


MEETING DATE:	12 July 2012	 North Lincolnshire Clinical Commissioning Group REPORT TO THE CLINICAL COMMISSIONING GROUP COMMITTEE
AGENDA ITEM NUMBER:	Item 6.4	
AUTHOR: JOB TITLE: DEPARTMENT:	Ellie Gordon Head of Commissioning NHS Continuing Healthcare/FNC Directorate of Strategy & Joint Commissioning	

CARERS ACTION PLAN

PURPOSE/ACTION REQUIRED:	Decisions for Approval
CONSULTATION AND/OR INVOLVEMENT PROCESS:	This action plan has been produced in partnership with the Local Authority and supported by the Executive Strategic Commissioning Board and also the CCG Engine Room on 2 February 2012 as part of the developmental process.
FREEDOM OF INFORMATION:	This action plan has been developed to be a public document to ensure transparency of actions, and developments to support carers' needs. Public

1. PURPOSE OF THE REPORT:

The NHS Operating framework for 2012/2013 puts carers and meeting their needs at the forefront of work for the NHS for 2012/2013. It states clearly that the experience of carers should be at the forefront of driving what the NHS does, by listening to carers and ensuring their knowledge and experience form a core of PCT/CCG work. This listening is to be demonstrated through the production of a joint action plan with local authority colleagues to be published by 30 September 2012.

In North Lincolnshire we have achieved this by working closely with North Lincolnshire Council colleagues in offering joint listening sessions with carers, where we have listened to carers' needs and ideas for meeting these needs. The NHS Operating Framework for 2010/11 indicated an expectation of investment in services to support carers and particularly carers' breaks. In addition carers lobbied the PCT to ensure that funds would be available to ensure such needs could be met with additional resource. The carers were successful in achieving this and resources were allocated in the forward financial plan. The attached plan clearly outlines the indicative resource set aside in the financial plan and also how they have been aligned with existing funds from NLC for carers.

This action plan has been developed and supported through the Executive Strategic Commissioning Board with NLC and is proposed as a joint action plan by both NHS NL and NLC, and agreed to be representative of the ways in which carers health and social care needs will be met. It will be considered through the NLC Cabinet Member. The action plan also addresses the four key areas that the Operating framework stated must be evidenced in support of work with carers over the next year:

- Identify the financial contribution made to support carers by both local authorities and PCT clusters and that any transfer of funds from the NHS to local authorities is through a section 256 agreement;
- Identify how much of the total is being spent on carers' breaks;

- Identify an indicative number of breaks that should be available within that funding; and
- Be published on the PCT or PCT cluster's website by 30 September 2012 at the latest.

The 2011/12 element of the action plan was agreed previously and has been implemented.

2. STRATEGIC OBJECTIVES SUPPORTED BY THIS REPORT: *(will be populated following agreement with Council of Members)*

3. IMPACT ON RISK ASSURANCE FRAMEWORK:

Yes		No	x
-----	--	----	---

There is no risk from this document to the risk assurance framework.

4. IMPACT ON THE ENVIRONMENT – SUSTAINABILITY:

Yes		No	x
-----	--	----	---

This does not have an impact on the environment.

5. LEGAL IMPLICATIONS:

Yes	x	No	
-----	---	----	--

This has been developed as a document for public consumption so that the public can be fully aware of actions and developments to support carers.

There are contractual and procurement elements in this action plan which when implemented advice and support will be sought to ensure the process meets with procurement legislation.

The plan has been written to reflect the fact that over the years covered in the plan needs and also resource may alter to ensure that the Clinical Commissioning Group (CCG) is not overcommitting to any development.

6. RESOURCE IMPLICATIONS:

Yes	x	No	
-----	---	----	--

Financial and staffing resource to support this project has already been identified in the financial plan.

Resources identified beyond 2012/13 are based on NHS North Lincolnshire's financial plan, these are indicative at this stage as are dependent upon any impact of CCG allocations in future years.

