

Wednesday, 18 January 2023

**ADULT SOCIAL CARE AND HEALTH OVERVIEW AND SCRUTINY  
SUB-BOARD**

A meeting of **Adult Social Care and Health Overview and Scrutiny Sub-Board**  
will be held on

**Thursday, 26 January 2023**

commencing at **2.00 pm**

The meeting will be held in the Meadfoot Room - Town Hall

**Members of the Committee**

Councillor Johns (Chairwoman)

Councillor Barnby (Vice-Chair)

Councillor Douglas-Dunbar

Councillor Loxton

Councillor O'Dwyer

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# ADULT SOCIAL CARE AND HEALTH OVERVIEW AND SCRUTINY SUB-BOARD AGENDA

**1. Apologies**

To receive apologies for absence, including notifications of any changes to the membership of the Committee.

**2. Minutes**

(Pages 4 - 6)

To confirm as a correct record the minutes of the meeting of the Adult Social Care and Health Overview and Scrutiny Sub-Board held on 24 November 2022.

**3. Declarations of Interest**

- a)** To receive declarations of non pecuniary interests in respect of items on this agenda

**For reference:** Having declared their non pecuniary interest members may remain in the meeting and speak and, vote on the matter in question. A completed disclosure of interests form should be returned to the Clerk before the conclusion of the meeting.

- b)** To receive declarations of disclosable pecuniary interests in respect of items on this agenda

**For reference:** Where a Member has a disclosable pecuniary interest he/she must leave the meeting during consideration of the item. However, the Member may remain in the meeting to make representations, answer questions or give evidence if the public have a right to do so, but having done so the Member must then immediately leave the meeting, may not vote and must not improperly seek to influence the outcome of the matter. A completed disclosure of interests form should be returned to the Clerk before the conclusion of the meeting.

**(Please Note:** If Members and Officers wish to seek advice on any potential interests they may have, they should contact Governance Support or Legal Services prior to the meeting.)

**4. Urgent Items**

To consider any other items that the Chairwoman decides are urgent.

**5. Review of Domiciliary Care**

(Pages 7 - 15)

To review domiciliary care in Torbay and how this is delivered and monitored.

(Note: Jo Williams, Director of Adults and Community and Steve Honeywill, Head of Adult Social Care Commissioning will present this item).

- 6. Review of unpaid carers** (Pages 16 - 26)  
To consider a report on the review of unpaid Carers in Torbay.

(Note: Jo Williams, Director of Adult and Community Services and Katy Heard, Carers Lead, Torbay and South Devon NHS Foundation Trust will present this item)

- 7. Adult Social Care and Health Overview and Scrutiny Sub-Board Action Tracker** (Page 27)  
To receive an update on the implementation of the actions of the Sub-Board and consider any further actions required (as set out in the submitted action tracker).

**Meeting Attendance**

Please note that whilst the Council is no longer implementing Covid-19 secure arrangements attendees are encouraged to sit with space in between other people. Windows will be kept open to ensure good ventilation and therefore attendees are recommended to wear suitable clothing.

If you have symptoms, including runny nose, sore throat, fever, new continuous cough and loss of taste and smell please do not come to the meeting

## **Minutes of the Adult Social Care and Health Overview and Scrutiny Sub-Board**

**24 November 2022**

**-: Present :-**

Councillors Douglas-Dunbar, Dudley, Foster and Loxton

Non-voting Co-opted Member  
Pat Harris, Healthwatch

(Also in attendance: Councillors Brooks (virtually) and Johns (virtually))

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### **13. Apologies**

It was reported that, in accordance with the wishes of the Liberal Democrat Group, the membership of the Sub-Board had been amended to include Councillor Dudley in place of the Chairwoman, Councillor Johns, who attended the meeting remotely due to having Covid-19 and therefore was unable to be a formal member of the Sub-Board).

As apologies had been received from the Chairwoman, Councillor Johns, Councillor Douglas-Dunbar was elected Chairwoman of the Sub-Board for the meeting.

### **14. Minutes**

The minutes of the meeting of the Sub-Board held on 27 October 2022 were confirmed as a correct record and signed by the Chairwoman.

### **15. Review of Dentistry Provision in Torbay**

Melanie Stoker (Senior Programme Manager), Amy Claridge (Dental Team) and (Head of Stakeholder Engagement) from NHS England provided an update on dentistry provision in Torbay and responded to the following questions:

- How was dentistry funded and how were the units of dental activity (UDA) calculated which meant that dentists were paid different amounts across the country.
- When and how could contracts be changed.
- What work was being done to encourage children to visit the dentist.
- There were other benefits of visiting the dentist including overall oral health and spotting other disease e.g. cancer, what was being done in the community to encourage people to have better oral health and raise awareness of potential early warning signs of other health issues.

- There were a lot of pilots being carried out, how soon could they be rolled out in Torbay and what more could be done sooner to improve access to dentists and improve oral health.
- How soon was it expected that numbers of children visiting dentists would be back to pre-pandemic levels.
- What follow up action was being taken on the pilots e.g. the teeth brushing in schools to ensure that parents also follow this up with teeth brushing before bed and that support in school would not result in less support at home.
- What was being done to improve waiting times for adults and vulnerable children.
- What could be done to encourage more people into dentistry (e.g. improved working conditions, access to housing etc.) and to use dentistry staff for other roles to enable more patients to be seen.
- Dentists were expected to meet 96% target otherwise funding was clawed back, how does this process work and what was the impact.
- Yorkshire has dental access centres in their town centres was this something that could be looked at for Torbay.
- What work was being done to focus support on areas of deprivation and how this linked to schools (it was suggested that free school meals may be a good indicator to use to identify suitable children and families to support).
- How can we ensure that money clawed back from dentists in Torbay was invested in preventative and good oral health for people in Torbay.
- Were vaping and fizzy drinks considered bad for oral health.
- How were we monitoring the success of the dental reform programme.

