

**Appendix 1**

**Best Value Review**

**39 Recommendations**

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**SUPPORTING CARERS**

**Recognising the importance of carers**

1. The Council should make a clear and unequivocal statement that recognises the worth of Carers to the community. This should be publicised throughout the local media, together with a Charter for Carers that states what the Council will do for Carers, how it will be done and how people will know it has been done.
2. The Charter should provide a commitment by the County Council to provide support, advice, information and practical help. Also, a pledge to communicate with and listen to what Carers say about their priorities, and to involve them in planning and monitoring the services that they receive.
3. "Champions" should be created at all levels of the organisation. To include two Cabinet Members (the portfolio holders for Children and Young People and Adult Social Care) with specific responsibility to lead in this field at Member level. Also, the Head of Social Care for Children and Families and the Heads of Service from the Adult Social Care portfolio tasked to drive the change process in their respective areas of responsibility and to ensure that developments are joined up across the whole social care field.
4. In order to recognise the importance of Carers the Carer Activity Co-ordinator post should be re-titled Carer Services Manager and be made a permanent post rather than a secondment as at present. It should report directly to a Head of Service and be paid a salary commensurate with this level of responsibility (Range 9 or 10). In view of the size of the task to be undertaken, the post should be full-time. The postholder should be given clear targets to achieve, and be required to produce six-monthly progress reports to the Carers Champions in the Cabinet.
5. The Carer Services Manager to convene and lead a multi-disciplinary team that will produce a clear, concise, co-ordinated and integrated five-year strategy for all Carers. The strategy to be agreed with all partners and stakeholders by the end of 2002 for implementation from March 2003. The strategy should link all social care services, both external and in-house, health and education services. The strategy should have an overall aim of improving the standard and level of support for all Carers across the County. A steering group should be set up to monitor progress. The group should include Carers and their representatives and be chaired by a Cabinet "Champion". As its first task, the group should agree clearly defined and measurable outcomes for its work.
6. An identified team member in every care management/social work team should be given the responsibility for ensuring that staff are kept up-to-date on training and information.

### **Young Carers**

7. Identify a post to be designated as a "Young Carers Champion". The postholder to work with the Young Carers workers in the Carers Associations, with social care services, the Education Welfare Service and education staff and with health employees to develop and implement a practical strategy that recognises the special needs of Young Carers.
8. The protocol relating to joint working between Adults and Children and Families teams should be developed further in relation to Young Carers and should form part of induction and training.
9. Young Carers should be identified specifically within the Education Development Plan, and a strategy should be developed to raise the awareness of teachers of the issue and to equip them to improve the quality of support for these pupils in schools. This should include consideration of a model curriculum to guide schools. Schools should also be encouraged to develop a similar system to that operating in GP surgeries to identify Young Carers

### **Minority ethnic groups**

10. The Council should implement the following support for people from minority ethnic groups:
  - To provide funding for a pilot of a public interpreting service to be developed as part of the existing Interpreting Service.
  - To develop processes that would enable people from minority ethnic groups to obtain easier access to advocacy.
  - An advertising campaign to be launched to encourage people from ethnic backgrounds to come forward to participate in the sitting service.
  - Leaflets for Carers to be made available in a wide variety of languages. Advice to be sought on the appropriate languages from the County
  - Council's interpreting service.
  - In recognition that a number of people from ethnic minorities are illiterate, even in their own language, allocated time slots should be provided at a range of services where an interpreter would be available.
  - Widely-advertised staffed phone lines to be set up in the County Council with bi-lingual speakers to be available on specific days to provide advice and support to Carers.
  - Consideration to be given as to how Punjabi speakers could be made available at major service outlets e.g. health, housing, benefits, agencies, etc.

- Consideration to be given to using day care facilities more flexibly, to possibly create special days for minority ethnic groups.
- A diversity target to be set for the Carers Associations to measure developments in providing support to Carers from minority ethnic groups.

### **Respite Care**

11. A clear plan to be produced with detailed milestones and costings, setting out a "route map" for the improvement of respite services in the northern part of the County for adults under the age of 65. The plan to be completed by the autumn of 2002 for full implementation by spring 2005. Carers and/or their representatives to be involved in producing the plan.
12. Information about unmet need in relation to respite care to give carers a break should be gathered to inform further consideration of respite provision.
13. Eligibility criteria to be reviewed and amended where they militate against the Carer receiving breaks through respite care.
14. Further develop Direct Payments type schemes and other flexible forms of support and breaks for Carers.