The action plan proposes that a section 256 agreement is entered into with the Local Authority to transfer resources in 2012/13 and future years as indicated. For future years this covers commitments from 12/13 but any additional resource will be reviewed in future years subject to CCG allocations. This will be developed as an additional annex to the agreement currently in place with NLC.

CCG will need to ensure that commissioning of carers services is fully supported within the commissioning support service to ensure delivery against this action plan.

7. EQUALITY IMPACT ASSESSMENT:

Yes		No	x
-----	--	----	---

An equality impact assessment has not been undertaken. This will be undertaken in time to go to the CCG committee on 12 July 2012.

8. PROPOSED PUBLIC & PATIENT INVOLVEMENT AND COMMUNICATIONS:

Yes	x	No	
-----	---	----	--

This action plan has been developed with the full involvement of the carers' advisory group, which is a group of carers who meet regularly with NHSNL and NLC, to discuss the needs of carers across North Lincolnshire.

This paper, if agreed, will be published on the website.

9. RECOMMENDATIONS:

The CCG Committee is asked to: -

- Note the revised action plan.
- Agree that this is an action plan which reflects best use of public money in meeting the needs of carers.
- Agree to the transfer of resources as indicated to the Local Authority under Section 256.

Action Plan for Carers 2012-2014

The following action plan has been created to ensure the continued implementation of the joint commissioning strategy 'your life, your choice 2009-2014

Key code:

Green – outcome achievement is on target or has been achieved.

Amber - outcome achievement is behind target, or has elements which are yet to be finalised in order to progress.

Red- outcome achievement has fallen behind time line, or lack of progress has mean this outcome has to be slipped time wise.

Activity commenced/proposed in 2011-2012

The activities for 2011-2012 have been previously agreed by Executive Strategic commissioning board to ensure that actions are jointly agreed between NHS NL and NLC.

NHS Budget allocated for 2011-2012 £135,513

NLC budget allocated for 2011 -2012 £593,800

Total budget allocation for 2011- 2012 £729, 313

Outcomes	Activity	Costs	Evaluation process	Progress	Payment process
There will be a robust process in place to ensure fair and equitable allocation of carer break monies	Continue with enhanced funding of carers breaks	£50,000 per annum from NHS NL. £150,340 from NLC.	Through family and carers team activity Activity against NI 135	Carers breaks continue to be well used and well received by carers.	Recharge from NLC
To ensure G.P`s are aware of the range of services available to carers. To ensure there is a robust referral pathway to carers services	Continue with GP liaison service – this service will sign post to stat and non stat and voluntary carer provision.	£14,000 (Part year costs) from NHS NL. Contribution from NLC forms part of core costs of CSC contract value.	Through activity and outcomes monitoring as part of carers support centre contract review.	This service has well met needs and so will be carried forward as a piece of work, and expanded.	Recharge from NLC

<p>To enhance support offered to carers to include specific support to meet their own health care needs.</p>	<p>Enhancement of health support to carers as part of a holistic system of support to meet caring needs. This development was not realised in 2011/2012 due to issues with arranging the HR processes to facilitate recruitment. This action will be carried forward to 2012-2013 as an activity.</p>	<p>£29,770 (Part year costs)</p>	<p>Through monitoring arranged with the family and carers team.</p>	<p>This was not achieved in 2011/2012 and has been carried forward to 2012/2013 as a piece of work.</p>	<p>Not realised and so no payments required in 11/12.</p>
<p>The outcomes will be that the carers support centre will continue to meet outcomes as agreed in the service specification for the carers support centre for 2012/2013.</p>	<p>NHS NL and NLC will continue to contribute to the provision of the carers support centre in Brigg. To ensure that this valuable contribution to carers support to continue. This also includes carers advisory group, carers companion carers information. The carers support centre will also work closely with non stat and voluntary groups to develop a carer network.</p>	<p>£340,690 of which NHS NL contributes £57,800</p>	<p>Contract monitoring</p>	<p>New contracts have been agreed with the CSC to ensure that this activity can continue in a clearly monitored manner.</p>	<p>Recharge from NLC ongoing payment.</p>
<p>This will ensure that family and carers are able to access services to meet needs.</p>	<p>The family and carer team will continue to be funded to monitor and assess carers eligibility for core services</p>	<p>NLC funded £160,570</p>	<p>Contract monitoring.</p>	<p>Family and carer team are a long standing team who continue to provide a valuable service for carers.</p>	<p>Solely NLC funded.</p>

