Report to:	Cabinet
Date:	26 June 2018
By:	Director of Adult Social Care and Health
Title of Report:	Remodelling of Carers services
Purpose of Report:	To consider proposals for Carers Services

RECOMMENDATIONS

Cabinet is recommended to:

- 1. agree to the remodelling of Carers Services as set out in the report; and
- 2. delegate to the Director of Adult Social Care and Health authority to take all necessary actions to give effect to the implementation of the above recommendations.

1. Background

1.1 There are approximately 60,000 carers in East Sussex with up to 20% of those known to statutory or community services. There is a 32% turnover in caring¹, meaning that every year in East Sussex, there are approximately 19,000 new carers and the same number again ending their caring roles. Three out of five people will be carers at some point in their lives².

2. Supporting Information

2.1 The current gross annual budget for Carers Services is £4,284,000. The savings proposal for Carers Services is £422,000, leaving available funding of £3,862,000 for 2018/2019. The gross budget for Carers Services has reduced over recent years, as set out in the table below. With the £422,000 savings, the overall Carers Services budget will have reduced by 18% since 2016-2017.

	16/17	17/18	18/19
Gross Budget	£000	£000	£000
Clinical Commissioning Group	3,613	3,304	3,304
	3,013	3,304	3,304
ESCC	1,116	1,116	980
Savings			(422)
Total funding	4,729	4,420	3,862

2.2 The proposal to deliver £422,000 savings from Carers Services covers services commissioned from the voluntary sector and staff savings from the directly provided Carers Breaks and Engagement Team.

¹ Analysis conducted for Carers UK by Michael Hirst (2014) Transitions into and out of unpaid care

² Carers UK (2001) It Could Be You – A report on the chances of becoming a carer

2.3 Carers Services are commissioned from a range of voluntary sector providers. The Carers Breaks and Engagement Team also provides short-term interventions to people living with dementia and other long-term conditions and their carers, and is funded from the Carers Services budget. In addition, the Association of Carers provides carer respite.

2.4 The majority of voluntary sector services for carers were initially commissioned through the Commissioning Grants Prospectus and are now contracted services. These services are as follows:

Provider	Service	Target Group
Care for the Carers	Carers Centre (information, advice, support, engagement, counselling, outreach)	All adult carers of adults
Association of Carers	Computer Help at Home (one to one tuition at home with a volunteer)	All adult carers of adults
Association of Carers	Talk & Support (telephone support)	Isolated, housebound and bereaved carers
Alzheimer's Society	CrISP (Carers Information & Support Programme)	Dementia carers
British Red Cross	Carer Support – short-term & crisis interventions	All adult carers of adults
ICE Project	Information & Training for Mental Health carers	Mental health carers
Coastal Wellbeing	WRAP (Wellness Recovery Action Planning)	All adult carers of adults
Motor Neurone Disease Association (MNDA)	Carer Support	MNDA carers
Headway	Carer Support (Acquired Brain Injury)	Acquired Brain Injury carers

2.5 Over the last two years the Carers Breaks and Engagement Team have successfully bid to deliver additional Clinical Commissioning Group funded services. These are:

- Carers Primary Care Service
- Dementia Guide Service
- Dementia Support Service

The total annual funding for these services is £716,000.

3. Consultation Summary

3.1 In the ten week consultation period from 15th February to 25th April 2018, a series of individual and collective consultation meetings took place. In addition, views were sought from a range of stakeholders by letter, telephone, email and meetings.

3.2 A total of 796 comments or queries were received from people about Carers Services prior to and during the consultation period.

3.3 People disagree with the proposal to reduce funding or are unhappy with it. Key themes from the consultation include:

- Carers save money by providing unpaid care at home and should be invested in
- Cutting funding would put more pressure and stress on carers, affect their health and wellbeing, and increase their own support needs
- This saving is a false economy, as if carers can't continue in their caring role it would be more expensive in the long term and may push more people into residential care sooner

- People want valuable voluntary and charity services to be supported to continue providing support for carers
- There are already growing numbers of carers needing help, while at the same time social care and carers services have already been reduced
- People are particularly concerned about reductions in support for the person they care for and say that statutory organisations will see more demand for other services if funding is reduced
- Organisations say that carers are affected by both the cuts to their support and reductions in services for the person they care for
- Day services for older people and those with a learning disability provide valuable respite for carers and allow them to continue working
- Carers need ongoing support and advice to help them continue as a carer

3.4 A summary of the responses to the Carers Services consultation is set out in the report at Appendix 1 and copies of all the consultation responses that have been received are in the Member's room and the Cabinet room for Members to consider.

4. Proposed changes to the Service Provision

4.1 It is proposed that a new model of Carers Services is developed and commissioned within available resources. Services will be recommissioned during Autumn 2018 to commence in April 2019, after current funding agreements cease.

- 4.2 The new service model will comprise of four key elements:
 - **Early identification**: the priority will be to reach carers at an early stage of their caring journey as evidence indicates this helps prevent the escalation of need
 - **Single Access Point**: Information, advice and signposting for all carers in one place which reflects the priority identified by carers
 - **Universal Services**: focusing on lower level support through groups, peer support, enhancing wellbeing and training
 - **Targeted Services**: where eligible need is identified and this will include respite care and end of life support

5. Impact of delivering the proposed changes to the service provision

5.1 In considering the proposals in this report, Cabinet Members are required to have 'due regard' to the duties set out in Section 149 of the Equality Act 2010 (the Public Sector Equality Duty). Equalities Impact Assessments (EqIAs) are carried out to identify any adverse impacts that may arise as a result of the proposals for those with protected characteristics and to identify appropriate mitigations. A summary of the key impacts from the EqIA can be found at Appendix 2 and the full version of relevant completed EqIAs have been placed in the Members' and Cabinet Room and are available on the <u>Cabinet</u> pages of the County Council's website. They can be inspected upon request at County Hall. Members must read the full version of the EqIAs and take their findings into consideration when determining these proposals.

5.2 The biggest impacts of delivering this saving proposal are likely to be in the following areas:

- male carers who are underrepresented in carers' services
- female carers may be disproportionately affected as they are the majority of carers
- Older carers are likely to be experiencing age related challenges to their own physical and mental health, as well as the person they care for

- Younger carers may receive less support to access opportunities, and may face barriers to their social and educational development and access to employment
- Unpaid carers have twice the prevalence of long-term illness and disability, and a reduction in services may result in poorer mental and or physical health and a risk to the sustainability of the caring role
- BME carers are less likely to be receiving practical and financial support with caring and may struggle to access culturally appropriate services
- As many carers are caring for a partner or spouse, those who are married or in a civil partnership may be disproportionately affected by a reduction in services
- Reduced funding for services may disproportionately affect older LGBT carers who are estimated to already be under represented as service users
- Rural carers may face additional barriers including inadequate transport options and be at greater risk of social isolation
- Carers on low-incomes may have fewer options with a reduced service, and not be able to pay for the additional support they need

In addition to the above, key transition points and vulnerabilities for carers can include:

- point of diagnosis
- start of active caring role as needs increase, following hospital discharge or as capacity declines
- young carers reaching adulthood
- parent carers where their disabled child moves to adult services or leaves home
- becoming a parent or grandparent
- entering or leaving paid work
- caring for someone with substance misuse issues
- carers with their own physical or mental health issues
- multiple caring roles
- bereaved carers

5.3 There is likely to be a cumulative impact on carers resulting from other savings proposals such as a reduction in respite due to the proposed decrease in provision in learning disability services. Overall, there is likely to be reduced support available to carers and less choice of services.

6. Conclusion and Reason for Recommendations

6.1 It is recognised that Carers Services are strategically relevant as they make a significant contribution to keeping people with care and support needs safe, preventing their needs from escalating and enabling them to remain living in the community.

6.2 The impact of reducing the budget by £422,000 will be significant and is likely to result in a reduction of carer specific support services. Other forms of support are available in the community; for example, targeted at older people, but like-for-like alternative service provision that recognises the specific needs of carers is unlikely to be available.

6.3 The recommendation to proceed with the remodelling of services is in line with the strategic priorities of East Sussex County Council but will be delivered with less resource. The Council is no longer in a position to continue providing or commissioning the same level of Carers Services. Over time, the reduction in service provision may increase pressure on other social care services.

KEITH HINKLEY Director of Adult Social Care and Health

Contact Officer: Tamsin Peart, Strategic Commissioning Manager Lead Member: Councillor Maynard Local Member: Countywide service

BACKGROUND PAPERS:

Appendix 1: Consultation Report

Appendix 2: Equality Impact Assessment summary

ASC savings consultation 2018 Carers' services

Appendix 1



Date: June 2018

Document summary

Results from the ASC savings consultation carried out between February and April 2018, focusing on the carers' services

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About this document:

Enquiries:Author:Community Relations TeamTelephone:01273 481 242Email:consultationASC@eastsussex.gov.ukDownload this documentFrom:www.eastsussex.gov.uk/ascsavings	Version number: 1 Related information		
Accessibility help Zoom in or out by holding down the Control key and turning the mouse wheel. CTRL and click on the table of contents to navigate. Press CTRL and Home key to return to the top of the document Press Alt-left arrow to return to your previous location.			

Background

The Council agreed its budget for 2018/19 at its meeting on 6 February. It will see the Council make savings of £17 million. This includes a budget reduction for Adult Social Care and Health of nearly £10 million.