Lincoln Sargeant (Director of Public Health, Mark Richards (Public Health Specialist), Wendy Okurut (Brixham Town Council) and Pat Harris (Healthwatch) also took part in the discussions and debate.

Resolved (unanimously):

That NHS England/the Integrated Care Partnership be requested to provide an annual update to the Torbay Adult Social Care and Health Overview and Scrutiny Sub-Board on improvements in dental access and planned oral health improvement initiatives, including key outputs and key performance indicators via an accessible dashboard (the content of which to be agreed with the Director of Public Health).

## **16. One Devon Partnership Integrated Care Strategy**

The Director of Public Health (Dr Lincoln Sargeant) outlined the submitted paper which provided an update on the development of the One Devon Partnership Integrated Care Strategy which was produced by the One Devon Integrated Care System (ICS) setting out the direction for the system on how NHS commissioners, local authorities, providers and other partners could deliver a more joined up, preventative and person centred care for the whole population across the course of their life. The Director of Public Health responded to the following questions:

- How could the Sub-Board fully comment on the document when it did not include target performance indicators to consider.

- There was a brief mention of workforce, what more could be included to reflect what was proposed to improve workforce planning.
- How would we ensure and measure the impact of prevention.
- What other community initiatives would be considered to help with prevention (e.g. community event in the library for free mouth cancer checks).
- How would the ICS ensure that patients only have to tell their story once as they move through the system.
- How would the ICS ensure that any housing targets did not conflict with the housing targets and strategies from the member Local Authorities.
- Would targets around improving housing standards be more appropriate.

Resolved (unanimously):

That the Board notes the progress of the One Devon Partnership Integrated Care Strategy and recommends that further details around prevention, housing and workforce are included as well as ensuring the voice of the child and young person is heard.

**17. Adult Social Care and Health Overview and Scrutiny Sub-Board Action Tracker**

The Sub-Board noted the submitted action tracker.

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Chairwoman

**Meeting:** Adult Social Care and Health Overview and Scrutiny Sub-Board

**Date:** 26<sup>th</sup> January 2023

**Wards affected:** All

**Report Title:** Domiciliary Care

**When does the decision need to be implemented:** Updates requested by Scrutiny Board

**Cabinet Member Contact Details:** Councillor Stockman

**Director/Divisional Director Contact Details:** Report by Steve Honeywill, Head of Adult Social Care Commissioning on behalf of the Director of Adult Social Care, Joanna Williams.

### 1. Purpose of Report

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1. To provide the Scrutiny Sub-Board with information regarding how Domiciliary Care in Torbay is delivered, provided and monitored.

### 2. Reason for Proposal and its benefits

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- 2.1 The information in this report and attached data is available to provide Members with assurance and pertinent information regarding the performance of the local Domiciliary Care market and its achievements and challenges.

### 3. Recommendation(s) / Proposed Decision

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- 3.1 For Members of the Board to note the contents of the report and
- 3.2. Officers to follow up regarding any requirements from discussions or specific actions from the Board.

### Appendices

**Appendix 1:** Domiciliary Care hours performance data, hours etc

Tab One, 15 minute visits, Tab 2 Hours over time, Tab 3 Hospital admissions

### 1. Introduction and summary

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- 1.1 Torbay has a long-standing Domiciliary Care framework of currently 18 providers working in the community on a procured framework named “Living Well at Home” The current framework commenced in March 2020 and runs until March 2025. It should be noted that the start of these arrangements coincided with the pandemic so the initial operating period until mid-2022 was focused upon our response to the pandemic across the health and social care system and supporting providers and service services through a challenging and uncertain period.
- 1.2 Despite the above context the Domiciliary Care (Dom Care) market has responded consistently over a long period and has grown and sustained capacity despite the distress caused by Covid and structural issues such as the supply of Adult Social Care workforce and economic pressure providers have faced in a number of ways.

### 2. Overview of the market

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This section of the report provides a summary of the successes and challenges in this market.

- 2.1 **Workforce, recruitment, retention and marketing.** Adult Social Care (ASC) workforce sufficiency is a much-reported topic in the media in recent time often seen through the prism of delayed discharges from Hospital. Our data in the attached appendix 1 demonstrates in different ways that we have sustained and increased hours over time and avoided some bed based admissions by helping people to remain in the community. By way of an illustration in mid-2020 around 60-80 people per month had been admitted to Hospital from Dom Care, in late 2022 this same measure was between 46-54 people. Regarding hours of Dom Care, in January 2018, 28,000 hours were planned in a month, after the lock down periods of 2020 into 2021 this had increased 40,000 hours at the end of 2020 and the start of 2021, more recently in October-December the planned monthly hours were between 43,000 and 44,000.
- 2.2 **Economy:** Despite the resilience demonstrated above the employment market had been a challenge with respect to recruitment and retention in all domains of ASC. Other comparator jobs locally have paid higher hourly rates, Dom Care typically pays £10 -£12 per hour, other jobs in Retail and Hospitality have raised pay in a tight labour market to £2/£3 per hour above this level. This has been the position for the last year or more. We do not know the exact rates that private businesses pay carers as that's sensitive market business information, but £10 - £12 is a range that has often been reported. Providers are creative with recruitment, marketing and retention proposals but competing on hourly rates



with other sectors and the better paid comparator in the public sector is a difficulty. The absence of a career pathway is an issue that is often raised as an impediment to increasing this workforce. It should be noted providers have different operational organisational models, some pay on time work and by tasks, different methods are used for travel costs, some may receive standard wages/pay. We have all worked hard locally to improve the situation, but the challenges are part of national funding for ASC if pay levels are to raise to make this carer work an attractive career option.

