

HEALTHIER COMMUNITIES SELECT COMMITTEE			
Report Title	Implementation of the Care Act 2014		
Ward	All	Item No	6
Contributors	Executive Director for Community Services		
Class	Part 1	Date: 13 January 2016	

1. Summary

- 1.1. This report provides the Healthier Communities Select Committee with an update on the progress made to implement the requirements of Care Act 2014.
- 1.2 The Care Act 2014 is the single biggest change to adult social care legislation in the UK since the National Assistance Act 1948. It aims to simplify a diverse range of legislation that has developed since 1948; put best practice in social care on a statutory footing; and respond to the challenge of how people plan and pay the cost for their social care.
- 1.3 In Lewisham, a work programme is in place, overseen by the Executive Director of Community Services, to ensure effective local delivery. In addition, officers are involved in the regional and national activity around the implementation of the Care Act 2014.

2. Purpose

To update the Healthier Communities Select Committee on the progress of implementing the Care Act.

3. Recommendations

- 3.1 The Committee is recommended to:
 - 3.1.1 Note the approach taken in Lewisham to the implement the requirements of the Care Act.
 - 3.1.2 Note the progress made to date.

4. Policy Context

- 4.1 The priority areas in Lewisham's sustainable community Strategy which the Care Act most aligns with is to "Support people with long term conditions to live their lives in their communities and maintain their independence". There is also a clear opportunity to support further progress on the priorities to "Improve health outcomes and tackle the

specific conditions that affect our citizens” and to “Empower citizens to be involved in their local area and be responsive to the needs of those who live there”.

- 4.2 The Care Act promotes the integration of health and social care and the use of services that prevent the need for long term care and support where possible. There is clear direction for health, social care, housing and other key partners to work together and involve and develop stronger and resilient communities. This links to the strategy of the Health and Well Being Board and the work that is being delivered by the Adult integration care programme.

5. Requirements of the Care Act 2014

- 5.1 The first phase of the Act, implemented in April 2015, introduced new duties for Councils to:

- Provide prevention, information and advice services.
- Provide assessments and support services for carers, equal to those given to service users.
- Provide advice and support planning to people who pay for their own care.
- Follow national minimum eligibility threshold for both service users and carers.
- Implement a universal service for deferred payments for residential care.
- Implement new safeguarding duties.
- Market shaping responsibilities (including market position statement and protocols regarding the duty around provider failure).
- Managing transition from Children and Young Peoples’ services to Adult Services, which includes a right to an “Adult” assessment prior to the 18th birthday.
- Provision of an advocacy service.
- Ensure that the workforce is trained and developed to meet the new operational requirements.

- 5.2 Phase 2 of the Care Act 2014 will introduce:

- A cap on the amount someone will pay towards eligible care and support to meet their eligible needs.
- A “Care Account” giving people with eligible social care needs an annual statement of their progress towards reaching the cap, whether their care is organised by the Council or not.
- Extension of the financial support provided by the Council by raising the means test threshold for people with eligible needs.

- 5.3 The changes in Phase 2 of the Care Act were scheduled to take effect from April 2016 but in July 2015 the Government announced that they would not be introduced until April 2020.

6. Progress to date

- 6.1 In many areas of work, Lewisham is already well placed to meet the legal requirements of the Care Act as the Act aims to ratify existing good practice and personalisation.
- 6.2 A Task and Finish Group with core representation from the Council has been established to oversee the implementation of the above requirements. The following work streams have been set in place to develop and implement the programme:
- 6.2.1 Assessment and eligibility: This is the area of most significant change. The four levels of eligibility under the Fair Access to Care criteria (FACs) High, Substantial, moderate & Low has been replaced with one eligibility threshold that is most comparable to the high to moderate level under FACs. Lewisham previously set the threshold for eligibility at substantial and has not seen significant growth in demand due to the new legislation. Increases for assessments have however come from those people who are discharged from hospital. The purpose of the assessment process is now to support people to identify their needs, understand the options available to them and to plan for meeting the identified needs by considering the assets the person has available to them.
- 6.2.2 Information, Advice, Prevention and Advocacy: The Act requires local authorities to provide information to people on how and where to access services and to ensure there is advocacy support.
- 6.2.2.1 The new Social Care and Health WebPages went live in August 2015. This website was co-designed and tested with service users to provide appropriate, up to date information and resources including: how to access adult social care, support to stay at home, employment, education, leisure and information to support self-care and self-help. In the last twelve months the number of people visiting the website increased by 20%.
- 6.2.2.2 We are keen to help local people make use of local services and events to help reduce social isolation and improve wellbeing. A comprehensive online Social Care and Health Directory of Services in Lewisham is now available. This section is increasingly popular and there were 18,000 visits to the directory last month.
- 6.2.2.3 Plans are in place to pilot health information and advice for people waiting for appointments at Advice Lewisham. This takes an integrated approach to delivery and focuses on prevention, self-care and self-management.

