		AGENDA ITEM 7a
		PAF/07/15
Committee:	People and Families Scru	utiny Committee
Date:	12 March 2015	
Carers Strateg	│ ıy Task & Finish Group – In	terim Report
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CARERS STRATEGY

The Interim Report of a Review by a Task and Finish Group of the People & Families Scrutiny Committee

March 2015



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FOREWORD

To be completed when the Task and Finish Group reports to The May meeting of the Committee



I would wish to thank my fellow Task and Finish Group Members for their diligent approach and professionalism during the course of this review.

I commend this report to you.

COUNCILLOR THERESA HIGGINS

Chairman of the Carers Strategy Task and Finish Group

Background

Background to the Scrutiny

The predecessor to the People and Families Scrutiny Committee, the Community and Older People's Policy and Scrutiny Committee established a Task and Finish Group to review the Carers Strategy in January 2012. However, the legislative process related to the Care Act to be implemented from 1 April 2015 delayed the county strategy and as a result the Task and Finish Group was put in hiatus until the autumn of 2014 by which time the implications of the forthcoming Care Act became known and the Essex County Council Carers Strategy started taking shape once again.

The People and Families Scrutiny Committee agreed to convene a Task and Finish Group on 25 June 2013. The Membership of the Task and Finish Group was established following this meeting.

Membership

The Membership of the Task and Finish Group was agreed as:

Councillor Theresa Higgins (Chairman), Parsons Heath and East Gates Councillor Jenny Chandler, Great Baddow Councillor Terry Cutmore, Rochford North Councillor Michael Danvers, Harlow North Councillor Ray Howard, Canvey Island West

It should be noted that Task and Finish Group was, initially, under the Chairmanship of Councillor Terry Cutmore from 1 October 2014. However, it was agreed at the 8 January 2015 meeting of the Task and Finish Group that Councillor Higgins assume the Chairmanship as Councillor Cutmore became Chairman of the Essex County Council Audit Committee.

Evidence base of the Scrutiny

Five formal oral evidence sessions have been held, to date, where a range of witnesses have been able to provide evidence to the Task and Finish Group. To date these have been:

- Sharon Longworth, Head of Commissioning Vulnerable People, Essex County Council
- Helen Gilbert, Commissioning Support Manager, Essex County Council
- Adam Boey, Senior Policy and Strategy Advisor (People), Essex County Council
- Councillor Anne Brown, Cabinet Member for Communities and Healthy Living
- Councillor Ricki Gadsby, Cabinet Member Deputy for Communities and Healthy Living
- Shona Pearce, Senior Project Manager, Essex County Council
- James Clarke, Chief Executive Officer, Action for Family Carers
- Christopher Wetton, Chief Executive, Essex Carers Support
- Rhona Gilder, Community Engagement Officer, Essex County Council
- Maxine Derrick, Quality Assurance Manager, Essex Cares Ltd.

Written representations have been requested from Michael O'Brien, Head of Commissioning Education and Lifelong Learning, Essex County Council and each of the twelve Housing Authorities in Essex. These written contributions will be included in the full report to be received at the May meeting of the Committee. The full People and Families Scrutiny Committee will be presented with the impact on carers of the Care Act at a Committee meeting on 12 March 2015. Additionally, Members of the Task and Finish

Group will be undertaking visits to carers and carers groups in their own localities during April 2015 to supplement the contributions received.

The Task and Finish Group is content that it has received, to date, a range of views and collected evidence from a number of key witnesses to fully review the Carers Strategy.

Issues, Evidence and Recommendations

Key Evidence

The first meeting of the Task and Finish Group established the scope of the review and it was agreed the following should be tested as part of the review:

- The role of carers in Essex and the specific pressures and challenges faced by them
- The identification and recognition of carers in Essex
- The current support provided by a range of organisations to carers, and if and how, this can be enhanced further
- The implication of the Care Act on carers
- How services and support relate to local and national strategies
- How, in the light of financial pressures, carers can continue to receive a good level of support
- Whether Essex County Council is reaching all carers who require support
- The arrangements between the County Council and other service providers, for example third-sector providers
- How the advice on benefits provided to carers can be improved
- How signposting for carers can be improved