We used the consultation to ask for people's views on how we are proposing to make the savings. Shortly before the consultation launched, the Government announced some extra funding for social care provision. No decisions have been made yet on how the Council will spend the £1.6 million it will receive.

This report is about savings proposal for carers' services. We are proposing to reduce the amount of money that we spend on carers' services by 10%.

The Council's Cabinet will consider recommendations, the consultation results and Equality Impact Assessments at its meeting on 26 June. All responses received in the consultation will be presented in Members Papers.

Summary

This section provides a summary of the key themes and activity from the consultation. You can find the full results in the appendices.

We consulted on our savings proposals for carers' services between 15 February and 25 April 2018.

Activity and events

One meeting was arranged in each of the three clinical commissioning group areas and there was also an additional event arranged due to the level of interest.

Event type	Details	Attendees
Carers consultation meeting	Thursday 22 Feb 10.30am - 12.30pm	15
(Hastings and Rother area)	The Bridge Community Centre	
Carers consultation meeting	Tuesday 6 Mar 2.00pm - 4.00pm	27
(High Weald Lewes and Havens area)	The Anzac Hall, Meridian Centre	
Carers consultation meeting	Wednesday 21 Mar 2.00pm - 4.00pm	46
(Eastbourne, Hailsham and Seaford area)	All Saints Church Hall	
Peer Support Network	Wednesday 28 Mar 11.30am – 2.30pm	34
Summit	Project Art Works, Hastings	
Carers' Network Meeting	Tuesday 10 Apr 10am – 12pm	28
	All Saints Church Hall, Eastbourne	
Carers consultation meeting	Thursday 12 Apr 2pm – 4pm	20
(extra event)	Bexhill Town Hall	

Respondent numbers and response methods

The table below shows the different ways that respondents shared their views. Some people may have taken part more than once.

Method	Volume
Survey for people who use services	550
(Paper and online)	

General survey about the savings (Paper and online)	53
Other feedback (Email, letter, call, video, feedback form)	Indiv: 19 Org or group: 4
Event or meeting	170
Total responses	796

Key messages

These key messages reflect the feedback received from organisations, groups and individuals across meetings, surveys and other feedback such as emails and letters.

- People disagree with, or are unhappy about, the proposal to cut funding for carers' support.
- They say that carers save money by providing unpaid care at home and should be invested in.
- Cutting funding would put more pressure and stress on carers, affect their health and wellbeing, and increase their own support needs.
- This saving is a false economy, as if carers can't continue in their caring role it would be more expensive in the long term and may push more people into residential care sooner.
- People want valuable voluntary and charity services to be supported to continue providing support for carers.
- There are already growing numbers of carers needing help, while at the same time social care and carers' services have already been reduced.
- People are particularly concerned about reductions in support for the person they care for and say that statutory organisations would see more demand for other services if funding is reduced.
- Organisations say that carers affected by both the cuts to their support and to reductions in services for the person they care for. For example, cuts to day services for older people and those with a learning disability.
- People were concerned about whether an impact assessment has been done and whether decisions have already been made.
- Nearly half can get the information and advice they need most of the time. It would be better if carers have access to more information and advice in one place.
- 40% say they get the support they need most of the time. It would be better if carers get ongoing support and had one contact person supporting them.
- Targeted services they find most helpful are ongoing support, practical support, and respite from caring.
- Peer support groups can help people to continue in their caring role and gain power over their situation through shared knowledge.

People suggest more effective partnership working, streamlined services and reviewing the number of senior managers and consultants.

Summary of themes by response method

Carers survey

Views: People disagree with the proposal to cut funding or are unhappy with it.

- They say that carers save money by providing unpaid care at home.
- Cutting funding will put more pressure on carers and affect their health and wellbeing.
- This saving is a false economy, as if carers can't continue in their caring role it will be more expensive in the long term and may push more people into residential care sooner.

What helps most in their caring role: Support from Care for the carers (CftC), from friends and family, respite services, and support from the Council to navigate the system.

First identifying as carer and a better way: People were most likely to say this happened when their relative became ill or was diagnosed with an illness or condition.

Information and advice: Nearly half can get the information and advice they need most of the time. It would be better if carers have access to more information and all in one place.

Support you need to continue caring: 40% say they get the support they need most of the time. People made positive comments about their support, but said it would be better if they got the information they need, ongoing support, and practical support.

Targeted services for carers concerned about their health and wellbeing: Offering them ongoing support, advice and support from a health advisor, and respite from caring are most important.

Targeted services for carers caring for someone with a long-term condition: Offering them ongoing support and respite from caring are most important.

Targeted services for carers caring for someone who has a life-limiting condition: Offering them ongoing support is most important.

Other comments: They disagree with the proposal to cut funding and say that carers need ongoing support and advice to help them continue as a carer.

General survey

Views on the proposal

- People commented on national finances and spending and the local impact.
- The most vulnerable would be affected by the proposals.
- Carers already save the government money and any savings would be more expensive in the long term.

The impact of the proposal

- The proposals would increase the stress on carers.
- Statutory organisations would see more demand for other services if funding is reduced.

Suggestions

• People said the Council should do things differently and innovate.

Other feedback via letter, email etc

Organisation and group feedback

Views on the proposal

- They recognise the financial pressures the Council is facing, but are concerned about the impact of the proposals on unpaid carers.
- Carers are affected by both the cuts to their support and to reductions in services for the person they care for.
- There are already growing numbers of carers needing help, while at the same time social care and carers' services have already been reduced.
- Peer support groups can help people to continue in their caring role and gain power over their situation through shared knowledge.

The impact of the proposal

- Cutting the carers' budget is a false economy and would lead to greater expenditure in other areas of the budget.
- Carers are not a resource or a solution to the funding crisis, as this would just lead to more carers experiencing ill health, having to leave work or being unable to cope.

Individual feedback

Views on the proposal

- Unpaid carers save money and should be invested in.
- People are generally more concerned about changes to the services the person they care for receives and the impact this would have on them.
- The value that people place on the Carer's Personal Budget.
- People feel that decisions have already been made and the consultation is a waste of time.

Events feedback

Views on the proposal

- Carers save money for the Council and NHS and give good quality care.
- The Care Act means that Councils have a duty to meet people's needs.
- Day services for older people and those with a learning disability provide valuable respite for carers and allow them to continue working.
- Carers don't always recognise themselves as carers or it can take time to be identified as such.
- People value the information and support provided by CftC and services like counselling and courses for new carers.
- People were concerned about whether an impact assessment has been done and whether decisions have already been made.
- They want valuable voluntary and charity services to be supported to continue.
- They wanted to know why carers personal budgets that were granted in previous years are now being refused and whether these will be cut in future.

The impact of the proposal

- If carers lose support it would be more expensive in the long term as they would need more support and more people would end up in hospital.
- It's important that the cared for has their needs met and service maintained, as any reductions impact on the carer and their quality of life.

Suggestions

- More effective partnership working and streamlining services where possible.
- Review the number of senior managers and consultants and make savings there.
- Could one of Milton Grange or Firwood House remain open to minimise the impact on clients?

Sample quotes

These comments are a small selection of the comments we received during the consultation. They have been chosen as they either reflect the key themes or offer a specific suggestion.

Organisation comments

"[We are] already seeing a rise in the number of carers needing help, an increase in the intensity of caring roles and a growing number of safeguarding concerns – all coupled with a marked reduction in services available to carers and vulnerable people. Caring hugely impacts peoples' lives, affecting their health, and limiting their finances and career."

"All agreed that the group provided emotional support and its loss would be devastating to not only the carer but also the cared for also. The social element of the group was also important as it allowed everyone to socialise and help to relieve the isolation that can come with caring."

"[T]he development and commissioning of services including re-tendering should be done in consultation with service users."

Individual comments including clients, carers, staff and the public

"[Carers save an] inestimable amount of money every year. Carers are often unpaid and if they are unable to carry on or breakdown the burden falls on the taxpayer."

"Carers need to be looked after so they can look after the person they care for. If not they will suffer ill health themselves and will end up needing care and the cared for person will need to be cared for by someone else. It would be false economy to neglect carers' needs."

"If less support is made available for carers (for example) two important things will happen. 1/The carers will become more stressed and in turn they too will need more social help. 2/ If the carer cannot cope the person being cared for will have to go into a home. In both of these scenarios the government would end up with a bigger and more expensive problem."

"Care for the Carers have helped with counselling and someone on the end of the phone to talk to when I have had enough."

"Care4Carers has listened, it may not be able to have a magic wand to stop the hurt that people are experiencing, but it takes the time to listen and hope they can help."

"Counselling sessions gave me confidence to self refer to health in mind who provided a 6 week stress control course which has been very useful in improving my resilience to the caring situation."

"I would like to suggest rather than giving away a carers personal budget of between £100 to £500 for a one off expense to a carer to get a break or meet their need in another way that the council should do what Brighton do - they don't have carers personal budget that money is used I believe to provide support to the carer by ongoing services such as a sitting service so the carer is able to have a break and go out weekly or bi weekly and have time away as the care needs are covered to enable the carer to have a break which

is far more beneficial than a one off holiday or physio treatment etc to maintain health and wellbeing."

"Carers should be treated as active partners and be given the recognition and support they need."

"Important to make sure more carers are identified and their voices can be heard, plus get the support they need. Often carers don't recognise themselves as carers."

