, No Religion). It is noted that a number of carers have chosen not to declare their age, ethnicity or religion. Furthermore, the monitoring data for the carer services also shows carers have generally refused to provide information about their sexuality and there is no information about other protected characteristics such as pregnancy and maternity, gender reassignment and marriage and civil partnership (although we do collect data about who they care for and this is grouped into spouse, partner, child, parent, family member, friend and other). We are assisted in the collection of this information by our Engagement partner CIP (Communities in Partnership), who collect and store monitoring information for Carers on their database.</p> <p>This monitoring data provides a snapshot of the carers currently accessing these current carer services. It provides an indication of different characteristics which could be impacted by changes to service delivery and a benchmark against which to consider service development. Any new services for carers which are established as a result of the review and service development process will also have to submit monitoring data so that equality and diversity issues can continue to be monitored.</p>			
<p>Note: If no to Question 9, you will need to ensure that monitoring systems are established to check for impact on all nine protected characteristics.</p>				
11.	<p>Who is likely to be affected by the proposal? Which of the protected characteristics? (Please tick) Explain how each protected characteristic is likely to be affected below: [NB. Alternatively, if no protected characteristic is deemed to be affected, please explain why]</p>			
		Yes	No	Comments
Age		✓		<p>All the existing carer services are open to all age groups classed as 'adult' (that is, aged 18 years and above); although some of the carer dementia respite services are only available to people caring for those with dementia over 65 years and one carer service for those caring for people with dementia who are under 65. The only stipulation for the carer accessing services is that they are aged 18 or over. The monitoring data for all carer services show a range of ages of carers accessing services (from 18 to 85 and over). There is no intention, as part of the strategic review process or future</p>

		<p>service modelling to change this in any way; that is these services will remain accessible for all aged over 18 years. However, of interest to the review and service development process is the current data for the age of the cared for person which shows significant increases in the age of the person being cared for over 75+. The review will determine whether there are any issues with accessing carer services in respect of certain age groups (i.e. older people). If issues are identified then service modelling will aim to resolve this and ensure continued and (if required) more equitable access to carer services.</p>
Disability	✓	<p>The monitoring data for existing carer services only records the physical or mental health condition of the person they care for and no disability relating to the carer is recorded although this may reflect what carers have chosen to declare. All national and local research shows that carers are more prone to ill health such as physical ailments i.e. bad backs due to lifting, stress related illnesses, poor sleep and depression. It is therefore possible that some carers accessing carer services may have a disability themselves. This will be considered throughout the review and service development process to ensure continued equal access to carer services and seek to improve these services and outcomes for carers.</p>
Gender Reassignment	✓	<p>The monitoring data for existing carer services does not provide any evidence for gender reassignment amongst current carers accessing these services. As such this will be considered throughout the review and service development process to ensure continued access to services. It should be noted that whilst the review and service development process of the carers services will consider this group there is no intention to remove access to services for this group, rather it seeks to improve these services and outcomes for carers.</p>
Marriage and Civil Partnership	✓	<p>The monitoring data for existing carer services does not provide and evidence for marriage and civil partnership amongst carers accessing services, although there is some data regarding the status of the cared for person; i.e. do you care for spouse/partner. It is possible that some of the carers accessing carer services may be affected by issues arising from marriage, civil partnership or being single and this will be considered throughout the review and service development process to ensure equal access to services for all carers. It should be noted that whilst the review and service development process will consider this group there is no intention to remove access to services from carers, rather it seeks to improve these services and outcomes for carers.</p>
Pregnancy and Maternity	✓	<p>Access to carer services may be affected by reasons associated with pregnancy and maternity i.e. carer respite delivered in the carers' home. It is therefore possible that some of the individuals accessing some carer services may have been affected by issues arising from pregnancy and maternity and this will be considered throughout the review and service development process to ensure continued equal access to services. Monitoring data for existing carer services does not provide any evidence for pregnancy and maternity amongst carers but data is collected around whether they are caring for a child. It should be noted that whilst the review and service development process will consider this group there is</p>

