



Carers' Breaks & Respite

Commissioners' workshop

Wednesday 26th February 2025

10:00 - 13:00



Welcome to the Carers' breaks & respite workshop

The purpose of this half day workshop is to provide a space for commissioners to share and learn how to offer effective carers' breaks and respite care, in challenging financial climates.

The event will consider:

- Our legal responsibilities as local authorities
- What respite means to carers, and what is most important to them
- Innovative alternatives to traditional respite
- Current challenges in provision, and how we might overcome them

This work is part of the WM ADASS Improvement Programme.

Housekeeping

- We will be recording this event; the video will be made available after the webinar;
- Audience: Please switch off your microphone. Any comments or questions can be submitted via 'Chat';
- MST automatically records attendee details i.e. email address. We will use this to identify people who joined. This data will be deleted when no longer required;
- ➤ We will not sell or share your Data with a 3rd Party. Data will not be used for any purpose other than to share relevant circulars i.e. sharing the PowerPoint or recording.

Agenda

- 10:15 Welcome- Peter Tomlin
- 10:25 Legislative background Gabrielle Borro
- 10:40 Vision for respite- from people with lived experience- Lydia Snape
- 11:00 Direct Payments- Alastair Eggington
- 11:10 Innovation in respite & carers breaks –SLP and LA contributors
- 11:30 BREAK (10 minutes)
- 11:40 A framework for understanding respite- Anna Walker
- 11:45 Breakout sessions- respite and breaks across different service areas- all
- 12:15 Feedback- all
- 12:45 Next steps and close- Peter Tomlin

Welcome

Peter Tomlin

Corporate Director of Adult Social Care and

All Age Commissioning

City of Stoke on Trent Council





Gabrielle Borro – Joint Carers and Engagement Lead

Care Act Duties – Carers



Carers Assessment

Where it appears a carer has needs for support (either current or future) the authority must offer an assessment of need



Willing and Able

We must ascertain what a carer is willing and able to provide and parts of their role they do not wish to continue



Eligible Needs

We have a duty to meet any unmet needs in line with eligibility guidelines



Information and Advice

Provide information and advice that is relevant to specific circumstances, including those who will be self-funding their care and those who are not eligible.



Sustainability

Assessments should look at the long-term sustainability of a caring role. Whether the carer is working / or in education/



Whole Family Approach

We should understand the needs of everyone within the family and the impact caring may have on them. This includes responsibilities for Young Carers.



Promotion of Wellbeing

Local authorities must have regard to wellbeing. We must look at how carers manage their own health and wellbeing alongside caring responsibilities.



Prevent / Reduce / Delay

Ensure the provision of preventative services. Carers play a vital role in in preventing the need for other care and support.



ຶ່ງ EQUAL FOOTING UNDER THE CARE ACT 2014 ຶ່ງ ກໍ



The Care & Support (Eligibility Criteria) Regulations 2014

Do your needs arise from your caring role?

Wellbei

Your physical or mental health is, or is at risk of, deteriorating;

As a result you are unable to meet any of the following outcomes:

- Carrying out any caring responsibilities the carer has for a child
- Providing care to other persons
- Maintaining a habitable home environment
- Managing and maintaining nutrition
- Developing and maintaining family or other personal relationships
- Engaging in work, training, education or volunteering
- Making use of necessary facilities or services in the local community, including recreational facilities or services
- Engaging in recreational activities.

he Impact

As a consequence, there is a significant impact on your wellbeing.

Is the answer YES to all three questions, you will be considered eligible for support.

Significant Impact

Significant impact is the determination of eligibility. This is can be a difficult area to assess and it unlikely that the same scenarios carers present with will have the same impact. For carers it may be a single effect, for example they have had to relinquish caring responsibilities for their grandchild, for that carer the impact is significant on them.

Given the tendency for caring roles to increase over time many carers present with the cumulative effects of caring that end up having a significant impact on their wellbeing and effecting all areas of wellbeing.