In order to test these areas the Task and Finish Group agreed it would need to:

- Review the draft refreshed Essex County Council Carers Strategy, as well as other key national strategies
- Hear the views of both adult and young carers
- Hear the views of third-sector, as well as advocacy and support groups
- Invite relevant senior officers from Essex County Council People Commissioning and Family Operations, as well as health organisations to provide an overview of current services, policies and provision
- What is the role of education in identifying young carers?
- How the refreshed Carers Strategy will be monitored?
- Increase the focus on uptake. Are there areas of poor coverage in support across the county?
- Investigate whether attendance allowance and other benefits are actually claimed?
- Ascertain the views of Borough/City/District Housing Authorities
- Ascertain the services provided by other Local Authorities to carers

The Task and Finish Group has not achieved each of these aims, as its primary focus has been on the establishment of the Essex Carers Strategy. Therefore, the Task and Finish Group would strongly recommend that its life continues beyond the publication of the Essex Carers Strategy to enable it to

monitor the strategy and its outcomes as well as, in the shorter term, continue a wider review of carers so that it may, potentially, formulate recommendations for the responsible Cabinet Member to consider.

RECOMMENDATION

The Task and Finish Group continues its work to cover the full remit agreed at its establishment so that it may monitor the agreed Essex Carers Strategy, in its first year; and consider any further recommendations for the Cabinet Member to consider.

Owner: Chairman of the People & Families Scrutiny Committee

Implementation Review Date: March 2015

Impact Review Date: March 2016

By theme, the key evidence received at the Task and Finish Group sessions are outlined below (THIS SECTION TO BE COMPLETED IN MAY 2015 FOLLOWING FUTURE MEETINGS, RECEIPT OF WRITTEN EVIDENCE AND VISITS TO CARERS/CARERS GROUPS:

The level of caring in Essex

Preparing to be a carer/Identifying oneself to be a carer

The Voluntary and Community Sector

Commissioning of Services

Young Carers

Other Public Services

Recommendations

The Task and Finish Group has agreed its recommendations to the Cabinet Member for Communities and Healthy Living for the Carers Strategy and seeks the formal approval of the People and Families Scrutiny Committee to file these recommendations to the Cabinet Member. The recommendations are outlined below (the first and last recommendation are for the Chairman of the People and Families Scrutiny Committee) and are also highlighted within the Summary of the Evidence Sessions section within this report (from page 11). In the event that the Cabinet Member does not accept any of the recommendations below, the Committee should be advised, in each case, the reasons for rejection in writing. It is likely there will be further recommendations to the Cabinet Member when the full report is published in May 2015.

1. The Task and Finish Group continues its work to cover the full remit agreed at its establishment so that it may monitor the agreed Essex Carers Strategy, in its first year; and consider any further recommendations for the Cabinet Member to consider.

- 2. The Carers Strategy should explicitly include reference to be reavement.
- 3. The Carers Strategy should include hyperlinks to documents and papers, such as *A Road Less Rocky*. The links are particularly pertinent to the sections of the strategy which refer to people not preparing to be carers.
- 4. The Carers Strategy should be clear about the changes in retirement age and should also explicitly state that there are carers who are under the age of 11.
- 5. The Carers Strategy should consider the implications of the effect caring responsibilities have on the education of young carers, and highlight this.
- 6. The Carers Strategy should be published in plain English and available in a variety of formats.
- 7. The Carers Survey and the wider Adult Social Care Survey results should be presented to the People and Families Scrutiny Committee when available.

Summary of the Evidence Sessions

Wednesday, 1 October 2014

The membership and Chairmanship of the Task and Finish Group were established. The Group were informed about carers in the national context and the potential implications for carers of the Care Act, which explicitly places informal carers on an equal footing with paid carers. In the past Essex County Council has had the duty to undertake an assessment if carers had a significant caring role, now carers can request an assessment and ECC will have to carry this out and provide or facilitate access to support in response to identified eligible needs.

It is not necessarily known how many carers there are in Essex. In the 2011 National Census 146,211 people in the county declared they were carers. There are also estimated to be around 10,000 young carers in Essex between the ages of 11-18 – these are not always sole carers. However, it is notoriously difficult to get the full picture of who is and who is not a carer as many people do not label themselves in this way. Only 11,000 of those who declared they were a carer in the Census were assessed in 2012/13.