- 6.2.2.4 Work continues to develop the Single Point of Access, building on Phase I which brought together the Social Care Advice and Information Team (SCAIT) and District Nurse call service. This will improve the coordination and provision of health and social care information for Lewisham people.
- 6.2.2.5 Screening tools have been introduced to improve prevention and to facilitate referrals to other services such as the Handyperson Service. The screening tool is initially being used with people who have fallen and are known to Linkline (Community Alarm Service).
- 6.2.2.6 Despite its ever-growing use of technology and its potential to transform the way we do business to be of benefit to everyone, we need to be mindful that the Digital Inclusion Charity 'Go On' estimates that 23% of UK adults still don't possess the basic digital skills necessary to take advantage of it. For this reason Lewisham is now working with 'Go On', starting by undertaking a series of 'deep dives' or work with residents to understand more about the barriers and enablers to digital inclusion.
- 6.2.2.7 The project will launch in February 2016 and together with partners from across the public and private sector there will be initiatives such as 'Digital Zones' taking place in shops, banks and public buildings where people can discover the benefits that basic digital skills and being online can bring to their everyday life. Digital champions will be on hand to give top tips and advice or just show people how to use their Smartphone, tablet or laptop.
- 6.2.3 Deferred payments: The Act now requires all Local Authorities to provide a deferred payment scheme. As Lewisham already had a well-established scheme prior to the Act it was not expected that there would be a significant increase in demand for these arrangements and to date only 10 applications have been received.
- 6.2.3.1 The basis for these arrangements has changed however. Prior to Care Act 2014, Local Authorities were not allowed to recover the administration costs of running a deferred payment scheme from service users. Councils are now permitted, as part of the new legislation, to charge an upfront arrangement fee and interest on deferred payments to ensure that the deferred payment offer is cost neutral to the Council. They can also charge for any administration costs incurred in providing the deferred payment scheme.
- 6.2.3.2 Deferred payments have been processed to date on a pilot basis. A revised policy will be brought to Mayor and Cabinet in the New Year for formal agreement.
- 6.2.4 Safeguarding: The Care Act puts adult safeguarding on a statutory footing, and creates a Safeguarding Adults Board, which mirrors the arrangements for safeguarding children's boards. The Act also widens the breadth of the safeguarding remit including self-neglect and modern slavery into the remit of safeguarding concerns. Lewisham

already has a well-established Safeguarding Adults Board and produces a Safeguarding Annual Report.

6.2.5 Carers: the Care Act widens the responsibility of local authorities for carers, and increases the rights of carers to assessments and services. Partnership work is in place with the voluntary sector to ensure there is a range of support services available to carers. There has been a slight increase in the demand for assessments and services which is consistent with the national feedback. The commissioning team have mapped existing support services and capacity is available to ensure support is readily available.

6.2.6 Market shaping: Work is in progress to develop a market position statement which will identify further priorities for market development. As part of the work that is in progress with the care market providers we are re-commissioning the domiciliary care framework to develop an outcome based approach to the delivery of care, and are working with strategic housing partners to ensure there are more opportunities within the borough for extra care housing. We recognise that there are challenges for the whole of the care market in terms of meeting new regulatory requirements and funding the London living wage.

6.2.6.1 The adult social care budget was awarded growth of £2.2m in 2015/16 to fund increases in pay to local carers to London Living Wage levels and paid travelling time for home carers employed by agencies. Delays in award of the new home contracts has delayed spend of the element awarded for travelling time; this will not now be spent until 2016/17. The element for residential and nursing homes will be used to fund fee increases requested to cover the introduction of the National Living Wage but there are, as yet, no plans to pay LLW to all homes.

6.2.7 People with no recourse to public funds: The Care Act states that those people who have no recourse to public funds may not have their care and support needs met if those needs have arisen solely because they are destitute or because of the physical effects of being destitute.

6.2.8 Transition: The Act requires local authorities to sufficiently plan for young people receiving services moving to adulthood. This coincides with the Children and families Act 2014 to develop co-ordinated education, health and care plans for people with special educational needs and disabilities (SEND) Work is in progress across Children's and young people's and Adult services to develop this further.

7. Financial implications

7.1 Funding for implementation of the Care Act and for pressures arising from it has come from two sources.

7.2 The Department of Health has paid a grant of £1.056m to cover three elements. Underspend against the element for the implementation of

Dilnot reforms in particular has been noted in revenue monitoring reports. Spend on remaining elements of implementation of the Act will be contained within the other two elements of the grant.

- 7.3 There is also an allocation of £800k within the Better Care Fund to cover pressures arising from the Act. As demand for carers services has, to date, been lower than expected, there is likely to be an underspend against this allocation and proposals are being developed for alternative use of the funding released.

8. Legal Implications

- 8.1 The Care Act (The Act) sets out a modern and cohesive framework for adult social care in the form of a single statute. It implements the Government's commitment to reform social care legislation in the White paper 'Caring for our future: reforming care and support' (July 2012). The new legislation replaces much of the existing law and statutory guidance on adult social care.
- 8.2 The changes recommended by the Dilnot commission on the funding of care and support by introducing a cap on the costs that people will have to pay for their care will be delayed until 2020.
- 8.3 Lewisham has reviewed policies and procedures in light of the new legislation to ensure that these comply with the responsibilities of the Act.

9. Crime and Disorder Implications

- 9.1 There are no specific crime and disorder implications arising from this report.

10. Equality Implications

- 10.1 The Care Act introduces a new criterion that actively considers wellbeing, with a strong focus on enablement and promoting independence.
- 10.2 The Act is introduced to make care and support clearer and fairer, not only promoting people's wellbeing but also enabling people to prevent and delay the need for care and support, and to support carers to maintain their caring role. The reform is intended to put people in control of their lives, supporting them to pursue opportunities to realise their potential. Therefore, the Care Act will have a positive impact on our adult population. It is not expected to have any negative impacts on the younger population.

11. Environmental Implications

- 11.1 There are no specific environmental implications arising from this report.

If there are any queries on this report please contact Joan Hutton, Head of Adult Social Care on 020 8314 8634.