

Peterborough Carers Strategy 2009 - 2011

Approval Process

Lead Author Trish McHugh

Improvement and Development Manager

Directorate of Care Pathways

Developed by Hedda Lilley, Project Manager

Directorate of Care Pathways

Sarah Coomes, Project Support Manager Deborah Gallacher, Project Support Manager

Directorate of Care Pathways

Updated by Sue Oakman

Improvement and Development Manager

Directorate of Care Pathways

Approved by Denise Radley

Ratified by NHS Peterborough Board

Document Type Strategy

Version 13

Latest Revision date May 2009 Review date May 2010

Valid on 09/11/2009

Document Control Sheet

	2004
Development and	The Peterborough Carers Strategy 2009 – 2011 has been developed following consultation with Carers, Service Users, Partner Agencies in
Consultation:	Health and Social Care and the Voluntary Sector.
Consultation.	A mapping exercise of current services alongside feedback from
	questionnaires sent out to Carers about current services is also
	informing this work.
	Stakeholder consultation on the strategy has been carried out during
Discomination	September and Oct 2008.
Dissemination	Copies to all members of the Carers Steering Group by request
	Feedback at Bi-annual Carers Event.
	NHS Peterborough Pathways Workshop for Professional Staff.
	All Partner Agencies
	Local Media
	NHS Peterborough website
	Peterborough City Council Website
	Other Voluntary Agency Websites by agreement
	Peterborough Community Services Staff Briefings
Implementation	Task and Finish groups will be convened to implement identified
	actions in the strategy.
	The Carers Steering Group currently meets 6 times a year. Part of
	their remit will be to monitor progress of the action plan set out within
	the Strategy.
Training	Awareness raising to all statutory and non statutory organisations will
	be carried out on rolling programme.
Audit	
Review	Carers Steering Group
	Equality Impact Assessor
Standards for	This strategy supports NHS Peterborough's compliance with the DH
Better Health	publication "Carers at the heart of 21st century families and
	communities: a caring system on your side, a life of your own" (DH,
	2008).
Equality and	An Equality Impact Assessment has been completed (Sept 2008).
Diversity	

Revisions

Version	Page/ Para No	Description of change	Date approved
1.0		For Board Comment	03/12/08
13.0		Strategy reviewed and updated	

Contents

		Page
	Executive Summary	05
1.	Introduction	06
1.2	Background	07
1.3	Who is a Carer?	07
1.4	Facts and Figures	08
1.5	Local Picture	09
1.6	Current Performance	11
1.7	Current Service Provision	11
1.8	Direct Payments	12
1.9	Emergency Support Service	13
1.10	Current Expenditure	14
2.	Our vision	15
3.	Overarching Objectives 2009-2011	18
3.1	Proposed Deliverable Objectives over the next 3 years	18
3.2	Challenges to be met	19
3.3	Risks and assumptions	19
4.	Consultation Process	20
5.	Action Plan	21
6.	References	22
7.	APPENDIX 1 - Statutory and other Relevant Guidance	23
8.	APPENDIX 2 – Action plan (attached)	

Executive Summary

This Carers Strategy is a statement of how services and support for unpaid carers in Peterborough will be developed by 2011.

In June 2008 the Government published a new National Strategy for Carers

- Carers at the heart of 21st- century families and communities "A caring system on your side. A life of your own." The National Strategy gives a framework for a ten-year programme and a vision for what the government wants to see in place for carers by 2018. Importantly, it is linked to wider health and social care reforms which recognise the increasingly vital role that carers play in society. Health and social care services are aiming to promote individual choice and independence, with a shift towards preventative approaches and early intervention.

Unpaid carers are not a static population and nationally about 2 million people take on new caring responsibilities every year. More needs to be done in Peterborough to identify and assess carers at the right time. Further work is also needed to identify 'hidden' carers, and those who may need specialist approaches such as carers from BME communities, and carers of people with substance misuse problems.

Further carer involvement is being developed in the City with two new carer forums being set up during Q1 2009 - A Carers Partnership Board, with a volunteer Carer as Vice Chair and a Young Carers Steering Group which will be set up in partnership with Children's Services.

Research shows that carers often experience more ill-health than other members of the population. More needs to be done to ensure carers who visit GP's surgeries and primary care services are identified and signposted to appropriate sources of support. There is a need for greater and more consistent awareness about the needs of carers amongst all professionals, and more integrated working. There needs to be more work inter-agency working to meet the needs of Young Carers in Peterborough, and work to improve joint working between adults and children's services.

The Carers Steering Group has been in place in Peterborough for some years. It is a multi-agency group including carer members alongside professionals from the Primary Care Trust and voluntary sector organisations. This group initially approved the Strategy and the priority areas that require initial action. The updated strategy and revised action plan which details the work required and specifies the monitoring to take place will be taken to the Carers Partnership Board in June 2009 for approval before being sent to the PCT board for final ratification.