In Essex there are three main routes for carer support:

- 1. Social care assessment and support
- 2. Voluntary and Community Sector support funded by ECC or the NHS (all ECC external funding for carers is delivered through the VCSOs)
- 3. Engagement with health and social care professionals

The value of care provided by carers in Essex has been estimated by the University of Leeds in their *Valuing Carers: calculating the value of unpaid care* research as £1,760m in terms of the cost of replacement care. This is independently verified research.

The feedback received from carers on the level of support received in Essex is not very good, with results from the biennial Adult Social Care survey not comparing well with other parts of the country, for example, carers are less likely to:

- use support services to take a break
- feel encouraged and supported in the caring role
- feel they have been fully involved in discussions about support services
- have received training

Add to that one-third of survey respondents were not aware of any support services available from local voluntary organisations.

The focus of the new joint (ECC and the five Clinical Commissioning Groups (CCGs)) Carers Strategy would be on supporting the carer to maintain their own independence, by focussing on their health, wellbeing and life choices; and improving outcomes and increase independence for service users. A Carers Partnership Group has been established which would set out a vision for carers and have a delivery plan as part of its strategy.

A four-level model for carers' services is being developed with a view to being in place by 2017. The model, created in the light of the Care Act, is aimed at improving the experience of carers through:

- 1. Community-based and community-led activities
- 2. A locality level 'first-stop' model
- 3. Social care assessment and support
- 4. Professional awareness and engagement

Friday, 28 November 2014

The Group discussed the Care Act and Carers Conference which had taken place on the morning of the Task and Finish Group meeting and received an update on the developing Carers Strategy. The Care Act and Carers Conference enabled the work of the Task and Finish Group to be advertised and a request to contact the Group from interested parties was extended.

A Grants Pack invitation to the voluntary sector to provide services for carers had been developed with six themes:

- Choice and control
- Respect and recognition
- Access to networks of support
- Achieving full potential
- Good health and wellbeing
- Independence

The Group were informed that three engagement events have taken place, including one for young carers which focussed upon what young carers needed, and the problems and issues they encounter. Young people are represented as part of the Essex Carers Network. Young carers are included within each of the six themes but mostly achieving full potential. The theme will be expanded as the strategy develops.

In terms of the Care Act implementation ECC will need to provide:

- a universal service providing information and advice
- specific targeted information on finances or respite care
- intensive service based upon emergency or crisis management

Thursday, 8 January 2015

Councillor Anne Brown, Cabinet Member and Councillor Ricki Gadsby, Deputy Cabinet Member for Community and Healthy Living were in attendance to contribute to the review.

Councillor Brown stated that Essex has been slow in getting provision for carers up-and-running; and it is critical that services are put in place in readiness for the implementation of the Care Act. However, it is unlikely that full services will be established in readiness for 1 April 2015.

Councillor Brown referred to the guidance published by the Department of Health to enable carers to care for longer, which can be found at:

https://www.gov.uk/government/publications/care-and-support-whats-changing

Shona Pearce, Senior Project Manager was in attendance to contribute to the review on behalf of the Essex Carers Partnership Group which was established in May 2013 and has representation from the County Council, the CCGs and Carers Groups. To date its focus has been on developing a new strategy for Carers. The vision, outcomes and principles for the strategy was informed through engagement with carers groups as well as the two carers who sit on the Partnership Group.

The Group questioned which outside organisations may challenge the strategy once established. Councillor Brown suggested any challenge might come from those who scrutinise the CCGs.

Tuesday, 3 February 2015

The Task and Finish Group considered the draft Carers Strategy at the meeting and James Clarke, Chief Executive, Action for Family Carers (AFFC) and Christopher Wetton, Chief Executive, Essex Carers Support was in attendance to contribute to the review. Essex Carers Support has facilitated a range of engagement and consultation exercises at ECC's request although rarely with any feedback. Essex Carers Support along with other voluntary and community organisations were involved in the development of previous versions of Carer Strategy documents and as an organisation representing a large number of carers living in Essex would hope to be included in further work on this.