Current NHS slippage for 2011/2012 -£36,000.

Activity proposed for 2012-2013 – (this will include continuation of schemes above where appropriate)

NHS Budget allocated for 2012-2013 + slippage from 2011/2012 of £36,000 = £291,000

NLC Budget allocated for 2012-2013 £593,800

Total Budget allocated 2012-2013 £884,800

Outcomes	Activity	Costs	Evaluation process	Progress	Payment process
There has been a positive response and 'take up' of carers breaks and as a consequence there will continue to be a commitment from the PCT to jointly fund this initiative	Continuation with the funding And evaluation of carers breaks to ensure breaks are being offered equitably to all carers.	£50,000 per Annum from NHS NL. £150,340 from NLC	Through family and carers team, as well as feedback from carers.	This continues to be monitored and taken forward by the family and carers team, and continues to progress within agreed time lines.	Section 256
The originally titled GP liaison service was created to raise awareness amongst GP's of the needs of carers, and provide information to show how they can work with and support this group of citizens. This scheme has been received very positively by GP's across North Lincolnshire, and now forms part of the core contract with the carers support centre. The proposal herein would be to expand this work	Continue with, and expand the Health professional liaison service for carers. This will also include ensuring that this service sign posts not only to core stat carers support but also non stat and voluntary organisations which support carers.	£55,000 from NHS NL.	Through activity and outcomes monitoring as part of carers support centre contract review.	We are currently awaiting a business case to outline how this service can be taken forward, and need to agree	Section 256

<p>beyond the primary care setting, to include secondary care. This expansion would mean that carers and their cared for person could access support and information whilst in the secondary care setting.</p> <p>This scheme is an example of innovative practice by working with carers as ‘champions’ to advocate on behalf of fellow carers, and to ‘normalise’ the caring role to health care professionals.</p>			Also through monitoring increase in referrals to the family and carer team for carers who are eligible for main stream services.	performance monitoring.	
<p>The family and carer team will continue to be funded to monitor and assess carers eligibility for core services.</p>	<p>To ensure that carers who have eligibility as agreed in the regional strategy, are able to swiftly access care and support to meet their needs.</p>	<p>NLC funded £160,570</p>	<p>Contract monitoring.</p>	<p>Family and carer team are a long standing team who continue to provide a valuable service for carers.</p>	<p>Solely NLC funded.</p>
<p>To enhance support offered to carers to include specific support to meet their own health care needs. This would be offered in the form of a carer support worker who would be based with and managed as part of the Family Carer team (plus additional admin support)</p>	<p>Enhancement of health support to carers as part of a holistic system of support to meet caring needs. This development was not realised in 2011/2012 due to issues with arranging the HR processes to facilitate recruitment. This action has been carried forward to 2012-2013 as an activity.</p>	<p>£50,000 from NHS NL to form part of the family and carers team above.</p>	<p>Through monitoring arrangements with the family carer team</p>	<p>These roles are now in the process of being recruited to, using NLC internal processes.</p>	<p>Section 256</p>
<p>Currently there is one support centre for carers in North Lincolnshire which is based in Brigg, due to its location it is felt that some carers may be</p>	<p>Ensure that there is equitable access to resource from a carers support centre for a wide range of carers across North</p>	<p>£125,000 (Of which £50,00 will</p>		<p>Ellie Gordon has agreed to commission</p>	<p>Cost of research project</p>

