

## Appendix 2

### Carer's Savings Consultation Analysis

**August 2013**

#### Background

Within the City of Derby support to carers has been coordinated through a single 'front' door approach with one lead provider who is grant funded, which is currently Derbyshire Carer Association (DCA). This service provides a range of support including a carer assessment, emergency plan, and ongoing support. This entails making referrals to other services, providing advocacy or emotional support.

The Council Cabinet agreed its budget for 2013 to 2016 on 30th January 2013. A significant reduction in central government funding has led to the need for savings to be considered across a number of areas, one of the proposals was to reduce the funding set aside to support carers.

This table shows the proposed budget savings:

| Financial year (beginning 1 <sup>st</sup> April)     | 2013/14 | 2014/15 | 2015/16 | Total |
|--|---------|---------|---------|-------|
| Proposed reduction in carers funding (in £thousands) | (225)   | (16)    | (327)   | (568) |

On the 20<sup>th</sup> March 2013 Cabinet approved that consultation on the savings should take place focussed on the first 2 years proposals which had clearly identified areas of funding reductions.

Proposals for delivering 2015-16 savings (identified as £327,000) have not yet been formulated. It is recommended that the Carers Strategy Board are involved in developing and assessing proposals to deliver these savings over a more protracted time period. Findings from this consultation have raised how valued the carers feel the core service is in supporting their needs and future outcome of consultations and the EIA will be brought to Council Cabinet for decision at a later date.

#### Consultation methodology

A range of methods have been used to seek consultation from carers and customers. The consultation ran from 21<sup>st</sup> March to 13<sup>th</sup> June and covered the savings linked to the carers personal budget, internal cost savings, voluntary sector funding and the short term funding linked to the welfare rights post.

As part of their role Derbyshire Carers Association support a group of carers known as Carer Ambassadors who provide support on partnership boards, consultations and decisions linked to carer services. This group wanted to take the lead role in the consultation plan.

The consultation included;

- Forum meetings coordinated and managed by the Carer Ambassadors

- The submission of comments collated by a carer lobby group provided initially to Cabinet in January.
- A carer open forum meeting with the Leader of the Council and the Cabinet Member for Adults and Health.
- Questionnaire feedback linked to the voluntary sector proposals
- Feedback following a mail out to all carers on the Derbyshire Carer Association data base (approx 2,000 carers) which provided the information on the proposals and an opportunity to provide feedback via the questionnaire, telephone or email.

This report also includes data from consultation with carers completed in October 2012, commissioned by the Department of Health (DH) and the Care Quality Commission (CQC). This survey was sent to carers who had received support over the previous 12 months to understand their experience in receipt of services to ascertain if they are helping them in their caring role and their life outside of caring and the carers perception of services provided to the cared for person.

## **Key findings**

### **On the proposed reduction of the carers personal budget by £125,000 in 2013-14**

Carers felt that the services currently provided by Derbyshire Carers Association gives them a lifeline and the knowledge there is someone there if they need them.

Carers expressed fears about the level of support which will be available in the future to support them.

Carer organisations feel the support to carers is vital therefore reducing carer support contracts makes this medium & long term vision unsustainable.

The consultation found that most carers are women, and most of these are older people. For many of them, who have not been able to build up pensions, a Carers Personal Budget is the only money they are able to obtain for themselves.

Concerns were raised about people on low incomes who have found the carers one off personal budget valuable in supporting them to access a break or to purchase items classed as a luxury.

Carers believe that having a personal budget from the Council helps them to have private time which allows them to recharge their batteries and gives them the strength to continue caring.

A suggestion provided at the open meeting was for all carers to be given the same Personal Budget amount as this would be fairer and would also reduce administration.

**On the proposals to reduce Council staffing from within the integrated commissioning team (saving £12,145)**

There were no specific comments provided linked to this proposal.

**On the proposal to end the temporary funding for a Carer specific [post in the Derby Advice service (saving £20,858)]**

Carers fed back that they feel under pressure due to cuts, not just cuts to Carers directly but also to the ones they care for. Most of the cared for are having welfare benefits reassessed in the current Welfare Reform changes. The uncertainty surrounding these changes is adding to carers' fear for the future.

Carers would however support efficiency savings by this proposal so long as the following minimum standards could be maintained.

- Urgent enquiries are dealt with immediately by Derby Advice staff and non-urgent enquiries are dealt within 6 weeks.
- Customers are seen by appointment at the Council House or if needed by a home visit.
- Derby Advice maintains a good level of expertise and gives good advice to Carers.

