

Healthwatch Richmond Care Act Forum

31/7/2014

Time	Item	Presenter
17:45	Registration and refreshments	
18:00	Welcome and introduction from Healthwatch Richmond	Kathy Sheldon
18:05	Introduction from Richmond Council	Cllr. Marlow
18:10	The Care Act Consultation	Derek Oliver, London Borough of Richmond upon Thames
18:40	Round table Discussions	Facilitated discussions in mixed groups of service users, carers, members of the public and professionals
19:40	Feedback and questions	Facilitators
19:55	Next Steps and close	Healthwatch Richmond
20:00	Forum closes	

Welcome and introduction from Healthwatch Richmond

**Kathy Sheldon, Vice Chair Healthwatch
Richmond**

Housekeeping

- We are taking photographs of today's event - please let us know if you **do not** give permission to use any photos of you that we take today
- Fire alarms - non planned leave from your nearest exit
- Toilets are located in the corridor to the right of the main entrance to this room

Care Act Engagement

- On 24th June 2014 Healthwatch Richmond was asked to start engaging the community on behalf of Richmond Council

● By the 8th August deadline we will have:

- Engaged over 150 people at 8 visits to community venues
- Surveyed 50 people
- Public event engaging 90 people



Introduction from Richmond Council

Clr. David Marlow

THE CARE ACT - CONSULTATION AND ENGAGEMENT EVENT

Derek Oliver

**Assistant Director Adult and Community Services
London Borough Richmond upon Thames**

WHAT I WILL TALK ABOUT:

- What the Care Act is and some highlights
- Summary of some of the key points
- The timescales
- The consultation process
- How the Council is managing the process

In summary – what does this mean to me?

WHAT IS THE CARE ACT?

- Reforms the law relating to care and support for adults and carers
- New legal framework - brings legislation together into one modern law
- Biggest change in Adult Social Care legislation for 60 years
- Encompasses the whole population

The Act is built around people:

- Well-being and outcomes
- Carers rights
- Preventing and delaying needs for care and support
- Building on strengths in the community
- Embeds rights to choice
- Personal budgets
- High quality services are available locally
- Safety of the vulnerable

The Act makes care and support clearer and fairer:

- Extends financial support to those who need it most
- Introduces a cap on the care costs
- People not having to sell their homes in their lifetime to pay for residential care
- A new deferred payment scheme available
- A single national threshold for eligibility to care and support
- Availability of information, advice and advocacy
- Continuity of care when people move between areas
- Safeguards over provider failure

TIMESCALES

- The Care Bill received Royal Assent in May 2014 and passed into law as the Care Act 2014
- Draft guidance and regulations:
 - Published late May 2014
 - Consultation on draft regulations ends August 15th
 - Final regulations anticipated October 2014
 - Further information/ consultation planned on financial elements in 2015
- Phase 1: non-funding changes will come into force **April 2015**
- Phase 2: funding changes will come into force **April 2016**

OVERVIEW OF THE CARE ACT

A summary of key points

HOW THE CARE ACT IS SET OUT

- General responsibilities and universal services (includes well-being and prevention)
- First contact and identifying need (assessments and eligibility)
- Charging and financial assessment
- Person-centred care and support planning
- Integration and partnership working
- Moving between areas

HOW IS THE COUNCIL RESPONDING?

Project - Project Manager	What this covers
1. Funding Jeremy DeSouza Assistant Director - Finance and Resources	Areas relating to how care is paid and charged for, including the cap
2. Prevention, Information and Advice Janet Cole, Service Manager	Preventative services, information and advice about services
3. Personalisation, Carers and Transitions Lynn Wild, Service Manager	Assessments, support plans, direct payments for service-users and carers. Transition from children's services.
4. Adult Safeguarding Head of Safeguarding	Areas relating to keeping vulnerable adults safe from abuse or neglect
5. Market Shaping Amanda McGlennon, Commissioning Manager	Ensuring a diverse and high quality range of services are available

CARE ACT IMPLICATIONS

- **‘The must do’s’** - some issues that had local discretion will become mandatory, e.g. personal budgets, safeguarding adult boards
- **‘The should do’s’** - some issues will be for local discretion
- Some things will be new
- A lot of current legislation will be repealed
- The scale of change cannot be overstated
- The financial pressure on public funds is likely to be immense

GENERAL DUTIES - Applies to everyone

- **Well-being:**
 - Underpins the Act.
 - The Council must work to promote an individual's well-being in everything it does under the Care Act.
- **Preventing, reducing and delaying needs:**
 - Applies to the whole population (including carers).
 - Council must take steps to keep people independent and healthy for as long as possible.