"Bereavement and end of life support is so important – someone there who you can ring up – someone to listen."

"Family carers are the largest unpaid workforce in the UK and are in a position of vulnerability. A reliance on family members to provide care due to Social Care savings will lead to increased pressure on NHS emergency and crisis services in the long-term. An increased dependency on older generation of care-givers and insufficiently met needs of the most vulnerable in our society will impact on NHS dependency two-fold."

Appendix 1: Carers survey

What do you think about our proposal to spend less money on carers' services? (513 answered)

Top theme: Nearly half of the respondents said they disagree with the proposal or are unhappy about it.

The other key themes were:

- Carers save the government and local councils money.
- Cutting funding would put more pressure on carers.
- Providing support and services to carers should be a priority for the Council.
- It is a false economy which would lead to carers and the people they care for needing more support and funding in the long term.
- Carers are typically unpaid, so if they can't continue in their caring role it would be more costly for the Council.
- The cared for would suffer and it would affect their carers' health and wellbeing.
- They understand the need for savings.
- Investment is needed in services.
- The proposal to reduce funding is poor and would cost money.
- People would end up in residential care sooner than they would otherwise.
- More investment is needed in carers' services.

Who or what has helped you most in your caring role? (512 answered)

Top theme: People talked generally about the support they have received from the provider CftC.

The other key themes were:

- They get the most support from family and friends.
- Respite services.
- Support to navigate the system from the Council.
- No one has helped them most.
- Support from their GP.
- The person they care for getting social care support.
- Financial support.
- Support from nurses of the person they care for.
- Support from the STEPS services.

When did you first identify yourself as a carer? (517 answered)

Top theme: People said they first identified as a carer when their relative became ill. The other key themes were:

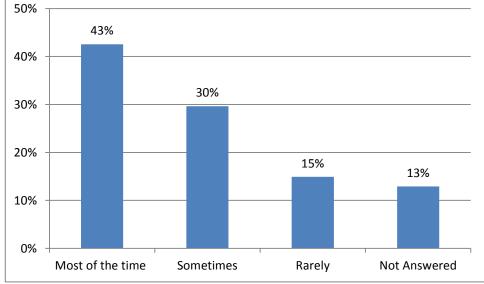
- When the person they care for was diagnosed with an illness or condition.
- It happened naturally through their family responsibilities.
- When their relative lost their independence.
- When the person they care for came home from hospital.
- When the person they care for experienced changes to their physical health.
- Through a gradual change in roles.
- When the person they care for started needing more help and support.

Would there have been a better way for you to have identified yourself as a carer? (480 answered)

Top theme: People said that there wouldn't have been a better way. The other key themes were:

- Identification as a carer needs to happen at an earlier stage.
- It would have been better if their GP had identified it and signposted them.
- You need support and information at an earlier stage.
- The role isn't recognised as it should be.

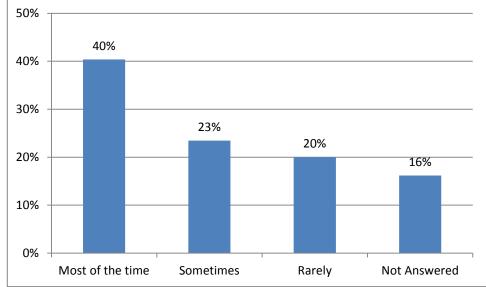
Have you been able to get the information and advice you need as a carer?



We asked people how this support could be better.

Top theme: Provide more information to carers and have one place where people get it. The other key themes were:

- Positive comments about the services which are currently available, particularly CftC.
- Continuity of support must be maintained.
- Information about financial support and providing this earlier in the process.
- Support to manage their health as a carer.



Have you been able to get the support you need to continue in your role as a carer?

We asked how this support could be better.

Top theme: People made a positive comment about the support they have received. The other key themes were:

- The importance of information in being supported.
- If they had got ongoing support.
- If they had practical support.
- If they had respite.
- Carers' services need more resources.
- Carers need access to grants and financial support.
- It would be better if they had one contact person supporting them.
- If they had support to manage their health as a carer.

What sort of targeted services would you find most helpful relating to: (445 answered) Supporting carers who are concerned about their health and wellbeing

Top theme: Offering them ongoing support, advice and support from a health advisor, and respite from caring.

The other key themes were:

- GP support.
- Practical support.
- Emotional support.
- Access to counselling services.
- Financial support.

Caring for someone with a long-term condition

Top theme: Offering them ongoing support and respite from caring are most important. Other key themes:

- Advice and support from a health advisor.
- Financial support.
- Practical support.
- Support to manage their role as life changes for them and the person they care for.

Caring for someone who has a life-limiting condition

Top theme: Offering them ongoing support in their role.

The other key themes were:

- Access to respite from caring
- Practical support.

Do you have any other comments about the proposals?

146 people ticked 'No', while 287 ticked 'Yes'.

Top theme: They disagree with the proposal to cut funding for carers' services and say that carers need ongoing support and advice to help them continue as a carer.

The other key themes were:

- The proposal is a severe blow to carers.
- Carers save the country money.
- The cared-for people would suffer.
- This is a vulnerable group of people who need proactive support.
- It would have consequences for future generations.
- There would be financial implications if the proposal to reduce funding goes ahead and it is likely it would cost money, not make savings.
- The Council should look for savings from other departments.

About you questions

Gender

	Respondents		Census
Male	153	28%	48%
Female	351	64%	52%
Prefer not to say	5	1%	N/A
Not answered	41	7%	N/A

Transgender

6 people identified as transgender, while 429 (78%) answered 'no' and 13 chose prefer not to say. The rest (102) did not answer the question.

Age			
	Respondents		Census
under 18	2	0%	19.8%
18-24	4	1%	7.3%
25-34	8	1%	9.6%
35-44	17	3%	12.5%
45-54	54	10%	14.2%
55-59	36	7%	6.3%
60-64	75	14%	7.5%
65-74	121	22%	11.2%
75+	177	32%	11.6%
Not answered	56	10%	N/A

Ethnicity			
	Respo	ndents	Census
White British	453	82%	
White Irish	10	2%	
White Gypsy/Roma	3	1%	98%
White Irish Traveller	0	0%	
White other	5	1%	
Mixed White and Black			
Caribbean	10	2%	
Mixed White and Black			0.5%
African	1	0.2%	0.5%
Mixed White and Asian	1	0.2%	
Mixed other	1	0.2%	
Asian or Asian British Indian	1	0.2%	
Asian or Asian British			
Pakistani	0	0%	0.6%
Asian or Asian British			0.070
Bangladeshi	0	0%	
Asian or Asian British other	0	0%	
Black or Black British			
Caribbean	0	0%	0.3%
Black or Black British African	0	0%	0.3%
Black or Black British other	0	0%	
Arab	0	0%	
Chinese	2	0.4%	0.3%
Other ethnic group	2	0.40/	0.070
Drofor pot to cov	2	0.4%	N/A
Prefer not to say	-	1%	n/a
Not Answered	54	10%	n/a

Disability

171 (31%) respondents consider themselves to be disabled, while 299 (54%) don't and 24 chose prefer not to say. The rest (56) did not answer the question.

Impairment type

Please note that this is a multiple choice question.

	Respondents		
Physical impairment	98 18%		
Sensory impairment	49	9%	
(hearing and sight)			
Long standing illness or	75 14%		
health condition, such as			
cancer, HIV, heart disease,			
diabetes or epilepsy			
Mental health condition	48	9%	
Learning disability	20	4%	
Other	23	4%	
Prefer not to say	10	2%	

Religion

302 (55%) respondents consider themselves to have a religion or belief, while 159 (29%) do not, and 21 chose prefer not to say. The rest (68) did not answer the question.

Stated religion or belief

	Respondents		Census
Christian	288	52%	60%
Buddhist	1	0.2%	0.4%
Hindu	1	0.2%	0.3%
Jewish	2	0.4%	0.2%
Muslim	0	0%	0.8%
Sikh	0	0%	0%
Other	7	1%	0.7%
Not answered	251	46%	

Sexuality

	Respondents		
Bi/Bisexual	11	2%	
Heterosexual/Straight	395	72%	
Gay woman/Lesbian	0 0%		
Gay Man	5 1%		
Other	7	1%	
Prefer not to say	26	5%	
Not answered	106	19%	

Marriage or civil partnership

330 (60%) respondents are married or in a civil partnership, while 130 (24%) are not and 20 chose prefer not to say. The rest (70) did not answer the question.

Appendix 2: General survey

All the data in this section shows responses for people who ticked to say that they were providing a comment about this savings area (53 people) and not everyone who filled in the general survey (over 700 people).

Are you completing the survey as: (53 answered)

Please note people could choose more than one answer option.

Answer option	Count
A family member or friend of someone who uses social care services	22
An employee of a health or social care organisation	11
A member of the public	13
A group or forum (providing an official response)	0
An organisation (providing an official response)	3
Other (please explain below)	6
Not Answered	2

If you are providing an official organisation or group response, please tell us your: The following organisations and groups provided a response through the survey:

The following organisations and groups provided a response through the survey:

- Care for the Carers
- East Sussex Families & Carers Team
- Sussex Community Development Association

What do you think about our savings proposals? (50 answered)

Top theme: People commented on national finances and spending and the local impact. The other key themes were:

- The most vulnerable would be affected by the proposals.
- It would be more expensive in the long term.
- Carers already save the government money.
- It would increase the stress on carers if services and support are reduced.
- Services for the cared for provide valuable respite for carers and allow them to continue working.