- 2.3 **Consistency and growth:** In the appendix 1 data overview this contains information that demonstrates the consistency and growth in Dom Care to help people live independently in the community. By way of illustration as touched on in 2.1 above since 2018 to 2022 our planned hours per month have increased in the order of 60%. This has helped with Hospital admissions which in April /May 2020 was around 70 per month which was now between around 45- 54 per month, which assists pressure on the acute system. We are also managing more complex clients in the community via Dom Care
- 2.4 **ASC system** is under pressure nationally although our integrated local arrangement has helped managing and mitigate these pressures. The latest reported data in the media shows that 165,000 ASC vacancies nationally, a 51 per cent increase in the past year. This now appears to be structural workforce concern. At the end of 2018 we had three clients in receipt of more than 35 planned visits per week, at the end of 2022 this had increased to 25 clients per week demonstrating the increased complexity being managed in the community as alternative to bed based care and preventing hospital admissions
- 2.5 **Areas for development** – Our aspiration would be to expand Dom Care into areas such as reablement support for people discharge from Hospital and if technology enabled care to provider equipment maintain independence and safety in the home in conjunction with Dom Care input. Dom Care providers have undertaken innovations that occurred during the pandemic period, for example improvement IT system to monitor rotas and client contact time, use of fleet vehicles for carers use for home visits and e-bikes. This sector is keen to look at efficient ways or working to the benefits of clients, staff and their business models.
- 2.6 **Covid challenges** had a significant impact upon the operations of Dom Care and has a difficult legacy in terms of staff fatigue and recruitment and retention to front line work. Currently PPE is still free but at some point, it is assumed this will become an extra cost to these businesses. The legacy of covid is still very real to providers and carers.
- 2.7 Following a Care assessment a **wait for a service** for both logistical and operational reasons has always been a factor. An established prioritisation process is in place in teams to make this, those without any informal supporting and living alone would be the highest risk waiting for care. It should be noted for the period March 2022 to December 2022, with a few peaks and troughs these outstanding lists have been broadly static, and the situation has not worsened, the mean average number waiting at any given time is 138, those without informal supported would be around 30-40 in this group. Of course, these

numbers change daily as people are allocation care and new clients move into the system to be allocated care.

### 3. Financial Opportunities and Implications

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- 3.1 Current framework March 2020 to March 2025.
- 3.2 Council Commissioners with Trust colleagues over the next 18 months to develop an approach to re commissioning of the framework to enhance the model to support local needs. The Council Market Sustainability Plan, which a requirement of the government Fair Cost of Care process will be published at the end of March 2023 that will touch upon these matters, but this will be aligned to our existing Market Blueprint Plan published in 2021.

### 4. Legal Implications

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- 4.1 None from this briefing

### 5. Engagement and Consultation

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- 5.1 Engagement with the Domiciliary Care market has always been important to commissioners and our delivery partners in Torbay and South Devon NHS foundation Trust.
- 5.2 During the pandemic we worked very closely with the framework providers in the deployment of Covid grants support to target interventions financial and practical, including using funds to undertake a marketing campaign to work in Dom Care locally, help with overseas works recruitment, temporary money to makes retention payments to staff or funds provided to providers to increase pay as an acknowledgement and thank you for working through the pandemic. Subsequently the Trust have reinstated face to face care collaborative meetings with providers as soon as this was practical. Engagement and transparent communication continue to be our approach with the care market.

### 6. Purchasing or Hiring of Goods and/or Services

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- 6.1 Not applicable to this briefing.

### 7. Tackling Climate Change.

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- 7.1 Not applicable for this briefing.

## 8. Associated Risks and other information

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- 8.1 In addition to the analysis in Section one and two of this report and the appendix data the follow items are also relevant context.
- 8.2 The Dom Care framework has grown and delivered in Torbay, however other providers are in the local market either supporting self-funded clients who to do receive care after a Care Act assessment or supplement framework capacity on a case-by-case basis during pressure points of demand. This is a smaller element of the market, between August and December 2022 only 2% extra Dom Care capacity was commissioned over and above the framework hours.
- 8.3 Historically a view has been in places that too many short 15 minutes Dom Care visits form part of the home care offer. This is now only as minor element of the market whole, for example of the planned 44,252 Dom Care Hours in December 2022, only approximately 200 hours fell into this grouping, less that 1% on the whole planned hours allocation, therefore this is no longer a material issue based on the evidence. (See Appendix 1 )

## 9. Equality Impacts - Identify the potential positive and negative impacts on specific groups

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This is an assessment of the Living Well at Home Framework

	Positive Impact	Negative Impact & Mitigating Actions	Neutral Impact
Older or younger people	X		
People with caring Responsibilities	X		
People with a disability	X		
Women or men			X
People who are black or from a minority ethnic background (BME) (Please note Gypsies / Roma are within this community)			X
Religion or belief (including lack of belief)			X
People who are lesbian, gay or bisexual			X