<p>restricted from using its facilities</p> <p>This element of the action plan will ensure that this provision will be expanded with the introduction of 1 satellite site across the locality. This site will offer the same range of interventions as the carers support centre, however will ensure that this is across a wider geographical area for increased numbers of carers. This expansion will mean that new initiative will mirror the development of locality based service provision</p>	<p>Lincolnshire.</p> <p>This will be measured using contract performance monitoring.</p> <p>To ensure this development is based on robust evidence base a formal research proposal has been commissioned.</p>	<p>be non recurrent start up costs).</p>		<p>Leeds University to understand the local needs for such provision, which will then inform the commissioning process.</p>	<p>£24,517. This element will be paid direct to Leeds University the remainder to be section 256</p>
<p>NHS NL with continue to jointly commission services for carers via the Carers support centre</p>	<p>The outcomes will be that the provider will continue to meet outcomes as agreed in the service specification for the carers support centre for 2012/2013.</p> <p>The carers support centre will also be expected to work closely with stat and non stat/voluntary services to ensure carers needs are met.</p>	<p>£340,690 of which NHS NL contributes £57,800</p>	<p>Contract monitoring</p>	<p>Contract monitoring will now take place within the remit of the recently agreed service specs.</p>	<p>Section 256</p>
<p>The Carers' partnership is a forum which supports carers to raise areas of concern, and also praise with the various partners across health and social care.</p> <p>The Partnership also ensures that these partners can take items for development and input to the carers for consultation.</p> <p>To ensure the continuation of the partnership, and</p>	<p>Advertisements will be drafted for a chair of the partnership, and also for administrative support for the chair. This will ensure that the chair is able to receive feed in from carers to inform the agenda of the carers' partnership.</p> <p>This support, in conjunction with the chair, will also ensure that feedback from the partnership is disseminated as</p>	<p>£5,000 to enhance provision above and ensure continuity of this forum.</p>	<p>Through activity of the Carers' Partnership, feedback from carers.</p>	<p>A chair has now been appointed. So far the administrative support has not altered and no decision reached about</p>	<p>Section 256</p>

also to ensure that issues raised here reach the widest number of carers there is a need for strong carer leadership presence an dissemination of information.	widely as possible to carers. The forum will actively develop links with stat and non stat/voluntary services to ensure carers needs are met.			this support.	
To ensure that there is cover for carers at times of crisis and emergencies, that can be used by the family and carer team.	Money will be held to meet the needs of carers at times of crisis. This will initially be piloted in this year to measure effectiveness. This budget will be managed by the family and carer team	£6,000	Through monitoring arrangements with the family carer team.	The parameters for use of this budget have yet to be formally agreed.	Section 256

Anticipated NHS Expenditure £291,000

Anticipated NLC expenditure £593,800

Total anticipated expenditure £884,800

The following pages show indicative amounts that may be available to spend over these next years, and the schemes that could be funded. Which schemes remain and which require a change will be informed and influenced by the monitoring and outcome measures referred to in earlier years.

Activity proposed for 2013-2014 – (this will include continuation of schemes above where appropriate)

NHS Indicative Budget allocated for 2013-2014 £ 800,000

NLC indicative budget for 2013-2014 £593,800

Indicative overall budget £1393,800

Outcomes	Activity	Costs	Evaluation process	Payment process
<p>To continue to ensure that carers are able to access breaks, to provide respite from the continued pressure of their caring role.</p> <p>Ensure that the carers breaks offered are able to meet the needs of carers, and do provide effective respite from the caring role.</p>	<p>Continuation with the funding And evaluation of carers breaks to ensure breaks are being offered equitably to all carers.</p> <p>Continue to evaluate carers breaks to ensure that they meet carers needs.</p>	<p>£70,000 per Annum £150,340 from NLC</p>	<p>Through family and carers team, as well as feedback from carers.</p> <p>Implement a formal process of qualitative data gathering to further inform the provision of carers breaks that clearly meet need.</p>	<p>Continuation of Section 256</p>
<p>The Health professional liaison service will continue to be developed to ensure that there is continued support and liaison with health care professionals, to show how to</p>	<p>Continue with, and expand the Health professional liaison service for carers.</p>	<p>£55,000</p>	<p>Through activity and outcomes monitoring as part of carers support centre contract review.</p>	<p>Continuation of section 256</p>

