

# Adult Social Care Scrutiny Commission Report

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## **Support for Carers**

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Lead Member: Cllr Sarah Russell

Lead Strategic Director: Laurence Jones

Director: Kate Galoppi

Date: 14 November 2024

## **Useful information**

- Ward(s) affected: All
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- Report version number: 2

### **1. Summary**

- 1.1. The purpose of the report is to provide an update on carers work in the City and across Leicester, Leicestershire and Rutland ICS and set out our priorities over the next 12 months.
- 1.2. The report will focus on the following key areas:
  - 1.2.1. Number of carers supported, and type of support provided.
  - 1.2.2. Carer Services, including the commissioned Carer Support Service and projects funded through the Accelerating Reform Fund (ARF).
  - 1.2.3. Carer identification.
  - 1.2.4. Carers Strategy and Review of the Carers Delivery Group (CDG)
  - 1.2.5. Challenges and opportunities for the future.

### **2. Recommended actions/decision**

- 2.1. The Committee are recommended to:
  - a) note the current work that is being undertaken to support carers
  - b) to provide comment and feedback on the current arrangements
  - c) to approve the planned engagement and consultation with the Carers Delivery Group and wider stakeholders, to review the governance and reporting arrangements for the Carers Delivery Group.

### **3. Scrutiny / stakeholder engagement**

- 3.1. The Accelerating Reform Fund care projects are being co-produced and the first meetings with carers to deliver the projects are taking place in November 2024.
- 3.2. Engagement and consultation with key stakeholders, including members of the Carers Delivery Group (CDG) is proposed as part of the strategic review of the governance and structure of the Carers Delivery Group (CDG)
- 3.3. The new carers strategy for 2026 onwards will be co-produced with carers and partners across LLR. The Carers Delivery Group, which includes representation from carer groups across LLR, will be instrumental in supporting the co-production.
- 3.4. New carer practice guidance is being developed co-productively with carers and social work teams.

## **4. Background and report information**

### **4.1. Introduction**

A carer is someone who looks after a family member, friend or neighbour who could not manage without their help. According to the Office for National Statistics Census 2021, there were 26,527 unpaid carers in Leicester, but there could be many more.

We recognise the significant and vital contribution carers make in our communities, and we value the support carers offer to the person they care for, which often prevents, reduces and delays the need for more formal care services from adult social care.

### **4.2. Numbers of carers supported.**

#### **4.2.1. Carers supported by adult social care 2023/24.**

In the financial year 2023/24, adult social care directly supported 796 carers. Of these 603 had a carers assessment, the remaining 155 were referred to other sources of support, including to the carers support service.

- 502 had a joint assessment with the cared-for-person.
- 101 had a separate assessment from the cared for person.

As a result of a carers assessment the support provided included:

- 160 carers received carer respite, this is support to the cared for person and could be additional home care hours or a short break in a residential care home.
- 38 carers received a one-off direct payment.

#### **4.2.2. Carers supported by the Carer Support Service (Age UK)**

Over the last 3 years the Carers Support Service has provided support to approximately 3,000 carers, set in context the 2021 Census for Leicester identified 26,527 unpaid carers (aged 5years +) are living in the city. Unsurprisingly, demand for the service continues to be high and at the start of the financial year April 2024, 724 carers were deemed to be actively receiving support. In the period April-June 2024, an additional 116 carers were referred to the service.

The type of support provided is varied and includes advice and information, support with carer benefits and finance, drops ins, peer support groups, and carer learning and training.

The majority of carers supported are female (69%), which is not surprising given that 59% of carers are women according to the 2021 census, and female carers typically provide more hours of caring than males. It is also interesting to note that 69.9% of respondents to the 2023/24 Survey of Adult Carers in England were female.

The highest proportion of carers supported are over 60 (59%). This is a slightly older age profile than that of the age profile of carers in England according to the 2021 Census. However, it should be noted that the hours of care provided increase significantly in older age groups of carers. Younger carers are also more likely to be balancing their caring responsibilities with full-time employment, presenting challenges in accessing support services. Interestingly, approximately

58% of respondents to the 2023/24 Survey of Adult Carers in England were aged over 60.

64% of people being cared for are over 65. This is very close to the age profile of cared for people in England, with 66.5 % being aged 65 and over (2023/24 Survey of Adult Carers in England).

The diversity of the city is reflected in the reach of the service with around 50% of carers identifying as Asian or British Asian, and 36% white British. For detailed breakdown of demographics see appendix 1.