**On the proposals to reduce grant to voluntary sector organisations supporting carers (saving £40,500)**

Overall feedback related to the loss of the voluntary sector organisations potentially limiting the number of new carers being identified and this in particular doesn't support the need to identify more carers from BME groups or some of the harder to reach areas of the community.

There was a view that current carers' services are already not responsive enough to the cultural or language needs of people from Black and Minority Ethnic communities.

In relation to the specific grants being proposed to be reduced -

Age Uk Derby and Derbyshire - £19,000 - This funding pays for a support service offered via the 30 GP practices and the local Hospitals with an established referral pathway and understanding of the support available to carers. Age Uk provided feedback via the questionnaire stating they felt that their service is vital because it supports the early identification of carers and supports hospital discharge planning. They have stated they would not be able to sustain this service with reduced funding.

Disability Direct (DD) carer service- £16,500 - The grant funding provided to DD, has been used to identify carers within the community with a specific emphasis on the harder to reach groups within the city. No specific feedback was obtained on this service through the consultation.

Crossroads- £5,000 - This service provides direct care so that carers can attend appointments or engagements, or short breaks. The funding agreement makes 3192

hours of care available per annum (current take up is approximately 1784 hours per annum) The proposed funding reduction would relate to a 12.5% loss of service reducing the available hours to 2793 per annum.

**On the proposals to reduce consultation activity (saving £2,125)**

There were no comments or feedback relating to this proposal

**On the proposals to reduce funding in council budgets that support assessment and support planning (saving £40,372)**

There were no comments or feedback relating to this proposal

**This report covers the following elements:**

1. Forum meetings with carers
2. Questionnaire finding for voluntary sector services
3. General comments and email feedback
4. Carer open meeting
5. Analysis of the national Carer's survey

## **Consultation analysis**

### **1. Forum Meetings with carers**

The forum meetings were chaired by the Carer Ambassadors and held at the Council House, 55 carers were invited of whom 11 attended 2 focus groups on the 22<sup>nd</sup> and 26<sup>th</sup> April at the Council House.

#### In relation to the saving to the Derby Advice role

- Carers are happy with the service at the time of the focus groups but fear that cuts will mean that the time taken and the quality of advice they are given will deteriorate in future.
- Everyone in the focus groups had a good experience of Derby Advice.
- In all cases Carers found out about Derby Advice by word of mouth and Derbyshire Carer Association (DCA).
- Due to isolation and being absorbed by caring duties Carers don't receive the help they need.
- Carers need independent advice to cope with a complex welfare system.

#### In relation to the carer annual Personal budget proposed reductions

- Carers couldn't understand why in 2011/12 average personal budgets equalled £371 whilst in 2012/13 they equalled £137.00 when in both years the budget was under spent.
- Carers found the award of a £50.00 personal budget an insult.
- Carers are angry because they feel the Council deliberately under spent the budget without being open and honest about it.
- Carers don't approach the Council directly for services.
- 'Many Carers don't get days off because their loved ones require constant care. Many Carers don't take holidays because of their concern for loved ones. They feel a responsibility that they find difficult to pass on to strangers. This makes private time for Carers so important. Private moments allow the carer to regain your humanity'.

#### General comments:

Carers are guided by the belief that most people want to be cared for at home by people they know and love. Living at home allows us to follow sacred modern values of individual freedom, personal control and self-realisation.

The Council is unsuccessful in communicating with Carers. Providing the means of communicating information such as a web site is not the same as conveying information successfully. Word of mouth and contact with voluntary and charitable groups active in the community is the way Carers find out about Council Services. It appears to be a cultural phenomenon for which the Council cannot be entirely blamed. Councillors should take advantage of this when preparing budgets and planning services.

### Conclusion from the forum meetings

- Carers feel that they are the unpaid lead member of the healthcare team. They would like to be recognised as the vital member of a home-care system which saves the Country millions of pounds.
- All the Carers in the focus group will continue to care for their loved ones no matter what the Council do.
- What Carers fear is that they will not be fit enough to continue to act as a Carer. They do not express any fear for themselves or worry about themselves at all. What troubles them is what will happen to their loved ones if they have an accident, become unwell or old and infirm. This fear can often cause ill health.
- Carers fear for the future at a time when they are no longer fit enough or well enough to look after their loved ones. This is a matter the Council should consider. Benefits in the future are difficult to predict with accuracy. Costs are easy to calculate. On average every Carer who looks after a loved one at home does so for a third of the cost to the Council of full time residential care.