1. Introduction

- 1.1.0 The Peterborough Carers Strategy 2009 2011 sets out the strategic direction for the further development and delivery of services to unpaid Carers in Peterborough over the next 3 years. It seeks to contribute to the overall health and well-being of Carers, observing local and national enablement, preventative and health improvement agendas.
- 1.1.1 The Peterborough Carers Strategy has been reviewed to ensure consistency with the main themes of the national carers strategy 'Carers at the heart of 21st-century families and communities'. The strategy has been written to ensure that the aims and objectives align closely with NHS Peterborough's Strategic plan and operational plan, with final consideration given to other relevant strategic documents such as the Strategic Health Authority's vision 'Towards the best, together', the 2009-10 Operating Framework and the Local Area Agreement.
- 1.1.2 The strategy is specific to Carers of adults and young Carers of all backgrounds and ethnicity in Peterborough. It aims to support both the carers who choose to make contact with social services as well as those who choose not to.
- 1.1.3 Around 10% of the population of Peterborough provide unpaid care to family members, friends and neighbours and their role and contribution to society needs to be recognised.
- 1.1.4 Research carried out by the charity Carers UK estimates that without the 6 million carers in the nation, the costs to the NHS would more than double with the value of unpaid carers being put at £87 billion each year. This figure is more than 50% higher than it was in 2002.
- 1.1.5 The overarching aim of this strategy is to get all agencies involved in supporting Carers to work better together to improve the lives of Carers across the city. It does not seek to prescribe how Carers needs should be addressed rather it sets out a framework for action from which to influence and build upon current support and service delivery to Carers.
- 1.1.6 We have identified 8 priority areas for 2009 2011: Information and Advice, Breaks from Caring; Work, Leisure & Lifelong Learning; Health & Well Being; Person Centred Planning; Equality of Access; Carers Assessments; Delivering Quality Carers Services.
- 1.1.7 During development of this strategy a range of stakeholders were consulted to ensure that the strategic direction meets the needs of Carers and reflects the priorities for service planning and delivery. It is our intention that Carers will be involved in the implementation and continuous review of the strategy.
- 1.1.8 It is our intention to produce an "easy read" version of this document.

1.2 Background

- 1.2.1 NHS Peterborough works in partnership with Peterborough Community Services and other statutory and voluntary organisations. We commission and deliver both adult social care services (on behalf of Peterborough City Council) and health services for local people. This includes the lead responsibility for assessing carers needs ands providing services to support them.
- 1.2.2 The PCT recognises the immense contribution unpaid Carers make to society and the value, financial and otherwise, of the work they do in caring for those who could not manage without their help and support. Society is changing, people are living longer and many older people develop long term clinical conditions. Residential care is expensive and it has been the government's policy for some time to help elderly people remain in the community. Indeed, many of these people themselves have rising aspirations and want to maintain independence and control and remain living at home. But there is not always the necessary back up from social services to help these people continue to live on their own. Instead, it is family and close friends who take on the responsibility. Without unpaid Carers, formal services would be unable to cope with demand.
- 1.2.3 This strategy should not be seen as replacing the previous Strategy 2005-06 but should be viewed as moving the Carers agenda forward. It builds on earlier achievements, recognising the changing policy and legislative landscape, the views of Peterborough Carers and takes into account social and demographic changes.
- 1.2.4 Locally much work has already been done on recognising, involving and supporting Carers and the challenge for 2009 - 2011 will be to build effectively on this work and integrate principles of support for Carers into mainstream services.
- 1.2.5 In 2008, Central Government announced that by 2011 it expects all local authorities to be providing social care services to adults, including Carers, via Personalised Budgets. Personalised Budgets offer greater choice and control to individuals. This strategy includes delivery of this agenda.

1.3 Who is a Carer?

- 1.3.1 NHS Peterborough defines a carer as 'someone who looks after or feels responsible for a relative, neighbour or friend, due to their ill health, disability or frailty'.
- 1.3.2 This can include daily support, but also support from any distance, which involves frequent contact where this commitment disrupts the Carer's normal weekly/daily routine.
- 1.3.3 The help the carer gives is unpaid.

- 1.3.4 Carers come from all backgrounds, ages and ethnic minority groups and can be men, women or children. Carers tend to be categorised into three groups:
 - Young Carers a child or young person (under the age of 18 years) who
 takes responsibility for the care of a family member, usually a parent or
 sibling, who suffers from an illness, disability, mental ill health or substance
 abuse.
 - Adult Carers those over 18 years of age caring for another adult with any of the above needs.
 - Parent Carers those over 18 years of age caring for a child (who is under 18 years of age) with a disability (this can include other relatives or guardians)

Services for Carers who provide substantial support for a child or young person with a disability are provided by Peterborough City Council Children's Services and will therefore be identified within their relevant strategic plan.

1.3.5 A Carer can give a whole range of support to the person they care for such as providing practical, physical and emotional support to help that person to continue living independently at home; supervising someone to keep them safe; managing finances; and ensuring medication is taken to keep someone healthy. Some carers could also be service users in their own right.

