

Shared Care Scotland
Survey of Short Break / Respite Strategy Development by Local Authorities
July to November 2006

Purpose:

To complete a simple audit to establish the existence of strategic approaches to the local planning, provision and development of short break/respice services.

To identify the challenges facing local authorities in meeting the needs of carers and service users for short break and respice services.

Methodology:

A questionnaire survey was used – see appendix 3. Questionnaires were sent to the Directors of Social Work of each local authority for forwarding to the relevant department/s. Questionnaires were sent out between July and August 2006 and returned between September and November.

Two Lead Officer workshops and two ‘Have Your Say’ events (attended by carers, service users and practitioners) have taken place over the course of the year and we have drawn on discussion at these events to augment the information received via the questionnaire survey. Notes from these events can be found on the Shared Care Scotland website.

Limitations:

In order to minimise the time and effort required to complete the questionnaire, it was decided to limit the number of questions but to allow for more detailed responses if people were inclined. Some responses were more comprehensive than others and therefore more informative.

We have attempted to identify common themes in responses and the issues most frequently mentioned. However the research was carried out quite informally and the information provided was taken at face value.

Response:

Of the 32 Councils that were contacted we received 22 completed questionnaires.

Summary:

From the responses received it would appear that most local authority areas plan and commission their respice/short break provision in a responsive and incremental way, rather than by using more strategic, anticipatory approaches. Most responses (2 to 1) indicated that respice/short break planning was split between departments dealing with different care groups rather than through integrated approaches. Where integrated approaches had been developed there were indications that they had not been fully implemented at this stage.

The pressure on funding and the need to meet an increasing expectation for more individualised community based services, while maintaining existing traditional models, was

the most frequently identified challenge facing Councils. Striking the right balance between block and spot purchasing of services was also proving difficult. These points were alluded to in many respondents' comments.

Meaningful involvement of carers and service users in the planning and designing of services was also identified as a challenge although good practice was evident in many of the responses received.

There was recognition within the majority of responses that short break and respite provision is a valuable and much needed form of support for carers and service users. In 16 responses people indicated they would be giving greater focus to the review and development of their services over the coming months.

Conclusions:

The lack of evidence of more systematic, strategic approaches to the development of short break and respite services, in line with the SWSG 10/96 guidance (Appendix 4), is a concern. In times of funding pressure and competing priorities, the development of a more strategic and coordinated approach to the planning of respite is even more necessary. Targeting resources effectively, in the absence of any longer term strategy, will be much harder to achieve and result in missed opportunities for joint working and commissioning of services.

From the questionnaires received, we can identify some characteristics of good practice:

Characteristics of good practice:

- Multi agency approach to service planning, provision and development. To include carers and service users, relevant local authority, health and voluntary sector staff and service providers;
- A clear and up to date understanding of the range and volume of existing provision and the strengths, weaknesses and gaps in this provision based on assessed needs, wider consultation and carer/service user feedback;
- Regular monitoring of information and trends which may affect the demand, shape and availability of services in the future;
- The ability to be innovative and flexible with funding and resources;
- A commitment to continuous review and evaluation of the quality and appropriateness of services provided against agreed standards, involving those who use the services;
- A central lead focus for short break and respite services and a named officer coordinator/contact;
- Drawing on the above, the development of a Short Break/Respite Strategy with clear and measurable short, medium and long term goals. Strategies that are care/user group specific could be integrated to maximise opportunities for coordination of effort and resources, where appropriate. Strategies should cover the following:

- What are we trying to achieve and for whom – vision, goals, milestones?
- Why is this important and how do we know – baseline information?
- Who else shares our goals and what opportunities are there for joined up working?
- How will we achieve our goals in the short, medium and longer terms?
- Who will be involved and what will they contribute?
- How will we measure our progress?

Examples of Good Practice:

- Strategic Approaches: City of Edinburgh Council, Breaking New Ground: A strategy and action plan to develop short breaks and breaks from caring in Edinburgh, 2003-2008; Aberdeen City Council, independent research undertaken to inform development of respite strategy, 2003
- Service Review: Renfrewshire Council, Review of Respite Services for Adults with Learning Disabilities, March 2006 (see Appendix 2); Angus Council, Report for the Joint Management & Commissioning Group, Respite Provision in Angus, 2006
- Joint Planning/Coordination: Falkirk Council, Short Break Bureau
- Carer/Service User involvement: Glasgow Learning Disability Partnership, Inverclyde Council Respite Forum and Respite Service Review Working Group, North Lanarkshire Council Carers Strategy Implementation Group

The following section highlights the most frequently expressed challenges.

Challenges:

- Despite some good progress over recent years, the pressure on services remains as expectations rise and more people require a wider range of services
- Translating the aspiration for flexible, person centred approaches into financially viable services
- Balancing the different needs of service users with most efficient and equitable use of limited resources
- Difficulty in finding services to meet needs of people with more complex needs and challenging behaviour, particularly children and people with mental health needs
- Difficulties in managing transition between children and adult services
- Money to develop short break/respite services is not ring fenced which means it can be reprioritised
- Shifting emphasis from residential provision to community based services
- Promoting diversity and choice – maintaining traditional services while at the same time developing new more flexible options
- Difficulty in balancing individual needs and preferences with the needs of the wider carer/service user population

- Strengthening of planning, communication and information systems between agencies and departments to ensure more coordinated approaches to service provision.