People who are transgendered			X
People who are in a marriage or civil partnership			X
Women who are pregnant / on maternity leave			X
Socio-economic impacts (Including impact on child poverty issues and deprivation)			X
Public Health impacts (How will your proposal impact on the general health of the population of Torbay)			X

## 10. Cumulative Council Impact

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10.1 None

## 11. Cumulative Community Impacts

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11.1 None

Steve Honeywill,

Head of ASC Commissioning,

Torbay Council

January 2023

15 min visits from paris dom careplanning  
w/c 2/1/23

By Provider	Clients	Weekly visits	Weekly hours
ABIDE HOMECARE	1	7	1.75
AGINCARE UK LTD (SUPPORT SERVICES) (Not ECH address)	2	21	5.25
AGINCARE UK LTD T2	1	14	3.50
BAY CARE GROUP	4	40	10.00
CARETAKERS SW LTD	1	21	5.25
CUMBERLAND COMPLEX	1	7	1.75
DEVON C.AIR LTD	1	7	1.75
HELP@HAND CARE SERVICES	1	7	1.75
HOMELIFE CARERS LTD	2	14	3.50
LOVE TO CARE DEVON	1	1	0.25
PALM TREE HOME CARE LTD	5	36	9.00
STELLA CARE DEVON LTD	1	7	1.75
SUMMON BONUM	2	14	3.50
<b>Grand Total</b>	<b>23</b>	<b>196</b>	<b>49.00</b>
AGINCARE UK LTD (SUPPORT SERVICES) (ECH address)	15	186	46.50

By Care Type (excluding ECH address)	Clients	Weekly visits	Weekly hours
HOUSEWORK WITH SHOPPING	1	1	0.25
IND SUPPORT WITH MEDICATION	4	35	8.75
INDEPENDENT SUPPORT ONLY	7	50	12.50
MEDICATION ONLY	2	21	5.25
PERSONAL CARE ONLY	2	27	6.75
PERSONAL CARE WITH IND SUPPORT	3	24	6.00
PERSONAL CARE WITH MEDICATION	5	38	9.50
<b>Grand Total</b>	<b>23</b>	<b>196</b>	<b>49.00</b>

Notes:

From paris careplanning (dom) so may include non LWH and SL care

Clients may be receiving other care

Some clients receiving care from multiple providers

			Planned Hours pw						Planned Visits pw					
Reporting Month	1) Planned hours in month	2) Planned cost in month	0-4	4.1-7	7.1-14	14.1-28	28.1-56	>56	0-7	7.1-14	14.1-21	21.1-28	28.1-35	>35
Percentage Changes	11,669	319,198	0.45%	#DIV/0!	0.98%	4.60%	9.12%	22.45%	0.46%	0.67%	1.53%	5.25%	8.44%	144.44%
30/01/18	28,167	496,536	199		133	50	25	7	228	135	89	52	15	3
31/12/20	39,836	815,734	180	122	173	115	57	11	240	123	121	142	19	13
30/04/20	27,999	573,425	162	110	133	73	37	10	218	101	95	83	15	13
31/05/20	32,836	672,388												
30/06/20	32,207	659,596												
31/07/20	34,387	704,161												
31/08/20	36,898	755,573												
30/09/20	35,608	729,223												
31/10/20	37,841	774,870	170	130	152	109	53	10	228	120	124	119	20	13
30/11/20	38,495	788,398	167	132	182	112	60	7	178	122	178	118	59	9
31/12/20	40,520	829,745	180	122	173	115	57	11	240	123	121	142	19	13
31/01/21	40,309	825,418	188	123	165	118	59	12	246	116	129	139	19	16
28/02/21	35,821	733,580	186	124	174	115	66	11	246	124	134	137	18	17
31/03/21	41,598	851,799	189	135	187	124	67	16	262	137	138	143	23	15
30/04/21	43,005	895,929	154	125	163	122	59	14	221	132	133	116	23	12
31/05/21	45,220	941,956	149	125	162	123	56	16	216	125	130	120	24	16
30/06/21	43,998	914,218	198	134	199	143	73	20	274	147	152	139	30	25
31/07/21	45,636	948,128	189	129	195	136	76	19	263	140	145	142	32	22
31/08/21	45,462	945,065	190	125	198	130	78	18	267	144	142	138	25	23
30/09/21	43,788	913,067	182	123	199	134	79	22	259	144	147	142	22	25
31/10/21	44,744	932,587	179	113	181	134	77	20	255	147	128	135	20	19
30/11/21	43,334	900,358	171	117	171	139	71	22	249	145	133	124	21	19
31/12/21	42,830	891,486	167	117	162	130	73	21	240	135	135	121	18	21
31/01/22	42,801	890,988	174	116	155	118	73	18	246	125	131	116	17	19
28/02/22	38,836	807,952	182	121	155	123	75	18	257	131	129	117	18	22
31/03/22	43,186	900,365	185	113	153	116	83	17	249	130	136	106	21	25
30/04/22	41,481	925,820	184	114	148	115	77	19	248	124	137	102	22	24
31/05/22	42,235	942,881	188	121	144	111	72	18	256	126	137	96	20	19
30/06/22	40,357	901,436	183	113	148	105	72	20	246	120	139	97	20	19
31/07/22	42,467	948,000	181	116	154	106	66	20	241	117	145	100	21	19
31/08/22	42,295	943,980	173	106	155	107	68	18	232	116	137	97	19	26
30/09/22	42,348	949,033	175	111	149	97	72	17	235	109	136	94	20	27
31/10/22	43,592	977,804	169	111	152	101	71	21	229	109	140	101	20	26
30/11/22	42,566	957,609	175	106	158	106	76	17	235	117	139	101	21	25
31/12/22	44,252	995,687	176	111	161	110	73	18	236	119	143	102	24	25