AFFC has not been involved directly in formulating the new strategy though it may be that Carers who take up AFFC services may have been consulted as the organisation has worked with ECC to facilitate some consultations recently. AFFC have been involved in consultations over previous Carers Strategy documents in Essex and are keen to contribute to developments such as this and the work on The Care Act.

Councillor Higgins stated there is not anything within it that considers the carer when the person cared for dies or what is done as follow-up actions following bereavement. The day somebody is bereaved they are no longer a carer but, as a charity, AFFC continues to support them, AFFC has established informal groups of former carers who still meet together. The charity believes supporting bereaved former carers

is critical. Essex Carers Support signposts people to bereavement groups. There is a real value in experienced former carers who can continue to contribute to carer groups. There is an issue of how people are supported throughout the bereavement process. AFFC work with carers to plan their future and other critical transitions and being able to recognise when things might change in care responsibilities allows carers to make decisions and take control of situations prior to crisis points emerging.

RECOMMENDATION

The Carers Strategy should explicitly include reference to bereavement

Owner: Cabinet Member for Communities and Healthy Living

Implementation Review Date: March 2015

Impact Review Date: March 2016

The Carers Trust report A Road Less Rocky was highlighted:

http://www.carers.org/sites/default/files/dementia executive summary english only final use this o ne.pdf

The Group heard that actually identifying oneself as a carer can often be difficult; much of this is around the use of language. The issue of identification is crucial as many people provide many hours of care but fail to recognise themselves, formally, as carers. A lot of the support carers need is not financial but it is actual recognition and acknowledgment of the caring role. People do not prepare to be carers; therefore, raising awareness to the wider public of the role should be undertaken as the role often creeps up on individuals. For most people it is a huge learning curve with elements to the role that people are totally unprepared for. Peer support groups are really helpful as they provide access to others who have been through similar situations.

RECOMMENDATION

The Carers Strategy should include hyperlinks to documents and papers, such as *A Road Less Rocky*. The links are particularly pertinent to the sections of the strategy which refer to people not preparing to be carers

Owner: Cabinet Member for Communities and Healthy Living

Implementation Review Date: March 2015

Impact Review Date: March 2016

There needs to be a wider discussion on the resources available for the caring role. For example, the financial and economic contribution carers make which was highlighted in the first meeting of the Task and Finish Group. There are no longitudinal studies which demonstrate to Local Authorities and the NHS how caring contributes to savings on the need for residential care and hospital admissions. Hospital discharge planning is a big area for carers. Making GP appointments when somebody is reliant on you is difficult as the person being cared for will, potentially, be unsupported. GP surgeries need to recognise the needs of carers, and they should shoe a degree of flexibility in terms of appointment times to carers. Carers groups have been trying to work with GPs for many years. It should be as easy as possible for GP practices to know where to go to with a single point of contact. AFFC has agreed to work with Community Agents to ensure this single point of contact and to avoid unnecessary duplication and this should be done through the lines of Community Agents not through those of GPs.

The Task and Finish Group queried whether Essex County Council were taking into account the differing retirement ages depending upon current age, as the age of 65 is quoted in the draft strategy? The largest group of carers is actually those of working age, the number of carers Essex County Council directly engages with is proportionally quite small with in excess of 180,000 providing care in the wider geographical county. It was suggested there should be some clarification in the strategy around retirement ages. There was also some concern regarding the identification of the ages of young carers.

RECOMMENDATION

The Carers Strategy should be clear about the changes in retirement age and should also explicitly state that there are carers who are under the age of 11

Owner: Cabinet Member for Communities and Healthy Living

Implementation Review Date: March 2015

Impact Review Date: March 2016

Councillor Chandler highlighted a concern whether there is sufficient engagement with primary and secondary schools concerning young carers? The written response requested from the Head of Commissioning Education and Lifelong Learning will include reference to the implications the effect caring responsibilities on the education of young carers.

RECOMMENDATION

The Carers Strategy should consider the implications of the effect caring responsibilities have on the education of young carers, and highlight this

Owner: Cabinet Member for Communities and Healthy Living

Implementation Review Date: March 2015

Impact Review Date: March 2016

The Task and Finish Group discussed the availability of the strategy in different formats.