How would people and organisations be affected by the proposals? (50 answered)

Top theme: The proposals would increase the stress on carers.

The other key themes were:

- Statutory organisations would see more demand for other services if funding is reduced.
- If they went ahead it would have a negative impact on carers and their quality of life and their cared-for's quality of life.
- It would just lead to the use of more expensive services and increase hospital visits.

Do you have any suggestions for alternative ways of making the savings? (46 answered) Top theme: People said the Council should do things differently and innovate. The other key themes were:

- Reducing management and support staff at the Council.
- Commented negatively on the recent allowance increase for Councillors.

• Looking for savings in other departments.

Do you have any other comments about the proposals?

27 people ticked 'No', while 22 ticked 'Yes'. There weren't any key themes.

About you questions

Gender

	Respondents		Census
Male	17	32%	48%
Female	34	64%	52%
Prefer not to say	0	0%	N/A
Not answered	2	4%	N/A

Transgender

One person identified as transgender, while 46 (87%) answered 'no' and 2 chose prefer not to say. The rest (4) did not answer the question.

Age			
	Respo	ondents	Census
under 18	0	0%	19.8%
18-24	0	0%	7.3%
25-34	4	8%	9.6%
35-44	7	13%	12.5%
45-54	11	21%	14.2%
55-59	8	15%	6.3%
60-64	9	17%	7.5%
65-74	7	13%	11.2%
75+	3	6%	11.6%
Not answered	4	8%	N/A

Ethnicity

	Respo	ndents	Census
White British	39	74%	
White Irish	0	0%	
White Gypsy/Roma	0	0%	98%
White Irish Traveller	0	0%	
White other	3	6%	
Mixed White and Black	0	0%	
Caribbean			
Mixed White and Black	1	2%	0.5%
African			0.57
Mixed White and Asian	1	2%	
Mixed other	1	2%	
Asian or Asian British Indian	0	0%	
Asian or Asian British	0	0%	
Pakistani			0.6%
Asian or Asian British	0	0%	0.076
Bangladeshi			
Asian or Asian British other	0	0%	

Black or Black British	0	0%	
Caribbean			0.3%
Black or Black British African	0	0%	0.570
Black or Black British other	0	0%	
Arab	1	2%	
Chinese	0	0%	0.3%
Other ethnic group	0	0%	
Prefer not to say	2	4%	N/A
Not Answered	5	9%	n/a

Disability

10 (19%) respondents consider themselves to be disabled, while 37 (70%) don't and 2 chose prefer not to say. The rest (4) did not answer the question.

Impairment type

Please note that this is a multiple choice question.

	Respondents	
Physical impairment	9 17%	
Sensory impairment	0	0%
(hearing and sight)		
Long standing illness or	4	8%
health condition, such as		
cancer, HIV, heart disease,		
diabetes or epilepsy		
Mental health condition	6	11%
Learning disability	0	0%
Other	0	0%
Prefer not to say	1	2%

Religion

22 (42%) respondents consider themselves to have a religion or belief, while 23 (43%) do not, and 4 chose prefer not to say. The rest (4) did not answer the question.

Stated religion or belief

	Respondents		Census
Christian	20	38%	60%
Buddhist	0	0%	0.4%
Hindu	0	0%	0.3%
Jewish	0	0%	0.2%
Muslim	0	0%	0.8%
Sikh	1	2%	0%
Other	2	4%	0.7%
Not answered	30	57%	

Sexuality

	Respondents	
Bi/Bisexual	2	4%
Heterosexual/Straight	41	77%
Gay woman/Lesbian	0	0%
Gay Man	1	2%
Other	0	0%
Prefer not to say	4	8%
Not answered	5	9%

Marriage or civil partnership 30 (57%) respondents are married or in a civil partnership, while 12 (23%) are not and 7 chose prefer not to say. The rest (4) did not answer the question.

Appendix 3: Location of respondents

The map shows the location of respondents who provided their post code on one of the surveys (carers and general). Of the 528 people who shared their views about these proposals and provided their post code, a total of 463 were mappable.



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Note: points may represent multiple addresses at the same postcode

Appendix 4: Other feedback

Organisation and group feedback

The following organisations provided feedback about the proposal:

- 1) Bexhill Carers Wellbeing group
- 2) Care for the Carers
- 3) Hastings and District TUC
- 4) Hastings & St Leonards Local Strategic Partnership

Key themes

The overall themes were:

- Carers are affected by both the cuts to their support and to reductions in services for the person they care for.
- There are already growing numbers of carers needing help, while at the same time social care and carers' services have already been reduced.
- Carers often don't realise the pressure they are under.
- Carers can feel isolated, so they value peer support and the chance to share their experiences.
- Peer support groups can help people to continue in their caring role and gain power over their situation through shared knowledge.

The key concerns were:

• They recognise the financial pressures the Council is facing, but are concerned about the impact of the proposals on unpaid carers.

The key impacts were:

- Cutting the carers' budget is a false economy and would lead to greater expenditure in other areas of the budget.
- Carers are not a resource or a solution to the funding crisis, as this would just lead to more carers experiencing ill health or being unable to cope.
- The proposed reduction in funding for carers' support is likely to increase their support needs and may mean they can't continue to work.

Responses

Please note that the summaries cover all topics that the organisations have provided feedback on and not just the ones directly relevant to this report.

Code: Org000	3 Before co	onsultation started	Letter	Care for	the Carers
	\boxtimes				
HIV support service	Carers support	DESSS	Intermediate care and day services (Milton and Firwood)		LD dps & residential
\boxtimes					
Overall	Older people's day centres	Supporting people (accommodation)	Supporting People (Community)		Stroke Recovery Service
Summary					
 Summary The response recognises the financial challenges the Council faces, but says that the organisation has grave concerns about the impact of the cuts on unpaid carers. Social care cuts affect carers three times more than other vulnerable groups: by cutting the services they rely on for the person they care for; as well as those they rely on for themselves; and also affecting their overall benefits and 					

entitlements. Cutting the carers' budget is a false economy which can only lead to greater • expenditure from other areas of ASC budgets. Carers must not be seen as a solution to the social care funding crisis, and are concerned that they may be expected to plug the gap left when services no longer exist. Carers must not be seen as a resource, nor a means to improving service users' ability to live independently of services. This would lead to more carers experiencing ill health, having to leave work to care, or simply being unable to cope. The organisation is already seeing a rise in the number of carers needing help, an increase in the intensity of caring roles and a growing number of safeguarding concerns - all coupled with a marked reduction in services available to carers and vulnerable people. Code: Org0025 April Email **Bexhill Carers Wellbeing** group \times Π HIV support Carers support DESSS Intermediate care and day LD dps & service services (Milton and residential Firwood) \square \square \square Stroke Recovery Older people's Supporting people Supporting People Overall (accommodation) (Community) Service day centres Summary They value the monthly meeting and the peer support it offers. • Carers often don't realise the pressure they are under. • CftC offers support for a variety of situations and problems. They are an escape valve and mean you can talk to people who have empathy with you but aren't directly involved with your problems. These services help people to maintain their caring role and enable them to cope. The knowledge exchange in groups likes this gives the carer power over their situation. The way the signposting is done is easy to absorb and the relaxed atmosphere helps. Carers can feel isolated, so peer support gives you the strength to carry on caring, while the social aspect is good too. They all agreed that the group provides emotional support and losing it would be devastating to them but also the person they care for. Even when they stop caring, some people continue to attend the group as they feel they can help others through their experiences. Code: Org0016 Hastings & St Leonards April Letter Local Strategic Partnership \times \times \square Carers support DESSS Intermediate care and day LD dps & HIV support service services (Milton and residential Firwood)

\boxtimes		\boxtimes	\boxtimes	
Overall	Older people's	Supporting people	Supporting People	Stroke Recovery
	day centres	(accommodation)	(Community)	Service

Sumn	nary	((0000000)	/	
•	They are the	nerefore cor onate effect	cerned about th	artnership workin le proposed savi e on urban areas	ngs and the	Э
•	Focusing the savings on preventative services is short sighted and would undoubtedly lead to increased demand for acute services.					
•	To fully understand the impact, more detailed analysis needs to be undertaken and the information provided should also reflect the ongoing cuts to services.					
•	Hastings has a higher proportion of people living with long-term conditions. The proposed reduction in funding for carers' support is likely to increase their support needs and may mean they can't continue to work.					
•	 Reductions in funding for accommodation, housing support, and DESSS would affect services which are all vital in tackling homelessness. 					
•	 Hastings has seen bigger increases in homelessness than the rest of the county over the past years as services have reduced. 					
•	 Reducing homelessness is a national priority, so reducing funding for these preventative services is not in keeping with that policy direction or the likely increases in need for these services. 					
•	 Both community housing support services have extensive experience of working with vulnerable people who would struggle to engage with statutory services. 					
•	 Accommodation-based services are essential in helping people to develop tenancy readiness skills. 					
•	 Reductions in these accommodation services would put people at risk of repeat homelessness, impact on the community, and put vulnerable young people at risk of 'cuckooing'. 					
•	Closer par	tnership wor n service pro	king across stat	utory services is ould include shar		
 The areas with the highest demand should be prioritised when funding decisions are made. 						
•	local level	so they can	be better target			
•			community res	involved in the p ilience.	rocess give	en the big
Code:	Org0024	April		Email	Hastings an TUC	nd District
HIV su serv	• •	⊠ rs support	DESSS	Intermediate care a services (Milton Firwood)		☐ LD dps & residential

	day centres	(accommodation)	(Community)	Service
Summary				
 hearte They cuts, withe colored The d from a Stroke The la The s much wards The a They impact 	ed Stand up for are concerned which would le ommunity who ecimation of le already disadw e Recovery Se ack of an Equa taffing cuts wo longer to acco bandonment of urge councillo et and mitigate are opposing	or East Sussex camp d that staff in Adult S ead to inevitable dela are least able to cop ocal services would antaged people (the ervice, carers' support ality Impact Assessmould be a false econd ess services and wo of the preventative a rs to consider using the proposals with t	ocial Care are taking ays in services for tho	the brunt of the se members of ned safety nets ne Works, the ort Service). In is telling. have to wait on hospital e same effect. to limit the ment funding.