### **4.3. Carer Services**

#### **4.3.1. Carer Support Service**

The carers support service is delivered by Age UK and the new recommissioned service commenced 1<sup>st</sup> July 2024. The contract value is £770k over 5 years (£154k pa) and the service is jointly funded with health who currently contribute 16% of the funding through a section 256 arrangement. The new service was developed in collaboration with local carers and carer feedback and how the service is performing will be an integral part of the ongoing contract monitoring and review. The service supports carers to achieve their personal outcomes using a strengths-based approach. It supports all carers over the age of 18 regardless of who they care for. This includes carers who live out of area but care for someone resident in the city as well as parent carers of children under 18.

The service offers a comprehensive information, advice, and guidance service as well as financial/benefits advice for carers. They also offer a regular programme of carer learning and support sessions including mindfulness and wellbeing, arts and crafts, neurodiversity, healthy eating and mental health and physical health. It also runs regular peer support and group support sessions which are well attended.

The support service is a crucial part of the support available to carers across the local place-based system and is preventative in nature. Whilst it is difficult to anticipate how much this service contributes in terms of cost savings in helping to prevent carer breakdown, it is recognised that the carer support service alleviates pressure on adult social care by supporting carers with advice and information, financial/benefit advice, and peer support and also saving social worker time with supporting carers to develop their contingency plans.

#### **4.3.2. Outcomes for carers**

The carers support service contracts sets out a number of qualitative key performance indicators that the service is required to measure to demonstrate the impact the service has on delivering successful outcomes for carers. Age UK use an outcome star to record how a carer feels at the initial point of contact with the service, this is then measured again at 3-6 monthly intervals and on leaving the service. Measures include “feeling more confident and knowledgeable in my caring role” and “feeling more able to manage and sustain relationships with family and friends”. This has been consistently high over the last 2 years with people reporting on average, between 80-100% improvement after receiving support. More details on these measures are included in Appendix 1.

#### **4.3.3. Accelerating Reform Fund**

In January 2024 the Department of Health and Social Care (DHSC) launched the Accelerating Reform Fund (ARF) focused on embedding and scaling approaches to transform care and support including for unpaid carers, who play such a vital, selfless role in our society. This funding is £96,000 and split across 24/25 and

25/26. Funding is allocated to local authorities through ICS (Integrated Care System) geographies to encourage collaboration between local authorities and local health boards and local authorities are expected to work in partnership with others, including care providers, the NHS, the voluntary and community sectors, people who draw on care and support and unpaid carers. As part of a Leicester, Leicestershire and Rutland consortium we received funding for 2 projects:

- To support carer identification and contingency planning
- Hospital Discharge Grant for carers

County are the lead authority in the consortium and funding runs from March 2024 - Dec 2025. Work on both projects is currently ongoing.

4.3.4. The earlier in their caring journey the carer is identified, and the contingency planning conversation happens, the better prepared carers are and the less likely they are to require costly emergency interventions later down the line. The ARF funding is being used to work with carers to develop a contingency plan template across LLR that can be shared with key organisations, e.g. hospitals, GP, social care, to support carers feel confident and better able to manage their carer responsibilities. This work will be supported by a LLR wide promotional event, Spring 2025, to raise awareness of the importance of early carer identification and contingency planning.

4.3.5. The hospital discharge grant for carers will run across city and County but each LA area will administer its own scheme. It is anticipated that the funding will be £36k, although this is still to be confirmed, and will be administered by our Carers Support service. The aim of the discharge grant is to provide carers with additional support in the form of a one off grant, that could be used to unblock barriers to hospital discharge and potentially 'speed' it up, as well as ensuring that the carers needs are advocated for in the discharge process.

#### **4.4. Carer Identification**

4.4.1. Carers don't always recognise themselves as carers, and this is especially highlighted when caring happens within the family, for example a parent caring for a child or husband caring for his wife. This is one of the reasons why carer identification is challenging. Priority 1 in the current carers' strategy is 'carers are identified early and recognised'.

4.4.2. Social media awareness raising happens throughout the year, but particularly during carers week in June and Carers Rights day in November. We know this helps identification and we have co-produced social media assets with local carers having their pictures taken in local places in order to try and support carers to self-identify.

4.4.3. The Carers Support Service plays a key role in the identification of carers and it continues to work with other partners, including health, hospitals and VCSE organisations to promote the service to people they support who may not identify as carers. The new contract has recognised that more needs to be done around the promotion of the service to support carer identification and an enhanced outreach offer will now be delivered as part of the new service. As part of the new outreach offer the service will actively promote the LLR carer

passport scheme which is currently operating in Leicester but not widely recognised.