1.4 Facts and Figures

1.4.1 National Picture

The 2001 Census estimated that:

- There are 5.2 million Carers in the UK
- 175,000 of these are young Carers
- More than 1 million are caring for more than 50 hours a week
- More than one quarter have been caring for more than 10 years

Carers UK states that:

- Every day 6000 more people become Carers
- Estimated demographic changes coupled with the direction of community care policy will lead to a 60% increase in the number of Carers by 2037.
- Every year 1:5 Carers give up work to care. By 2034, an extra 3.4 million people could be caring.
- A recent study¹ estimates Carers contribution in monetary terms at £87 billion per annum.
- 1.4.2 At any one time, 1:10 people in Britain are Carers, and every day 6,000 people take on new caring responsibilities. The number of people over the

Valuing Carers – calculating the value of unpaid care, Carers UK, 2007

- age of 85 the age group most likely to need care is set to double over the next 20 years (DH, 2008).
- 1.4.3 Carers at the heart of 21st century families and communities (DH, 2008) 'sets out a vision that by 2018, Carers will be universally recognised and valued as being fundamental to strong families and stable communities. Support will be tailored to meet individuals' needs, enabling Carers to maintain a balance between their caring responsibilities and life outside caring, whilst enabling the person they support to be a full and equal citizen'.
- 1.4.4 National estimates suggest that up to 20% of employees are likely to have caring responsibilities, which can cause financial hardship and difficulties in employment.

1.5 Local picture

- 1.5.1 The 2001 Census identified that:
 - nearly 15,000 people in Peterborough viewed themselves as Carers, around 10% of the local population and consistent with national estimates.
 - 3000 were caring for more than 50 hours per week.
 - nearly 480 children aged 0 18 are providing care.
- 1.5.2 Of the carers known to Adult Social Care currently, It is noted that a moderately high proportion of these carers are aged 65 years and over. This may prove to be a significant factor in the coming years as these carers are no longer able to continue providing this support.
 - 36.4% of Carers are age 65 and over (5% are age 85 and over).
 - 36.8% of those cared for have a physical disability
 - > 32.7% of their Carers are age 65 and over.
 - 14% of those cared for have a learning disability.
 - > 32% of their Carers are age 65 and over.
- 1.5.3 In terms of activity, 1,774 carers were assessed or reviewed during 2008/09. This figure is up from 1,366 in 2006/07. Of these:
 - 39.6% were age 65 or over (this figure was 28% in 2006/07)
 - 100% received services and/or information and advices as an outcome (up from 24% on 2006/07 who received services as an outcome)
- 1.5.4 Prevalence based estimates suggest that over the next 3 5 years the number of Carers in Peterborough will increase to 17,500. (JSNA population estimates).
- 1.5.5 The East of England Strategic Health Authority have published 'Towards the best together' which documents the goal that all PCT's will provide improved services to Carers. One objective is to ensure that Carers get enhanced support at high risk times. Recruitment of new Carer Support Workers with broadened responsibilities is one way that this will be achieved.

- 1.5.6 A large number of service users with social care needs are not contacting social services this could indicate that they are probably being supported by family or friends acting as informal Carers (JSNA, 2007). In recognising that there will always be some carers who choose not to become known to social services it will be essential that access to information and advice is as broad and far reaching as possible. To achieve this, new and innovative avenues of communication will be developed such as linking into public transport to promote information at bus stations.
- 1.5.7 In previous years, Peterborough has seen low numbers of Carers receiving support. However, concerted pieces of work involving the identification of carers, and the merging of two different databases has seen the number of carers with clients identified increase from 1774 in June 2008 to 2679 in June 2009.

The profiles of carers and service users in Peterborough are set out below:

Carers known to NHS Peterborough - 6 June 2009 Clients with carer identified on RAISE - by client age and category

Primary Client Category	<18	18-64	65-74	75+	Total
Physical And Sensory Disability/frailty		424	265	1273	1962
Physical Disability		296	165	425	886
Hearing Impairment		16	3	36	55
Visual Impairment		30	9	69	108
Dual Sensory Loss		3		12	15
Frailty and/or Temporary Illness		79	88	731	898
Learning Disability		315	8	1	324
Mental Health		13	18	72	103
Other Vulnerable People		5		6	11
Substance Misuse		1	2	1	4
Total		758	293	1353	2404

Carers with clients identified on RAISE - by client category and carer age band

Primary Client Category	<18	18-64	65-74	75+	Total
Physical And Sensory Disability/frailty	12	1371	385	433	2201
Physical Disability	8	639	154	161	962
Hearing Impairment	1	39	11	8	59
Visual Impairment	1	72	18	32	123
Dual Sensory Loss		10	2	6	18
Frailty and/or Temporary Illness	2	611	200	226	1039
Learning Disability		243	68	34	345
Mental Health		65	18	31	114
Other Vulnerable People		10	1	4	15
Substance Misuse		2	2	0	4
Total	12	1691	474	502	2679

1.6 Current performance

- 1.6.1 Peterborough achieved an overall 2 star rating (adults) by The Commission for Social Care Inspection (CSCI) for 2008.
- 1.6.2 Performance against the PAF Social Care Benchmarking data states that Peterborough reaches an acceptable banding, however, there is considerable room for improvement, with Peterborough one of the lowest performing authorities in the Country against this indicator.
- 1.6.3 The Self Assessment Survey (SAS) for the Council indicates steady growth in the number of breaks provided to carers of people with disabilities year on year. From 19 in 2003/4 to 89 in 2006/7, however, this is still below the nearest neighbour (IPF) Average. The calculation changed after 2006-07 to include not only carers receiving breaks themselves, but also the cared-for person who received respite during the year. 283 carers were shown therefore to have benefitted from a break in 2008-09.
- 1.6.4 The RAPC return for 2006/7 shows that there is a comparatively small number of carers of people aged 18-64 with disabilities receiving support service in the year 2006/7. Only 21 carers of the 875 clients receiving services during the year, received a service assessed to support them in their caring role. However, in 2008-09, 1774 carers received either an actual service and/or information and advice compared to the 4936 clients who had received a service.

