
THE CARE ACT : AN UPDATE ON PROGRESS

SUMMARY REPORT

Purpose of the Report

1. This report follows on from a report presented to Scrutiny Committee in October 2014 which outlined the early implications of the Care Act for Darlington. This report sets to outline the work done to date on the implementation of the Act within Darlington since this last meeting.
2. The report sets out progress to date on the following:-
 - (a) The local and regional progress of The Act.
 - (b) Specific updates on the work streams that Scrutiny Committee expressed an interest in to help champion.

Recommendation

3. It is recommended that Scrutiny Committee take note of the report.

**Murray Rose
Director of Commissioning**

Background Papers

There were no background papers used in the preparation of this report other than those referred to

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S17 Crime and Disorder	None
Health and Well Being	The Care Act is a significant change in social care policy which will involve representatives on the HWB. The board will be presented with updates as necessary
Carbon Impact	None
Diversity	National EIA has been undertaken
Wards Affected	All wards
Groups Affected	Adult Social Care Service Users – Current and Future.
Budget and Policy Framework	None
Key Decision	None
Urgent Decision	None
One Darlington: Perfectly Placed	The Care Act will particularly impact on outcomes in One Darlington: 'People are healthy and supported'
Efficiency	None

MAIN REPORT

Local and Regional Progress of the Implementation of The Care Act

4. There are undoubtedly a number of challenges facing the authority as we progress towards April and the first tranche of changes that The Act outlines. Changes in the way that we assess people, by underpinning all we do with the 'Well-being Principle' and the introduction of a national eligibility criteria means that a significant proportion of the work force will need to be briefed on the intricacies of this. A number of staff workshop sessions are set up to deliver this over view.
5. The Care Act places statutory duties on all Local Authorities to provide Information and Advice to all residents of the borough whether or not they have an eligible care need or indeed are known to the authority. This is meant to aid the prevention agenda and ensure that residents are considering their future care needs long before the need for care arises. Work is underway with the contact centre to design an front line Information and Advice offering. The authority has a number of advice services that we need to look to align. This not only involves the authority but our partners in other public services and the voluntary and community sector.
6. As a local authority our Information and Advice offering needs to include information on what types of care and support is available, e.g. specialised dementia care and befriending services. The range of care and support services available to local people, e.g. prevention and re-ablement services and wider services that support wellbeing. We also have a statutory duty to provide information on the care and support system and how the system works here in Darlington e.g. specific information on the assessment process, eligibility and review stage and How to access independent financial advice on matters relating to care and support.

7. The Care Act says councils must include people in plans about their care and support. This is simply putting best practice around social work into statute. If it is hard for people to share their ideas for their care and support and express their desires in a clear way the Care Act says councils must find an advocate. An advocate can help in assessments or plans or in the provision of advice. Locally and regionally there are concerns about the capacity in the market place for independent advocates. Investigation work at a local and regional level is underway to ascertain what impact the Care Act will have on the market and how any increase in demand for advocates can be serviced whilst keeping the service independent.
8. The Care Act introduces legislation to provide protection and support to the people who need it most and to take forward elements of the government's initial response to the Francis Inquiry giving people peace of mind that they will be treated with compassion when in hospital, care homes or their own home. It also seeks to ensure that those people needing social care do not have to pay more than £72,000 for long term care (across their lifetime) by introducing a care cap.
9. Please note that the consultation on the Care Cap has been significantly delayed and is now not due until the beginning of February 2015. This consultation will see the proposed Care Cap discussed and will give the authority an opportunity to feedback on the funding challenges. Should the Care Cap proceed as planned; once this cap is reached by a service user the state will pay the cost of any care above that figure (not to include food and accommodation costs – these are sometimes referred to as hotel costs). The care cap has been much publicised across all forms of media.