RECOMMENDATION

The Carers Strategy should be published in plain English and available in a variety of formats

Owner: Cabinet Member for Communities and Healthy Living

Implementation Review Date: March 2015

Impact Review Date: March 2016

With regard to assessments and provision of needs under national eligibility criteria in the Care Act it was stated that many carers are unaware whether they have actually undergone an assessment.

In summary it was stated the strategy is an aspirational document. It was recognised that working age adults are the single biggest group of carers, and the hardest to reach; and are not often in contact with Adult Social Care. If working age adults find their caring role impinges on their work there are wider

implications, for example if they have to withdraw from work they will no longer be making tax contributions etc.

Rhona Gilder, Community Engagement Officer was in attendance to present the results of the Carers Survey. The survey is undertaken as a statutory requirement and developed by the Health and Social Care Information Centre and is distributed every two years. Carers, known to Essex County Council, are selected at random from the ECC SWIFT database to take part in the survey.

Most of the survey is quantitative data; however, there are a number of questions which require free text. It was these questions Rhona fed back to the Task and Finish Group. The question: In the last 12 months, have you found it easy or difficult to find information and advice about support, services or benefits? elicited the following responses, from the 500 people who answered this question:

32% that have not tried to find information; 40% who found it fairly or very easy; 28% who found it fairly or very difficult.

The verbatim feedback suggests a level of confusion and not knowing where or who to ask for information and advice. Some suggestions of assistance taking a long time and many telephone calls have to be made in order to get any support. One case stated that it became "difficult and frustrating", months of waiting for an assessment for respite care, with the GP advising they can self-refer and social workers says they need a GP referral.

Listed below are issues people found difficult to find/get information on:

- Not knowing what equipment to buy or request
- Financial aspect on home help/carer from Social services
- CAB limited open hours
- Finding alternative activities for cared for person to attend
- Benefits and allowances
- Inconsistent information at doctors, clinics, less in local councils or libraries
- Workers not knowing what is available in local areas
- Social services phone lines are difficult as you tend to get option numbers to press or promises that someone will contact and never do.
- No time to look about support
- Never knowing who to phone as departments keep changing

For those who have not tried to get information and support the reason noted in this survey was it is a waste of time or they do not feel there is any point to it, also not knowing who to contact in the first place.

Quotes from the feedback includes:

"I leave messages and no one rings back";

"I have not tried to find information in the last 12 months, it's to frustrating";

"The various agencies do not talk to each other";

"Looking at websites, you go in circles and not achieve any new information".

The question: In the last 12 months, how helpful has the information and advice you have received been? elicited the following responses from the 495 people who answered the question:

34% that have not received information or advice;

57 % who found the information and advice very or quite helpful;

9 % who found the information and advice very or quite unhelpful.

Therefore, over half of those answering appear to find information and advice received to be helpful. However the verbatim feedback appears to be of unsatisfactory experiences; with agencies such as Age Concern, Alzheimer's Society; and advocates appearing to be of beneficial help. The theme that came out of this feedback was around the length of time people are waiting to receive support of any sort, including house adaptations, carers assessments, and respite. There appears to be a common suggestion that any type of advice and/or support takes a considerable time and sometimes actions appear not to be followed up.

Quotes from the feedback includes:

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"Advocate fine. Social services poor. Care home very good";
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The question: **How do you find out about support available for carers from voluntary organisations in your local area?** elicited the following responses from the 502 people who answered the question:

38% stated they were not aware of any support available
13% from the internet
26% via social services referral
15% via NHS referral
20% Word of mouth
7% Advertising
8% Other

Quotes from the feedback include:

"Haven't tried to find out in latter years- experience has taught me not to";

"Internet from other relative who has computer or people";

"I asked a friend to google info for me";

"We organise things ourselves";

"The only person who could help me at any time was the receptionist at my mother's GP"

"Our excellent GP said I needed breaks form 24 hour care";

"Agents for Social Services called early this year but been of no help".