Promoting Diversity and quality of provision of services

A local authority must promote the efficient and effective operation of a market in services for meeting care and support needs with a view to ensuring that any person in its area wishing to access services in the market—

- (a) has a variety of providers to choose from who (taken together) provide a variety of services;
- (b) has a variety of high-quality services to choose from;
- (c) has sufficient information to make an informed decision about how to meet the needs in question. –

This includes services for meeting carers' needs for support

Duty of cooperation and integration – the Care Act makes integration, cooperation and partnership a legal requirement on local authorities and on all agencies involved in public care, including the NHS, independent or private sector organisations, some housing functions and the CQC.

Statutory Guidance

- Respite / Break provision are integral to fulfilling the Care Act requirements
- As the delivery of respite provision often results in a service that replaces the care of the carer and results in delivery of support to the carer, it's important that both the needs of the carer and the cared for person are understood and assessed, determinations for respite need to be based on both person's needs, wishes and outcomes
- Care Act 2014 or guidance does not introduce any caps or limitations in terms of how much a carer is allocated rather that respite provision should be based of need.
 - Local authorities have been criticised for using resource allocation systems, where there is little alignment with the actual needs of the carer / cared for person. Applying arbitrary amounts with no evidence of correlation with needs can be considering "fettering of discretion"
- Local authorities can operate cost effectiveness guidance but must demonstrate there is suitable and available provision to meet needs before restricting cost
- Respite provision starts to be considered a permanent residence after 28 days of consecutive provision if delivered in a residential setting
- Alignment of personal budgets is encouraged in the statutory guidance, where a carers direct payment is offered alongside a personal budget for the person with support needs – 11.37 – <u>Care Act Statutory Guidance</u>
- Charging for services delivered directly to the carer (such as a carers' direct
 payment) is up to the discretion of the local authority but statutory guidance
 indicates this is likely to create a "false economy" hence why most local authorities
 do not charge

"Where a service is provided directly to the adult needing care, even though it is to meet the carer's needs, then that adult would be liable to pay any charge, and must agree to doing so" – <u>Care Act Statutory Guidance</u>

"Where replacement care is essentially a homecare service provided to the adult need care that enables the carer to have a break, it should be considered a service provided to the cared for person, and thus must be charged to them, not the carer". - Care Act Statutory Guidance

Challenges with applying the statutory framework

- Despite the Care Act 2014, placing Carers on an equal footing, the requirement to charge for services for breaks and respite can be a deterrent for people taking up services. It can provide a difficult challenge in situations:
 - Where the person being cared for doesn't fully recognise the need for respite provision
 - Where the person lacks insight into what the carer does for them.
 - Where the person doesn't want any other care than that of the carer (All common scenarios).
- Joint approaches to assessment are needed, so it's not enough to assess a carers needs and determine respite as we need to understand the needs of the person whom the care will be delivered
- Ensuring that there is enough resource to meet demands, individualised approaches to respite and not taking a one-size fits all approach, this can be difficult to commission for, particularly where demand is more nuanced
- Pandemic distorted demand for respite provision
- Mental capacity needs consideration Best Interests may need consideration when putting respite provision in place
- Health funded respite and access.

A vision for respite from people with lived experience

Lydia Snape - unpaid carer and member of WM-ADASS Co-production Advisory group



Process – Carers Direct Payments

Funding Application Made

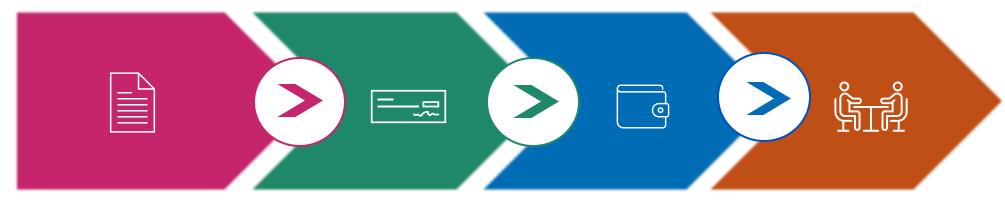
Carers Direct Payments can be paid on-going or as a one-off payment.