- 4.4.4. We continue to work closely with other LLR partners, particularly the Leicester, Leicestershire & Rutland Integrated Care Board (ICB) to ensure that identification of carers and the pathways for carers within organisations are aligned as far as is possible. The VCSE Alliance is supported by the ICB and the ARF projects referred to within this report will use the Alliance to promote carer identification and contingency planning.
- 4.4.5. The ARF hospital discharge grant will support better carer identification and consideration of their needs when their loved one are discharged from hospital.

#### **4.5. Carers Strategy and Review of the Carers Delivery Group (CDG)**

- 4.5.1. The current carers strategy, which sets out how we will support carers, runs until the end of 2025. While we continue to develop support for carers, feedback confirms there is more to do, particularly to improve our offer to carers, through assessment, support and access to services that enable them to take a break.
- 4.5.2. A new 5 year strategy will be developed co-productively with carers over the next 10 months. As part of this work a strategic review of the Carers Delivery Group (CDG) and the governance arrangements is being undertaken. The CDG is an LLR wide board that supports the implementation and delivery of the strategy and includes representation from social care, health, UHL, carers groups and people with lived experience.
- 4.5.3. The aim of the governance review is to ensure that we have a governance structure in place across the ICS which moves beyond individual organisations to systems working together with purpose and focus driven by the carer voice, to improve the lives of unpaid carers. The ICB have offered to fund an independent researcher to do the work needed to review the CDG over the next few months. They will look at current reporting mechanisms, how we involve carers in strategic decision making, and how we ensure the group/board/meeting is fit for purpose in managing and influencing strategic change and improvements for carers so we can move the carers agenda forward as an Integrated Care System. Once the review is concluded early next year, work on developing the new carers strategy in coproduction with all stakeholders, and most importantly with carers themselves, can begin.
- 4.5.4. The review will be led by the ICB, supported by partners, including Leicester City Council's Adult Social Care Commissioning Team, and will seek engagement and consultation with members of the CDG and other key stakeholders. This will include 1 to 1 interviews and focus groups as appropriate. Full details of the proposal can be found at appendix 2.

#### **4.6. Challenges and opportunities for the future**

- 4.6.1. Local Account - The role of carers is highlighted in the published "2024 Local Account (of Adult Social Care Services)", particularly around the theme of Active and Supportive Communities. Of the carers who responded to the surveys only 24% said they were able to spend their time as they wanted, doing the things they valued and enjoyed. Fifty-one per cent said they did not

do enough of the things they valued and enjoyed and 25% said they did not do anything they valued and enjoyed. Similarly, only 34% of unpaid carers said they had as much social contact as they wanted. While 31% said they did not have enough social contact and 35% said they had little social contact and felt socially isolated. This suggests that we have more work to do around supporting carers to have more time to themselves to do the things they enjoy.

4.6.2. The Leading Better Lives project - gathered feedback from people across the city, including carers around what is working well and what is not working well in relation to your health and social care needs. Some of the positive messages were:

- “We’re a friendly community & we look out for each other”
- “I find it helpful to get advice & information from community groups”
- “I know where to get advice and information from”
- “Meeting with other people in similar situations is a lifeline”.

However a key theme that emerged for carers was ‘I look after others, but no-one looks after me’ and some of the challenges were:

- “I’ve got my own health issues and it’s hard to be a carer and care for yourself”
- “You put off doing things, like going to an exercise class”
- “You lose your identity when caring”
- “You suddenly go from being a daughter to being a carer and the burden of caring increases until you are exhausted”.

Some of the actions coming out of the leading better lives project will seek to make information and advice more accessible and to raise awareness of where people, including carers, can get the right information at the right time.

4.6.3. Adult social care 24/25 divisional plan - Carers are a key priority ‘we want informal carers to feel well supported, able to continue their caring roles and live a good life’. Across the division various workstreams are ongoing that support this priority.

4.6.3.1. Work is ongoing with social work teams and carers involved in the Making Real Group to co-produce new carer-specific practice guidance for carer assessments and we are focusing on ensuring carers, and staff supporting carers have greater access to information, training and the support that might be available via a carer’s assessment.

4.6.3.2. To improve our carers’ experience we are expanding our information and advice offer, across all formats and including advocacy. Our adult social care webpages/portal have been updated so they are easy to navigate and they include links to the carers support service, so carers accessing our website will be able to find the information they want quickly and easily.

4.6.3.3. Working across the council to improve the move between children’s and adult services with young carers and parent carers, so that they can consider and plan for their future aspirations in terms of college, university, leaving home and ageing.

4.6.3.4. To further develop short breaks options and support carers we are undertaking a respite review to ensure we are best meeting need. We are also working in partnership with Public Health to deliver the CareFree initiative and increase take up.

