

HEALTH, SOCIAL CARE AND WELLBEING SCRUTINY COMMITTEE – 11TH SEPTEMBER 2012

**SUBJECT: CARERS STRATEGIES (WALES) MEASURE 2010 –
INFORMATION & CONSULTATION STRATEGY**

REPORT BY: CORPORATE DIRECTOR SOCIAL SERVICES

1. PURPOSE OF REPORT

- 1.1 To advise members of the 'Carers Information & Consultation Strategy' that has been produced as outlined in the Carers Strategies (Wales) Measure. Due to the relatively short timescale provided for consultation (23 July 2012 to 19 August 2012) it has not been possible to bring the draft report to Committee as part of the consultation process. However, the report was circulated electronically to members of Scrutiny Committee in August 2012.

2. SUMMARY

- 2.1 The Carers Strategies (Wales) Measure 2010 was passed by the National Assembly for Wales on 22 September 2010 and received Royal Assent on 10 November 2010. The Carers Strategies (Wales) Measure, Regulations and Guidance on implementing the Measure, were issued to LHBs, Trusts and Social Services on 8 December 2011.
- 2.2 The Measure places a duty on the 'designated authorities' to prepare and publish an Information and Consultation Strategy for carers, based on Health Board boundaries, setting out how organisations will work together to provide appropriate information and advice to carers.
- 2.3 A copy of the Gwent Partnership Carers Information And Consultation Strategy 2012-2015 is held within the Members Resource Centre.

3. LINKS TO STRATEGY

- 3.1 The Carers Strategy Implementation Plan in Wales 2000
Health Social Care & Well-being Strategy 2011-14
Fulfilled Lives Supportive Communities – 2007
Sustainable Social Services for Wales – Framework for Action – 2011
Carers Strategies (Wales) Measure 2010

4. THE REPORT

- 4.1 Whilst local authority Social Services Departments have long had responsibility for meeting carers needs, under the Measure Local Health Boards and Trusts are designated as the lead authority for ensuring delivery of the requirements of the Measure. Research shows that for 4 out of 5 Carers, their first point of contact with any statutory agency is with a community-

based health service. Research also shows that this first point of contact is generally either at a health centre, GP practice or at home. In establishing the National Health Service (NHS) as lead agency, the Measure recognises that the NHS plays a vital role in identifying carers, offering them information and signposting or referring them to sources of advice and support.

- 4.2 A key requirement of the Measure is that carer awareness is mainstreamed as part of the day-to-day activities of NHS staff at all levels, whether employed by or contracted to the NHS. The overall objectives of the Measure are to ensure that organisations work in partnership with carers, patients, local authorities, the Third Sector, the private sector and other relevant groups to ensure:
- the identification of carers by staff and professionals at all levels within the NHS.
 - the effective provision of relevant, up to date and targeted information to carers at every point of their journey through the NHS.
 - that carers are informed of their legislative right to an independent assessment of their needs as a carer.
- 4.3 The Director of Primary, Community & Mental Health Services and the Head of Partnership and Network Planning within Aneurin Bevan Health Board, are the officers who have led on the measure and who chair a multi agency Carers Measure Group. The purpose of the Carers Measure Group is to lead the development of the 'Carers Information and Consultation Strategy' and through its membership, engaged with the five Gwent Local Authorities, Third Sector and carers representatives in order to ensure a consistent and sustainable approach to the requirements of the Carers Measure.
- 4.4 The aim of the strategy is to raise awareness of carers and their needs, across all staff groups to positively influence organisational culture and increase opportunities whereby carers can be identified and provided with appropriate and timely support. It will be important to have a positive impact upon carer confidence by both supporting them to recognise themselves are carers but also to accept the support they may need.
- 4.5 The strategy also sets out the principles, objectives and desired outcomes, along with how organisations will work in partnership to improve information, communication and involvement of carers. Specific requirements in relation to the needs of young carers are also highlighted.
- 4.6 Following the formal consultation period ending on the 19 August, the draft document has been finalised, incorporating feedback received via the consultation. The final version of the 'Carers Information & Consultation Strategy' has been be circulated to the Health Board, five local authorities and the Third Sector (through Torfaen Voluntary Alliance and Gwent Association of Voluntary Organisations) to be reported to their various approval bodies with onward submission to Welsh Government by Aneurin Bevan Health Board by the 31 October 2012.
- 4.7 Caerphilly Social Services have expressed their disappointment that both the consultation and approvals timetable is very time limited and as such does not allow officers to conform to all the required processes usually adopted within the Authority. These concerns have been acknowledged and accepted by senior staff in ABHB. However, officers have worked within the time frame set and as full a response as possible to the consultation document was submitted.
- 4.8 It should be noted that the duties placed on organisations via the Measure do not replace those already in place for local authorities, rather they consolidate and complement them and will be in addition to those local carers strategies already in place or being produced within local authorities.
- 4.9 Locally a draft carers strategy has been produced by officers from Caerphilly CBC and Blaenau Gwent CBC and this is currently undergoing a 12 week consultation process. The key commitments and actions from the Pan Gwent strategy will be incorporated into this document.

5. EQUALITIES IMPLICATIONS

- 5.1 An equalities impact assessment is being completed by Aneurin Bevan Health Board and this will accompany the final version of the carer's strategy.

6. FINANCIAL IMPLICATIONS

- 6.1 The funding made available by the Welsh Government is being distributed to Health Boards across Wales on a per capita basis. Year 1 funding £81,944 for 2011/12 is for Health Boards and Social Services to cover costs associated with training and awareness raising amongst relevant staff to ensure that they are fully conversant in all aspects of the Measure. The funding for 2012/13, £81,944 also covers Welsh translation, printing and distribution costs for the Strategy, with a further dedicated funding of £15,608 for Young Carers. This funding will be passed to Health Boards following Ministerial sign-off of the local Information and Consultation Strategies towards the end of 2012. Whilst funding allocations will go to Local Health Boards, the legal requirement to discharge functions associated with the funding is prescribed jointly with the Local Authorities.

7. PERSONNEL IMPLICATIONS

- 7.1 There are no direct personnel implications arising from this report.

8. CONSULTATIONS

- 8.1 Engagement and consultation with carers and staff was undertaken in 2 phases. Phase 1 comprising wide engagement of identified stakeholders, including maximum use of existing forums and planned opportunities for engaging with carers. National Carer's week, which took place week beginning 18 June 2012, was also used as a key opportunity for engaging with carers as well as staff within organisations. Feedback from engagement activities has informed both the development of the draft Strategy and the future use of mechanisms for engagement.
- 8.2 Phase 2 comprised a formal consultation on the draft Strategy over a 4-week period commencing on Monday 23 July and finishing on Friday 17 August 2012. Consultation on the draft strategy was as broad as possible, given the limited timescale. Information was provided and responses sought through the ABHB website, with links available on the individual Council's websites. Information was distributed through the local media to raise awareness of the consultation period and to encourage as many carers as possible to participate. The draft strategy was widely distributed to professionals in the local authorities, health board, voluntary sector, providers of carers services and carer groups and forums
- 8.3 All comments received internally have been fed back to Aneurin Bevan Health Board as part of the authority's response.

9. RECOMMENDATIONS

- 9.1 Members are asked to note the content of the 'Carers Information & Consultation Strategy' and the consultation process followed to date.

10. REASONS FOR THE RECOMMENDATIONS

- 10.1 This document will provide direction for the local authority and its partner organisations with regard to services to carers.

11. STATUTORY POWERS

- 11.1 Local Government Act 2000
- National Assistance Act 1948
- National Health Service & Community Care Act 1990

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