Support plan finalised with carers personal budget

Review

An initial follow up review takes place around 6/8 weeks after the Direct Payment has been issued.

An annual review will be scheduled following this.



Carers Assessment / Joint Assessment

Either a Carers Assessment or Joint Assessment is completed. A determination of eligibility is made.

Payment Made to Carer

Range of ways this happens depending on frequency and whether internally or external managed. This can either be via a pre-payment card or BACs.

A letter of agreement issued alongside payment.

Use of Carers' Direct Payments to support break opportunities



support networks

Andrew and Lily

Andrew cares for his wife Lily, who is living with dementia. Andrew and Lily's life had become more and more isolated. They had moved to Coventry decades ago and as his caring role had intensified he'd had to give up work. Since the pandemic, his caring role had amplified and he'd had little opportunities outside of the home. Andrew didin't want Lily to go into a respite placement or receive breaks at home. We explored options with Andrew and he expressed a wish to visit his family up North. The Carers Direct payment funded both Andrew and Lily to travel and stay near family for a week.

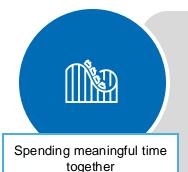
The break had meant Andrew, managed to reconnect with his family. During the week his family had the chance to get to know Lily a lot better, Lily felt comfortable in their presence and was able to stay for longer durations with Andrew's family meaning Andrew got a break and by the end of the week had two full days fishing with his brother. Andrew's family have since been to visit.



home

Harpreet and Jas

Harpreet and Jas. Jas looks after her daughter Harpreet who had autism. The practitioner discussed carers direct payments with Jas during an assessment but at the time Jas was unsure of what would help. After a couple of weeks Jas recontacted the team and asked if she could utilise the Direct Payment to make some improvements to the garden, so that it was more secure and a safer space for Harpreet to play. The garden had been neglected for some years and had become a source of worry. The direct payment also bought some climbing equipment so Harpreet had somewhere to climb and slide. Jas felt more confident knowing that Harpreet was safe in the garden playing, it freed up some of her time within the home.



Ryan and Mum

Ryan has a learning disability and autism and since the pandemic has refused to accept support from anyone other than his Mum. He's receiving clinical support from the learning disabilities team. As a consequence Mum has had to give up work. Ryan loves going to theme parks, fast rollercoasters and spinning motions and his Mum really enjoys this time too but they were often turning up at theme parks and at the last minute Ryan would refuse to get out the car, which was proving costly. The direct payment funded a pass for the family which helped flexibility when this happens. It also meant that Mum had a range of activities she could access at low cost. Mum enjoys this time with Ryan and they both get a change of scenery from their home.

Challenges

Carers Direct Payments

- Time is fundamental, carers need time to process a carers direct payment and think about how their needs might be
 met, practitioners need time to explain and think how it might support the carer
- Perceptions of necessity is it really essential / will it really make a difference / is it just tokenistic
- Still examples of using indicative budgets rather than based on need (lots of Direct Payments all for the same amount)
- Evidence of those caring most intensely not benefitting as much
- Practitioners / service managers who struggle with creative options rather than traditional support
- Blurred lines between who the service is for and whether it should be charged
- Knowledge of practitioners in general

Direct Payments for respite / break provision

- Use of direct payments limited to purchasing traditional models of respite, few examples of out of the box thinking, use
 of holidays or dual personal budgets
- Charging can be a deterrent, sometimes the cost of the service is so minimal that it matches the financial contribution from the person
- Ensuring that there is suitable provision
- Ensuring that carers can plan for the future.

Innovation in respite & carers breaks

Lynne Harrison
Operations Director
Shared Lives Plus





Shared Lives Respite provision West Midlands

27th February 2025

Why Shared Lives?