#### **4.7. Summary**

4.7.1. The ongoing work around the carer's agenda brings lots of opportunities to improve and strengthen support for carers over the next 12 months. We recognise the opportunities through groups like Making it Real and the Carers Delivery Group to ensure the carer voice informs and supports our work in adult social care, particularly given the importance we place as an Authority on the support for our carers (as per our divisional priorities). Linked to this are the improvements we recognise are needed in our current infrastructure – ensuring our carers' voices influence other strategic boards for example the Leicester Integrated Health & Care Group and the Health & Wellbeing Board. Our work to develop the next iteration of the LLR carers strategy co-productively with carers, to ensure the strategy is owned and led by carers, is a key priority for the department and our ICS. The new carers support service will continue to evolve in response to carer demand and feedback and the renewed focus on outreach and promotions to reach more carers. Over the next 12 months the Accelerating Reform Fund projects will support carer identification and contingency planning and the hospital discharge grants will be in place to help improve the carer experience of the discharge process.

#### **5. Financial, legal, equalities, climate emergency and other implications**

Not applicable as this report is for information only on the work being done to support carers.

##### **5.1 Financial implications**

There are no financial implications arising directly from the report. However, some spending on services for carers is identified; and carers across the city provide care that in some circumstances could otherwise fall to the Council to fund.

Signed: Georgia Shelton

Dated: 01.11.24

##### **5.2 Legal implications**

Commercial Legal

5.2.1 The Care Act 2014 sets out the Authority's responsibilities to carers for adult members of the community.

5.2.2 *The Accelerating Reform Fund* has been awarded to the consortium for which County Council are the lead. This should be governed by a Memorandum of Understanding (MOU) or some form of underlying agreement which sets out each member of the consortium is responsible to the DHSC/sets out the allocation of funding and such. As such, officers will need to ensure that any acceptance by the Authority of the grant conditions imposed by DHSC is being complied with. Legal Services can support with the review of this (if it has not been done so already) and any possible Subsidy Control ramifications.

5.2.3 The AR Funding is to be used for two projects as identified in paragraph 4.3.3 of the report (**AR Funded Projects**).

5.2.4 The Authority has an existing contract for the *Carers Support Service (Services)* for the purpose as set out in 5.2.1 above. Based on the report the ARF Funded Projects are to be delivered via the Services Contract. It is not clear if these elements of the



Services have already been scoped into the [procured] Service Contract. If not, they can only be varied within the scope of permitted modifications of the Public Contracts Regulations 2015 and further the Authority's internal Contract Procedure Rules. Officers should ensure Procurement and Legal Services are engaged to advise and assist with any such variation(s), as required.

5.2.5 *Hospital Discharge Grants to Carers*: The Authority has power to provide grants to voluntary and community sector organisations under the general power of competence set out in section 1 of the Localism Act 2011. Any grant funding will require a Subsidy Control Assessment prior to award as well as ensuring grant terms and conditions underpin any such award(s).

Signed: 04/11/2024

Dated: Mannah Begum, Principal Solicitor, Commercial Legal, Ext 1423  
Social Care & Safeguarding - Legal

5.2.6 The report details the proactive means by which the authority is seeking to ensure that it both identifies and meets the needs of carers within its community in line with statutory duties under the Care Act 2014. There are no further direct legal implications of this report.

Signed: 04/11/2024

Dated: Susan Holmes, Head of Law – Social Care & Safeguarding, Ext 1402

### 5.3 Equalities implications

There are no direct equality implications arising from this report as it is for information on the work being done to support carers. However, it is important that equality considerations are considered as part of the ongoing work to support carers and any consultation/engagement is accessible and relevant to carers/key stakeholders.

Signed: Sukhi Biring, Equalities officers

Dated: 5 November 2024

### 5.4 Climate Emergency implications

There are limited climate emergency implications directly associated with this report. As service delivery generally contributes to the council's carbon footprint, any impacts be managed through working to encourage and enable the use of sustainable travel options, considering the energy efficiency of any buildings used, using materials efficiently and following the council's sustainable procurement guidance, as applicable to the programme.

Signed: Aidan Davis, Sustainability Officer, Ext 37 2284

Dated: 04.11.24

### 5.5 Other implications (You will need to have considered other implications in preparing this report. Please indicate which ones apply?)

Not Applicable

**6. Background information and other papers: Appendix 1**



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**7. Summary of appendices:**

Appendix 1 contains a breakdown of data on the carers accessing the carers support service. Appendix 2 is the proposal for the review of the Carers Delivery Group (CDG)

**8. Is this a private report (If so, please indicate the reasons and state why it is not in the public interest to be dealt with publicly)? no**

**9. Is this a “key decision”? If so, why? no**