Individual feedback

About the feedback	
Number of respondents:	19
When it was received:	Before the consultation: 1
	February: 5
	March: 10
	April: 3
How it was received:	Email: 5
	Letter: 2
	Phone: 12
Who it was from:	Carer: 16
	Client: 1
	Family/friend of client: 2

Key themes

The overall themes were:

- Unpaid carers save money and should be invested in.
- People are generally more concerned about changes to the services the person they care for receives and the impact this would have on them.
- The value that people place on the Carer's Personal Budget.
- People have found the carers' support they have received helpful.
- Some people have found carers' support hard to access or not found it helpful

The key concerns were:

- People feel that decisions have already been made and the consultation is a waste of time.
- The CRESS service will be stopped.

Appendix 5: Events feedback Key themes

The overall themes were:

- Carers save money for the Council and NHS and give good quality care.
- The Care Act means that Councils have a duty to meet people's needs.
- Health and care are interlinked and costs shouldn't be pushed around between them.
- Carers should be treated as active partners and given the support they need.

- Carers are in a position of vulnerability and must not be taken advantage of.
- Day services for older people and those with a learning disability provide valuable respite for carers and allow them to continue working.
- Carers don't always recognise themselves as carers or it can take time to be identified as such.
- People value the information and support provided by CftC and services like counselling and courses for new carers.
- Support and respite is important for people caring for those with complex conditions such as dementia.

Views on other savings proposals:

- Milton grange closing would lead to bed-blocking. Where would people go?
- The Council's older people's day services are better than the private sector. The funding and charges for them need to be realistic.
- The learning disability day services provides social interaction, learning and contribution to society.
- People value having access to personal care facilities at older people's day services.

The key concerns were:

- Whether an impact assessment has been done and whether decisions have already been made.
- That the Council is consulting with health partners about the wider impact of the proposals.
- That valuable voluntary and charity services are supported to continue.
- Why carers personal budgets that were granted in previous years are now being refused and whether these will be cut in future.

The key impacts were:

- If carers lose support it would be more expensive in the long term as they would need more support.
- It is a false economy to cut carers' support and would mean that more people end up in hospital.
- It's important that the cared-for has their needs met and service maintained, as any reductions impact on the carer and their quality of life.

Suggestions:

- More effective partnership working and streamlined services where possible.
- Review the number of senior managers and consultants and make savings there.
- Advertise CftC using their brochures to leave on cars parked in disabled parking spaces Morrison's is a good place.
- Have monthly carers' meetings for people with dementia like the one held at Milton Grange CftC can help to establish carers to facilitate groups.
- Combine 1 Space with ESCIS and have information in one place.
- Could one of Milton Grange or Firwood House remain open to minimise the impact on clients?

Thursday 22 Feb, The Bridge Community Centre

The meeting was introduced and everybody was welcomed. A short video was shown to outline the savings proposals.

The Council gave a presentation on the background, savings proposals and consultation process.

Q & A

Question: Is it a £10 million reduction?

Answer: Yes.

Q: Doesn't mention the withdrawal of the Alzheimer's Society Services?

A: Hastings and Rother and Eastbourne, Hailsham and Seaford Clinical Commissioning Groups tendered for a new Dementia Support Service which will start on 1st April. This covers both the services that the Alzheimer's Society is currently providing to support people living with dementia and their carers. The Society chose not to bid to deliver the service. The Carers Breaks Engagement Team, based in Adult Social Care, will be providing this service from April 2018.

Q: Will there be a transition from the Alzheimer's Society to the new Dementia Support Service?

A: Yes and you will have been contacted by the Alzheimer's Society to ask for your consent for your details to be passed to the new service.

Q: What is meant by voluntary sector providers?

A: Non-statutory and charitable organisations that provide services in the community with paid staff and/or volunteers.

Q: What is meant by the Carers Centre and where is it?

A: It is essentially Care for the Carers – the main office centre is in Eastbourne and we provide services across the county. Carers Centre is a term used to describe carers' organisations that provide a range of services to carers including information, advice and support.

Q: How can carers' own needs be recognised?

A: Carers' needs including health and wellbeing are included in a carer's assessment.

Q: How qualified are the staff that carry out the assessments and is an assessment straightforward?

A: Adult Social Care has a well-trained workforce. Assessments are based on individual carers' needs and will ask a number of specific questions to help establish what needs a carer may have and to look at what might help them in their caring role.

Q: Carers save money for the NHS and councils. How have you reached the savings figures, has there been an impact assessment completed and have decisions been made?

A: No decisions have been made and impact assessments are being completed relating to all savings proposals and will be presented alongside the consultation feedback to Council Cabinet Members (decision makers) in June 2018. The budget savings are a proposal and we are consulting to hear the views and ideas of where the priority should be.

It is very important that we talk to carers and clients about the savings proposals and collect as much feedback as possible about our priorities, what we could do differently or better and how the money we have available can be best spent to meet as many carers' needs as possible.

Q: The Golden Ticket initiative has been endorsed in other parts of the county. But now there are proposed savings, how can this be?

A: There have been a number of areas of search to see where the £10million can be saved. The Golden Ticket is directly funded by the NHS Clinical Commissioning Group (CCG) and not the local authority.

Attendee comment: The local authority could work more effectively with better partnership working. An in-house review with a proposal to look at savings on senior managers could be taken forward.

A: We are looking at everything as part of the savings plans including Adult Social Care staff **Q: A lot of money has recently been spent on Greenwood respite centre providing a**

hotel experience - was it necessary to spend so much money on one service?

A: All services should be considered within the wider context and carers should be treated the same within the system.

Attendee comment: Carers should be treated as active partners and be given the recognition and support they need.

Attendee comment: Important to be supported in terms of the needs of the cared for person, that their needs are met and their care not reduced as this also impacts on the carer.

Q: SENSE is campaigning for better long term support for disabled people and their families – what is the long term fix? The effect on carers will increase.

A: Agree. We need to campaign to government for long term resolutions. We are engaging at both national levels with the Stand Up for East Sussex Campaign (as shown in the video) also at local level. I advocate for health & social care and will strive to protect services but the envelope of money to spend has reduced and since 2010 it has reduced by £112 million, we need to be ready for the reality of savings required.

Q: Are the equality impact assessments being sent to government?

A: Meetings with MPs continue to take place to state the negative impact that the savings may have. Central government has allocated an extra 1.6 million to East Sussex, it has not yet been decided how this money will be prioritised.

Attendee comment: We will Stand up for East Sussex and give our support as carers to the Council.

Q: Can you streamline services available?

A: We have begun to make these improvements; an example is Health and Social Care Connect, a single point of access jointly provided by health and social care. We are trying to remodel services where we can but some services may need to stop.

Q: Whose job is it to make improvements?

A: We work with our partners, stakeholders, clients and their carers to seek any areas to improve and develop support services however the lack of finance can impact on this. *Attendee comment: To have one social worker to build a relationship with, to enable continuous help and support would be better especially for people who have a learning disability.*

A: Many social workers move jobs and recruitment to these posts can be difficult. However a social worker may not always be necessary as there are a range of professionals and trades, for example the increase of care co-ordinators. The provision of a whole life disability service continues to be considered.

Q: Is the decline in social workers budget led?

A: No, social work can be a stressful job and staff move on or get promoted. It is important to get the right person at the right time.

Q: From the £17 million savings required, why is more that 50% of this being taken out of adult social care?

A: Adult social care has the biggest budget proportionately. ESCC has said it will protect adult social care and children's services as the council's 'core offer'. There is opportunity to campaign to your elected members. The government are set to publish a green paper on care and support for older people, but this may not be until next year.

Q: Can a commitment be made to protect the learning disability budget? The review process could be changed to save some money by reducing reviews to every three years.

A: We need to prioritise and protect those with eligible needs. Preventative services cannot be protected.

Attendee comment: If the council cut services even by one day a week this be will taking away what people need.

Q: What are the cuts on the local economy and can there be more savings made?

A: Cuts to services are happening throughout ESCC. It is important we invest in the local economy to attract more business rates as central government are reducing their grants. *Attendee comment: Carers are cheap and give dedicated guality care.*

Q: Are there any MPs attending the consultation meetings?