The question: Which voluntary sector organisations have you approached for support in the last 2 years? elicited the following responses from the 502 people who answered the question:

66% responded that it was not applicable as they had not approached the voluntary sector for any support or services in the last 2 years

7% Crossroads 3% Action for Family Carers 62% Essex Carers Support

[&]quot;Different people different info";

[&]quot;All information that I have received has been by me chasing it";

[&]quot;I was told by Social Worker I could apply for a personal budget, that was six months ago and not heard from her at all. Disgusted";

[&]quot;Nobody telephones or follows up their visits, they tick their boxes and go home";

[&]quot;Nothing fits in with my mother's needs";

[&]quot;Very difficult to get calls returned from social care. No continuity in their service".

1% Supporting Carers and Families Together 6% Alzheimer's Society 13% Other

- Action for Carers
- Age UK
- Alzheimer's Society
- Doctor at hospital
- Essex Cares
- Homecare
- Home instead Senior Care Agency
- Leaflets and posters in GP surgery
- Library
- Local day centre
- MENCAP/magazine
- Family
- Advocacy

The Task and Finish Group suggested the data could be reported to the wider People & Families Scrutiny Committee. It was highlighted that there is a caveat in the survey results in that working age adults are not picked-up in the results The Group suggested that when the outcomes are presented it should be made clear that the survey is s representative sample of those who have received a service, as carers, from ECC as their experiences are often different from other carers outside the ECC systems. It was agreed that the results of the survey, together with the wider Adult Social Care survey being undertaken currently, be taken to the wider People and Families Scrutiny Committee when the data from both surveys is complete, as concern was raised about where the results go to within ECC once known.

RECOMMENDATION

The Carers Survey and the wider Adult Social Care Survey results should be presented to the People and Families Scrutiny Committee when available

Owner: Chairman of the People and Families Scrutiny Committee

Implementation Review Date: Not applicable

Impact Review Date: Not applicable

The Task and Finish Group were informed that some Hospital Trusts in the country have recognised the contribution carers can bring and have offered carers free car parking within the hospital and a free drink in the hospital refectory, in the form of a social contract.

Monday, 16 February 2015

Maxine Derrick, Quality Assurance Manager, Essex Cares Ltd, was in attendance. Essex Cares provides a number of day services, mostly based in 40 centres across the county. These include wellbeing and activity centres, aimed at the elderly and those with learning difficulties. These centres are moving to being multipurpose, so they can provide a range of services to clients, under the same roof. Such services as physiotherapy, occupational therapy and providing a hot meal can be beneficial, but there is also the

social element, which can be very important. Work based skills services are provided, primarily aimed at adults with learning difficulties. These target areas such as catering, horticulture and conferencing. There is also a reablement service, which is free and is provided for a six-week period to those who have been discharged from hospital. It is normally for the elderly, who may find it hard to readjust to returning home, or who may have lost self-confidence. If, at the end of this period, the individual is still not able to cope, Essex Cares then refers the case to Social Services. Essex Cares is also involved in working with employers to assist individuals into employment, and to continue with them. Essex Cares does not provide domiciliary care.

There are three ways in which individuals can access services:

- Those with a personal budget
- Those with an assessment
- Those wishing to pay for a particular service.

With regard to carers, Essex Cares works with them to assess their needs, although actual reviews for carers are carried out by others. When customers are being assessed, carers are invited as well. There are certain services that can be provided specifically to carers, such as providing sessions where they can swap experiences with other carers, or receive talks from GPs. Equipment can also be provided.

Councillor Higgins suggested Essex Cares Ltd could consider what it could explicitly provide to carers and it could also consider assessing both carers and those cared for together, as a couple, rather than separately.

Written Evidence

TO BE INSERTED

Cabinet Member Remarks

TO BE INCLUDED FOR THE MAY 2015 REPORT

Acknowledgements

The Task and Finish Group would wish to thank the following for providing oral and written evidence across six meetings, as well as those who had expressed a willingness to attend sessions but were unable to do so due to other commitments:

THE LIST OF ACKNOWLEDGEMENTS TO BE COMPLETED FOR THE MAY FINAL REPORT

Essex County Council Overview and Scrutiny Committee Review Scoping Document

This form is a tool that should be compiled at the start of each inquiry to set out clearly the aims and objectives of the committee's involvement in a particular matter, and will be completed at the end of the inquiry to confirm what has been achieved. The form also provides an audit trail for a review.