			no intention to remove access to services from carers, rather it seeks to improve these services and outcomes for carers.
Race	✓		It is widely acknowledged that access to carer services may be affected due to cultural reasons. This is of interest to the review and service development process and attempts continue to be made to determine what the issues are with accessing carer services in respect of race i.e. some carers may be or feel less able to access services than others because of their race. These issues have been identified in previous consultation with carers. If they continue to be identified then service modelling will aim to resolve these issues and ensure continued and (if required) more equitable access to carer services. It should be noted that whilst the review and service development process will consider this group of carers, there is no intention to remove access to services from them, rather it seeks to improve these services and outcomes for carers.
Religion or Belief	✓		It is widely acknowledged that access to carer services may be affected by religion or beliefs. This is of interest to the review and service development process and attempts will be made to determine what the issues are with accessing carer services in respect of religion or belief i.e. some carers are reluctant to access services due to their religion or beliefs. If such issues continue to be identified then service modelling will aim to resolve these issues and ensure continued and (if required) more equitable access to these services. It should be noted that whilst the review and service development process will consider this group of carers there is no intention to remove access to services from this group, rather it seeks to improve these services and outcomes for carers.
Sex	✓		It is recognised that access to carer services may be affected by sex – for instance, evidence suggest women are more likely to identify themselves as a carer and consequently access carer services than men . This is of interest to the review and service development process and attempts will be made to determine whether there are any issues with carers accessing carer services in respect of their gender. If such issues are identified then service modelling will aim to resolve this issue and ensure continued and (if required) more equitable access to carer services. It should be noted that whilst the review and service development process will consider this group there is no intention to remove access to carer services from this group, rather it seeks to improve these services and outcomes for carers.
Sexual Orientation	✓		Access to carer services may be affected by reasons associated with sexual orientation (such as social exclusion). This is of interest to the review and service development process and attempts will be made to determine whether there are any issues with carers accessing services in respect of their sexual orientation. If such issues are identified then service modelling will aim to resolve this issues and ensure continued and (if required) more equitable access to these services. Monitoring data for existing carer services provides only limited information about sexual orientation amongst current customers as many individuals have chosen not to give a response to this question. It should be noted that whilst the review and service development process will consider this

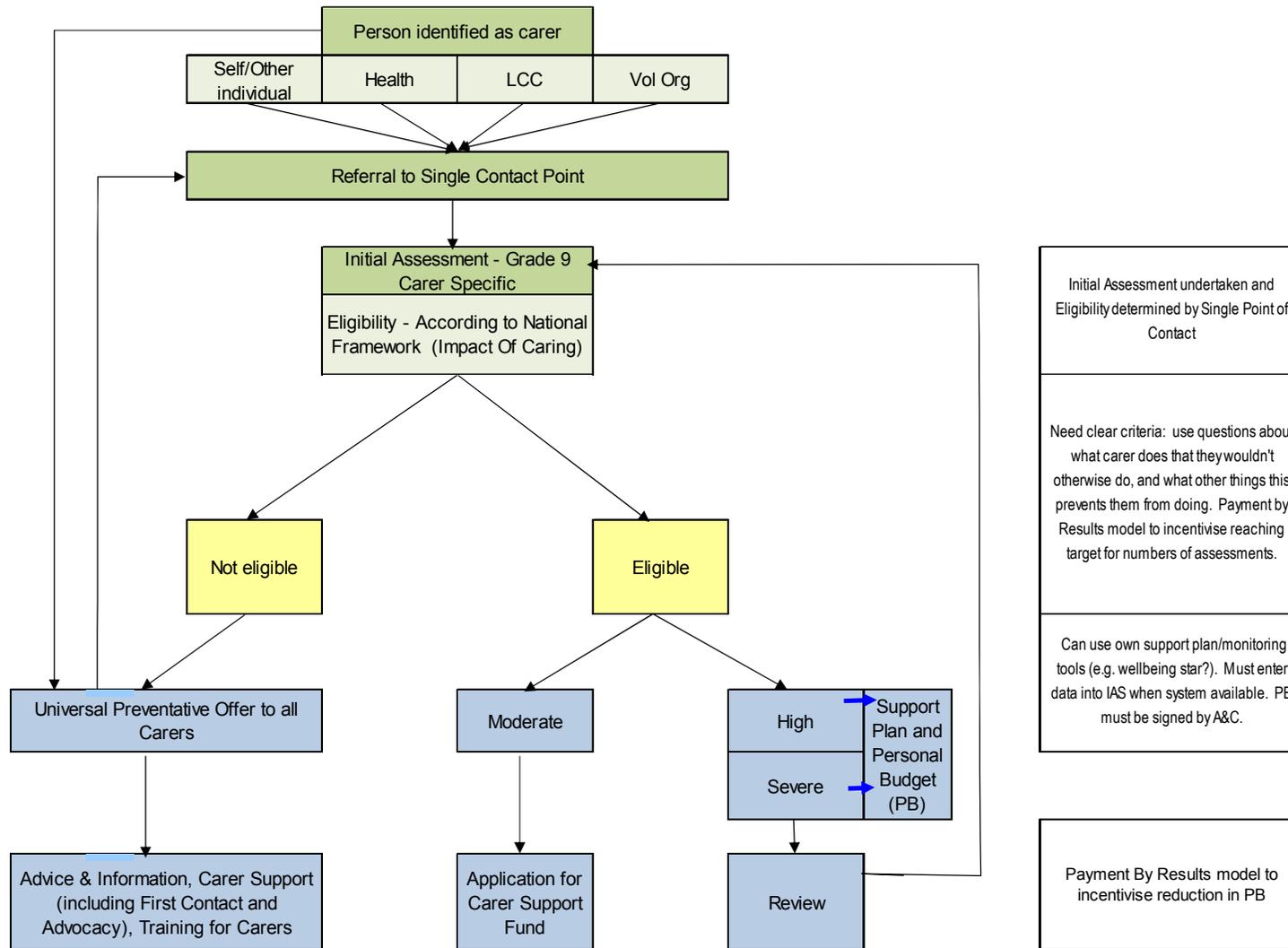
			group there is no intention to remove access to carer services from this group, rather it seeks to improve these services and outcomes for carers.
Other groups e.g. rural isolation, deprivation, health inequality, carers, asylum seeker and refugee communities, looked after children, deprived or disadvantaged communities	✓		Of particular interest is the investigation of unequal access to carer support services due to deprivation or rural communities. This may be of interest to the review and service development process and attempts will be made to determine whether there are any issues with accessing carer services in respect of these other issues. If such issues are identified then service modelling will aim to resolve these issues and ensure continued and (if required) more equitable access to carer services. Monitoring data for existing carer services does not provide any evidence for any of these other groups, however, carers often anecdotally comment that they cannot access carer services due to lack of transport e.g. the dementia café at Huncote Leisure Centre being inaccessible by public transport. It should be noted that whilst the review and service development process will consider these groups there is no intention to remove access to carer services from these groups, rather it seeks to improve these services and outcomes for carers.
Community Cohesion	✓		The review process and service development may have some impact upon community cohesion i.e. the review of the Blaby Dementia Café Service. Although the monitoring data for this service does not collect information around community cohesion, during engagement with carers they have expressed that by accessing services within locality community and leisure services this gives them a sense of contributing to/involvement with their community. There is the potential that (following completion of the strategic review of carer services) service modelling might encourage even greater involvement of carer services in local communities. This would be seen as a positive step/impact.
12.	Other comments:		
13.	Decision:		
	No Impact <input type="checkbox"/>	Positive Impact	Neutral Impact <input type="checkbox"/>
			Negative Impact or Impact Not Known ¹ <input checked="" type="checkbox"/>
Note: If ticked 'Negative Impact or Impact Not Known' box at Question 15, will need to progress to full EIA.			
14.	Proceed to full EIA?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
15.	What are your reasons for your decision?		
	The strategic review process and service development process has been designed so that it can take into account all the protected characteristics (see section 11) without discriminating against any of them. It aims to understand more about potential issues relating to accessing carer support services in respect of these characteristics and to use these to understand existing provision of carer services and to enable the		