Month	1) New Package	2) Increased package	3) Decreased package	4) Ending packages	5) Total Service Users at snapshot	6) New Clients in prev 6 weeks	7) Hospital admssions
30/04/20	104	36	18	67	772	144	69
31/05/20	78	48	20	76	775	104	74
30/06/20	54	34	14		776	76	51
31/07/20	58	32	12	62	640	94	60
31/08/20	65	32	15	48	641	83	84
30/09/20	75	26	11	72	659	91	64
31/10/20	82	33	18	70	672	115	73
30/11/20	90	28	15	58	676	116	65
31/12/20	68	21	14	72	697	94	64
31/01/21	107	31	12	96	720	127	61
28/02/21	56	15	10	45	719	105	65
31/03/21	106	35	13	839	770	138	68
30/04/21	102	40	19	77	763	143	68
31/05/21	80	52	17	89	757	108	75
30/06/21	68	41	20	68	747	93	59
31/07/21	68	31	17	87	736	106	70
31/08/21	66	26	22	73	728	93	42
30/09/21	51	18	16	61	732	69	49
31/10/21	49	25	22	60	716	62	38
30/11/21	25	22	15	53	691	38	50
31/12/21	38	15	5	47	686	48	36
31/01/22	70	22	13	41	682	75	51
28/02/22	68	18	8	60	699	93	36
31/03/22	66	18	8	55	718	91	49
30/04/22	92	21	14	73	692	123	38
31/05/22	67	29	8	56	686	95	50
30/06/22	74	25	7	73	676	100	53
31/07/22	67	25	10	103	694	116	46
31/08/22	125	25	6	85	671	142	49
30/09/22	84	17	10	85	696	131	47
31/10/22	106	34	6	68	708	129	50
30/11/22	64	24	13	57	726	95	54
31/12/22	53	21	6	54	751	87	34

**Meeting:** Overview and Scrutiny sub-board      **Date:** 26<sup>th</sup> Jan 2023

**Wards affected:** All

**Report Title:** Carers' updates

**When does the decision need to be implemented?** For info only

**Cabinet Member Contact Details:**

Cordelia Law (Children), [Cordelia.Law@torbay.gov.uk](mailto:Cordelia.Law@torbay.gov.uk);

Jackie Stockman (Adults and Public Health), [Jackie.stockman@torbay.gov.uk](mailto:Jackie.stockman@torbay.gov.uk)

**Director/Divisional Director Contact Details:**

Jo Williams (Director Adult Services), [Joanna.Williams@torbay.gov.uk](mailto:Joanna.Williams@torbay.gov.uk)

## 1. Purpose of Report

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- 1.1 To provide an update about unpaid Carers in Torbay including the national context and Adult Social Care (ASC) perspective.

## 2. Background

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- 2.1 Carers are the unpaid family members or friends who support someone with any disability, long-term illness, mental health or substance misuse issue.
- 2.2 Torbay's multi-agency Carers' Strategy is refreshed every three years, with extensive consultation beforehand supported by Engaging Communities Southwest / Healthwatch. The present Strategy and Action Plan<sup>1</sup> runs from 2021-2024 and the Young Carers Under 25 (YC<25) Strategy and Action Plan<sup>2</sup> runs 2022-2025. Actions are formally monitored on a quarterly basis by

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<sup>1</sup> <https://www.torbayandsouthdevon.nhs.uk/uploads/torbay-carers-strategy-2021-2024.pdf>

<sup>2</sup> <https://www.torbayandsouthdevon.nhs.uk/uploads/young-carers-under-25-strategy-and-action-plan-2022-2025.pdf>



the relevant multi-agency Strategy Steering Group, which are chaired (or co-chaired for YC<25) by Carers, and then published on-line<sup>3</sup>.

### 3. Update

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- 3.1 The national picture for ASC Carers of Adults<sup>4</sup> has been steadily deteriorating year-on-year, with an average 2% reduction in Carer-reported quality of life (CRQoL) every 2 years both nationally and in Torbay. (Appx 1, Fig 1)
- 3.2 Carers UK's 2022 survey<sup>5</sup> also shows a deteriorating position for carers, with increased impact of cost-of-living concerns. Carers' financial positions and poverty rates have always been worse than their peers<sup>6</sup>, but where this would previously have impacted holidays and 'luxuries', 25% are now reducing essentials such as food or heating, almost double last year's figure<sup>7</sup>. This is also impacting Carers' mental health, with 30% reporting 'bad or very bad' mental health, and with worse rates for Carers receiving Carers' Allowance (37%) or on low incomes (40%).<sup>8</sup>
- 3.3 Compared with these bleak figures, Torbay has some positives, with Carer-Reported QoL being in the top quartile nationally (Appx 1, Fig 2) and, in Healthwatch's recent Devon-wide survey, Torbay's figures for Carers' mental health deterioration due to caring are better than the rest of Devon<sup>9</sup>.
- 3.4 The remaining ASC Outcome Framework Carers' statistics are also very positive (Appx 1, Fig 3). Credit must go to ASC for 3B (Overall satisfaction of carers with social services, ranked 9 /149 nationally), and 3C (The proportion of carers who report that they have been included or consulted in discussions about the person they care for, ranked 13/ 149). Unfortunately, the Strategy target to be top quartile for 3D part2 (The proportion of carers who find it easy to find information about services) was missed by 3 positions (41/ 149).