Review Topic (Name of review)	CARERS STRATEGY
Committee	People and Families Scrutiny Committee
Terms of Reference	 To understand the type and role of carers in Essex and the specific pressures and challenges faced by them To look at issues around the identification and recognition of carers in Essex To investigate the current support provided by a range of organisations to carers and if and how this can be enhanced further To assess the implications of the Care Act on carers To consider how services and support relate to local and national strategies To consider how, in the light of financial pressures, carers can continue to receive a good level of support To consider whether Essex County Council is reaching all carers who require support To consider the arrangements between the County Council and other service providers To consider how the advice on benefits provided to carers can be improved To consider how signposting for carers can be improved
Lead Member, and membership of Task and Finish Group	Cllr Jenny Chandler Cllr Mike Danvers Cllr Theresa Higgins Cllr Ray Howard Cllr Terry Cutmore (Chairman)

Key Officers / Departments	Sharon Longworth, Head of Commissioning Vulnerable People
Lead Scrutiny Officer	Robert Fox
Relevant Portfolio Holder(s)	Cllr Anne Brown and Cllr Dick Madden
Relevant Corporate Links	The Commissioning Strategies People in Essex can live independently and exercise control over their lives, and Children in Essex get the best start in life
Type of Review	Task and Finish Group
Timescales	September 2014 – March 2015 (provisional)
Rationale for the Review	The review of the Carers Strategy commenced in 2012 but was placed in hiatus due to the Care Bill. A Task and Finish Group was established, however, only one Member of that Task and Finish Group was re-elected to the Council. The Cabinet Member for Adults Social Care has suggested a Task and Finish Group is re-established to look at the revised Essex County Council Carers Strategy, and this has been agreed by the Chairman of the Committee.
Scope of the Topic	Include The following is included in the scope of the review: • Unpaid carers Excluded The following falls outside the scope of the review:
	 Professional and domiciliary carers (however, there are implications for paid carers in relation to their professional development)

Key Lines of Enquiry	 Review the draft refreshed Essex County Council Carers Strategy, as well as other key national strategies Hear the views of both adult and young carers Hear the views of third-sector, as well as advocacy and support groups Invite relevant senior officers from Essex County Council People Commissioning and Family Operations, as well as health organisations to provide an overview of current services, policies and provision What is the role of education in identifying young carers? How will the refreshed Carers Strategy be monitored? Increase the focus on uptake. Are there areas of poor coverage in support across the county? Investigate whether attendance allowance and other benefits are actually claimed? 	
Other Work Being Undertaken	The Essex County Council Carers Strategy is being refreshed concurrently with this review.	
What primary / new evidence is needed for the scrutiny?	The views of carers, both adult and young, are key in taking this review forward; as are the views of third-sector organisations who work closely with carers.	
What secondary / existing information will be needed?	 Reports from Carers UK, i.e. In Poor Health; Out of Pocket; Valuing Carers, Carers Missing Millions Past ECC Carers Strategy documentation Carer specific websites and other related websites, i.e. www.alzheimers.org.uk The notes from the initial Task and Finish Group meetings in 2012 The Care Act, 2014 The Royal College of General Practitioners has also conducted a recent study 	
What briefings and site visits will be relevant to the review?	The first Task and Finish Group set-up meetings between the individual Members of the Group and a carer within their division as a fact-finding exercise. This could be replicated.	

Who are the witnesses who should be invited to provide evidence for the review?	Charitable organisations (both national and local), i.e. Carers Trust; Carers Choices (based in Benfleet); Action for Family Carers (based in Maldon) and other voluntary and third-sector groups identified by the Task and Finish Group, including the YMCA Carers and Young Carers Cabinet Members for Adults Social Care and Families and Children Officers of the County Council Health Organisations Young Essex Assembly ECC Planning Groups Citizens Advice Bureau Anglia Ruskin University The above is not an exhaustive list.
Implications	In terms of topic, have the following matters been taken into consideration in the planning of this review: Legal implications
What resources are required for this review?	There will potentially be some expense in terms of payments for travel for carers who contribute to the review. The Committee is performing a critical friend role in this review as it will make
	recommendations for inclusion in the refreshed Carers Strategy.

Notes	
Provisional Timetable	To be determined by the Task and Finish Group at its first meeting.

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