¹ 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

development of more effective carer services for future commissioning. This should consequently, result in more equitable access by carers to all carer services in Leicestershire and more positive outcomes for carers to enable them to continue caring.

As this will represent a significant change to current service provision, the measures put in place to ensure that Equality groups are protected will need to be reviewed to assess their effectiveness. A full EIA will be produced following consultation in order to record the outcomes from the consultation, demonstrate how the redesigned services for carers have taken account of them and complete the Equalities Improvement Plan.

APPENDIX C – Proposed Carers Pathway



NB: Where eligibility is described in the above diagram it refers to eligibility for carers services as opposed to eligibility for Adult Social Care support through Fair Access to Care Services.

List of Key Stakeholders to be alerted of the consultation

Organisation/ Department	Stakeholder
Leicestershire County Council departments	Adults and Communities staff
	Research & Insight
	Community Safety
	Communities and Places Team
	Business Intelligence & Performance
	Children and Young Persons Service
	Environment and Transport
	First Contact
	Multi Agency Traveller Unit
	Health
West Clinical Commissioning Group	
East Clinical Commissioning Group	
Leicestershire Partnership Trust- Community Provision	
Leicestershire Partnership Trust Community Mental Health Teams	
Pharmacies	
East Midlands Ambulance Service	
Community	Districts and Borough Councils
	Fire service
	Police
	Housing Providers/ Landlords
	Probation
	Leicester City Council
	Rutland County Council
Customers	Public Representation
	Customers of current provision
	Carers
Providers	Provider Forum
	Specific providers
	Voluntary Sector
	Voluntary Action Leicestershire
Governance	Equalities
	Cabinet Lead Member for Adult Social Care
	Efficiencies Programme Manager
	Change Board/ Director of Adults and Communities
	Cabinet
	Scrutiny
	Health & Wellbeing Board
	Learning Disability Partnership Board
	Integrated Commissioning Board
	Leicestershire Together/ Better Care Together
	Healthwatch
Housing Board	