## **2. Questionnaire findings in relation to Voluntary sector services**

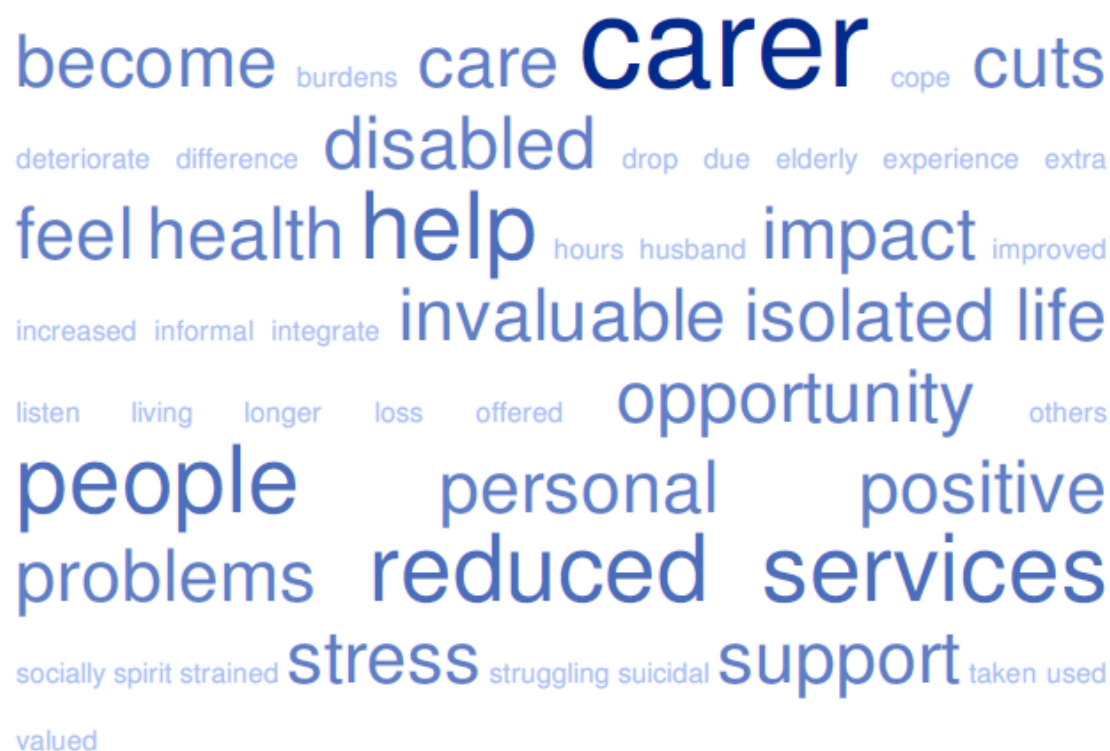
There are 5 organisations which support carer services, of these 2 responded via the questionnaire and 1 by letter (attached at the end of this report).

The organisations who responded felt that the service to carer was invaluable and DCA raised concerns in relation to 2015-16 proposals.

From the questionnaires to the public there were 10 responses. The table below shows the service areas:

| <b>Providers</b>                               | <b>Responses</b> |
|--|------------------|
| Crossroads                                     | 4                |
| Disability Direct                              | 4                |
| Derby and Derbyshire mental health carer forum | 2                |

Respondents were asked about the impact on them if services were reduced. A word cloud has been used to illustrate the main areas of comment.



### Importance of service areas

Respondents were asked to rate the importance of 9 areas of service to the well-being of Derby residents. Table 2 shows the 9 areas.

|  |
|--|
| A. Carer's provision. The services are Age UK Derby & Derbyshire Carer Connect, and Disability Direct Carer's Support.   |
| B. Carer's provision. The service is Crossroads Care respite support.  |
| C. Focus Line & Derbyshire Voice   |
| D. Access to community opportunities. These services include the provision of social, leisure and education, e.g. lunch clubs.   |
| E. Responding to health and social care risks and preventing deterioration. These services include interventions for victims of crime, activities that prevent a frail older person from falling |
| F. First Contact. This service supports partnership working to link vulnerable adults to a range of different services appropriate to their needs.   |
| G. Information and advice. These services support customers to access preventative services in the community that will help them remain independent.   |
| H. Advocacy. These services provide support for individuals to express their views, meet their needs or access their rights.   |
| I. Infrastructure support. These services provide support to voluntary and community organisations to assist them to work more effectively, and represent their views.                           |

All respondents rated all of the 9 areas as important, in relation to A and B the following shows the key elements noted.



