

## Respite care boost for army of unpaid carers

A key new strategy to identify and support carers of all ages across Scotland has been unveiled by the Scottish Government. It is backed by a promise of £5 million investment over a period of five years for the voluntary sector to provide much needed respite care for carers.

The strategy is unique in that it outlines the way forward for adult and young carers. Plans for adults include creating a Carers Rights Charter, investing in carers training, improving the identification of carers by health and social care services and making carers' own health and wellbeing a priority.

Unveiling the document, Public Health Minister Shona Robison said the contribution of unpaid workers to health and social care was worth an estimated £7.68 billion a year. 'The £5 million respite funding over five years will help the voluntary sector to sustain and support carers, help carers continue the life-sustaining work they do and develop innovative short breaks and respite.'

'We will explore how this money might best be used - for example, short breaks for families with children who have disabilities would be a priority. We hope to see innovative proposals from the voluntary sector that will break new ground.'

### Have your say

Is this the way forward  
for Scotland's carers?  
Email your views to us at:  
[pdjroberts@btinternet.com](mailto:pdjroberts@btinternet.com)



## Dementia Timeout: a new 'one stop' help and advice initiative unveiled

A NEW social enterprise dedicated to creating a unique help and advice centre for people with dementia, their carers and families has been unveiled.

Dementia Timeout – designed to fill a substantial gap in the campaign to help people 'live well' with dementia and retain their independence – has been launched by Jennifer and Paul Roberts.

Jennifer, a specialist in dementia care and training, said the objective was to develop an innovative online service promoting:

*High quality holiday accommodation specifically designed for people with early stage dementia, their carers and families;*

*Dementia-friendly cafes and restaurants and places to go for people with dementia;*

*The latest assistive technology to help people with dementia to remain in their own homes – and lead independent lives;*

*Up-to-date information on the latest innovations in dementia care;*

*A detailed online advice centre – outlining the help available for people with dementia, their carers and families.*

'There is a distinct lack of dementia-friendly holiday accommodation (and places to eat and go) in the UK,' said Jennifer (pictured above).

'Consequently, going on holiday can be difficult and stressful for people with dementia, their

carers and families. We have developed a blueprint to provide dementia-friendly self-catering accommodation that would take away the difficulties and stress – and encourage more people with early stage dementia and their carers and families to take holidays and well-earned respite breaks.

'As part of our new concept, we plan to promote the best assistive technology to help them live well with dementia – on their holidays and breaks and in their own homes,' said Jennifer.

For more information contact Jennifer or Paul on 01877 386332 or by email at:  
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# CFYB dementia update

## Quality 'first' for RUH Bath

A major new project to help improve the care of people with dementia during their stay in hospital has been launched at the Royal United Hospital Bath. Charter Mark Standards – the first of their kind in the UK – have been established to achieve the highest quality care in hospital wards.

Consultant geriatrician Chris Dyer said the 'high standards are set for each adult ward to ultimately provide the very best care possible for patients with dementia and ensure their stay in our hospital is as stress-free as possible.'

Each ward at the hospital has the opportunity to apply for a gold, silver or bronze Charter Mark.

The standards focus on four main areas of care: respecting and caring for people with dementia; the ward environment; meeting nutritional needs and suitability of staffing.

## Pioneering dementia scheme could save billions in health care costs

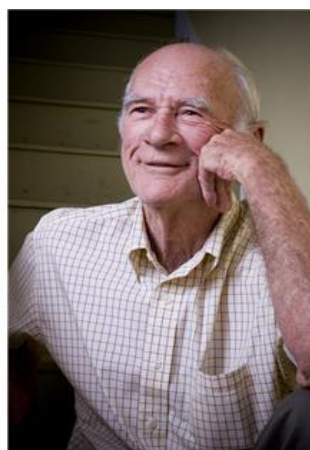
AN AWARD-winning project pioneered at a Stoke health centre could set the benchmark for dementia care in the UK.

Health trusts throughout England and Scotland are interested in taking up the innovative scheme which could save billions of pounds in health care costs.

GP Dr Ian Greaves has already won a major enterprise award for his work on the widely acclaimed Gnosall Health Centre project.

Gnosall developed an innovative care pathway for its 8,000 patients that led to a dramatic reduction in hospital costs.

Dr Greaves told Alzheimer Scotland's recent Dementia Awareness Conference in Glasgow how the pathway involved:



*A health visitor assessment inside one week;  
A consultant examination inside one month;  
A care plan and treatment launched in one month.*

He explained how better use of resources – including eliminating unnecessary consultancy and scanning

fees – had helped to produce savings of £400,000 in the past year. This money was being re-invested in providing better – and more pertinent care – for patients with dementia.