GENERAL DUTIES - Working with partners and providers

Integration

- Emphasis on joining up health and social care services at every level

‘Market Shaping’:

- The Council must work with care providers (“the market”) to ensure there is a diverse and high-quality market for care services
- The Council must meet a person’s needs if a provider fails

UNIVERSAL DUTIES - Applies to everyone

Prevention: the provision of services to help *prevent, delay or reduce* the development of needs for care and support.

- Universal services to keep people healthy and independent.
- Joined-up prevention strategy
- Emphasis to keep people out of the 'care system'

UNIVERSAL DUTIES - Applies to everyone

Information and advice: help people to make the most of the resources available to them and plan for their future

- Targeted information and advice
- Online resource directory of Care Providers e.g. 'Care Place'
- Independent financial advice

SERVICE USERS AND CARERS

- National minimum eligibility threshold
- New assessment framework- the council must assess if a person *appears* to have care and support needs
- Right to request a direct payment to purchase own care
- Continuity of care when moving between areas
- Transitioning from children's to adult's services- right to an assessment before turning 18

SERVICE USERS AND CARERS: New rights

Self-funders

- Those who fund their own care have the right to ask the council to manage their care
- Council *can* charge for administering this

Carers

- Rights on same footing as those they care for
- Assessment, financial assessment, support plan, and personal budget

FUNDING CARE: 'Means Test' (2016)

- Financial assessment
- An increase to the capital limit means that more people will be eligible for financial support from the council
- Capital limit increased from £23,250 to £118,000 for people in care homes

FUNDING CARE: Cap on Care Costs (2016)

- Currently there is no limit on the amount a person with assets might have to pay towards their care
- 'A cap for care' is placed at £72,000
- Cap is based on cost of providing care, individual contribution is still means-tested
- The cap will be lower for those who develop needs before reaching old age
- Free care for those with life-long needs
- Personal costs met by the individual

FUNDING CARE: Cap on Care Costs (2016)

- A person's progress towards the cap is monitored using a **Care Account**
 - Need to have an assessment and support plan
 - A Care Account monitors the amount it would cost the council to meet a person's eligible care and support needs (excludes living costs when in a care home)
 - Self-funders care costs will be tracked with a 'care account', based on their assessed needs
 - **NOTE:** A person may still be eligible for financial support. Care costs count towards the cap even if the council funds some or all of it.

FUNDING CARE: Deferred Payments

- A person living in a residential care home can 'defer' paying the costs of their care and support.
- Will not have to sell their home within their lifetime
- A charge is placed on a person's home to be paid at a later date
- Interest will apply to a deferred payment loan
- Contributions towards care home fees is still paid from the service-user's income

THREE MAIN REASONS WHY WE ARE CONSULTING?

1. Make people aware
2. National consultation (Deadline 15th August) - as part of the national consultation to Department of Health on the Care Act draft regulations and guidance documents
3. How we go forward - consider how we involve the public as we begin to shape how we design the Councils' arrangements to deliver new duties from April 2015 and April 2016

FURTHER CONSULTATION

Draft DH regulations and guidance (Aug 2015)

- Responses from within the council
- Healthwatch outreach with advocacy groups
- Coproduction group of services users and carers
- Voluntary Sector Survey

Future consultation (On-going)

- First step in wider consultation
- We will consult in more detail as we work to implement the act (and know more!)

FINAL COMMENTS

- This is new, significant and the unknown
- We are establishing our understanding
- It is resource intensive – people and money
- The Council will have to make decisions on new issues
- We will at some point stop doing some things we do and start doing new things
- The NHS is an integral part of this
- You are an integral part of this

Questions?

www.richmond.gov.uk/the_care_act
thecarebill@richmond.gov.uk

Roundtable Discussions

Feedback and Questions

Next steps and close

**Thank you from
Healthwatch Richmond
and Richmond Council**