### 3. General Comments and email feedback

In January when the Cabinet announced the savings to the carers budget, a carer lobby group was set up, to provide some details of the impact the proposed savings would have on carers.

The group contacted all the recorded carers from the DCA data base and surveyed the general public who they had contact with.

The lobby group asked;

Public: 'Carer services are important because...'

Carers: 'Carers support is important to me because...' and 'without the support, the impact on me would be....'

The public question received 91 comments. These mainly cover the need to provide support to carers and the importance of the support networks for carers to help them maintain their caring role and avoid carer breakdown.





The carers questions received 75 responses in relation to 'carers support is important to me because.....

The question, 'without the support, the impact on me would be....', received 93 comments.

The carer comments can be divided into 4 themes;

- The importance of the emergency plans and the personal budgets and the importance of taking a break
- The value of the Support networks from other carers, having someone to reduce the isolation
- Good advice and information
- General support from DCA, someone there when needed



## Email feedback from carers

All 2,000 carers from the DCA database also received information following the March Cabinet meeting, there were only 4 replies.

The following are extracts form the email;

“Understanding the demands that will be placed on a carer, as a result of taking on the carer role and how this is likely to progress over time. There is always some view as to how a “patient’s” condition will progress over time, albeit with uncertainty, but there is little emphasis on how that will reflect in the demands placed on the carer. I think there is lots of information around in social services, the medical profession and in the voluntary sector that could be pulled together to help with this – but it’s no mean job to do this. We should recognise however that being a carer is a job, and if it was advertised I expect it would need to read something like I have written in the attachment – included as an appendix to this document. (I wrote this for another purpose) IF this was a job in industry, no-one would be allowed to do it without appropriate training and support”.

“The points I have taken from my experience are, my ignorance as to what is available to support my carer needs, and even when I did know, my reluctance to access support. I don’t think I am unique in this,

- Me wanting to carry on, being self-sufficient
- The progressive rather than sudden increase in the burden of caring, essentially this meant I did not appreciate when I needed to stop doing lifts, transfers etc.
- My delay in talking to the GP
- Me not really appreciating the extent of support that was available and how to access it.
- I was probably too pre-occupied in making the best of today rather than putting in place things needed for a better tomorrow.”

“The stress of caring became too much for me to cope with and I gave up my employment. When I left work I felt totally let down by everyone until I had a visit from a worker from DCA who made me feel valued again. You have no idea how much I appreciated the knowledge that help was at hand should I need it .... and my god how I did ....”.

“I know that I would struggle emotionally if I thought that carers’ support was being cut because even though I don’t need it now, I know several people who do and with the closure of day centres it is more important now than ever that that support is available as and when it’s needed”.

“ALL carers need to feel valued, after all £58 a week is no substitute for a decent living wage and it would cost a GREAT deal more if my sister was in care.”

“I have valued very much the personal time taken by a Care Co-ordinator in conducting a carer's assessment on my situation and needs, through Think Carers.”

#### **4. Carer open meeting**

An open meeting was held on the 11<sup>th</sup> July at the carers request to provide an opportunity for carers to ask the Leader of the Council and Councillor for Adults and Health.

Comments below are not verbatim. They focus on recording the questions and challenges that came from carers at the meeting.

#### Comments in relation to the budget proposals

- The Carers Budget should be increased not reduced.
- Cutting carers services is a false economy because if carers are not supported to cope then the Council will have to pick up the cost of care.
- Many carers do not recognise themselves as carers and therefore do not ask for help until it is too late. Cutting services that raise carers’ awareness of their entitlement to help will create a self-fulfilling prophecy in terms of reducing demand in spite of real need still being out there.
- Cutting carers services means that the Council is targeting the most vulnerable people

- Many carers provide high levels of support for years without getting the chance to take a break.
- The Council should make better use of the voluntary sector to deliver better services at a lower cost
- The Council should not engage in “passing the can” and should take overall responsibility for carers support rather than delegating too much to other organisations.
- The Council should provide information about the percentage of carers support that is proposed to be reduced, compared with the percentage in other areas of Council service.
- Most carers are women, and most of these are older people. For many of them, who have not been able to build up pensions, a Carers Personal Budget is the only money they are able to obtain for themselves.
- Some carers are only given a Personal Budget of £50. This is insultingly low in terms of the amount of support that they actually provide.
- All carers should be given the same Personal Budget amount as this would be fairer and would also reduce administration.
- The Council needed to take into account the particular needs of carers with mental health problems, which can often be caused by caring itself

## **5. National Carer survey**

Councils were required to undertake a consultation with carers in October 2012, the Department of Health (DH) and the Care Quality Commission (CQC).