Better earlier diagnosis of dementia at Gnosall includes home visits for those with memory concerns, with checks carried out for dementia and depression. A monthly clinic is organised at the surgery with a specialist psychiatrist, and a health visitor attends with the patient and their carer.

Dr Greaves spoke in Glasgow of the need for people to win the 'hearts and souls' of GPs. 'We have to address the value of diagnosis. We have to make sure carers can cope. There is enough money out there to do this – we have to make it work.'

## £5m care 'revolution'

A flagship care facility being developed in Southport promises to be one of the most advanced dementia care resources in the UK. The first phase of the £5 million 60-bed Birch Abbey complex – which will serve the whole of Merseyside – has just been completed. Birch Abbey will have eight recreational rooms and bistros, five garden areas, a training and education facility and technology suite, the latest in-room technology and sensors and innovative bathrooms.

Owners iPersonally believe the complex – creating up to 30 highly specialised jobs – will be a 'revolution in care services'.

## Opera hits high note

A ground-breaking opera dramatising the day-to-day reality of caring for someone with Alzheimer's disease has been performed to audiences throughout the UK this summer.

The Lion's Face, written by Welsh poet Glyn Maxwell and composer Elena Langer, and performed by the Opera Group, took two years to develop.

A six-venue tour of the UK took the opera to Brighton, Oxford, Newcastle, Watford, Cheltenham and the Royal Opera House.

Working in partnership with Professor Simon Lovestone's team at the Institute of Psychiatry, Kings College London, the opera was developed to find a way of creatively exploring the experiences of an Alzheimer's patient, a carer and a research scientist.



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# Paul's view on social care

## Is merger with NHS the answer?

THE long and tortuous search for a solution to funding long-term care in England is turning into the Holy Grail of social care. Millions of pounds have been wasted on Government green and white papers and endless consultations on 'blueprints' for the way forward that will never leave the drawing board.

Now, with the Coalition Government setting up a special commission to shape the future of adult care funding, an influential think-tank has put the cat among the pigeons by questioning whether fundamental reform is necessary.

In a new report, Policy Exchange has recommended that the commission investigate the possibility of merging health and social care budgets – with the NHS taking over responsibility for social care funding from local authorities.

Policy Exchange has suggested in *Careless: Funding long-term care for the Elderly* that the controversial proposal be considered with three other potential funding models:

- A partnership scheme where the State funds 50% of everyone's care and then matches £2 of contributions from the individual with £1 from the State
- A compulsory social insurance scheme which would require everyone over a certain retirement age to make either a one off payment or regular contributions
- A hybrid model under which the State would guarantee some level of care but people would be required to top-up for their long-term care through insurance or annuity backed products

The merging of health and social care budgets will appeal to our new cost-cutting government. It will delay – perhaps indefinitely – the need for radical reform of long-term care funding. It will be a cheaper option than the partnership or hybrid



Models and less controversial than a compulsory insurance scheme.

Many in social care will applaud the idea – particularly as the government has promised to protect spending on NHS front-line services

while social care budgets are likely to be slashed by 25% or more in public

spending cutbacks. Policy Exchange say an obvious perceived conflict to delivering them as one service is that the NHS is free at the point of use while long-term care is not. 'This is simply not true,' they say. 'The NHS is not completely free at the point of use. Those with relatively limited means already pay for prescription and dental charges, the so-called co-payments. In addition, top-up payments – where people pay for treatments (mainly cancer drugs) – are also permitted under current NHS guidelines.'

'To ensure that health and social care provision continues to remain affordable for the State, we believe that it is more important to extend the principle of top-up and co-payment in the NHS, rather than free care at the point of need into long-term care.'

Of course, being part of the NHS – inextricably linked with social care – will have its benefits. Plans to reform the NHS – with more decision-making being devolved to the GPs – offers an opportunity to look at whether a merger of health and social care is possible and practical.

Integrated care schemes being piloted throughout the UK are proving a success and offer an alternative way forward. But let us not lose sight of the potential complications and escalating costs of merging two care giants.

Cynics will see a joining of the two as a back door way to making people pay for all but emergency care and operations. Would a merger make a combined health and social care service more or less vulnerable to swingeing cuts?

The NHS is a huge organisation slow – and very often reluctant – to reform. Local authorities may be less than happy at losing social care – and its highly trained staff – to the NHS. Would social care be a poor or equal relation under the NHS? The question is: who will be bold enough to make a decision on the future of long-term care funding?