1.7 Current Service Provision

- 1.7.1 The support provided to Carers covers a wide range of services and resources. Some services are provided directly to Carers; other services are provided to the person with support needs and should benefit the Carers by reducing the impact of caring and/or the number of hours they provide caring.
- 1.7.2 Services for Carers are provided on two levels:

Open access (Carers can refer themselves). These include:

- Carers project at PCVS advice, support and sitting service
- Advocacy service also at PCVS. Supports adults with learning disabilities get their voice heard through one to one support and group advocacy. Has a particular focus on supporting the BME community.
- Young Carers Project also at PCVS. Supports Young Carers and their families in Peterborough. The project provides social activities for the Young Carers to enable them to take a break from their caring role. The project offers support and advice.
- Alzheimer's society
- Rethink (supporting Carers of adults with severe and enduring Mental Health problems)
- Crossroads (although open access, eligibility criteria applies)

Training support i.e. Moving and Handling, Medicines Management, IT

Direct services for Carers – resulting from a Carers Assessment²

- Carers Opportunities Fund (part of the Carers Grant)
- Direct Payments (see paragraph 1.8)
- 1.7.3 Services for the person with support needs: These require referral and assessment via Adult Social Care.
 - Respite care
 - Day services
 - Home care
 - Direct Payments

1.8 Direct Payments

- 1.8.1 It is a statutory and legal obligation of all local authorities to offer a Direct Payment to anyone eligible for a social care service. Carers have a right to a Direct Payment in their own right as a Carer. The payment is given to the carer to buy services they have been assessed as needing instead of social services arranging them. The number of carers receiving a direct payment in Peterborough has increased from 7 in 2007-08 to 20 in 2008-09.
- 1.8.2 Services across social care which may benefit carers are provided by a range of independent sector providers as well as Peterborough Community Services and Cambridgeshire and Peterborough Mental Health Foundation Trust.

Service developments identified within this strategy provide an excellent opportunity to further develop the local voluntary sector.

 The cared for must meet our eligibility criteria, which currently stands at high moderate. Account is taken of the impact of the caring role on the carers life and sustainability of that role, and what the key nature of the support provided.

- This means that all carers in these circumstances should be offered a carers assessment to establish whether support can be given.
- Carers can decline an assessment if offered.
- Carers assessments should also include consideration of carers aspirations around work, education and leisure.

² ** Carers Assessment:

Where staff come into contact with a Carer who appears to be providing a substantial amount of care on a regular basis, they have a statutory duty to tell of their right to a carers (needs) assessment.

1.9 Emergency Support Service

1.9.1 NHS Peterborough, Peterborough City Council and Peterborough Community Services have worked in partnership to develop and deliver the *Emergency Support for Carers* service. This supports carers of adults in an emergency.

The service can typically help carers in the following circumstances:

- Carers admission to hospital or other health needs.
- Family emergency, i.e. close relative taken ill
- Real risk to the carers employment on a particular occasion
- Funeral of close friend or relative
- 1.9.2 All carers can register with the service by filling in a contingency plan. This establishes what needs to happen should the carer not be available for the reasons stated in 1.9.1.
- 1.9.3 Key contacts are notified via the Contingency Plan and Adult Social Care can contact them if the carer was not able to do so. If no-one is available to do this, or if they cannot get hold of the contacts, the emergency support service would be able to step in for up to 48 hours. This service is only available for up to 48 hours and is free.

1.10 Safeguarding and The Mental Capacity Act

1.10.1 Safeguarding adults is a key area of work. The Department of Health launched a consultation on how to improve safeguarding policy, the protection of vulnerable adults, and address abuse in all its forms in the care system in October 2008. The 'No Secrets' guidance for local authorities, the police and the NHS to work together to protect adults is already in place. The Government now wants to make sure it keeps up with changes in the social care system, with the new emphasis on choice and control and changing forms of abuse.

The Safeguarding of Adults Policy has been developed jointly by the agencies and organisations that have responsibility for protecting adults from abuse. The co-ordinating role rests with NHS Peterborough which has the responsibility for delivering adult social care services on behalf of Peterborough City Council. The protection of vulnerable adults is one of the most important tasks facing health and social care services. Both adult carers and the people they care for may be vulnerable adults and are covered under the Peterborough Safeguarding Policy (2008). The policy includes;

- * A framework and structures to ensure that there is clarity on how to report adult abuse, who will act and what responsibilities individuals and agencies have to respond to incidents.
- * The policy covers both statutory and non-statutory organisations and requires them to ensure that they are familiar with the policy and the responsibly to alert Adult Social Care if abuse is suspected.
- * Key definitions including vulnerable adults and what constitutes abuse

A core principle of the policy states that Safeguarding is Everybody's business. Organisations who are signatories to the policy have agreed a range of statements on the protection of vulnerable adults which they will all work to.