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<sup>3</sup> <https://www.torbayandsouthdevon.nhs.uk/services/carers-service/strategy-policy-and-quality/>

<sup>4</sup> <https://digital.nhs.uk/data-and-information/publications/statistical/personal-social-services-survey-of-adult-carers/england-2021-22>

<sup>5</sup> <https://www.carersuk.org/media/p4kblx5n/cukstateofcaring2022report.pdf>

<sup>6</sup> <https://www.jrf.org.uk/data/poverty-rates-informal-carers>

<sup>7</sup> <https://www.carersuk.org/media/p4kblx5n/cukstateofcaring2022report.pdf> page 14

<sup>8</sup> <https://www.carersuk.org/media/p4kblx5n/cukstateofcaring2022report.pdf> page 33

<sup>9</sup> <https://cdn.whitebearplatform.com/hwdevon/wp-content/uploads/2022/11/21153421/HWDPT-Unpaid-Carers-Survey-FINAL.pdf> page 20-21

- 3.5 Carers' Assessments are also on target (37% against YTD target of 30%) with Older People's Mental Health team doing particularly well (60%) but working age Mental Health doing particularly badly (24%). Further meetings are planned to address this. Particular mention must be made of Carers Aid Torbay, whose staff have completed more than double their target. (100 pa)
- 3.6 Availability of support to the person being cared for significantly impacts upon Carers. Even though this is a national issue (41% of Carers having no break in last year)<sup>10</sup>, the lack of appropriate replacement care is more of an issue for Carers in Torbay than other parts of Devon (Appx 4).
- 3.7 Due to domiciliary care issues, Carers can feel pressurised to care eg to support hospital discharge. Devon Carers have been funded to enhance Hospital-based support to Carers with impressive results<sup>11</sup>. Torbay has maintained its existing support, but detailed evaluation is required to compare the two schemes and identify any additional funding requirements / sources.
- 3.8 Evaluations have been undertaken of Carers' Direct Payments<sup>12</sup>, Carers' Technology Enabled Care pilot<sup>13</sup> and Learning Disability Carers' Support. All have evidenced excellent impacts on Carers' Care Act Outcomes.
- 3.9 Two external factors have significantly impacted upon Carers' Team and Service: procurement away from Torbay Council print department resulted in delays to the October Signposts magazine mailout; and issues with a Council IT server caused Carers Register database to crash completely. The Council IT team worked hard to ensure that the Carers' Emergency Back-up Scheme was rectified as quickly as possible, and have re-built the database within TFM, but four months later it does not yet fully replicate previous functionality.
- 3.10 The above factors impacted on the existing workload of the team so that some of the Strategy target dates have slipped, but existing Carers' budget has been moved around to build in additional capacity to address this.

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<sup>10</sup> <https://www.carersuk.org/media/p4kblx5n/cukstateofcaring2022report.pdf> page 33

<sup>11</sup> [https://www.westbank.org.uk/news/hsj-award-2021-winner-carers-hospital-service?gclid=Cj0KCQiAn4SeBhCwARIsANeF9DKKEymNr6Hv\\_FX4Pdvd4-BAU6dmwFYf8ENJLcZzewNMI\\_aVbGco9QEaAvvdEALw\\_wcB](https://www.westbank.org.uk/news/hsj-award-2021-winner-carers-hospital-service?gclid=Cj0KCQiAn4SeBhCwARIsANeF9DKKEymNr6Hv_FX4Pdvd4-BAU6dmwFYf8ENJLcZzewNMI_aVbGco9QEaAvvdEALw_wcB)

<sup>12</sup> <https://www.torbayandsouthdevon.nhs.uk/uploads/carers-direct-payments-evaluation-december-2021.pdf>

<sup>13</sup> <https://www.torbayandsouthdevon.nhs.uk/uploads/carers-technology-enabled-care-pilot-evaluation-summer-2022.pdf>

- 3.11 Partnership working remains strong, with Citizens Advice Torbay signing up to the Commitment to Carers and Samaritans undertaking a Memorandum of Understanding with Carers Services.
- 3.12 Torbay Council's own Commitment to Carers (C2C) is positive on the Staff Carers and HR aspects, with recent presentations at Managers' Forum and Wellbeing Supporters Forum, and with Carers well-placed within Equality Information<sup>14</sup>. Children's Services' C2C priorities are more mixed (Appx 3) with work still to be done about Parent Carer Champions and maintaining robust transition processes. Work is also planned to ensure that wider Council services also identify and are accessible to Carers.

## 4. Summary

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- 4.1 Torbay Carers Service is performing well both locally and nationally, but significant challenges for Carers remain.

## Appendices

**Appendix 1:** Appendix 1 Performance Measures from the Adult Social Care Outcome Framework (ASCOF)

Fig 1 Carer-reported Quality of Life in Torbay and in England over past 10 years

Fig 2. 2021-2 Survey. Carer-reported Quality of Life Comparisons and Ranking

Fig 3. 2021-2 Survey. ASCOF figures with Comparisons and Rankings

**Appendix 2:** Adult Social Care – Carers' Assessments Data Quality Report 1/4/22-31/12/22

**Appendix 3** Commitment to Carers - Extract re Torbay Council - Dec 22 progress against annual priorities 22-23

**Appendix 4** Carers concerns by area of Devon

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<sup>14</sup> <https://www.torbay.gov.uk/council/policies/corporate/equality-information/>

## Supporting Information

### 1. Introduction

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- 1.1 Besides the legal requirements in Section 4 below, Carer Support is based upon the NHS Long-term Plan (2019)<sup>15</sup>, GP Carers' Quality Markers (2019)<sup>16</sup> and NICE Guidance for Adult Carers (2020)<sup>17</sup>. It also delivers the Devon Integrated Care System's 'Commitment to Carers' (2019)<sup>18</sup>.