A: Huw Merriman (for Bexhill and Battle) is attending the carers' forum on the 30th May 2018. *Attendee comment: Not had a response about my query from Huw Merriman.*

A: I will take the details and look into that. [Care for the Carers] are in contact with all MPs in the county and continue to highlight the significant contribution that carers make. Care for the Carers can provide template letters for you to raise your concerns with MPs.

Attendee comment: To disseminate more information – meetings like this should be recorded and broadcast and streamed as a live feed via social media to reach more people.

Attendee comment: I don't agree with the cuts and no longer wish to participate in any discussions that seem to be endorsing the cuts.

A: All the feedback taken from the consultation (meetings, survey & all correspondence) will be used to look at the longer term commissioning plans for carers in East Sussex.

Attendee comment: Please can all good voluntary sector services remain as they are and ESCC to support them in any future developments.

A: Legally, the council has to tender for services as a fair and competitive process and to ensure best quality and price.

Q: How does ESCC ensure best value for money and to get the best service?

A: When ESCC look at bids they consider quality over price however ensuring best value is important. Contracts are now given over longer periods.

Q: What services do you have in mind, are ESCC providing practical support? A: We do provide these services now but can streamline or provide differently, we don't want to reinvent the wheel. Some providers may bid for the same as they provide now.

Q: Are contracts coming to an end soon?

A: Yes, end of September and we will know the budget decisions in June.

Q: Do you use Hastings Voluntary Action to get information out to the voluntary sector?

A: Yes.

Tuesday 6th Mar, The Anzac Hall, Meridian Centre

The meeting was introduced and everybody was welcomed. A short video was shown to outline the savings proposals.

The Council gave presentations on the background, savings proposals and consultation process.

Attendees were given post-it notes to write down their views.

Q & A

Question: Firwood House and Milton Grange are both proposed to close, could one of these centres remain open to reduce the impact on clients? (Chair of the Parkinson's Support Group)

Answer: The department management team are aware of some of the different ways to achieve the services both these centres provide. The unit cost of Firwood and Milton Grange are very high and more expensive that acute services. There is an opportunity to consider how the same provision can be achieved in a different way, ensuring people's needs and expectations are met. Milton Grange has a day service and there will be a review of all day services to consider if these services are 'fit for purpose' now and for the future.

A: Offered to visit the Parkinson's Support Group organisation.

Q: What is an EIA?

A: The council must have due regard to its Public Sector Equality Duty when making all decisions at council member and officer level. An Equalities Impact Assessment is the best method by which the council can determine the impact of a proposal on equalities and to assess that any changes made do not adversely effect different groups of people e.g. race, disability and age.

Q: How are people's voices heard fairly, how do you prioritise what is important to different people?

A: Care for the Carers is campaigning alongside carers, colleagues in the local authority, voluntary sector and charities – carers' voices are really important and to campaign for the needs of the person they care for.

A: If something is important to one carer it's likely that it will be important to other carers. Please use the survey and any other method to express your views, concerns and ideas.

Q: Many services are subsidised by the council, day care at Warwick House, meals and transport for example. Day care is an essential service for my husband and provides good carer respite. Council tax has increased to pay for some of these subsidies, could a further increase be made to help keep services running? Some of us would be willing and able to pay a higher amount for these services.

A: The council continues to look at ways income can be raised e.g. from business rates, government grant and council tax and this can be politically complex. Different councils are applying different methods for this including voluntary charging, however this would require sign-up from the public which is difficult. The government are set to publish a green paper on care and support for older people, but this may not be until next year.

Q: I don't agree with further council tax increases as this will negatively impact on low income families. Some carers had an opportunity to visit the Houses of Parliament to express their views and concerns as carers, but I feel MPs did not listen and I would like to know how many in government are carers. Carers save the government a lot of money, where does this saving go? It's a false economy as many people will end up in hospital.

A: Savings go back into the treasury – the money is no longer available and the government grant is significantly reduced. All councils have to make large savings.

Attendee comment: The single access point which is needed is wrongly defined and should be re-named multi-access to find the correct answer.

Attendee comment: Every carer is important. I have been a carer for many years for different family members. I would like to promote the neighbourhood support schemes more. I'm still working but if I become ill that will be two people that need looking after. More thought is needed for the future.

Q: How will the savings impact on respite care?

A: It is recognised that respite care is one of the most important services. The 'cared for' person is charged for the services they receive.

A: Respite services including day care and residential care are being looked at to see how much can be delivered and in different ways to meet needs.

Q: How can the council deal with budgets that are already stretched?

A: People are living longer and often with long term health conditions. Joining with health, East Sussex Better Together for example is one way to look at different models of care especially around preventing hospital admission. Working within communities to build community resilience and support networks.

Attendee comment: There are two issues politically and for local people. Pleased that voluntary organisations work more with the council and other organisations to provide fit for purpose services that have been researched and implemented in an organised way. Attendee comment: The Royal Voluntary Service is self-funding and does a good job supporting people in the community. Care for the Carers must be doing a good job – need to protect valuable voluntary sector.

Q: Can savings be made elsewhere i.e. bus passes, could the issue of these be reduced and review the people who really need them?

A: This alongside other savings ideas will all be considered. Some councils have stopped bass passes or are now means tested – the transactions however can outweigh the offer of a bus pass.

Q: What about the heating allowance – could there be savings?

A: This is not currently changing and is dealt with by Department of Work & Pensions as with most benefits. Nonetheless, these are sound ideas.

Attendee comment: Note that some villages don't have gas and heating schemes are needed for vulnerable people.

Attendee comment: Day care is reducing, this is crucial care and access to respite is important. The Care Act is a mechanism whereby the government can be challenged. Urge people to write to their MPs to protect the social care system. There is a legal duty for the local authority to apply the Care Act in securing funding.

I have a 33 year old severely disabled son who has critical care needs.

I want to fight for the future of social care as we need to protect this system. The Care Act is a 148 page document that I have studied; we need to challenge the government with that. It is a legal duty to apply by what the Care Act has set out. Adult Social Care could refer to it for funding.

I want to protect Care for the Carers as it is such a valuable service.

My son has had continuing health care for 9 years and it was reviewed last year. His needs are a lot more now than they were 9 years ago yet he has been taken off continuing health care because he does not meet the criteria. ASC have now taken on the Health Service costs of £20,000 per month for him. This is not a them and us situation, we are all in it together. Attendee comment: Day care support is a 'life-line' and I couldn't work without it.

A: Thank you for your fantastic and inspiring ideas and suggestions. [CftC] are in contact with all MPs in the county and continue to highlight the significant contribution that carers make. Care for the Carers can provide template letters for you to raise your concerns with MPs. A: Thank you all for your participation, constructive feedback and well-made points.

Post-it note comments

Post-it note commer		04050	
SAVING IDEAS ESCIS and 1 Space duplicate each other – how about keeping ESCIS which has everything on it and show which services are accredited People employed as consultants by ESCC, not employees – how much does that cost?	LD DAY CARE CENTRES St Nicholas is a lifeline for my son, social interaction, learning and contribution to society – little work. My son enjoys the day service at St Nicholas, it is an invaluable much needed service.	CARER THOUGHTS Bereavement and end of life support is so important – someone there who you can ring up – someone to listen.	CONSULTATION – INFORMATION I would love to be involved in further consultations and talks about the ASC budget. We need to protect our ASC system. We need to be very proactive with knowledge and information about the disability and the Care Act.
FUNDING Funding for Care for the Carers <u>must</u> be maintained as they support unpaid carers throughout the County.	OLDER PEOPLE'S DAY CARE CENTRES East Sussex Day Care Centres have facilities e.g. Bathing, showering and better food. These services are not usually available in the voluntary sector.	CARER THOUGHTS Care for the Carers is important, without family support the carer can feel very alone and vulnerable.	INFORMATION I appreciated very much Care for the Carers updated information through the magazine and letters.
FUNDING – CARER COMMENT Villages that don't have gas rely on electricity to keep warm. The heating allowance <u>is</u> needed. Why aren't our council tax rates reduced for what we don't have? Many people don't have computers (I don't) please make sure we are not forgotten. Please put telephone numbers on paperwork as many	DAY CARE SERVICES Day care services organised by East Sussex are much more effective than some of the privately run ones. They have more specialism and are not just "baby minding". Funding for day care services needs to be realistic. It is better to increase the charges rather than close them down. East Sussex provides training	CARER COMMENT So 'today' we are being asked to make £10 million savings. That is horrific. What worries me is how are budgets going to cope with the increasing number of people being diagnosed with diseases requiring care? Debilitating diseases are being diagnosed during earlier stages in life. My husband has been forced into early retirement with dementia. I cannot work as I cannot	

don't these days.	which is much more limited in the private sector.	leave him all day!	
RESPITE Respite is crucial for carers, my son has an allocation for day and night care. Without this service my life would be very difficult and my quality of life as a carer would be seriously jeopardised.		CARER COMMENT I had counselling recently and found it really helpful, it was at Summerhayes Newhaven and if that service had not been there when I needed it I don't know what I would have done. I care for my 92 year old dad.	
		CARER COMMENT I found the WRAP course very useful as a new carer. I had good support from Dementia Services. I have had good support from ASC.	
		CARER COMMENT I would like ASC plus Care for the Carers to really lobby the government plus ESCC to lobby the government.	
		CARER QUESTION How can I get support for my wife with Alzheimer's if she rejects anyone from outside the family? Support from the family is rare.	