The policy also contains a detailed multi agency safeguarding process that all agencies working with vulnerable adults must follow. For further information in this please see www.peterborough.nhs.uk/freedom of information/Policies and procedures/Social Care Policies and Procedures N-Z/Safeguarding Adults Policy November 2008.

1.10.2 There is a need to ensure carers are aware of changing practice and legislation that affects them, including the Mental Capacity Act. This concerns people who lack mental capacity and those who take decisions on their behalf, and it is therefore important that carers are aware and able to take appropriate action concerning the person they care for.

1.11 Current expenditure

- 1.11.1 For the strategic plan to be realised it is necessary to have a robust understanding of the current level of resources that are invested in carer services. Local Authorities and PCT's often have difficulty in providing the financial detail of budgets for carer services as often much of the support to Carers is embedded within core budgets.
- 1.11.2The Government has given a number of commitments to Carers in its 'Carers at the heart of 21st-century families and communities' publication. It will be imperative to ensure that any future monies for Carers in Peterborough is being directed through this strategy.
- 1.11.3 An analysis of the current Carers Grant Funding allocation is set out below:

Adult Services				
Carers Grant 07/08	£483,200			
How this was spent				
Carers Support Packages	£100,000			
Adult Link Carers	£ 38,000			
Voluntary bodies and admin	£345,200			
Other Funding				
Emergency Respite Fund	£65,600			

^{*}Carers Grant funding allocation to Children's Services was £120,800 and Emergency Respite Funding was £16,400.

2. Our Vision

- 2.1. The purpose of the strategy is to provide a framework for delivering support and services that will help achieve the best possible outcomes for Carers.
- 2.2 It is important to recognise that many people do not see themselves as Carers because first and foremost they may be husbands, wives, partners, siblings or friends. Older Carers and Carers from ethnic minority groups are particularly likely to remain hidden. Any effective strategy must address these hidden Carers as well as those in current contact with services, so this strategy aims to identify hidden carers and ensure that they are linked with the appropriate support services at the time they need them.
- 2.3 In this strategy the needs of Carers are looked at separately from the needs of the vulnerable adult so that Carers are supported as fully as possible in their caring role and receive services that enable them to continue to care without undue impact on their own health and welfare. Young carers particularly need to be protected from inappropriate levels of caring, and have the support they need to learn, develop and thrive. With this in mind, the strategy will incorporate new support programmes rolling out in schools such as the National Healthy Schools Programme. Targeted support for young carers will come from a variety of sources online, links to new national carers helpline as well as stronger links with existing young carers projects and children's services. It is also recognised that safeguarding issues may arise with respect to carers as well as those they care for.
- 2.4 Whilst recognising the need to help sustain Carers in their caring role we are also committed to supporting them as a person in their own right, ensuring access to leisure, education and employment opportunities. We will work closely with Job Centre Plus to support those carers who wish to re-enter the job market, as well as employer organisations such as Employers for Carers to ensure that employers have the support to retain employees with caring responsibilities. In addition to this, we will deliver the caring with confidence expert carer programme for carers residing within Peterborough.
- 2.5 It is essential that there is an integrated approach to addressing Carers issues across the public and voluntary sectors so that effective use of resources can maximise the positive impact on the lives of Carers across Peterborough. This will ensure that Carers are supported and recognised in their caring role. Initiatives such as the development of the Common Assessment Framework (CAF) for adults will encourage close partnership working between the council, the NHS and other statutory agencies, including the third sector, while self-directed services will enable greater emphasis on choice and control for carers.

- 2.6 There is strong anecdotal evidence from carers at Bi-annual events that there is great anxiety when the children they are caring for reach the age when they leave children's service and move across to adult services. Carers need to be assured that the young people they care for can move seamlessly into a new stage of life. We will therefore look to explore and develop clearer transitional Support services and communicate these services clearly to carers living in Peterborough.
- 2.7 The national carers strategy discusses the need for carers to have opportunities and space they need outside their caring role. There needs to be greater emphasis on the provision of planned breaks, which will provide carers with time to take up education, leisure and training opportunities like anyone else. We therefore pledge to consult with carers/all relevant parties, and work in partnership with the council to procure a range of planned breaks using funding from both the existing carers grants and new monies from the government. When undertaking this commissioning of these new services, we will take into account any learning shared from the government pilots set to commence in October 2009.
- 2.8 Prevention and early intervention measures can make a significant contribution to supporting individuals to manage their own health. While national pilots are underway piloting annual health checks for carers, we will look to work more closely with GPs in Peterborough to enable them to recognise a carer and signpost them effectively to appropriate services. This will involve supporting GPs to ensure they are meeting the carers criteria of the Quality and Outcome Framework accurately. This support will take various forms from assisting them to develop accurate carers registers in their practice, to providing educational support and useful resources for them to draw upon when needed.
- 2.9 The 2008 Drugs Strategy sets out the Government's aims for the next 10 years in drug treatment and prevention to improve the care and support service users receive, placing greater emphasis on families and Carers needs. This represents a positive step towards better support and outcomes for Carers. Responsibility for caring for a parent with substance misuse problems has been shown to lead to higher incidence of educational difficulties. Therefore, we are committed to working closely with Substance Misuse commissioning colleagues and the National Treatment Agency (NTA) to set up specific family and carer services.
- 2.10 High Quality Care for All discusses incorporating three specific domains: Safety, effectiveness and patient experience to enable high quality care across the NHS. When reviewing or developing new carer services, we will ensure these domains are included within all service specifications. Patient reported outcome measures (PROMS) and patient experience markers will ensure robust contract and performance measure are in place to guarantee these services are effective and cost efficient.