<p>provide support for carers.</p> <p>This scheme should continue to be expanded to continue to provide employment opportunities for carers and also ex carers.</p> <p>Extra funding provided will support the above outcome, and will also ensure that formal research can be undertaken to further inform the development of this element of service provision.</p>			<p>Also through monitoring increase in referrals to the family and carer team for carers who are eligible for main stream services.</p>		
<p>The family and carer team will continue to be funded to monitor and assess carers eligibility for core services.</p>	<p>To ensure that carers who have eligibility as agreed in the regional strategy, are able to swiftly access care and support to meet their needs.</p>	<p>NLC funded £160,570</p>	<p>Contract monitoring.</p>	<p>Family and carer team are a long standing team who continue to provide a valuable service for carers.</p>	<p>Solely NLC funded.</p>
<p>It is essential that carers are supported to meet their own health care needs, to reduce the risk of the development of long term conditions, also to ensure that the carer is able to continue with their caring role for as long as they wish to do so.</p> <p>This element of the scheme was developed to ensure that carers will be supported in meeting their care needs, by supporting carers to recognise and meet their own health care needs.</p> <p>One extra member of the family and carer</p>	<p>Enhancement of health support to carers as part of a holistic system of support to meet caring needs. This development has been realised in 2012 -2013</p>	<p>£50,000</p>	<p>Through monitoring arrangements with the family and carers team, who will have line management responsibility for the role.</p>	<p>Section 256</p>	

<p>team with a health focus, will only be able to meet the needs of a small number of carers. To ensure that a wider range of carers needs can be met in this way, this scheme will be expanded to ensure two health trainers can be employed to meet needs.</p> <p>To ensure that there is an increase in the range of employment opportunities for carers and ex carers, one of these posts will be encouraged to be a carer/ex carer.</p>				
<p>The expansion of the support centres will be expanded to ensure there are 2 satellite units, to continue with a wide provision of support for carers across North Lincolnshire.</p> <p>The provision of services will continue to be monitored, and commissioners will work with the provider to ensure a service that meets local needs is provided.</p>	<p>Ensure that there is equitable access to resource from a carers support centre for a wide range of carers across North Lincolnshire.</p>	£250,000	This will be measured using contract performance monitoring	<p>Section 256 for the costs agreed of £100,000 in 2012 2013.</p> <p>Additional costs to be reviewed in light of outcomes achieved in previous year.</p>
<p>NHS NL will continue to contribute to the provision of the carers support centre in Brigg. To ensure that this valuable contribution to carers support to continue.</p>	<p>The outcomes will be that the carers support centre will continue to meet outcomes as agreed in the service specification for the carers support centre for 2012/2013.</p> <p>This will also include liaison with stat and non stat/voluntary services to ensure needs are met.</p>	£340,690 of which NHS NL contributes £57,800	Contract monitoring	Section 256
<p>Carers who are hard to reach often miss</p>	<p>Such a 'shop front' would act not only as</p>	£200,000	This will be measured	To be agreed

