

**Report for:** Cabinet Member Signing, October 12<sup>th</sup> 2017

**Item number:**

**Title:** Draft joint Council and Haringey Clinical Commissioning Group Respite Care Policy for Children, Young People and Adults in Haringey for permission to consult with a range of stakeholders

**Report**

**authorised by :** Charlotte Pomery, Assistant Director Commissioning

**Lead Officers:** Sebastian Dacre, Commissioning Manager

**Ward(s) affected:** All

**Report for Key/**

**Non Key Decision:** Key Decision

## **1. Describe the issue under consideration**

- 1.1 Haringey Council and Haringey Clinical Commissioning Group are committed to enabling all residents to have a good start in life and to live as independently as possible with the right support, achieving their stated outcomes whether they are carers, young carers or cared for people. This paper proposes that consultation is carried out on a draft Respite Policy which is intended to provide clarity for all carers, users of all ages and practitioners to ensure that those with eligible needs receive the appropriate respite support.
- 1.2 Both carers and those with care needs have rights set out in law and described in the guidance that the Council and CCG have to consider, specifically: The Care Act 2014, the Children and Families Act 2014 and The National Framework for NHS Continuing Healthcare and NHS-funded Nursing Care 2012.
- 1.2 These pieces of legislation and guidance provide the framework for Local Authorities and Clinical Commissioning Groups (CCGs), as well as partners such as Mental Health Trusts, Acute trusts and the community and voluntary sector, to ensure that all partners are treating the needs of carers and the cared for person with parity, promoting their wellbeing and supporting their choice and control. There has also been a requirement to strengthen support for carers, including an emphasis on the importance of respite care. This also includes the requirement for the needs of young carers to be identified and addressed.
- 1.3 The draft respite policy (attached at appendix 1) is intended to provide clarity for all carers, users of all ages and practitioners to ensure that those with eligible needs receive the appropriate respite support.

- 1.4 This report sets out the Council's intentions for consultation (appendix 2) with a wide range of stakeholders on the draft joint Council and CCG Respite Care Policy for Children, Young People and Adults in Haringey before the final Respite Policy is presented to Cabinet for approval next year. It outlines how the Council and the CCG will move towards a consistent and equitable way of supporting people in the provision of respite across health and social care.
- 1.5 This policy forms part of a suite of documents which the Council is in the process of refreshing to ensure that its key priorities and outcomes – that is, to give every child the best start in life and to enable all adults to lead healthy and fulfilling lives, as set out in the Corporate Plan – are supported by clear policy positions.

## **2. Cabinet Member Introduction**

- 2.1 I am delighted to introduce this draft Respite Policy for consultation across Haringey. The policy is a joint document between the Council and the CCG and reflects the strong strategic and working relationships between the two partners.
- 2.2 We fully acknowledge the significant contribution which carers make to supporting people with care needs of all ages to lead independent and fulfilling lives. We see on a daily basis the difference that the energy, dedication and enthusiasm of carers make in the lives of local residents who need more support. This policy is aimed at providing clarity about the respite offer which would be available both from the Council and from the CCG.

## **3. Recommendations**

- 3.1 To approve the draft Respite Policy for consultation with stakeholders for a period of 56 days (8 weeks).
- 3.2 To report back to Cabinet on the responses to the consultation undertaken and for a decision on the proposed Respite Policy.

## **4. Reasons for decision**

- 4.1 Haringey Council is committed to supporting carers, young carers and the cared for person to access the right respite care in a way that supports carers, contributes to outcomes for the cared for person and aligns with the Borough Plan. The Council is also committed to closer integration between health and social care. This policy outlines Haringey Council and Haringey Clinical Commissioning Group's approach to respite care which has the aim of maintaining or improving carers' well-being and, in line with the Care Act 2014, the Children and Families Act 2014 and The National Framework for NHS Continuing Healthcare and NHS- funded Nursing Care 2012 treating carers and the cared for person equivalently.
- 4.2 Haringey Council and Haringey CCG recognise the significant contribution that carers – whether family members, young carers or parent carers – make to the

care of those with a range of needs who are thereby able to remain living at home for longer, preventing the need for institutionally based care for as long as possible.

- 4.3 The current council arrangements for respite care do not rest upon a single clearly stated policy position. Current practice is inconsistent with local variations in different service areas.
- 4.4 The CCG also does not have a single clearly stated policy position.
- 4.5 The aim of a single respite policy is clearly to set out and define what respite care is and isn't, to provide a clear pathway for identifying need and the provision of respite and to set out how charging applies to respite thereby providing clarity and consistency for all carers and cared for across Haringey.

## **5. Alternative options considered**

- 5.1 Alternative options considered were separate respite policies for children, adults, health and social care. This option was not taken forward as this would have been a missed opportunity to encourage joined up working across service boundaries.
- 5.2 The contents of the Policy reflect the wider strategic aims of the Council to give all children the best start in life and empower all adults to live healthy, long and fulfilling lives and also to contribute to the closer integration of health and social care. The option of maintaining the current model for respite was not considered to meet these wider strategic aims due to the lack of consistency across service areas.