### 2. Options under consideration

### 3. Financial Opportunities and Implications

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- 3.1 All work is within existing resources. Priorities for additional funding would be hospital-based support, mental health Carers, and increased evaluation capacity to evidence impacts and improvements.

### 4. Legal Implications

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- 4.1 All Carers' work is based upon legal requirements for The Care Act (2014) and Children and Families Act (2014).

### 5. Engagement and Consultation

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- 5.1 There is a good history of active engagement with Carers throughout all Torbay Carers' work and embedded in Carers' Strategies. Carers are offered remuneration for their time as well as expenses / replacement care costs.

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<sup>15</sup> [www.longtermplan.nhs.uk](http://www.longtermplan.nhs.uk)

<sup>16</sup> <https://www.england.nhs.uk/publication/supporting-carers-in-general-practice-a-framework-of-quality-markers/>

<sup>17</sup> <https://www.nice.org.uk/guidance/ng150>

<sup>18</sup> <https://www.icsdevon.co.uk/priorities/carers/>

## 6. Purchasing or Hiring of Goods and/or Services

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- 6.1 Contracts for Mencap support to Carers of adults with learning disabilities, and Carers Aid Torbay support with Carers' enabling and advocacy are due to be re-tendered in the coming 12 months.

## 7. Tackling Climate Change

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- 7.1 On-line meetings and support, with the associated benefit for Climate Change will continue to be developed.

## 8. Associated Risks

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- Impact of cost of living on Carers' already poor health and wellbeing.
- Risk of Carer breakdown due to inadequate replacement care and pressure to care eg hospital discharge.
- Adverse effects on Carers of working age people with mental health issues.
- Risk to Carers' Register function due to Database issues.

## 9. Equality Impacts - Identify the potential positive and negative impacts on specific groups

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	Positive Impact	Negative Impact & Mitigating Actions	Neutral Impact
Older or younger people	Yes – as many Carers		
People with caring Responsibilities	Yes		
People with a disability	Yes		
Women or men			x
People who are black or from a minority ethnic background (BME) (NB Gypsies / Roma are within this community)	Yes - Specific target for Carers from minority ethnic backgrounds		

Religion or belief (including lack of belief)			x
People who are lesbian, gay or bisexual			x
People who are transgendered			x
People who are in a marriage or civil partnership			x
Women who are pregnant / on maternity leave			x
Socio-economic impacts (Including impact on child poverty issues and deprivation)			x
Public Health impacts (How will your proposal impact on the general health of the population of Torbay)	Caring is a social determinant of health. Torbay Carers' work mitigates the impact of caring.		

## 10. Cumulative Council Impact

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10.1 None

## 11. Cumulative Community Impacts

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11.1 None

## Appendix 1 Performance Measures from the Adult Social Care Outcome Framework (ASCOF)

Personal Social Services Survey of Adult Carers in England (SACE) from Carers of adults who have had a Carers' Assessment in the previous 12 months

Fig 1. Carer-reported Quality of Life in Torbay (blue) and in England over past 10 years

Domain & KPI	Framework Source	2012/13 Outturn	2014/15 Outturn	2016/17 Outturn	2018/19 Outturn	2021/22 Outturn (Prov.)	2012/13 England Average	2014/15 England Average	2016/17 England Average	2018/19 England Average	2021/22 England Average
ASC 1D: Carer-reported quality of life	ASCOF SACE Survey	8.2	8.3	7.8	7.5	7.4	8.1	7.9	7.7	7.5	7.3

Fig 2. 2021-2 Survey. Carer-reported Quality of Life Comparisons and Ranking

Domain & KPI	Framework Source	2021/22 Outturn (Prov.)	2021/22 England Average	2021/22 SW Average	2021/22 Comparator Group	2021/22 Rank	2021/22 Quartile	2021/22 Performance Description
ASC 1D: Carer-reported quality of life	ASCOF SACE Survey	7.4	7.3	7.1	7.4	37/149	Q1	Slightly better than Eng ave Better than SW ave Same as CG ave In best quartile

Fig 3. 2021-2 Survey. ASCOF figures with Comparisons and Rankings

Domain & KPI	Framework Source	2021/22 Outturn (Prov.)	2021/22 England Average	2021/22 SW Average	2021/22 Comparator group	2021/22 Rank	2021/22 Quartile	2021/22 Performance Description
ASC 1I part 2: Proportion of carers who reported that they had as much social contact as they would like	ASCOF SACE Survey	34.4%	28.0%	23.9%	29.8%	10/149	Q1	Better than Eng ave Better than SW ave Better than CG ave In best quartile
ASC 3B: Overall satisfaction of carers with social services	ASCOF SACE Survey	45.9%	36.3%	37.8%	39.1%	9/149	Q1	Better than Eng ave Better than SW ave Better than CG ave In best quartile
ASC 3C: The proportion of carers who report that they have been included or consulted in discussions about the person they care for	ASCOF SACE Survey	71.3%	64.7%	66.5%	66.0%	13/149	Q1	Better than Eng ave Better than SW ave Better than CG ave In best quartile
ASC 3D part 2: The proportion of carers who find it easy to find information about services	ASCOF SACE Survey	61.4%	57.7%	61.5%	59.1%	41/149	Q2	Better than Eng ave Better than SW ave Better than CG ave In 2nd best quartile