The survey was sent out by the council to carers 18+ who had received some support from social services in part or through a 3<sup>rd</sup> party during the previous 12 months.

Additional questions were added for local purposes and it is these which will provide the following key facts as evidence of the carer services being used by carers.

The survey was sent to 945 people and received a response rate of 378 which is 40%, providing a confidence level of +/- 3.9%

The following feedback supports the Derby model to provide a 'front ' door ethos for carers, 67.9% used Derbyshire Carers Association (DCA) to access a carer assessment, 46.7% accessed the support to complete an emergency plan and 41.1% used DCA for ongoing carer support.

In general terms the survey showed 63.5% of carers had used DCA and 38.9% support from carer groups for someone to talk to in confidence.

The majority of carers 79% are over the age of 55, however it needs noting that 21.9% of respondents feel unable to access paid work due to their caring responsibilities.

The majority of those being cared for are over 65 and 57% of those who are carers are also over 65. The carer respondents stated that 26% had a physical impairment and 29.7% a long standing illness. This data links to some of the carer comments about their own health concerns and the need to ensure the carer keeps in good health.



## Letter from Derbyshire Carer Association



Jackie Straw  
Strategic Commissioning Manager  
Council House  
Corporation Street  
Derby  
DE1 2FS

White House, The Willows, Slack Lane,  
Ripley, Derbyshire DE5 3HF  
Tel: 01773 743355  
Fax: 01773 512288  
E-mail: [derbyshirecarers@btconnect.com](mailto:derbyshirecarers@btconnect.com)  
[www.derbyshirecarers.co.uk](http://www.derbyshirecarers.co.uk)

11<sup>th</sup> June 2013

Dear Jackie

### Savings Proposals for Carers Services

I write on behalf of Derbyshire Carers Association in reply to the Councils latest consultation on carers services. We work closely with the Council to support carers and understand the financial pressures that the Council is facing but remain concerned that any reduction in support for carers will ultimately prove to be a false economy, costing the Council more than is saved in the short term.

Firstly, we welcome the additional consultation on the third year (2015-16). You will recall that we were very concerned that carers could not be properly consulted as there was so little detail shown explaining which services the proposed saving of £327,000 actually represented. We look forward to receiving this detail in due course.

We remain concerned about the reduction in funding available for Carers Personal Budgets. It is generally accepted that the number of carers will continue to grow due to demographic changes and because the greater national awareness of carers is also leading to more carers coming forward. Therefore we remain concerned that the reduction in funding will not allow this support to reach all the carers who need it. In 2012/13 1082 carers were supported with a budget of £148,400 and clearly going forward with a budget figure of only £125,000 either less carers will be supported or the amounts that they receive will be cut.

We believe that the cuts to voluntary sector partners who were working with us to identify carers (Age UK and Disability Direct) is a false economy as we firmly believe that identifying and supporting carers early in their caring journey, ultimately saves money as carer breakdown is prevented.

We very much hope that the plan to offer carers financial information and support within Derby Advice rather than from a dedicated Carers worker based at Derby Advice, does give carers the support they need to maximise their money. We know that many carers face financial hardship, often as a result of giving up work to care for a loved one.

We trust that the Council has considered the impact of cuts to its own services which support carers and that the reduction in Council staffing within the Integrated Commissioning division and reduction in funding in Council budgets that support assessment and support planning, will not see carers facing long waits for services. When carers finally come forward and ask for help it is vital that they receive speedy support. This enables them to continue caring and as now generally accepted this ultimately saves the huge expenditure that results when carers are no longer able to care.

Respectfully we ask the Council to think again about the savings it proposes to make to carers services, bearing in mind that the amount of money spent supporting carers is a tiny fraction of the savings that carers produce for Derby by supporting their cared for person at home, rather than using formal services. We genuinely fear that reducing support for carers will see an increase in carer breakdown and crisis intervention which comes at significant cost.

Yours sincerely



Helen Robinson  
Chief Executive Officer