



HOUSING LIN EAST REGION CARE BILL EVENT

25TH MARCH 2014

POINTS ARISING DURING THE DAY FROM DISCUSSION AND WORKSHOPS

Adaptations – whether the cost of these will count as part of the cap for those with eligible care and support needs for whom a house adaptation would meet an outcome specified in the care and support plan. My own distinction between a general duty for prevention and an individual-based duty to meet assessed, eligible needs.

Unforeseen or unintended consequences, and unknowns – There seem to be many of these:

- How people will behave in the context of new rights (e.g. flood of carers' assessments? will carers withdraw their help once the care cap clock is ticking? What will self-funders do?)
- Empty properties in London if people choose deferred payments
- The inclusion of suitability of housing as a measure of wellbeing (which we all support) and its implications in the context of the **private rented sector**. Also illustrative of the fact that while the Care Bill brings together a raft of social care legislation to make it more coherent, it does not necessarily align well with other policies and reforms, e.g. bedroom tax forcing people out of cheaper two-bed accommodation into possibly more expensive and unregulated smaller privately rented accommodation which may not be "suitable".

Regional variations – Cost of property, care homes etc differing in different regions affecting both people's choices and the rate at which they reach the cap. Issue around standardisation of living costs across the country in care homes, when what they provide and costs locally will be very different.

Better Care Fund – Not new money. Housing providers need to be aware that for the first year, some of the money had already been committed, so flexibility relatively limited, whereas there should be greater flexibility with the second tranche. Also that the DFG is not the only capital allocation in the Fund.

Information on its own not enough – People often need someone to support them through the process and make sure that they get the help they need from somewhere. Cathy's example of refer net.

AFTERNOON FEEDBACK SESSION FROM WORKING GROUPS

Potential for disempowering rather empowering – Craig's point about ensuring that early intervention and providing low level support services do indeed help to prolong independence rather than create greater dependence.

Public awareness and expectations – The importance of public awareness-raising, trying to develop good understanding, realistic expectations and a recognition that people have to take some responsibility for their own future care needs. Media have important role to play in achieving this.

ASC authority issues – Would be better to have phased introduction to avoid citizen frustration and postpone implementation of Part 2 for a year because councils not ready. Staff shortages even before the Bill comes into force – plea for tolerance from other sectors. Analogy: travelling 100mph with austerity handbrake on.

Flaws in funding modelling – e.g assumptions of incomes that are erroneous, such as not recognising the loss of income from charges to working age adults.

Need for inclusion – First step to integration is to be aware of the existence, offer and potential of a range of sectors, including housing, which requires communication between sectors to engender mutual understanding, and be inclusive in thinking and acting. Inter-sector communication is fundamental and understanding one another's meaning of certain terms. Not a common language. The fact that few housing professionals in the room were aware of the Skills for care consultation on care Bill training needs tells its own story. Training needs to follow through to front-line staff.

Learning and development needs consultation – a national consultation exercise is taking place until 11 April 2014 to get people's views on a learning and development plan - designed to identify which roles will be affected by the changes brought about by the Bill, with a description of the skills and knowledge they will need to develop to deliver the requirements of the Care Bill successfully.

There are options on how to offer your views; either directly via this link;

<https://www.snapsurveys.com/wh/surveylogin.asp?k=139360356380>

or by using some of the resources offered by us to run a focus group to gain group feedback.

Both of these approaches are explained and offered here;

<http://www.skillsforcare.org.uk/Standards/Care-Bill/Care-Bill.aspx>

Feedback needed by 25th April

Following feedback on the learning and development plan we will create free learning materials for use across the sector specifically aimed at delivering the skills needed to meet the Care Bill requirements. They will be designed to be adaptable so they can be used by different organisations in a variety of situations.

For more information on the project visit www.skillsforcare.org.uk/carebill

Effective use of existing resources – The need to make use of all resources including the housing sector workforce to achieve a new order, but to do so appropriately and not to dump on the housing or voluntary sector.

Silos and protecting own patches – all need to be prepared to give a little

Holistic information provision – The challenge of making information services all-encompassing. If specialist information providers, each needs to know about and refer to other specialist and generalist sources

Co-designing services and outcome-based commissioning – The importance of all parties co-designing service specs and services to achieve defined outcomes, rather than the commissioner, or accountable provider, pre-determining the service solutions. More thought probably needs to be given to implications of accountable/prime providers.

Structures – Changing structures simply de-stabilises and results in loss of knowledge and continuity. That is not the solution to integrated working. Do need to include wider range of sectors in relevant forums, or ensure mechanisms for hearing their voices, eg. SABs. Also, need to focus on customer experience, not existing structures.

Prevention – Requires change in behaviour and attitudes, developing community networks around individual and ABCD at community level; being careful how the offer is “packaged” e.g. not using the term “care” in day services. Need for evidence (SG note: sometimes possible, through evaluation as suggested by Craig, but difficult to construct rigorous studies in order to demonstrate that something has NOT happened – so many variables which cannot be controlled for, so not always a reasonable requirement)NB to use the data that is available.

Pathway – discussion about this as a concept. “Living one’s life” preferable.

Seven day working – will that be necessary or at least desirable for housing providers? Something to think about

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26th March 2014