## Appendix 2 Adult Social Care

<b>Carer Assessment Data Quality Report - 2022/23 Month 09</b>						
Carers Assessments - 01/04/2022 to 31/12/2022						
Extracted 03/01/2023						
Assessments by Team						
Team	Separate Carers Assessments	Combined Carers Assessments	Carers Assessments (Numerator)	Clients with Community Based Services (Denominator)	Proportion (Indicator Outturn)	Target (YTD)
Brixham & Paignton	313	156	469	1,488	31.5%	30.0%
MH Over 65	69	26	95	159	59.7%	30.0%
Torquay	351	203	554	1,462	37.9%	30.0%
Torbay Total exc CMH	782	407	1,189	3,145	37.8%	30.0%
CMH / DPT Total	46	0	46	192	24.0%	30.0%
Torbay Total inc CMH	828	407	1,235	3,337	37.0%	30.0%
Full year target = 40.0%						



## Appendix 3 Commitment to Carers

Extract for Torbay Council Dec 22 progress against annual priorities 22-23

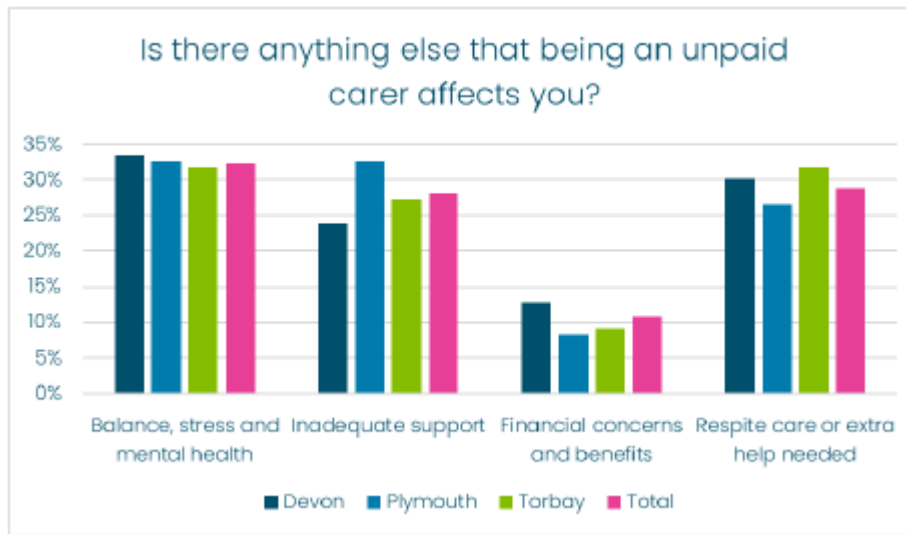
Torbay Council (TC)	Consider further ways of capturing the voice of Parent Carers (PC) and young carers (YC), and reflect these voices in development and service plans. ‘Sibling’ event being planned. Working partnership with SEND Family Voice / Tissues and Issues. Carers’ individual views in assessment and plans.	Establish parent carer (PC) champions across Children’s Services with regular meetings to share good practice and ensure all staff consider PC needs in assessment and planning. - Regular SEND co-production meetings. Families reported feeling more involved in the strategic direction of service. Have involved individual PCs with feedback to staff, but not champions.	Embed PC consent form within transitions process coordinated through Transition Panel. Continue to use Panel to communicate enhanced PC needs to Carers’ Services. Consent form embedded in referral to Adult Social Care (ASC). Considering best way for Carers Services to be informed of need as may not be reliably picked up.
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Torbay Council’s Commitment to Carers can be found here

<https://www.icsdevon.co.uk/download/commitments-to-carers-torbay-council/>

The self-assessment and action plan from which the priorities are taken is not a published document

## Appendix 4 Carers concerns by area of Devon<sup>19</sup>



<sup>19</sup> <https://cdn.whitebearplatform.com/hwdevon/wp-content/uploads/2022/11/21153421/HWDPT-Unpaid-Carers-Survey-FINAL.pdf> page 20-21

### Adult Social Care and Health Overview and Scrutiny Sub-Board Action Tracker

Date of meeting	Minute No.	Action	Comments
27/10/22	8	<p>Wait times for adult social care assessments and care.</p> <p>Members asked that following information be provided:</p> <ol style="list-style-type: none"> <li>1. The number of people who have been removed from the waiting list as a result of seeking private treatment; and</li> <li>2. The approach taken to share the waiting list data across teams and with partners.</li> </ol>	Awaiting response.
24/11/22	15	That NHS England/the Integrated Care Partnership be requested to provide an annual update to the Torbay Adult Social Care and Health Overview and Scrutiny Sub-Board on improvements in dental access and planned oral health improvement initiatives, including key outputs and key performance indicators via an accessible dashboard (the content of which to be agreed with the Director of Public Health).	Report submitted to NHS England/Integrated Care Partnership and added to the 2023/2024 Work Programme - complete
24/11/22	16	That the Board notes the progress of the One Devon Partnership Integrated Care Strategy and recommends that further details around prevention, housing and workforce are included as well as ensuring the voice of the child and young person is heard.	Report submitted on 5/12/22 – awaiting a response.