

Item 3 – Health, Disabilities and Carers perspective

MENCAP models are less relevant than the simple fact of reduction of money

Who is going to lose, or where is the money coming from

Personalisation agenda: concept not a problem, implementation can be
Closing down centres too fast – market needs stimulating fast,
role of LAs in this is currently patchy
– stress currently outweighing benefits

Transition arrangements

Much less money for adults than children – leading to transition
problems

(wide) variation amongst authorities as to who residential care and who in
supported living

MC those with very complex needs

Mencap – is a need for some residential care, but only for a small minority

Carers – Imelda and Carol

Imelda demographics and other social changes will worsen picture of number of carers
to working population

Families must plan for care

Vision of green paper is good

Delivery is old-fashioned and clunky

£220 mill is supposed to go through PCTs for short breaks for carers, not
really happening

1 in 5 carers fall out of work due to caring responsibilities – and tightening
eligibility reducing levels of support

National entitlement. National service

Welcome portability of this

But problem of local funding

Can't see how it can happen in proposed mechanism

Real anger over move of Attendance Allowance to LAs

Carers benefits ignored

Want to change view of social care so is seen as part of the social
infrastructure (e.g. relation to employment)

Equalities legislation

Is bit on anti-discrimination of carers

Role of LAs in shaping the services available is critical.

Carol: Of all the options, general taxation seems the most popular

Greater number of older carers will become a problem

Tendering - needs quality built in
 - takes up a lot of a small organisation's capacity

All departments should think about carers (housing etc.) not just ASC

Complexity of needs – must inform proposals

Personalisation needs to retain/create focus on family surrounding

Liam Hughes
Healthy communities
IDeA

Crisis so great it requires a great transformation
 and transformation is the route to quality and productivity

Good practice is happening, but patchy – needs spreading

Upstream innovations (not front-line) stretch regulators to the
limit, e.g. shared resources/centres – whose rules responsibility do they fall under

Changing organisational forms is not always necessary for
improved outcomes

We do definitely know some things

- i) third agers (50+) – early 'sinking' is enormously costly
- ii) health of orgs own staff makes a significant difference (large part of the community, esp. if include families)

Consider health as part of wealth

LGA note to Sir Michael on proposals

Challenge to members – get good practice out there

David Rogers Where do see Big Care Debate going (& after GE)

Mencap talking to all three parties, get some at least into all three manifestoes

Imelda Care & Support Alliance to maintain pressure
Getting people engaged to create consensus/mandate whoever is in government

Carol generating and maintaining voice

—

Alan cash to PCTs is vanishing.
What is LGA doing about this misappropriation?

GB PCTs making decisions without consulting LAs where to spend this money

—

N Khan Quality/cost relationship?
Use of inspection regimes to improve carers' position
What is the biggest area you would like the LGA to lobby on (is it Carers' Benefits?)?

David Rogers Investigate this PCT issue, but also
Depends on local relationship with PCT
Is a role for Health Scrutiny

A Cozens ADSS looking into/surveying on this
LGA has given out guidance on commissioning for carers

Carol Dialogue

Imelda same problem with other funding via PCTs – not getting to communities –
remaining in health budgets

Carer confidence/ self-reliance/autonomy – very varies group of people

Main issue for those in receipt of them is carers' benefit – but for carers generally it is the quality and flexibility of services provided.

Biggest problem is often fighting with bureaucracy

L Hughes co-design of services (co-production?)

Mencap Give people the option but don't force them to take on roles they do not want
(e.g. managing own/personal budgets involves finance role)
LA support for this e.g payroll type help (again tried and working well
– not spread)

Tendering – generation of competition
Making competing orgs/groups discuss issues generally
and productively is difficult
– re-invigorating partnership boards as poss. solution to this