Other challenges mentioned:

- Absence of a universal method of recording unmet need
- Lack of clarity about the role of the Health Boards in planning and funding short break and respite services
- Lack of uptake of Direct Payments – DPs could be a key driver for more innovation within service provision
- Balancing needs of different care groups with finite resources
- Difficulties in finding suitable external providers (voluntary or private) which can deliver the services required to the standards expected
- Rural authorities have added difficulty of population dispersal and therefore high costs of providing flexible, accessible services
- Trying to be more creative with funding, i.e. drawing in money from other sources both within and outside local authority
- Managing potentially conflicting interests and needs of carers and service users
- Being innovative under pressure

Strategies:

22 local authorities responded to the questionnaire.

In response to the question:

'Does your local authority have a respite/short break strategy?' (based on the definition provided in appendix 4)

- 12 answered No and 9 answered Yes. 1 response indicated that such a strategy was being developed.
- Of the 9 +ve responses, 2 indicated that the strategy had not yet been implemented.

Note: a number of responses indicated that strategies relating to short break and respite services were contained within strategies for different care groups. This is broken down as follows:

- 7 responses who answered 'Yes' to having a Short Break/Respite Strategy indicated that these were part of other documents rather than a single aggregated strategy covering different care groups. The documents mentioned included Carers Strategy, Community Care Plan, Partnership in Practice, separate care group strategies, Joint Local Implementation Plans.

We received very few Short Break Strategy documents to review and so it is not possible to comment on the content and quality of these documents.

Best Value Review Example

The following specification from Renfrewshire Council is for a review of respite services for adults with learning disabilities. This is an example of a systematic approach to reviewing services contributing the development of a strategic plan. The review was completed in March 2006.

Purpose of review:

- Evaluate the quality, effectiveness and cost of respite services for people with learning disabilities living in Renfrewshire
- Examine the various organisational models of service, management and accountability arrangements for respite services
- Consider local performance on cost and volume of respite available and benchmark against “best in class”
- Examine boundaries and relationships between respite services and a range of other provision for people with learning disabilities
- Identify the need for further strategic reviews of learning disability services, e.g. day services
- Establish expected standards of service
- Propose new technology solutions which are consistent with the expected standards of service
- Recommend priorities for improvement in service and develop a three year performance improvement plan

Survey of Respite Strategy Development by Local Authorities in Scotland

Please complete and return using the Reply Paid envelope by Friday 18th August 2006

Name of person completing this form:

Job Title:

Department:

Local Authority/Organisation:

Does your Local Authority have a 'Lead Officer' with overarching responsibility for respite services? If yes, please provide the job title for this person:

1. Does your Local Authority have a Respite/Short Break Services Strategy? *(see attached definition)*

YES / NO (circle answer) ***(if 'No', please complete questions 3-8)***

2. If Yes, does it cover a range of user/client groups or have separate strategies been developed for different groups? Please describe below:

3. If the answer is 'No' in Q1, how does your Local Authority plan for and deliver Respite/Short Break services for carers?

It would be greatly appreciated if you could send us a copy of the strategy (strategies) mentioned above plus any progress reports.

4. Please give brief details of partners that were/are to be involved in developing, implementing and monitoring Respite/Short Break services?

5. To what extent are you successful in meeting the needs of carers/service users for Respite/Short Break services? In what areas have you been most/least successful?

6. What would you say have been the major challenges faced in planning for and delivering Respite/Short Break services and how can these be overcome?

7. How are the respite needs of Young Carers identified and met?

8. Please use this space to provide us with any other information that you think may be relevant.

We would be particularly interested to hear about specific respite developments - either organised by the local authority, commissioned or in partnership with other organisations – that may be of interest to others and to the Respite Task Group. Please attach additional papers if necessary.

If you would like to be receive feedback on the outcomes of this exercise and be updated on developments in respite/short break services in Scotland, please provide your contact details below:

Email:

Address:

Phone:

Please email or post the completed form to:

Shared Care Scotland
Unit 7, Dunfermline Business Centre
Izatt Avenue, Dunfermline
Fife, KY11 3BZ
Tel: 01383 622462
Email: office@sharedcarescotland.com



THANK YOU

What is a Respite Strategy?

The following is an extract from the Scottish Office Circular SWSG 10/96 setting out guidance on Respite Care. The guidance provides a useful description of what a Respite Strategy should contain:

‘The SWSG survey in 1994 highlighted the absence in most areas of a clear, strategic framework for the provision of respite care. Service developments have accordingly tended to be implemented incrementally rather than as part of a planned or systematic approach. Whilst many authorities have yet to develop a strategic approach to respite care, there are some valuable examples where such an approach has been taken forward jointly, usually by health boards and social work departments. These have included specific respite care strategies in some authorities. In others respite care needs have been identified systematically within user group and carer strategies as a whole. These have been helpful in developing a coherent approach which meets the differing needs for respite provision of user groups and their carers.

The prime task therefore is to ensure the adoption of a strategic approach within future community care plans and other strategic planning documents. Social work departments, health boards, housing authorities and other planning partners should apply the same principles to planning for respite care as already extend to strategies for individual care groups. They need to:

- identify aggregate need for services (which may be derived from national or local studies or surveys, individual needs assessments etc).
 - quantify the size and shape of current services, gaps and deficiencies;
 - identify the objectives of their strategy and their planning goals, and how they are to meet them over the planning period;
 - identify ways of increasing and monitoring the provision of the full range of respite care services.
 - involve users, carers and providers in the development of strategies and their implementation.’
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