

Southend-on-Sea Borough Council

Report of Corporate Director, Department for People

to

Health and Wellbeing Board

on

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People Department Care Act Update

1. Purpose of Report

- 1.1 To update the Health and Wellbeing Board on the implications of the Care Act for Southend Borough Council and partners.

2. Recommendations

- 2.1 That the Health and Wellbeing Board note the report and the significant service and financial implications that will impact on the Council arising from the implementation of this Act.
- 2.2 That the Health and Wellbeing Board note what the implications of the Care Act are for the Board's partner organisations.
- 2.3 That the Health and well being Board note that a Joint Market Position Statement is currently being agreed between Southend Borough Council and Southend CCG as part of the care act requirements.

3. Background

- 3.1 The Care Act is considered to be one of the most important pieces of social care legislation since the 1948 National Assistance Act and 1990 NHS and Community Care Act. At the moment care and support is delivered against a number of Acts of Parliament, some over 60 years old. The Act replaces these with a single, modern law which will provide adult social care (ASC) with a new legal framework putting the wellbeing of individuals at the heart of care and support services.
- 3.2 The Care Act sets ways in which adult social care is funded, including introducing a Care Cap, which limits the amount an individual has to pay for their care in their lifetime. It also addresses the infrastructure required to manage the cap.

- 3.3 The Care Act will have a significant financial and service impact on local authorities, placing new duties and responsibilities on local authorities as well as extending existing responsibilities.
- 3.4 The majority of changes are set to take place in April 2015, with the reform of funding to take effect from April 2016.
- 3.5 The Care Act also places a duty on local authorities to carry out their care and support functions with the aim of integrating services with those provided by the NHS and other health related services to be in place by 2018.

Programme Progress to date

- 3.6 LG Futures has been commissioned to carry out an analysis of the financial impact of the Care Act on Southend. The initial findings will be shared at the end of November.
- 3.7 Rationalisation and integration of the Care Act and the Pioneer work Programme is underway.
- 3.8 Governance arrangements are in place (see Appendix 1)
- 3.9 The final guidance has been issued by the DH and implementation is underway.

4. Progress on key areas of the Act

Key Areas	Responsible organisations			
	LA	CCG	Hospital	Third Sector
Promoting wellbeing	✓	✓	✓	✓
Prevention	✓	✓	✓	✓
Providing Information, Advice and Advocacy	✓	✓	✓	✓
Providing the quality and diversity of local services	✓	✓		
Assessment and eligibility	✓	✓		
Funding Reforms	✓			
Safeguarding	✓	✓	✓	✓
Continuity of care and support when an adult moves	✓			

Promoting wellbeing

- 4.1 The Act creates a new duty to promote a person's well being and this principle underpins the approach to care and support. This is broadly already a responsibility for local authorities as demonstrated through the Health and Well Being strategy but it becomes a statutory responsibility under the Care Act. Work is underway to identify what, if any, changes are needed to social care assessments at the initial point of contact and subsequently. This principle will also inform the development of joint commissioning between Southend Borough Council and Southend CCG which is being scoped currently.

Prevention

- 4.2 As part of the Care Act requirements, local authorities must consider how to identify "unmet need" – i.e. those people with needs which are not currently being met, whether by the local authority or anyone else. Understanding unmet need will be crucial to developing a longer-term approach to prevention that reflects the true needs of the local population. This assessment should also be shared with local partners through the Health and Wellbeing Board, to contribute to wider intelligence for local strategies.
- 4.3 This requires local authorities to be pro-active to prevent, delay or reduce the need for social care support and this applies to the whole population, whether or not they currently use services. This work is being taken forward through the Prevention workstream of the Pioneer Project. A prevention strategy is in development and will underpin joint commissioning activity.

Providing Information, Advice and Advocacy

- 4.4 The provision of good quality information and advice by the local authority in partnership with others underpins the reforms. Part of the requirement to people who have unmet need is to provide proportionate advice, information and support.
- 4.5 An Information, Advice and Guidance strategy has been approved by the Programme Board. A Stakeholder communications plan has been developed which has been reviewed at the Health and Wellbeing Board consultation and engagement sub-group.
- 4.6 Following the release of national communication toolkits in late November, delivery of the key actions in the stakeholder communications plan will commence.