The broad strategic areas detailed above in the 2009 - 2011 strategy can be broken down into 8 key priority areas. These will form the basis of the action as follows:

- 1. Information and advice— Improve carers experience by ensuring that all Carers have easy access to clear and accurate information when they need to, and that primary care clinicians can accurately signpost carers to this information when required. Information available will advise what services are available, both locally and nationally, and how to access them. Carers views will be sought annually to measure how effective this information provision is.
- 2. Having a break from caring Ensure that new funding in 09/10 and 10/11 from Central Government for short breaks is made available to deliver more flexible short breaks and respite packages at the appropriate level when needed. Allow carers to access planned services, or to use individual budgets to procure their own breaks and monitor the relevant vital sign (proportion of carers receiving a 'carer's break' or a specific service for carers as a percentage of clients receiving community based services)
- 3. Work, Leisure & Lifelong Learning Increase the provision of help and advice to carers who wish to combine paid employment with their caring roles, or re-enter the job market when their caring role has ended, by accessing flexible working opportunities and increased learning/training, while also working closely with employers to help retain employees. Support carers to access leisure services so that Carers can have a life of their own.
- 4. Health and Well Being Development of emotional and practical support services for carers in order to maintain and improve their own health. The Caring with Confidence initiative is being run by a consortium led by the Expert Patients Programme, which includes the 3 main carers organisations (Carers UK, Crossroads and the Princess Royal Trust for Carers) and Partners in Policymaking.
- 5. Person Centred Planning Improve management processes and strengthen joined-up support around families to ensure that individuals (especially young Carers), are placed at the centre of the assessment and care planning process. More engagement with both carers and the people around them when developing and agreeing their care plan.
- **6. Equality of Access** Increase the provision of services to ensure Carers (those already known to services, and hidden carers yet to be identified) have access to culturally, age and lifestyle appropriate services to meet their needs.
- **7. Effective Carers Assessments –** Make it a priority to increase carers awareness of their right to an assessment and reviews.
- 8. Quality Carers Services Establish effective partnership working, with Peterborough Community Services (PCS), local schools and the third sector to deliver seamless and high quality services to all carers through the implementation of the strategy, with more effective monitoring to ensure that services are delivering desired outcomes. Develop closer working with GP's and Pharmacists to ensure they are familiar with all carer support services and can signpost carers appropriately according to need.

E:\moderngov\Data\AgendaItemDocs\7\6\6\AI00002667\PeterboroughCarersStrategy20092011Appen dix10.doc Page 17 of 24 May 2009

3. Overarching Objectives 2009-2011

3.1 Proposed Deliverable Objectives over the next 3 years

The overarching objectives for 2009 - 2011 are:

- 1. To ensure that Carers and the role they undertake is valued by all agencies involved in supporting them. To enhance awareness and understanding of the role of Carers in society across the whole of the Local Authority area. Links to priority 7.
- 2. To ensure that statutory responsibilities towards Carers are met and include Carers in the planning, commissioning and managing of services for both Carers and cared for. Links to priority 7 & 8.
- 3. To identify Carers and encourage individuals to identify themselves as Carers to ensure that a wider group of people access services available to enhance their lives. Links to priority 1 & 6.
- **4.** To develop a greater range, diversity and volume of services. Links to priority 6 & 8.
- **5.** Ensure people with caring responsibilities have the chance to work flexibly to combine work and their caring roles. Links to priority 3.
- **6.** To ensure children and young people are not providing unreasonable levels of care. Links to priority 1, 2, 3, 4, 5 & 6.
- 7. To provide appropriate support services for Carers when and where they are needed, in a flexible and co-ordinated manner, for all sections of the community. Links to all priorities.
- 8. To promote the physical and mental health and well being of Carers and prevent ill health of Carers, by improving health and social care support. Ensuring Carers are able to access advice, support, training, and education and leisure opportunities. This includes the provision of emergency care and support systems. Links to priority 1, 3, 4 & 8.
- **9.** To provide Carers with information, support and advice required that is up to date, relevant and readily available, for both the care they give and for them, in a flexible manner. Links to priority 1 & 5.
- 10. To offer all Carers a carer's assessment in their own right, giving more personalised support and greater scope to control and customise services by offering greater choice and control over how their needs are met. Links to priority 5 &7.
- **11.** To ensure that all practitioners receive training in assessing Carers needs and have an awareness of the services and expertise available, both within the Partnership and from outside agencies. Links to priority 7.
- **12.** To provide flexible working practices to staff who have caring responsibilities. Also to disseminate good practice to other local employers. Links to priority 3.