### **INFORMING, CONSULTING AND WORKING TOGETHER**

#### **Social workers/care managers providing basic information**

15. All care managers/social workers to be reminded of the procedures to be followed in respect of Carers and that the Carers right to an assessment and services is recognised and acted upon.
16. A simple strategy to be agreed with Heads of Service that will lead to improved recording and auditing of assessments, leading to improved compliance and proof of compliance.
17. The audit checklist to be reviewed to ensure that Carers' needs are given a much higher priority and a strategy to be agreed to improve compliance with the file audit system.
18. Quarterly audit reports should be produced for the Head of Service "champions" and the results to be published within social care teams.
19. An evaluation of the benefits of SWIFT in identifying Carers to be carried out 12 months after implementation.

### **Working together**

20. Carers to be seen as partners in the provision of help to the person needing care and to be involved as partners in planning and delivering services at all levels. The national Carers Strategy good practice checklist to be used as a model for working with Carers and be incorporated into the proposed Charter.

### **Communication and the accessibility of information**

21. A post of Carer Communications and Training Officer to be established, tasked with working closely with the Carers associations and other partners to put in place and implement a communications strategy. This should include imaginative ways of disseminating information (e.g. sending out information with Council Tax notices and Electoral Registration forms; placing posters and information in libraries; recruiting volunteers to provide information in doctors' surgeries, etc) and developing awareness and knowledge throughout the Council and beyond (e.g. through school governor training).
22. Set up and publicise widely a dedicated advice and information phone line.
23. Set up a clearly marked section for Carers on the County Council web site. The web site should include the names of the "Champions" outlined above and could be linked to the Continuing Education ICT for housebound people project. The web site should be linked to other useful sites such as the DSS, District Councils, Health, Housing, etc. Consideration should also be given to including a chat room facility whereby Carers can share information and experience.
24. Housing and benefits information to be included in the "Green Boxes" that should be re-launched and advertised more widely. For example a poster campaign along the lines of "The Green Box Is Here" to raise the public's awareness of the scheme.
25. Set up a database of Carers willing to be consulted and to participate in focus groups.

## **FUNDING, CONTRACTING AND COMMISSIONING**

### **Funding**

26. It is essential that the two Carers Associations, as the main providers of support and advice to Carers, be funded on the same basis. That is with agreed core funding for a sufficient period to provide continuity of provision for all posts and activities, and to enable the Associations to plan for the future. This would also have the added benefit of reducing the amount of time that the managers of the Associations spend bidding for funds and allow them more time to plan services.

### **Contracts and agreements**

27. Service level and core funding agreements should be put in place with both of the Carers Associations. Funding should be agreed for three-year periods to be reviewed

after two years. A primary consideration should be to provide continuity of funding for the work of these important organisations. The 11 agreements should clearly specify what services are required, contain a precise specification of standards and identify monitoring procedures. The latter to be as non-bureaucratic and "light touch" as possible.

28. Similar agreements should be put in place with all voluntary sector organisations by 2005 in order to enhance partnership working.
29. Discussions should take place with service providers and other agencies that purchase services from them to develop joint monitoring procedures.
30. An agreement to be put in place with a voluntary provider (e.g. Crossroads) to give interim support to Carers following referral and before the assessment takes place.

#### **CARER ASSESSMENTS**

31. Targets should be set to ensure that the authority becomes a top performing authority in relation to performance indicator D42, both by increasing the number of Carers who receive an assessment and ensuring that assessments already carried out are accurately recorded. The Service Improvement Plan to indicate a practical early date by when this could be achieved.

#### **CARER AWARENESS**

32. Training and induction for social workers/care managers to include the promotion of carer awareness, to ensure that Carers are recognised as partners in caring and approached accordingly and to achieve consistency of service.
33. Carers should be involved in the delivery of the above training.
34. Care managers and social workers should be aware of the benefits of technology and the contribution it can make in helping Carers.
35. Carer awareness should be made a core competency for social care staff with training needs identified through effective use of supervision and appraisal.
36. A similar programme of awareness training should be produced for schools and schools should be actively encouraged to adopt the programme.
37. County and District Councillors should be provided with a simple one page guide containing information relating to Carers (who to contact, or to advise their constituents to contact, services that are available, the management structure, a single contact phone number etc.).

#### **EMPLOYMENT POLICIES**

38. Buckinghamshire County Council should examine its own employment policies to see how they contribute towards recruiting, supporting and retaining staff with caring responsibilities.

#### **THE IMPROVEMENT PLAN**

39. The Best Value Improvement Plan to be presented to the Deputy Leaders Best Value PAG by the end of July 2002.