More could be done
to maybe provide a
cookery production
service for sale. Art
work fun sale
maybe?
They already collect
rubbish for Lewis
Leisure Centre –
maybe could raise or
save money in other
ways but in a safe
caring environment.
CARER COMMENT
Thanks to Care for
the Carers and ASC,
they have kept me
sane over the past
13 years caring for
my husband with
dementia. We
moved to Newhaven
13 years in May and
I feel we definitely
moved to the best
place. I have a
meeting with my
husband's mental
health social worker
tomorrow for them to
see the improvement
since moving.
CARER QUESTION
How much are you
consulting with
health partners – to
spend or rather
make savings?
Did you know
dementia now kills
more people in the
UK than cancer,
heart disease and
strokes?
Should ASC then
allocate money
based on the
numbers that need
it?

CARER QUESTION
The yearly Carers
Personal Budget we
get, will this be
reduced or not?
Please consider not
to reduce or cut this
as this a lifeline for
carers and the
people they care for.

Wednesday 21 Mar, All Saints Church Hall

The meeting was introduced and everybody was welcomed. A short video was shown to outline the savings proposals.

The Council gave presentations on the background, savings proposals and consultation process.

Q & A

Question: What savings do carers make?

Answer: There are national estimations of how carers save the NHS money and carers 'propup' the health and social care system. Care for the Carers (CftC) estimate over 65 thousand carers in E. Sussex and this figure is growing, the calculation of savings is based on using average salaries and the average time spent caring, however with lots of factors to take into account it is difficult to give an exact amount.

Q: Is it really a consultation? Have things already changed, staff are moving already i.e. Parkinson's Nurse.

A: Yes, we are consulting. Staff do move around to maximise resources and the same staff can't always be provided for consistency.

Attendee comment: Must push the government and let Teresa May know of the issues that councils are facing – she said she wouldn't make the cuts.

A: CftC are in contact with all MPs in the county and continue to highlight the significant contribution that carers make. Care for the Carers can provide template letters for you to raise your concerns with MPs.

Q: Why has the Alzheimer's Society closed what help is available in East Sussex?

A: The new Dementia Support Service which will start on 1st April. This covers both the services that the Alzheimer's Society is currently providing to support people living with dementia and their carers. The Carers Breaks Engagement Team, based in Adult Social Care, will be providing this service from April 2018.

Q: Are the Carers Breaks Engagement Team voluntary or paid?

A: Paid.

Attendee comment: My husband has had some bad experiences with hospitals following a brain tumour but he is happy where he is now and I will fight to keep his place especially as he is unable to return home (can advise of his placement after the meeting).

A: Acknowledged and noted – thanked for sharing carer story.

Q: Why are carers' budgets being refused this year (for budgets that have been claimed in the past)?

A: The Care Act resulted in a change in criteria and the way funds are allocated to meet as many peoples' eligible needs as possible. You can appeal the carers' budget decision if you are unhappy.

Q: Are you challenging Continuing Health Care failed assessments?

A: Yes, there are joint NHS and ASC meetings held weekly, cases are looked at individually. The NHS is facing financial deficit pressures and work is underway to consider a single NHS and ASC budget.

Q: What has the feedback been from the petition (Stand Up for East Sussex Campaign) to government?

A: Generally positive but waiting more responses. 6 thousand people took part in it. East Sussex and Becky Shaw (Chief Executive) has been promoting the campaign.

Q: How do people know where the savings go?

A: Essentially the money is reduced from the council's budgets – there is less government grant.

Q: How is the budget calculated to look at losses?

A: The Community Care budget is the primary budget – adjusted quarterly and reviewed to establish where the pressures are. The Government is unable to project against trends and demands and want councils to be self-sufficient. The trouble is the East Sussex economy is not as buoyant as other councils. It needs to attract businesses and build infrastructure. Council tax was raised as a result.

Attendee comment: Care for the Carers are so helpful and provide great support.

Q: How can we engage with MPs – we need to challenge the Eastbourne MP.

A: Stephen Lloyd is a member of the [CftC] Board of Trustees and we will take forward as a discussion with him.

Attendee comment: Can't close day centres that are really needed for carer respite.

Attendee comment: If the carer loses their support, this will result in more help needed in the future and where will the extra resources be found.

A: Council members to make decisions on how the money is spent. Cuts will force situations where can't meet need. Increasing pressure – services targeted and caring for fewer people – tightening eligibility criteria with a stronger reliance on the voluntary sector.

Attendee comment: Important to make sure more carers are identified and their voices can be heard, plus get the support they need. Often carers don't recognise themselves as carers.

Attendee comment: To advertise CFTC using their brochures to leave on cars parked in disabled parking spaces – Morrison's is a good place.

Attendee comment: GP surgery registered as a carer but need to follow up and signpost for support.

A: Scheme started in April 2018 with GPs to identify carers and record on Medical records. Carers' social prescription goes straight to Care for the Carers

Q: How will the closure of Milton Grange help bed blocking at the hospital?

A: Important to consult to look and consider a range of other opportunities.

A: Re-provision may be an option the unit cost at Milton Grange is more expensive than a hospital bed – maybe a combination of other services. People are living longer with complex health conditions and need to aim to support people in their own homes as much as possible. *Attendee comment: To have monthly carers' meeting for people with dementia like the one held at Milton Grange - Care for the Carers can help to establish carers to facilitate groups.*

A: Closure remarks – thank you for your fantastic and inspiring ideas and suggestions. [CftC] are in contact with all MPs in the county and continue to highlight the significant contribution that carers make. Care for the Carers can provide template letters for you to raise your concerns with MPs. There is an additional meeting that carers can attend on the 12th April in Bexhill

A: Thank you all for your participation, constructive feedback and comments.

Wednesday 28 Mar, Project Art Works

Project Art Works opened the Summit with a statement on the work of Project Art Works and the spirit of the Peer Support Network. The Adult Social Care budget consultation was one of the agenda items at the meeting and included a presentation from the Council.

Q & A

Question: In light of cuts to Continuing Healthcare, an increased number of people with high support needs are now funded through Adult Social Care. The National Framework for NHS Continuing Healthcare guides local authorities and the NHS to consider joint packages of care for those people found not eligible for CHC. Other local Authorities including Sheffield and Nottingham are implementing Joint Packages. What is East Sussex County Council's ambition for Joint Packages?

Answer: There will be a move towards a pooled budget of £850 million by 2020 which will include one commissioning pot for Continuing Healthcare and Adult Social Care (East Sussex Better Together). One assessment of need will determine whether an individual has a health need or a social care need. The cultural change that will need to follow suit is significant and will focus on a more asset-based approach as opposed to a dependency-based system.

Q: With reference to the growing numbers of people who are in need of support in the county, have you calculated the long-term cost to cutting service?

A: East Sussex County Council are focusing on preventative services to minimise long-term need. There are core services by law that ASC need to deliver such as assessments and reviews. There are other areas that can transform. Particular emphasis is placed on minimising institutional care with a focus on home or community-based care. The model of social care will need to transform to become an 'Infrastructure Enabler' as opposed to Service Provider. National intervention is needed to ensure Social Care reform.

There is an ambition to improve access to services that support individuals managing their own care, including working at a local level to support microproviders within the community provided they meet care quality standards and can enter into a market of services. The Social Care Green Paper due this year does not cover working age adults. One unified pathway into services for individuals with complex support needs is necessary.

Response from the Network:

- Regarding the consultation on the carers' budget, the Network identified a need for a broad range of respite services and a flexible personal budget which allows for individual needs to be met.
- An asset-based approach to care focuses on maximising existing support in the community such as informal networks and family support groups. For individuals with significant and complex needs, the wider circles of support need to be considered closely in any reform. Family carers are the largest unpaid workforce in the UK and are in a position of vulnerability. Reliance on this should not be a focus of an asset-based approach.
- There is a great need to ensure that commissioners understand the needs of people with complex support needs including those with profound and multiple learning disability. This means listening to micro family providers of care. It was acknowledged that the development and commissioning of services including re-tendering should be done in consultation with service users.

Tuesday 10 Apr, Carers Network

The meeting was introduced and everybody was welcomed. A short video was shown to outline the savings proposals.

The Council gave a presentation on the background, savings proposals and consultation process.

Q & A

Question: Have Equality Impact Assessments highlighted impact on people with disabilities?

Answer: The council must have due regard to its Public Sector Equality Duty when making all decisions at council member and officer level. An Equalities Impact Assessment is the best method by which the council can determine the impact of a proposal on equalities and to assess that any changes made do not adversely affect different groups of people e.g. disability, race, carers and age.

Q: What savings do carers make?

A: Carers UK has academic research of national estimations of how carers save the NHS money and carers 'prop-up' the health and social care system. CftC estimate over 65 thousand carers in East Sussex and this figure is growing, the calculation of savings is based on using average salaries and the average time spent caring, however with lots of factors to take into account it is difficult to give an exact amount.

Attendee comment: Reducing respite services will have a negative impact on carers.

Q: Can we appeal as a collective? Would this be a judicial review to challenge the way in which a decision has been made?

A: There are different ways through the consultation to help and inform the decisions that will be made by ESCC Cabinet members in June.

Q: If Milton Grange closes where will people go, would it be in the hospital as they do not have the resources.

A: Alternatives are being explored including if services can be developed elsewhere.

Q: What are the savings based on, is it that services are too expensive or on particular needs?