- Shared Lives strengths-based, sharing family and community life
- Highly flexible model of support Longterm live in support, day support or respite/short break options
- 97% of Schemes rated by CQC as good or outstanding
- Savings of between £8,000 to £30,000 per person drawing on care

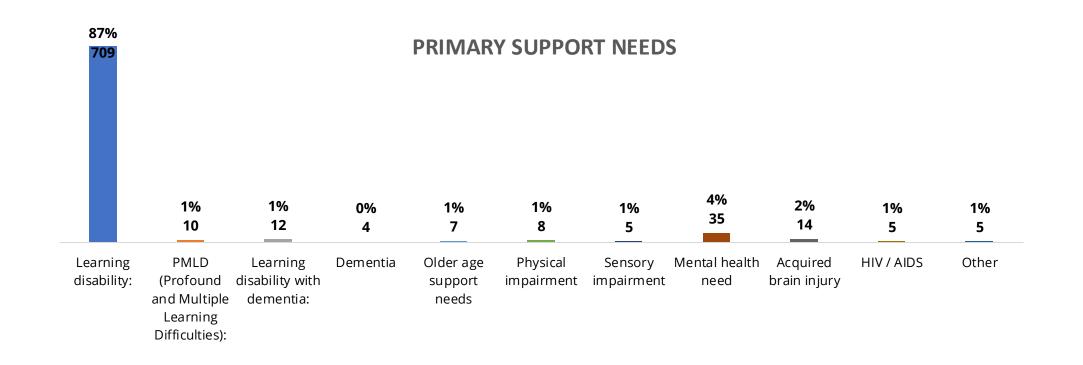




"Striving to have the best regional improvement programme in England"



TOTAL NUMBER OF SUPPORTED PEOPLE - WEST MIDLANDS REGION	790
TRANSITIONS/CARE LEAVERS	36

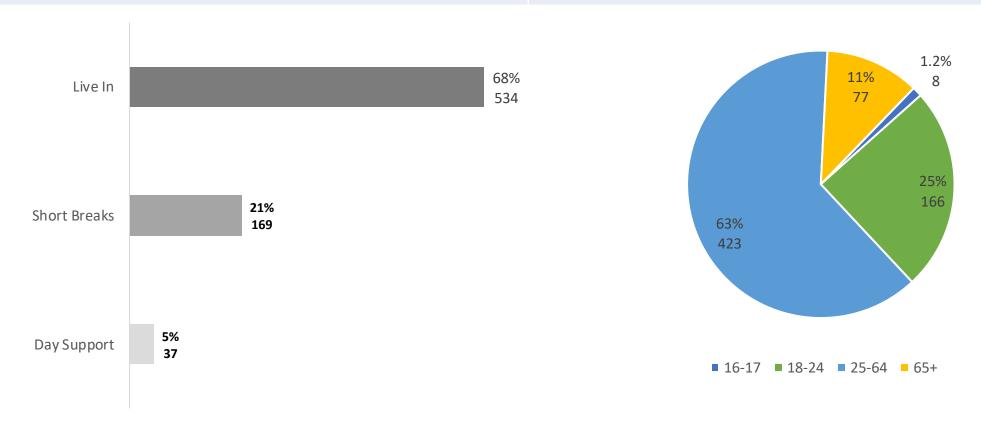




"Striving to have the best regional improvement programme in England"



TYPES OF SUPPORT ARRANGEMENTS PROVIDED TO SUPPORTED PEOPLE	AGE GROUPS
Live In · Short Breaks · Day Support	16-17 · 18-24 · 25-64 · 65+