<p>out on core services as they have difficulty freeing time from their caring role to meet their own needs.</p> <p>The initiatives already outlined here invariably try to identify innovative ways to meet the needs of such hard to reach carers.</p> <p>To expand this form of 'outreach' to hard to reach carers a shop front is proposed. This would be based in an area with high footfall to ensure that it is clearly and easily accessible, this would mean that a place in the high street would be required.</p>	<p>a drop in for carers, it would also be a place where the carer could ensure their cared for person is cared for whilst the carer either obtains some form of respite, or simply completes day to day activities.</p> <p>This would also be a place where carers could access support and information. As a shop front enterprise this will ensure that there is a high level of publicity to promote the needs of carers, and how these can be met. This will include linkage with stat and non stat/voluntary services.</p>		<p>through contract monitoring.</p>	
<p>The carers partnership forum appointments will be reviewed to ensure that they are achieving objectives set in 2012/2013.</p> <p>In collaboration with the carers it will be established if these roles are meeting set outcomes. As long as they continue to meet outcomes</p>	<p>These roles will continue to support the partnership, and will work closely with the carers and commissioners to ensure the roles continue to meet need.</p>	<p>£5,000</p>	<p>Through activity of the carers partnership, and feedback from carers.</p>	<p>Section 256</p>
<p>To ensure that there is cover for carers at times of crisis and emergencies.</p> <p>By this time it is anticipated that evidence</p>	<p>Money will be held to meet the needs of carers at times of crisis.</p>	<p>£170,000</p>	<p>Through contract monitoring with family carer team.</p>	<p>To be agreed .</p>

and knowledge will inform commissioning to address such crisis. There is therefore the option for this budget allocation to be used to formally commission services to meet crisis needs in the longer term.				
--	--	--	--	--

NHS Anticipated expenditure - £800,000

NLC anticipated expenditure £583,800

Total anticipated expenditure £1.383,800

Activity proposed for 2014-2015 – (this will include continuation of schemes above where appropriate)

NHS Indicative Budget allocated for 2014-2015 £ 1.150,000

NLC indicative budget £583,800

Total indicative budget £1.733,800

Outcomes	Activity	Costs	Evaluation process	Payment process
To continue to ensure that carers are able to access breaks, to provide respite from the continued pressure of their caring role.	Continuation with the funding And evaluation of carers breaks to ensure breaks are being offered equitably to all carers.	£70,000 per Annum £150,340 from NLC	Through family and carers team, as well as feedback from carers.	To be agreed
Ensure that the carers breaks offered are able to meet the needs of carers, and do provide effective respite from the caring	Continue to evaluate carers breaks to ensure that they meet carers needs.		Implement a formal process of qualitative data gathering to further	

role.			inform the provision of carers breaks that clearly meet need.		
<p>The Health professional liaison service will continue to be developed to ensure that there is continued support and liaison with health care professionals, to show how to provide support for carers.</p> <p>This scheme should continue to be expanded to continue to provide employment opportunities for carers and also ex carers.</p> <p>Extra funding provided will support the above outcome, and will also ensure that formal research can be undertaken to further inform the development of this element of service provision.</p>	Continue with, and expand the Health professional liaison service for carers.	£55,000	Through activity and outcomes monitoring as part of carers support centre contract review. Also through monitoring increase in referrals to the family and carer team for carers who are eligible for main stream services.	To be agreed .	
The family and carer team will continue to be funded to monitor and assess carers eligibility for core services.	To ensure that carers who have eligibility as agreed in the regional strategy, are able to swiftly access care and support to meet their needs.	NLC funded £160,570	Contract monitoring.	Family and carer team are a long standing team who continue to provide a valuable service for carers.	Solely NLC funded.
<p>It is essential that carers are supported to meet their own health care needs, to reduce the risk of the development of long term conditions, also to ensure that the carer is able to continue with their caring role for as long as they wish to do so.</p> <p>This element of the scheme was developed</p>	Enhancement of health support to carers as part of a holistic system of support to meet caring needs. This development was not realised in 2011/2012 due to issues with arranging the HR processes to facilitate recruitment. This action will be carried forward to 2012-2013 as an activity.	£50,000	Through monitoring arrangements with the family and carers team, who will have line management responsibility for the role?	To be agreed	