The Darlington Approach

10. An initial scoping session was held on 22 May 2014 where internal stakeholders were invited to sense check the Surrey Model (at the time this model was seen as the lead in implementation of the Act) and align Darlington's progress against each of the major clauses within the then Care Bill. From this meeting a number of work streams were pulled together to help formalise the approach that Darlington would need to take to deliver the main legislative changes outlined in the Care Bill. This approach was approved by JMT on 5 August and a number of CCG colleagues were added to a number of work streams.
11. As the Bill progressed through the House of Lords, all Local Authorities were encouraged by the Department of Health to use the Surrey Model as a base for both work stream planning and assessing the financial impact of the act on the Local Authority. The Department of Health has now changed this guidance in respect of the financial impact part; and has asked all Local Authorities to complete a model created by NE Lincolnshire Council in order to assess affordability. The Department of Health has also engaged the Chartered Institute of Public Finance and Accountancy (CIPFA) to assist in costing the financial impact and helping Local Authorities assess the cost of the unfunded burden. Work is still underway in Darlington to gauge the true cost of The Act. Representatives from Darlington are

working with colleagues across the region to understand the cost burden of The Act and what policy changes. The Act will invoke.

12. When the initial report on The Care Act was presented to Scrutiny Committee, members expressed a specific interest in two work streams. Those being Workforce (given that Darlington were taking a regional lead) and finance (particularly the financial impact The Act would have on the borough). This report will give an update on these specific areas.

(a) Local and Regional progress on Work Force

The Act significantly reforms the way social care needs are assessed, met and paid for, and how social care services are provided. The Care Act focuses on preventative services to reduce needs and therefore delay the need for an assessment. It is this message that is key to our staff training. Darlington are leading on the regional workforce group.

Progress to date:

- (i) Local briefing sessions are set up to give an overview of the Care Act. These sessions include all Staff and partners
- (ii) Members briefing session planned for February 2015
- (iii) Using regional money; we plan to purchase some very specific training on certain parts of the act that will require detailed knowledge.
- (iv) Agreement to use regional monies to procure an learning programme across the NE that all authorities and partners can access (12 month licence)

The aim of this work strand is to ensure that all staff are ready for the implementation of The Act and that those who are not directly impacted in their day to day role understand the potential impacts.

(b) Local and regional progress on Finance – Paying for The Act.

There are still a number of significant outstanding decisions to be resolved by the Department for Health and these are detailed below:-

- (i) No decision on interest rate to be charged on Deferred Payment Agreements;
- (c) No decision on Loan to Value Ratio on property where a Deferred Payment has been agreed.
- (d) Some finalisation of financial disregards to be agreed.
- (e) No decision on Working Age Adults and whether they should fall under a different cap. The lack of decision is due to concerns over working practice and complexity of needs. The decision on working age adults was expected in December 2014 – this is delayed.

- (f) The overall uncertainty of the unmet burden and the costs that local authorities will need to bear.
 - (g) A delay on the start of The Consultation on The Care Account. The intricacies of the Care Account and what it means and how it will work need to be the subject of a national consultation exercise. This consultation was due to start in the latter stages on 2014. This is now not expected to be published until 5 February 2015.
13. Scrutiny Committee need to be aware that these risks are still open when understanding the impact of the Act on Darlington and that timescales are still exceptionally tight. The implementation of the Care Act will have a twofold impact on Finance. The initial impact being the modelling work that has to take place to assess the affordability (and the burden) of the Act at a local and national level. ADASS have requested that the twelve North East Councils use the NE Lincolnshire Model to carry out this work so that there is a consistency in data across the region. This is now on hold.
14. The third Care Act stocktake is underway and this will give a more accurate understanding of regional readiness.

Summary and Next Steps

15. The Care Act presents all local authorities with a complex and demanding project plan that is currently working with a significant number of unknowns. This report is an attempt to detail the major challenges faced by Darlington Borough Council and to outline where demands on capacity might be as the journey towards April 2015 and beyond begins.
16. At the time of writing there is a great deal of the context for the Act that is clear but there are some details yet to be finalised at a national level: - working age cap, national eligibility criteria deferred payment guidance as an example and at a local level here in Darlington. The financial impact being the main one.
17. There are key links to other key national programmes the Better Care Fund and wider health and social care integration and these projects are aligned where deliverables are shared.