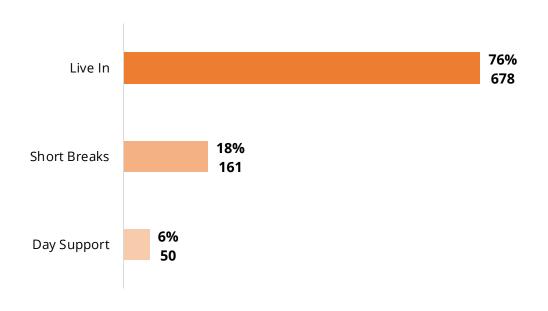


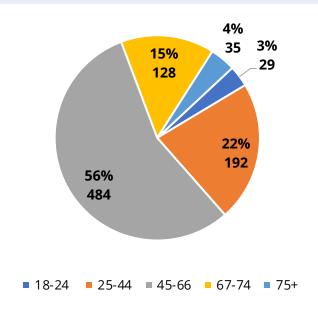
"Striving to have the best regional improvement programme in England"



TOTAL NUMBER OF SHARED LIVES CARERS – WEST MIDLANDS REGION	941
TOTAL NUMBER OF SHARED LIVES SUPPORT CARERS – WEST MIDLANDS REGION	174

SUPPORT TYPES PROVIDED BY SHARED LIVES CARERS	AGE GROUPS
Live In · Short Breaks · Day Support	18-24 · 25-44 · 45-66 · 67-74 · 75+





What Respite Provision Looks Like in Shared Lives

- Short stays with an alternative Shared Lives carer.
- Day support with different carers or community activities.
- Supported holidays or breaks tailored to individual needs.
- Emergency respite for unexpected situations.
- Flexible support arrangements based on personal preferences.



The Importance of Respite in Shared Lives Arrangements





- Provides a break from routine, boosting well-being.
- Encourages social interactions and new experiences.
- Supports independence and personal growth.
- Prevents burnout for both the person supported and their carer.
- Improves quality of life with variety and relaxation.

Respite includes short stays, day activities, or supported holidays.

Helps maintain long-term stability in Shared Lives arrangements.

Planned respite ensures smooth transitions and continuity of care.

Funding may be available through local authorities or personal budgets.

Open communication among all parties makes respite effective

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Enabling Shared Lives short break carers to flourish in Durham





A barrier to growing Shared Lives short breaks is guaranteeing enough referrals, and therefore income, to Shared Lives carers to allow them to leave other work roles. To address this, Durham Shared Lives has introduced service-level agreements (SLAs) for newly approved short break carers to ensure they can secure an income in their first year following approval.

Suitable short breaks carers are offered an SLA which guarantees a care and support fee or equivalent for 12 months. The SLA is classed as an expense payment and does not affect the self-employment status of the Shared Lives carer. The SLA enables Shared Lives carers to leave work and fully commit to short breaks. They have 12 months grace to establish short break arrangements with several supported people that could financially sustain them longer term.

This initiative has been a success so far, with four SLAs signed off. Each bedroom under the SLA can support sixteen new short break arrangements across the year. Durham Shared Lives has 81 supported people receiving overnight breaks, 38 of whom are living in long-term Shared Lives arrangements. Long-term Shared Lives carers also benefit from regular, matched short breaks.

Innovation in respite & carers breaks- Local authorities

- Booking Lauren Richardson, Staffordshire
- Short breaks- Nicola McGregor, Dudley
- My Time- Gabrielle Borro, Coventry

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Carers' Breaks & Respite

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10 Minute Break



A framework for understanding respite- Anna Walker

Type of respite/ support	Equipment	Sitting Service (day)	Day opportunities/ Short breaks	Accessing community	Residential respite	Overnight sitting	Family holidays (replacement care)
Availability- what provision exists, awareness?							
Access- eligibility, booking process, finance							
Quality- is there good provision for all?							
Examples/ Case studies							

Breakout sessions- respite and breaks across different service areas

- Please consider the framework, and where your strengths and gaps lie
- Trying to create a patchwork of good practice and unmet need across the region
- You may want to focus on one row, or one service area depending on the people within your group
- Please complete as much as you are able to, but be ready to feedback three key areas of **strength** and three key areas of **challenge**

feedback

Next steps and close- Peter Tomlin





Thank you for joining us today

A copy of the recording will be uploaded to: https://www.wm-adass.org.uk/news-events/

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eMail us at info@wm-adass.org.uk