<p>to ensure that carers will be supported in meeting their care needs, by supporting carers to recognise and meet their own health care needs.</p> <p>One member of the family and carer team with a health focus will only be able to meet the needs of a small number of carers. To ensure that a wider range of carers needs can be met in this way, this scheme will be expanded to ensure two health trainers can be employed to meet needs.</p> <p>To ensure that there is an increase in the range of employment opportunities for carers and ex carers, one of these posts will be encouraged to be a carer/ex carer.</p>				
<p>The expansion of the support centres will be maintained to continue with a wide provision of support for carers across North Lincolnshire.</p> <p>The provision of services will continue to be monitored, and commissioners will work with the provider to ensure a service that meets local needs is provided.</p>	<p>Ensure that there is equitable access to resource from a carers support centre for a wide range of carers across North Lincolnshire.</p> <p>This will be measured using contract performance monitoring.</p>	£200,000		To be agreed .
<p>This role will continue to ensure that there are close working relationships between the carers support centres, and the family and carers team at NLC.</p>	<p>Through performance monitoring of the role, and through contract monitoring as above.</p>	£30,000		To be agreed
<p>Carers who are hard to reach often miss out on core services as they have difficulty</p>	<p>Such a 'shop front' would act not only as a drop in for carers, it would also be a</p>	£200,000	This will be measured through contract	To be agreed

<p>freeing time from their caring role to meet their own needs.</p> <p>The initiatives already outlined here invariably try to identify innovative ways to meet the needs of such hard to reach carers.</p> <p>To expand this form of 'outreach' to hard to reach carers a shop front is proposed. This would be based in an area with high footfall to ensure that it is clearly and easily accessible, this would mean that a place in the high street would be required.</p>	<p>place where the carer could ensure their cared for person is cared for whilst the carer either obtains some form of respite, or simply completes day to day activities.</p> <p>This would also be a place where carers could access support and information. As a shop front enterprise this will ensure that there is a high level of publicity to promote the needs of carers, and who these can be met.</p> <p>This will include provision of care from both stat and non stat/voluntary service to meet needs.</p>		<p>monitoring.</p>	
<p>To further enhance the provision for hard to reach carers, there will be an investment in IT structures.</p> <p>Such investment will mean that carers who are geographically challenged and so unable to leave their home to access support can do so using IT.</p>	<p>Each carers support centre will be provided with additional funding to purchase IT support which can be given to carers on a temporary basis to facilitate support.</p>	<p>£300,000</p>		
<p>The carers partnership forum appointments will be reviewed to ensure that they are achieving objectives set in 2012/2013.</p> <p>In collaboration with the carers it will be established if these roles are meeting set outcomes. As long as they continue to meet outcomes</p>	<p>These roles will continue to support the partnership, and will work closely with the carers and commissioners to ensure the roles continue to meet need.</p>	<p>£5,000</p>	<p>Through activity of the carers partnership, and feedback from carers.</p>	<p>To be agreed</p>

<p>To ensure that there is cover for carers at times of crisis and emergencies.</p> <p>Providing that developments in the previous year have led to commissioned services to meet crisis needs, part of this allocation will be used for the continuation of such services.</p>	<p>Any budget slippage will be allocated to a pooled budget, wherein money will be held to meet the needs of carers at times of crisis.</p> <p>This budget will be managed by the family carer team</p>	£180,000	Through monitoring arrangements with the family carer team.	To be agreed
NHS NL will continue to contribute to the provision of the carers support centre in Brigg. To ensure that this valuable contribution to carers support to continue.	The outcomes will be that the carers support centre will continue to meet outcomes as agreed in the service specification for the carers support centre for 2012/2013.	£340,690 of which NHS NL contributes £57,800	Contract monitoring	To be agreed

NHS Anticipated expenditure £940,000

NLC anticipated expenditure £583,800

Total anticipated expenditure £1.523,800