A: We are looking at ways that services could be provided differently in order to meet more people's needs within an ageing population. Building based services are expensive due to the associated costs.

There is a Stand Up for East Sussex Campaign that recognises the particular demographic challenges in East Sussex.

Q: What is the latest strategy on carers' assessments?

A: The Care Act 2014 gives new rights including national eligibility to be used in assessing the needs of individual carers. Carers can complete an on-line assessment, this enables more carers to be reached and all assessments will be responded to by a practitioner.

Not all carers will require carer assessments however important to have access to advice and information.

Q: How long does a decision following a carer's assessment take?

A: The assessment takes about 30 minutes to be undertaken with an outcome around 2-3 days. It depends on the pressure in teams regarding the carers personal budget which needs to be processed by different teams and this can be months.

Attendee comment: No cuts to the independent support budget are currently planned and this is therefore still available to meet eligible care and support needs.

Q: Is the St Peter & St James Hospice contract being cut?

A: No

Q: Are there any template letters that can be used to campaign to local councillors against the cuts?

A: Yes, Carer for the Carers has these and can help with this.

Attendee comment: There are voluntary organisations that provide services in the community however contributions for these may need to increase in order to keep them running.

Attendee comment: It's not necessarily always a building is needed; it's the people who provide the support.

Q: What digital resources to support people are available e.g. Carers UK: Jointly App.?

A: Research has shown that 65% of over 65 years old in East Sussex are on-line. Important to think about how digital support can help and how this can be developed further for example information and advice. Association of Carers runs a computer help at home service and about 50% of carers are happy to use digital resources.

Attendee comment: Good quality information and communication is a two way process. Attendee comment: There are often battles with Health and Social care as they sometimes provide what they think people want.

A: Closed the meeting and thanked everybody for their participation, constructive feedback and comments. Paper copies of the consultation survey were made available.

Thursday 12 Apr, Bexhill Town Hall

The meeting was introduced and everybody was welcomed. A short video was shown to outline the savings proposals.

The Council gave a presentation on the background, savings proposals and consultation process.

Q & A

Attendee comment: A carer of a daughter with learning and physical disabilities spoke of her concern about LD service cuts and services of Care for the Carers being taken away, which is very short sighted. We need Care for the Carers, whose support over the years has been invaluable.

Answer: Government funding has been cut across the board in ASC and ESCC. Ultimately carers save the government a significant amount of money every day. Elected members will make final decisions where the cuts will be made. There will be cuts to back office staff and staff numbers. There are tough years ahead, however, there will be a Carers Centre in East Sussex and services most important to carers will be commissioned. It is a legal requirement to tender for services.

Question: The Alzheimer's Society funding for East Sussex has already been withdrawn and offered to Dementia Support Service from 23rd April; Re-think's budget has also been withdrawn and incorporated into CftC. How can it be a consultation when services are already cut? Organisations being put under one umbrella is a concern, as information and advice needs to be targeted and correct, not general.

A: The Dementia Support Service offers a new dementia service across the Hastings & Rother and Eastbourne, Hailsham & Seaford CCG areas for people living with dementia and their carers. This service was tendered and the Alzheimer's Society chose not to bid for it. The service was awarded to the Carers Breaks Team. Contact HSCC on 0345 60 80 191 to be referred into the service if you have not heard from them. Re-think stopped providing services many years ago. The ICE Project provides support to carers of people with mental health issues. It is recognised that there is a need for specialist support for carers as well as generic.

A: On behalf of CftC we also recognise the importance of specialist services and part of our strategic plan is to access funding to offer specialist support to groups of carers where this is needed.

Attendee comment: It took some time for me to realise I was a carer – I got in contact with STEPS who were amazing.

A: We need to avoid carers hitting crisis point, and monitor how we do this better in a large county. GPs are extremely busy but are encouraged to identify carers. The Carers' Prescription is an online referral tool for GPs and other healthcare professionals. It goes to Care for the Carers who will then contact the carer and offer information, advice and support. The service is simple to use, but GP uptake is still quite low.

Q: Who are STEPS?

A: 'STEPS to stay independent' provides a free and improved short term support service to help you stay living independently. A county wide service offering support to over 65's with housing issues and carer support needs. Home Works is for people aged 18 or over who have a long term physical health condition and need advice and guidance to help them live life to the full.

Attendee comment: The carer of a wife with Parkinson's stated that CftC do a brilliant job. Let's start with savings at the top – MPs should be cut and government funding redirected. Councillors should work together to look after the local people.

A: Unable to comment politically. The Stand Up for East Sussex Campaign is raising awareness with local and national politicians about the needs of East Sussex residents.

A: CftC in East Sussex is linked to two national charities – Carers Trust and Carers UK. Both organisations have a role in representing carers' voices nationally. CftC ensures they are aware of key issues facing local carers, by lobbying work and social media. Locally, CftC is contacting key decision makers about the cuts, speaking on behalf of carers about this consultation and cuts to carers' services. CftC will also support carers to contact their local MP (a template letter/email is available). After this final consultation meeting today, all the notes will be collated and built into a formal response. [We are] meeting with as many MPs as possible as part of this process. We have a commitment to our partners in the voluntary sector at this time, as to the impact on carers and vulnerable people. The message from charities across East Sussex is that we are working together.

Q: Do you have any detail on what you are proposing to cut?

A: All the contracts in the voluntary sector will end at the end of March 2019. We are going to commission services with less money and a fresh start. There will be significant cuts in-house with the Carers Breaks team. Not aware yet what services will be cut until budget signed off by Cabinet. Priorities will be informed by consultations.

Q: I support the idea of a single access point as it is essential to make services easier to access, to avoid confusion. Is this the plan for the future?

A: Hopefully we can make better use of resources in future to meet the needs and benefit everyone.

Q: Who decided the level of cuts – has Adult Social Care been hit harder than other departments?

A: ASC takes up 50% of ESCC budget, the original request was £14 million. Grass cutting in the county has been reduced with savings going directly into ASC.

Q: Will the 3% increase in Council Tax be used by Adult Social Care?

A: Yes the increase in Council Tax will go directly into ASC, and the money has already been taken account of.

Q: Is the East Sussex Better Together programme still progressing, as it all seems to have gone very quiet?

A: East Sussex Better Together is still progressing, with work behind the scenes. These savings are ESCC savings and running alongside pressures on the NHS locally and nationally. Due to the financial crisis in NHS we are not able to ask them to make this up, as they have their own challenges. The cuts are about ESCC's budget and not the health budget.

These are challenging times and very difficult for everyone. We need to try to do our best to make sure we meet people's needs and protect important services, perhaps trying new ways of doing things that will cost us less.

Thank you all for your time today and apologies that the news is not very uplifting. However, despite the significant cuts and changes, the most important carer support will be retained. A: Thank you on behalf of CftC for your fantastic and inspiring ideas and suggestions. We are

in contact with all MPs in the county and continue to highlight the significant contribution that carers make.

Please let us know if we can support you to have your say about the consultation. Care for the Carers can provide template letters for you to raise your concerns with MPs.

Equality impact assessment – summary report for RPPR proposals to Carers budget & carers breaks

The results of equality impact assessments must be published. Please complete this summary, which will be used to publish the results of your impact assessment on the County Council's website.

Date of assessment update: 8 May 2018 Manager(s) name: Tamsin Peart Role: Strategic Commissioning Manager, Adult Social Care

Impact assessment:

In order to deliver savings as part of ASCs RPPR process, the proposals are to make reductions to the Carers Budget (Better care fund). **Summary of findings:**

The biggest area of impact is to both carers and subsequently people with disabilities who are cared for. Cumulative, cross-characteristic negative impacts are anticipated should the proposals go ahead.

Note: There may be additional impacts through proposals to reduce funding for DESSS, The Stroke Association and LD directly provided services.

- Figures suggest that that 73% of carers supported are female and 27% male. Female carers may be disproportionately impacted, however it's estimated that male carers are less likely to access support and a reduction to services may exacerbate existing barriers.
- Older carers are likely to be experiencing age related challenges to their own physical and mental health, as well as the person they care for.
- Younger carers may receive less support to access opportunities, and may face barriers to their social and educational development and access to employment.
- Unpaid carers have twice the prevalence of long-term illness and disability, and a reduction in services may result in poorer mental and or physical health and a risk to the sustainability of the caring role.
- BAME carers are less likely to be receiving practical and financial support with caring and may struggle to access culturally appropriate services.
- As many carers are caring for a partner or spouse, they may be disproportionately affected by a reduction in services.
- Reduced funding for services may disproportionately affect older LGBT carers who are estimated to already be under represented as service users.
- Rural carers may face additional barriers including inadequate transport options and be at greater risk of social isolation.
- Carers on low-incomes may have fewer options with a reduced service, and not be able to pay for the additional support they need.

Appendix 2

Summary of recommendations and key points of action plan:

- ASC will work with providers to ensure The Carers Investment Plan and future commissioning takes account of the range of needs of all carers.
- The provision of information available (including from HSCC and on ESCC's website) should continue to be current.

Groups that this project or service will impact upon

Please mark the appropriate boxes with an 'x'

	Positive	Negative	Neutral
Age		Х	
Disability		Х	
Ethnicity			X
Gender/Transgender		Х	
Marriage or Civil partnership		X	
Pregnancy and Maternity			X
Religion/Belief			X
Sexual Orientation			
Other (including carers/rurality etc)		Х	
All			