3.2 Challenges to be met

- Personalised Budgets The Government now expects Personalised Budgets to be the standard for allocating resources and see this methodology as the biggest significant change in social care delivery since the Community Care Act.
- Prevention Preventative services can generate significant long term cost savings but are known to be difficult to commission in the first instance as funding and resources tend to be tied up with intervention services. Invest to save schemes and effective commissioning will be the key to making this significant change.
- Market Development The market in Peterborough for carer services is fairly limited. Provision is dominated by statutory bodies and a small number of third sector providers. In order to develop our range of services and opportunities we will need to grow the market extensively through, for example, approved provider lists. At present the limited provider range limits the growth of Direct Payments and Personalised Budgets as well as innovative services and elements of the choice agenda.
- Unmet Need Through our analysis of the current position of services and through consultation and discussion with Carers we have identified areas where we currently do not provide services but where there is a need to do so.
- **Finance** The Carers Grant will need to be defined to commission new services. The Local Area Agreement a plan that sets out the priorities agreed between central government and local strategic partnerships involving the local authority, public, private, voluntary and community sector representatives will support this area.
- Data Integrated processes for keeping, sharing and utilising data need
 to be developed further. Contract Management within third sector
 provision and statutory services are not well developed. This means that
 data is difficult to extrapolate. Poor data quality is also an issue in
 relation to carers registers, with inconsistencies noted in how data is
 captured. This will need to be improved.
- Diverse Populations there is a need to identify carers in BME communities and other hard to reach groups and offer them appropriate support. Peterborough has a higher percentage of BME population than its ONS cluster.

3.3 Risks and assumptions

- Resources will need to be made available to enable delivery of this strategy e.g. more carers year on year will require additional resources to support them.
- Delivery of assessments will potentially be through two external foundation trusts in the future – there will be a need to ensure that contractual arrangements deliver statutory requirements, cost effectiveness and the required performance.
- Low comparative performance against the national indicator (also a local indicator in Peterborough's Local Area Agreement) may constrain further

E:\moderngov\Data\AgendaItemDocs\7\6\6\AI00002667\PeterboroughCarersStrategy20092011Appen dix10.doc Page 19 of 24 May 2009

performance improvement in star ratings – the new definition provides opportunity to improve significantly and this strategy must ensure deliverables which lead to an improved comparative position.

4.0 Consultation Process

- 4.1 We have consulted with a wide range of individuals, Carers and agencies in order to help shape the strategy. We have had comprehensive engagement and involvement with the Carers Steering Group and with Carers at 3 Bi-Annual Events, which have taken place over the past 18 months.
- 4.2 Steering Group members were asked to use the draft strategy and action plan to engage and consult with their own staff, service users and Carers around the key priorities and proposed action plan.
- 4.3 Carers issues have been discussed at the NHS Peterborough Annual General Meeting (AGM) and a Pathway Workshop, with key stakeholders e.g. staff, GP's, and the general public.
- 4.4 At the end of the consultation period all feedback and comments were analysed and the draft action plan was updated to reflect views and opinions generated through the process.
- 4.5 The NHS Peterborough 5 Year Strategic Plan contains a chapter relating to Carers. It is planned that a 3 month formal consultation process will be carried out in the near future. The consultation is wide spread across the whole of Peterborough and as many stakeholders as possible will be able to comment on the Carers chapter.
- 4.6 The Draft Carers Strategy was taken to the NHS Peterborough Board in December 2008 for comments which have been taken into account in finalising the strategy.
- 4.7 The revised Carers Strategy will be taken to the Carers Partnership Board for sign-off before being taken as a final document to the NHS Peterborough Board.

5. Action Plan and Implementation

The action plan will be monitored quarterly by the Carers Partnership Board. The group will inform, provide feedback and be involved with helping to carry out the objectives in the action plan.

For the plan to achieve any real results it has to be the result of partnership working and not the responsibility of one service or organisation.

Social Marketing will be one of the tools that will be used to support implementation of the strategy. Social Marketing is about understanding the population (identifying types of people and behaviours) and then going out to service users and stakeholders to find out what we need to do to engage with them. Tactics and approaches appropriate to that group can then be developed.

The action plan is attached as Appendix 2.

6. References

Audit Commission (2004) Support for Carers of older people. London: Audit Commission

Carers UK (2008) http://Carersuk.org

Carers UK Website, accessed August 2008

Census (2001) Office of National Statistics

Department of Health (2006) Our Health, Our Care, Our Say. London: The Stationery Office

Department of Health (2008) Carers at the heart of 21st century families and communities: a caring system on your side, a life of your own. (http://www.dh.gov.uk/en/Publications/PublicationsPolicyAndGuidance/DH Accessed 30/7/08

East of England (2008) Towards the Best Together.

Enfield Council (2005) Enfield Carers Strategy 2005 – 2010

http://www.peterborough.nhs.uk/default.asp?id=125
NHS Peterborough website, Carers pages accessed 23/4/07
Park E (2008) Carer's Protocol (revised\0 NHS Peterborough)

Peterborough PCT (2005) Peterborough Carers Strategy.