## What the Policy Exchange say...

**Unrealistic plans:** Labour's plans for a National Care Service are unrealistic – with free personal care likely to cost the State an additional £106 billion a year. Funding care through general taxation should be excluded from consideration because it would be 'unaffordable and unfair'. The Conservative plan for people to pay £8,000 to cover the costs of all future residential care are unrealistic, with care likely to cost as much as £40,000 a year.

**Prevention works:** Partnerships for Older People Projects (POPPS), funded by the Department of Health at a cost of £60 million, should be expanded across all local authorities and PCTs. Popps have been found to have a significant effect on reducing use of hospital emergency beds.

**'Oldest old':** The fastest population growth is among the 'oldest old' – those aged 85 and over. Significant increases in demand for social care in the UK are thought not to begin to arise until the mid-2030s, when the bulge of post-second world war Baby Boomers begin to turn 85 and are more likely to require care. There is no urgent demographic pressure to make hasty decisions regarding reform of the system of financing long-term care.

**Financial advice:** Financial advice should become an integral part of the long-term care system. This should be achieved by compelling local authorities to signpost people to regulated financial advisors once they have conducted an eligibility test.

**Care funding:** A new system of long-term care funding would be fair when: Access to care is uniform regardless of income; funding arrangements between health and social care are consistent to prevent local interpretations of what qualifies as a social care need; the responsibility of paying for care is distributed between the government and the public; and generations equally share the burden of paying for care.

# CFYB how we can help you

## Does your website need a facelift?

Are you developing a new website for your business and need good vibrant content to help make it stand out from the crowd? Are you looking to create new words and images for an existing website in need of a facelift to give you an edge over your competitors?

We help plan and write the content for care company websites. So why not call or email Caring for your Business today to see if we can help.



## Do you need a top manager?

We have a proven track record in helping companies recruit top professionals to keep their businesses ahead of the rest. Want to know more? Then contact us today.

## Finding the Going tough?

Then this may be a good time to look at your business plan and strategy and make new plans for the future. When the going gets tough...it's time to seek help. And we may be able to help you survive and thrive.

Jennifer Roberts has more than 25 years' experience in the home care sector. She works with large, medium and small care businesses throughout the UK. Why not call her today.

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## Energy, ideas and motivation shown by the home care sector is very encouraging, writes **Jennifer Roberts**

I AM really excited about the launch of our new monthly newsletter. It gives us a great opportunity to keep in touch with you, tell you what we have been up to, the type of projects and work we have been involved in and provide lots of useful tips and valuable information. We also hope that you will become involved and use it as a valuable networking tool.

So what's been happening in the world of Caring for your Business? Well, as always, we have met with many interesting people in our sector and been involved in lots of different and innovative developments.

We have helped two organisations with their recruitment and selection process. Kemble Care, based in Herefordshire, asked for our help in finding their new registered manager. We provided assistance with identifying the type of person they were looking for, planning the recruitment and selection process and writing the paperwork to accompany that process.

As a result they found a talented new manager from outside social care – Annette Castro-Griffiths – who is now making great strides in taking the business forward. We wish Annette and the team at Kemble Care all the best for their future developments. We also helped Border Caring Services, a leading home care charity based in Selkirk in the Scottish Borders, to recruit a new general manager. We



*We can work with you to improve your business*

provided help and support during the process, advising on the recruitment drive and offering advice and guidance on selecting the right candidate.

Therese Glendenning was appointed to the post. She brings with her a wealth of experience and knowledge from the learning disability sector, with an excellent understanding of personalisation.

This we are sure will take the charity from strength to strength. We wish Therese and her team at BCS every success with their developments.

On the training front, we have been involved with two different and very interesting projects. The first was in Scotland. Age Concern in Glenrothes asked for our help with a train-the-trainer programme. This was to support their managers to develop, write, prepare and present training to their teams of volunteers.

We only had a day together, but in this time were able to make a real impact with the managers who now feel more confident and motivated to take on and deliver training. We are sure the volunteers will

really enjoy and learn a lot from the training sessions they will be delivering. Good luck to Anne, Fiona and Wilma.

In Macclesfield, we have carried out an innovative new dementia training project for Care Nursing. Working with the company's training manager Andrew O'Hara, we developed a three day training course designed for care workers who provide support to people with dementia living in their own homes.

The course provides a basic understanding of dementia and offers practical solutions to meeting the challenges of dementia. It is supported by practical exercises, competency tests to check learning and understanding, evaluation forms and reflective practice.

We have run the course twice in the past year. The courses have been received very positively and have led to changes in practice which have benefited both the person with dementia and their care workers.

These are just a few examples of the many interesting developments and projects we are involved in. The energy, ideas and motivation shown by the home care sector in building their businesses is very encouraging.

We look forward to inspiring and supporting you and your business in the future.

Jennifer Roberts SRN