

**STOCKTON-ON-TEES BOROUGH COUNCIL**

**CABINET RECOMMENDATIONS**

**PROFORMA**

Cabinet Meeting .....11th March 2010

1. Title of Item/Report

Personal Care at Home

2. Record of the Decision

The Personal Care at Home Bill aims to help around 280,000 people nationally with the highest care needs by guaranteeing free personal care at home. This is being promoted as the first step towards setting up a new National Care Service.

The principle of helping more people with care needs to stay in their own homes for as long as possible is an extension of Government policy the Council has been working towards for a number of years.

However, there are a number of key concerns about the Government's proposals in the Bill, including:

- \* The robustness of the Bill Impact Assessment;
- \* The feasibility of achieving the proposed local government efficiencies;
- \* The creation of perverse incentives that disadvantage already strongly performing councils, and;
- \* Implementation pressures and workforce issues.

The Government introduced their proposals for free personal care at home in the Queen's Speech on 18 November 2009. This follows the announcement in the Green Paper Shaping the future of Care Together, that care for people with the highest level of need living in their own home would be free from 1st October 2010, (subject to the passage of parliamentary and legislative processes).

The move followed growing concern that many older people were being forced to spend all their savings and sell property in order to fund care.

The Main points of the bill were:-

- Guarantees free personal care for people with the highest needs (suggested critical FACS banding) who also need substantial help with 4 or more activities of daily living. This includes current clients assessed

as critical in receipt of personal care support and those who self fund their care.

- Local authorities have the option to require a period of free re-ablement in advance of assessing for a community care service. Refusal to participate in this process (if the council decides it is a criterion) could result in a potentially eligible person not qualifying for free personal care.
- A focus on intensive assistance or "re-ablement" reflects the need to help people to regain their independence and prevent ill health. Helping people to stay in their own homes could involve installing new equipment in people's homes and use of telecare.
- No charge will be raised for intensive support and re-ablement services (consistent with Stockton's current policy).
- To be eligible, the client must be in receipt of "personal care" in their own home; specifically requiring significant help with 4 or more activities of daily living.
- To ensure personal care needs are assessed consistently, the DoH intends to develop a standardised assessment tool for all councils to use (summer 2010).
- Councils will have to ensure local flexibility where assessed care costs exceed any amount identified through the Resource Allocation System (RAS).

The Government believed the main benefits of the proposals were as follows:

- Guarantee free personal care for the 280,000 people, including those with serious dementia or Parkinson's disease, with the highest needs.
- Protect the savings of the 166,000 people who currently get free care from future charges.
- Help around 130,000 people who need home care for the first time to regain their independence.
- Where home adaptations or technology can increase a person's independence and reduce care needs, these would be offered.
- It would allow £130 million to be invested in re-ablement and prevention to help people to maintain their dignity and rebuild their confidence so that they can live at home for longer.
- This would put prevention at the heart of the system, improving quality, empowering people, and saving the NHS and social care money.

There was the potential for the Bill to have significant implications for the Council. Already organisations had begun to assess the impact of these proposals. ADASS had formally presented their concerns over the Bill highlighting a number of common reservations:-

The financial burden to councils to meet the "efficiency gap":-

In terms of finance in 2010/11, funding for Free Personal Care would be issued as part of the Area Based Grant from October 2010 onwards. The grant related to the extra costs to councils of implementing free personal care at home for those with the highest need. This extra cost had two elements, firstly lost council income from user contributions to personal care at home for those with the highest needs. Secondly, the majority of the additional cost would be for people who were not current users of publicly funded care and who were likely to be currently purchasing care privately.

In the first half year, £210m would be made available from central resources and the estimated remainder of the funding required, £125m, was to be found from local government efficiency savings. £670m was expected to be required in the first full year of operation, made up of £420m central funding and £250m which was to be found from local government efficiency savings. The Government was clear that there was a finite amount of money available for the policy and so the offer would be targeted at those with highest needs.

In local terms, this meant, depending upon which of the 3 funding models the government choose, the Council would get a full year grant allocation of either £652k, £701k or 746k. Across all Councils, there were winners and losers over the 3 models, so no one solution was guaranteed.

For Stockton this was estimated to be approx £248k of client contribution income would be lost per annum based on information used in the FACS EIT review for personal care and direct payment clients in the critical banding between October 2008 and March 2009. However, there were difficulties in modelling the impact based not only on estimates of loss of income, but estimates of numbers of self-funders, and number of “switchers” from informal care and residential care. Although the efficiency saving was not additional to that already expected by the Government, as it had not been fully factored into the current MTFP it did in reality represent an unfunded pressure.

Interestingly, an assessment of Free Personal Care introduced in Scotland in 2002 by the Joseph Rowntree Foundation, found that between 2002 and 2005, the overall number of local authority home care clients rose by 10 per cent. Within this group, 62 per cent more received personal care. If this pattern were replicated in Stockton, the financial burden would be significantly worse.

The increased administrative burden to councils:-

The impact assessment identified the proposed additional £29m cost of administering the bill had been factored into the costing for the grant and

efficiency savings. However, as the Government believed that there should be a set period, from 1st October 2010 to 31st December 2010, during which applications for free personal care should be considered retrospectively from the date of they were received plus a concerted effort by all local authorities to promote free personal care to all in the 3 months leading up to its implementation, the view of many councils was that this was insufficient.

At the very least, the Council would also have to undertake: the additional assessments of self-funders; re-assessments for some clients currently assessed at substantial; appeals activity where a banding was challenged; additional activity through intermediate care; and potential training required too deliver the new assessment tool. It was also noted that as the majority of people that meet the criteria for free personal care would also receive other services, they would still have to be assessed for charging, and so there would be no reduction in administrative costs.

Public confusion for free personal care:-

The draft guidance proposed that free personal care should be available to those in the highest need (FACS critical). The assessment of any client as "critical" was known to be variable based on their very unique circumstances of individual clients. People would also need to meet the criteria of requiring assistance with four Activities of Daily Living and new systems would have to be set up to assess this.

The Joseph Rowntree study in Scotland of free personal care, found that after 3 years of operation, there remained issues around the lack of understanding of free personal care by the general public, with many people surprised that they may still be required to pay for some aspects of care.

Timetable for implementation:-

This was a challenging timescale, which was not aided by the Government's intention to provide a national assessment tool in the summer of 2010. If the delivery of this tool was not timely then councils would struggle to deliver a working system for the expected start date of 1 October 2010.

RESOLVED that:-

1. The main elements of the new Bill be noted;
2. Further work be undertaken to estimate the potential financial impact (loss of income) by assessing the number of individuals who are assessed as receiving personal care (as per the definition/qualifying

criteria) and who have been assessed as critical in terms of the Fair Access to Care Services (FACS) eligibility criteria;

3. How many self-funders, or those who have resisted services because of charging but would possibly qualify be assessed;

4. How the Council will adapt our Resource Allocation System for Personal Budgets be considered.

5. Appendix A to the report be used as the basis for a Stockton Council response to this consultation exercise.

3. Reasons for the Decision

To note the issues and concerns assessed locally and reflected nationally, through informal correspondence with other Councils and formally through the Association of Directors of adult Social Services (ADASS).

4. Alternative Options Considered and Rejected

None

5. Declared (Cabinet Member) Conflicts of Interest

None

6. Details of any Dispensations

N/A

7. Date and Time by which Call In must be executed

Not later than Midnight on Friday, 19th March 2010

Proper Officer  
15 March 2010