Peterborough PCT (2007) Joint Strategic Needs Assessment

The Operating Framework for NHS in England 2009-10 'High Quality Care for All'

Warren J. O'Brien N (2007) Exploration of the needs of young carers in Peterborough: an analysis of existing services and proposals for future development. Anglia Ruskin University.

APPENDIX 1

Statutory and other Relevant Guidance

For more than a decade, Carers have been increasingly recognised in public policy. This strategy subscribes to the principles of the current legislative and policy agenda which seek to support Carers as partners in the provision of care. The most significant are listed below:

- Carers at the heart of 21st century families and communities: a caring system on your side, a life of your own (DH, 2008) sets out a vision that by 2018, 'Carers will be universally recognised and valued as being fundamental to strong families and stable communities. Support will be tailored to meet individualised need, enabling Carers to maintain a balance between their caring responsibilities and life outside caring, whilst enabling the person they support to be a full and equal citizen'.
- Our Health, Our Care, Our Say' (DH, 2006) this paper acknowledges the importance of Carers in its vision for the future. It set out a programme of work with Carers called 'New Deal for Carers', whose aim was to improve support to Carers through a range of measures.
- Work and families act (2006) The right to request flexible working, which has been extended to Carers of adults.
- National Service Framework for long term conditions (2005) This
 document has a quality requirement to support family and Carers of people with
 long term neurological conditions.
- Independence, well being and choice (Green paper March 2005) aimed to ensure that people receiving social care are able to maintain their independence, experience better quality of life and be involved in their own care. Carers play a vital role.
- The Carers Equal Opportunities Act (2004) Section 1 duty to inform this created a duty for local authorities to inform Carers of their rights to an assessment and for the carer's work, leisure, and lifelong learning needs to be taken into account when an assessment is undertaken. It also gives Local Authorities new powers to enlist the help of housing, health, education and other LAs in providing support to Carers.
- NSF for Children, Young People and Maternity Services (2004) sets national standards for children's health and social care which promote high quality, child-centred services and personalised care that meets the needs of parents, children and their families.
- The Children Act (2004) The educational needs of young Carers is addressed. Young Carers are supported to enable them to lead as normal a life as possible.

Support for Carers of Older People (2004) – Carers should be able to expect:

- GP's and local authorities to identify Carers when a referral is made about the cared for person.
- Information that is clear, concise information should be available regarding rights and benefits and local support they can access
- Sign posting to support and services

E:\moderngov\Data\AgendaItemDocs\7\6\6\AI00002667\PeterboroughCarersStrateg y20092011Appendix10.doc Version 1 Page 23 of 24 January 2009

- Assessment of own needs, and to be consulted on the assessment of the person they care for
- Consultation with Carers when services are planned which could affect the carer and cared for.
- **Delayed discharges Act (2003)** Confirms the rights of a carer to have their needs assessed as part of the assessment of needs of a person who may need a community care service to achieve safe discharge from hospital.
- Every Child Matters (2003) sets out to ensure that every child is given the
 opportunity to achieve their potential and promotes earlier intervention before
 children/families reach crisis point. It focuses on 5 key outcomes for children and
 young people and those key outcomes will be just as relevant for young Carers
- Direct Payment Guidance (2003) Local Authorities are now required to offer the alternative of Direct Payments instead of the service itself to Carers.
- Valuing People A new strategy for Learning Disability for the 21st century (DH, 2001) this emphasised the government objective to increase help and support to Carers from all agencies in order that they may fulfil their family can caring roles effectively. It identified that there was 'insufficient support for Carers, particularly those caring for people with complex needs.' Valuing people identifies 3 groups of Carers who face additional pressures:
 - Older Carers (aged 70 and over)
 - Carers from minority ethnic communities
 - Carers whose sons or daughters are going through transition from school to adult life.
- The Carers and Disabled Children Act (2000) this gave further rights to Carers to ensure that they are able to receive an assessment of need.
 - All Carers, including parent cares, are entitled to an assessment of their needs
 - Councils can offer assessments of need to all Carers, even if the person they care for chooses not to have their own needs assessed
 - Direct payments can be offered to those eligible for community care services
- The NSF for Older People Standard 8 (2000) Carers should be identified and seen as partners in care, being involved in the planning and implementation of services for older people. Standard 8 emphasises the need to improve the quality of life of older people, including older Carers. The NSF reinforces the rights of Carers to appropriate forms of support including the provision of short breaks.
- The NSF for Mental Health, Standard 6 (1999) Standard 6 aims to 'ensure health and Social Services assess the needs of Carers who provide care and support to people with mental illness. Local Authorities take the lead in ensuring that Carers needs are assessed, that Carers receive easy to understand information about what is available to help them and receive a written Carers plan, which is reviewed at least annually.
- The NHS and Community Care Act (1990) Local Authorities are required to involve families and Carers when making plans to support vulnerable people.
- The Commission for Social Care Inspection (CSCI) Report New Outcomes Framework for Performance Assessment of Adult Social Care.