**Carers’ issues**

**Learning Disability**

**Partnership Board**

 **18 March 2019**

**Local changes - Funding of support packages**

We are concerned that people with low-level support are ending up with no support at all, because the charging policy makes it too difficult to afford that support.

Is it time to check out the impact of these changes ? A Scrutiny issue ?

**Welfare Benefits – PIPs**

Even within the comparatively small numbers of carers in the Sub-group, we have

* one person who have been called for interview, then had that interview cancelled, then told that their completed form had never been received.
* One person whose agreed amount following the PIP assessment has never been paid (only the mobility component) ‘because they have a support budget from the Council.’

Time for an input / apology from a DWP representative ?

**Health inequalities**

We have been discussing the Annual Health Check, and a concern that it happens in isolation, and is often not referred to again. Given the recent report about the (avoidable) early causes of death for people with learning disabilities, why does the format of the health check not link to those identified areas of concern, and check them out ?

# Local practice – reviews

We were told that a considerably increased team of social workers was to be recruited to tackle the huge backlog of reviews, and make sure that support packages matched people’s current needs. When are we going to see something happening in this regard ?

**NHS report on the cost of replacement care if family carers have to give up**

An excellent summary report was presented to a recent Inclusion North event identifying the cost to the NHS and social care system if family carers were to become unable or unwilling to continue.

Nationally, the amount saved to public service budgets is about the same as the total cost of the NHS.

In Kirklees, the figure is just under £156 million pounds – every year…...

The report author suggests that family carers are the biggest single element of the entire health and social care workforce. ‘In any other industry they would collectively be respected as a very big player. If by giving them the right kind of support the output from this carer workforce could be increased by just 2 – 3 %, the financial gains would be significant. There needs to be more innovation in the way that carers are regarded and supported.’

In theory, at least, agencies in Kirklees are signed up to this, and committed to valuing carers.

So why are we still having to fight to get a senior manager from the Council to co-chair this Board to which KIN members and family carers give their time freely and willingly, and in the same belief – that the Board is a highly significant place in which to support each other, work to resolve problems, and plan for the future ?