Promoting the quality and diversity of local services

- 4.7 Local authorities will have a duty to develop a market that has a range of high quality providers that can meet the needs of all residents and facilitate choice. A Joint Market Position Statement is currently being agreed between Southend Borough Council and Southend CCG. This sets out changes needed in the current market to meet future need and commissioning intentions to meet those needs and support the local market to develop. For

example, an ever greater increase in the need for more personalised and bespoke support responses will change how local providers offer support and we will work with them to develop their offer and respond to different contracting models. The work on the Market Position Statement will be completed by the end of November and will drive commissioning activity

- 4.8 There is also a duty to ensure continuity of service in the event of provider failure; this includes care home provision, community based care and support services and for all people receiving care including self-funders. Southend Council has a contingency plan in place in the event of provider failure.

Assessment and eligibility

- 4.8 The Act creates the requirement for a single, consistent route to determining people's entitlement to care and support and extends the same entitlement to carers.
- 4.9 The Act sets a national minimum threshold for eligibility at which local authorities must meet a person's care and support needs. The description of eligible needs within new regulations will replace existing local thresholds and current statutory guidance called Fair Access to Care Services.
- 4.10 Final guidance has now been issued and the assessment and eligibility criteria is currently being reviewed in the light of this guidance.
- 4.10 Carers will also have a statutory entitlement to an assessment and will be entitled to support in their own right. This work is being taken forward as part of the assessment and eligibility workstream. Research suggests that approximately 10% of Southend's population have a caring role and the new requirements will increase the support available to carers, which will probably result in a cost pressure to the local authority. The LG Futures work will provide some detailed analysis of the financial impact of the likely cost pressure.
- 4.11 The Better Care Fund includes existing carers funding streams and the use of this resource is being developed through the work on the Fund.

Funding reforms

- 4.12 The financial reforms significantly changes charging for social care and will require local authorities to assume financial responsibility for people who have eligible needs where they fund their own social care and support, once they reach a cap. The reforms also increase the upper threshold for means tested services for people in residential care with a property being taken into account within the assessment. The funding reforms come into effect in April 2016 and a work programme for implementation is in development.
- 4.13 A Universal Deferred Payment Scheme (to be implemented from April 2015) means that people will not have to sell their home during their lifetime to pay for their care – local authorities will be able to charge interest on these payment arrangements. Southend currently operates a Deferred Payment

Scheme, but this will change in line with the new scheme e.g. interest applied from start of scheme.

Safeguarding

- 4.14 The Act requires local authorities to have a Safeguarding Adults Board (SAB) and to carry out safeguarding adults reviews where somebody experiencing abuse or neglect dies or there are concerns about how the local authority acted. Boards may also require information sharing from other partners. Boards are also required to have a work plan and publish an annual report. There is a new duty to carry out enquiries (or ask others to do so) where it is suspected an adult is at risk of abuse or neglect.
- 4.15 Strategies for the prevention of abuse and neglect is a core responsibility of a SAB and it should have an overview of how the strategies are being implemented and how that work ties in with the Health and Wellbeing Board's, Quality Surveillance Group's (QSG), Community Safety Partnership's and CQC's stated approach and practice.

Continuity of care and support when an adult moves

- 4.16 The Act states that when an adult with care needs moves between local authorities, the first local authority must provide all relevant information. The second local authority must provide information and assess the adult and their carer, taking into account their previous support plan. Until an assessment can be done, the second local authority must continue with the first authority's support plan. This arrangement currently exists between the three local authorities in Essex.

5. Timescales for implementation

- 5.1 The majority of the new legislation will come into effect in April 2015. The requirements related to the capped charging and extended means test will come into effect a year later in April 2016. The milestones leading up to implementation are as follows

Date	Key Requirements	Timescale
October 2014	Final regulations and Guidance published.	Completed
October 2014	Ensure that monthly Care Act Programme Board/Project Team and work stream lead meetings take place.	Ongoing to October 2015
October 2014	Work closely with ICT to map, develop and implement the required IT systems.	Ongoing to October 2015
November 2014	Receive and analyse the outcome of LG Futures work which has been commissioned to carry out some financial modelling work on the impact of the Care Act on Southend, this will	November 2014 – January 2015

