

The University of Manchester Institute for Collaborative **Research on Ageing** 

#### NIHR National Institute for Health and Care Page **Health and Care Research**

NIHR Policy Research Unit Older People and Frailty

## **The Impact** of Care Act **Easements**

under the Coronavirus Act 2020 on older carers supporting family members living with dementia at home

**Summary Briefing** November 2022

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### **Context and Project Aims:**

The Coronavirus Act 2020 gave emergency and enabling powers across legal domains, including "easement" powers for local authorities in England temporarily to water down the majority of their adult social care duties under the Care Act 2014. Triggering stages 3 and/or 4 easements protected local authorities from legal action for failure to comply with statutory duties if they were unable to do so because of crisis circumstances. Eight out of 151 local authorities triggered stage 3 or stage 4 easements between April and June 2020.

With a focus on older carers of family members living at home with dementia, the project aimed to:

- i. document the impacts of Care Act easements and reinstatement of statutory duties;
- ii. compare these with experiences in local authorities where easements were not formally triggered but services were cut;
- iii. understand how policymakers with safeguarding responsibilities approached the issues;
- iv. understand and document current urgent needs.

## **Methods:**

The project undertook 48 in-depth interviews with people over 70 who had been supporting their spouse or partner living with dementia to live at home in England; in-depth interviews with 27 professionals in social work leadership roles at 20 Local Authorities; a survey of 604 caregivers who were supporting a family member living with dementia at home from across the UK; and legal analysis of the operation of the Care Act easements.

The report and related documents are available at: https://www.opfpru.nihr.ac.uk/our-research/ projects/the-impact-of-care-act-easements

This document can be downloaded from: https://documents.manchester.ac.uk/ display.aspx?DocID=64489

# Summary of key findings:

- Easements were differentially implemented based on conflicting advice and understanding. Easements were soon revoked, and not in force for any local authority beyond July 2020.
- Carers in easement and non-easement areas experienced similar and ongoing changes from their usual care and support, unrelated to the easement periods or whether their local authority had invoked easements. Long beyond the easement period, carers struggled without access to many pre-existing support routes while those they cared for were rapidly deteriorating mentally, physically and socially. The research reveals a population in acute distress and suffering from very poor mental health.
- Given the extent of unmet need among carers in this study, on the face of it there appears to have been a high risk of instances where statutory duties under the Care Act owed to carers were not met, without litigation, regulatory intervention or other consequence. There is a danger that this precedent means that Care Act statutory duties may have been permanently undermined, in the context of local authority resources for social care increasingly reported as at a critical point.

#### **Implications:**

- The easements legislation did not prevent substantial reductions in support to carers. Legal, practical, and resourcing responses provided insufficient support for older carers in need.
- Care pathways after a dementia diagnosis are problematic with little integration between medical pathways and holistic care and support for carers. Mechanisms need to be developed to identify carers and the people they care for as at risk of needing intervention and support in crisis circumstances. Better practical, logistical and mental health support for carers seems urgently needed.
- Local authorities need resourcing for real alternatives to services closed in the pandemic, and strategies for ensuring safe home and respite care during a pandemic that (a) does not present unacceptable risks and (b) maintains sufficient quality of provision.
- Strategies need to address how to protect and preserve the social care workforce in a crisis.