## **6. Background information**

- 6.1 The draft Respite Policy seeks to bring into one place arrangements for carers and the cared-for person with regard to respite care and to ensure consistency of approach across the Council and the CCG. This Policy does not affect eligibility for services or support.
- 6.2 Currently, respite is offered inconsistently and depends on practice in each individual service area. There is currently no single policy in place which sets out what respite is and how it is identified, funded and delivered. In some areas respite is offered only in an emergency without the needs of the carer having been assessed.
- 6.3 The policy offers a single approach to respite across service areas for carers and the cared for person. The aim is to ensure that the service received and the user experience are consistent and that the most efficient, effective and suitable respite assistance is provided.
- 6.4 The changes proposed in the draft Policy should ensure that respite care is proactive rather than reactive. This will better support carers' wellbeing as the respite care will be planned and delivered in a way that meets the needs and

aspirations of the cared-for person. Planned respite care will ensure that the correct respite care is provided for the cared-for person and should reduce the risk of breakdowns in the provision of respite care.

- 6.5 A number of carers, across a range of service areas, have been engaged through existing carers' meeting and forums about the draft respite policy. The discussions centred on what respite care is and on the principle that the service is for the cared for person. The engagement focused on the broad themes of the policy but carers have not had the opportunity to comment on the detail of the draft Policy. Carers were in favour of a joint policy across health and social care.
- 6.6 Carers engaged were in agreement that a policy setting out what respite care is and how it is provided is needed as it will provide clarity for them. There were no major concerns expressed in relation to the draft policy.
- 6.7 The engagement carried out to date has also served the purpose of raising awareness of the draft Policy and the proposal for consultation over the Autumn period.
- 6.8 Following the proposed consultation, the amended Policy will be presented to Cabinet for approval.

## **7. Contribution to strategic outcomes**

- 7.1 The Corporate Plan, Building a Stronger Haringey Together, sets out the vision and priorities for the Council over the three years running from 2015 – 2018. The draft Respite policy will deliver outcomes in both Priority 1 and Priority 2 of the Plan to give all children the best start in life and empower all adults to live healthy, long and fulfilling lives and also to contribute to the closer integration of health and social care.

## **8. Statutory Officers comments (Chief Finance Officer, Procurement, Assistant Director of Corporate Governance, Equalities).**

### **8.1 Finance**

- 8.1.1 The council's total spend on respite for 2016/17 was £1.38m and the forecast spend for 2017/18 is £1.14m.
- 8.1.2 We would always recommend that value for money is obtained through the best use of resources ensuring that efficiencies and savings opportunities are always explored fully.
- 8.1.3 In applying a consistent approach, the allocation of respite is likely to have a dampening impact on spend as decisions will be based on carers needs as opposed to historic entitlement.

8.1.4 At this stage in the process it is noted that the policy is in draft. When the final proposal is submitted it is to be accompanied by an analysis of the full financial impact.

## 8.2 Procurement

Strategic Procurement notes the contents of this report and will seek to work with the service units to incorporate any new policy into future procurement activity relating to respite provision.

## 8.3 Legal

8.3.1 The proposal is for a respite policy across children and adult social care and health. It could affect existing arrangements and expectations for the provision of respite care. There is a common law duty on the Council to consult with service users and other stakeholders that are likely to be affected by the proposal. The consultation must take place at a time when the proposals are still at their formative stages. The Council must provide the consultees with sufficient information to enable them properly to understand the proposals being consulted upon and to express a view in relation to it. The information must be clear, concise and, accurate and must not be misleading. The consultees must be given adequate time to consider the proposals and to respond.

8.3.2 The Council must give genuine and conscientious consideration to the responses received from the consultees before making its final decision on the proposals.

8.3.3 As part of its decision making process, the Council must have “due regard” to its equalities duties. Under Section 149 Equality Act 2010, the Council in exercise of its adult care and support functions, must have “due regard” to the need to eliminate discrimination, advance equality of opportunity between persons who share a protected characteristic and those who do not, foster good relations between persons who share a relevant protected characteristic and persons who do not share it in order to tackle prejudice and promote understanding. The protected characteristics are age, gender reassignment, disability, pregnancy and maternity, race, religion or belief, sex and sexual orientation. In line with its equalities duties, the Council must undertake an Equality Impact Assessments (EqIA) of the proposals on the protected groups. The Council is required to give serious, substantive and advance consideration of the what (if any) the proposals would have on the protected group and what mitigating factors can be put in place. This exercise must be carried out with rigour and an open mind and should not be a mere form of box ticking. These are mandatory consideration. The outcome of the consultation on the proposals together with the analysis of the EIA must be considered before reaching a final decision on the proposals.

## 8.4 Equalities

8.4.1 A draft Equalities Impact Assessment has been developed and is attached as Appendix 3 to this report .

8.4.2 Further information about carers and the cared for person, including their protected characteristics, will be collected during the consultation. The consultation will also allow stakeholders to provide feedback, which will be taken into consideration when shaping the final Respite Policy.

## **9. Use of Appendices**

9.1 Appendix 1: Draft Respite Policy

9.2 Appendix 2: Draft consultation questions

9.3 Appendix 3: Draft Equalities Impact Assessment

## **10. Local Government (Access to Information) Act 1995**