	be built into the medium term financial strategy.	
November 2014	Sign off the Information Advice and Guidance Strategy.	November 2014
November 2014	Launch communications with members of the public including service users, carers and families to provide an overview of the Care Act.	December 2014 - March 2015
November 2014	Launch communications with internal stakeholders such as staff and members to provide the main points of the Care Act that people need to know now including - Information, advice and guidance, wellbeing, prevention, advocacy, assessment and eligibility, quality and diversity of local services, funding reforms, safeguarding and continuity of care after an adult moves.	December 2014 - March 2015
November 2014	Launch communications with external stakeholders such as voluntary organisations and advocacies to provide a more detailed overview of the Care Act.	December 2014 - March 2015
November 2014	Map the current assessment process and recording requirements for service users and carers to ascertain the “as is” position.	November 2014
December 2014	Map the future assessment process and recording requirements for service users and carers to ascertain the “to be” position.	December 2014
December 2014	Finalise the integrated Market Position Statement.	December 2014
December 2014	Consultation commences regarding part 2 of Care Act which particularly focuses on understanding costs and preparing for the funding reform.	December 2014 - March 2015
December 2014	Develop revised assessment and eligibility guidance and processes.	January 2015
January 2015	Design and implement the assessment forms for service users and carers in accordance with Care Act requirements.	February 2015
January 2015	Scope and implement the necessary changes to move from current deferred payment scheme in Southend to universal deferred payment scheme.	March 2015
January 2015	Scope any additional workforce resources required to meet projected demand.	January 2015 – June 2015

February 2015	Commence in-depth training programme with the workforce to ensure that they currently have the skills necessary to deliver services in the required way.	March 2015
April 2015	Part 1 of Care Act comes into force.	ongoing
June/July 2015	Initial feedback of consultation on Part 2 Care Act published.	
October 2015	Introduction of regulations to Parliament regarding part 2 of Care Act and guidance published.	
October 2015	Commence assessments of individuals requesting consideration for a Care Account.	October 2015 to March 2016
April 2016	Regulations and Guidance for part 2 of Care Act come into force.	

6. Corporate Implications

6.1 Contribution to Council's Vision and Corporate Priorities.

The proposals support Corporate Priority 4, to maintain improved outcomes for vulnerable adults and older people.

6.2 Financial Implications

To assist with Care Act implementation costs every local authority has been allocated £125,000. In Southend, this money is being used to pay for the programme and project management, IT development and initial system changes that are required prior to April 2015.

Southend Council have commissioned LG futures to carry out an analysis of the financial impact of the Care Act on Southend. The outcome of this work will be scrutinised during November to January and will inform the medium term financial strategy that is to be agreed at Council in February 2015.

In July 2014 the Department of Health (DOH) commenced a consultation on the care Act funding and asked for views from stakeholders on their proposed options for distributing funding to local authorities for the three specific new duties:

- Additional assessments for the cap on individual's lifetime eligible care costs. The financial impact of carrying out additional assessments is recognised by the DOH resulting in additional monies being allocated. It is envisaged that the demand for additional carers assessments will commence in April 2015 but the greatest financial impact will be from October 2015 in preparation for part 2 of the Care Act, the welfare reform.

- Universal deferred payment agreements. Additional funding has been allocated to accommodate the financial implications of the universal deferred payments scheme with effect from April 2014.
- Social care in prisons. It is noted that Southend do not have any prisons so will not be allocated any additional funding.

The outcome of this Care Act funding consultation as well as a financial modelling exercise has resulted in the Department of Health reviewing the proposed funding arrangements for the Care Act. The actual amount of funding allocation has not been released but is scheduled to be available in December as part of the local government provisional finance settlement.

Arising from the work that LG Futures are undertaking on the implementation and ongoing costs from the Care Act and the provisional funding allocation to the council it will then be possible to more accurately estimate the potential impact to the Council and how it will affect the Council's Medium Term Financial Strategy over the coming years.

6.3 Legal Implications

The Care Act is a significant change to Social Care legislation and imposes a number of statutory duties onto local authorities. A member of the Council's legal team attends the Project Team meetings and provides advice and guidance.

6.4 People Implications

There are likely to be implications for staff resourcing and workforce development. Full implications are not yet known but plans for workforce development activity are well underway and are being considered alongside workforce development requirements related to integration.

6.5 Property Implications

None

6.6 Consultation

This will be undertaken as required in accordance with Council policy.

6.7 Equalities and Diversity Implications.

An Equality Assessment will be completed.

6.8 Risk Assessment

The implementation of the Care Act carries a significant service and financial risk which is still being quantified.

6.9 Value for Money

None

6.10 Community Safety Implications

None

6.11 Environmental Impact

None

7. Background Papers

None

8. Appendices

Appendix 1 - Governance chart