



**Staffordshire County Council and
Staffordshire NHS Clinical Commissioning
Groups**

Joint Carers Strategy 2019 – 2022

‘All together for Carers’

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Introduction

1. Caring can occur in a very broad range of circumstances, often without warning. Anyone, including children, can become a carer. However, though caring will affect most of us at some point in our lives, many carers find that they cannot access the support they need to make their caring role more manageable. This in turn can add to the stress and isolation of being a carer, which can affect emotional and physical health. If left unchecked, this can be a pre-cursor to carer breakdown, in some circumstances requiring the emergency mobilisation of statutory services.
2. The support which carers give is a vital part of the health and social care system in Staffordshire, particularly as local authorities, NHS and the wider public sector face financial challenges of an unprecedented scale. We have to consider sustainability and value for money in all our services, balancing demand and quality with cost. We must support local communities to develop and be sustainable and support carers to help themselves, enabling us to target our resources for those who are most in need of support.
3. Most carers prefer to continue to care for their loved ones themselves for as long as possible. Many manage this with support from their own family network and do not need a lot of help, however, they need to know where and how they can get help in an emergency if they can't continue to care. Carers value easy access to good information and advice to support their caring role. Where they use statutory services, they want these to work in a more joined up way, so that they don't have to keep repeating their story. Carers would like to be involved in plans for services and to know when things change. Many carers find fulfilment in their caring role, and would like to be able to balance caring with other commitments, such as work, education or training.
4. Meeting these needs requires collaboration and therefore, this strategy has been developed by Staffordshire County Council and the NHS Clinical Commissioning Groups [CCGs] as a joint approach to supporting carers. This commits us to working proactively together through the financial challenges and ensuring the most appropriate use of resources to achieve the best outcomes for carers in Staffordshire. We cannot do this alone and therefore, this strategy includes a call to arms to community groups, businesses, schools and colleges, and the third sector, working together for the benefit of our carers, so that we can honestly say that we are 'all together for carers'.
5. This Strategy has been informed by conversations with carers and people affected by caring and we have had discussions with carers within our work on a range of strategies and plans. The Council has recently taken part in the bi-annual NHSE Carers Survey¹ and the findings have been used to inform and support this strategy. Independent surveys have been undertaken by local Healthwatch and Healthwatch England. We have also taken learning from the Department of Health Call to Evidence (for carers) in 2016, resulting in a Carers Action Plan published in 2018.

¹ Personal Social Services Survey of Adult Carers in England, 2018-19 (not yet published nationally)

The national context

6. Caring will touch most people's lives at some point, as more people provide care to someone who matters to us. There were approximately 6.5 million people providing unpaid care in the UK in 2011, representing a growth of 620,000 unpaid carers since 2001. In England and Wales, unpaid care increased between 2001 and 2011 at a faster rate than population growth.²
7. The provision of unpaid care is becoming increasingly common as the population ages. Between 2001 and 2015, the number of people aged 85 and over increased by over 431,000 (38%) and the number of people with a limiting long-term illness increased by 1.6 million (16%)³. It is thought that one in five people are providing unpaid care, with the peak age for caring between 50 – 64.
8. The number of older carers is increasing; official estimations are that 1.3 million people aged 65 or over are carers. Whilst the total number of carers has risen by 11% overall since 2001, the number of older carers rose by 35%⁴. It is estimated that we will see a 40% rise in the number of carers needed by 2037. This represents an additional 2.6 million carers, meaning that the carer population could reach 9 million⁵.
9. Whilst most carers want to provide care for their loved ones when they need it, the responsibility for providing care can have wide ranging health, wellbeing and economic impact. National research illustrates that carers experience poorer health than the norm. Carers report that it has an impact on their mental and physical health, yet many carers put off seeking medical help because of the demands of their caring role⁶.
10. The most common issues are fatigue (including lack of sleep), stress, depression and physical strain. Almost three quarters of carers responding to a national survey said they had suffered from stress or depression as a result of caring, whilst 61% said their physical health had declined.⁷ In a separate survey by the Carers Trust, 64% of carers reported disturbed sleep as a consequence of caring. Carers report feeling socially isolated and many lose touch with their families and friends.⁸
11. Many carers find that their financial situations are negatively affected by the impact of caring on their ability to find and retain paid employment. There are 4.27 million carers of working age in the UK; 57% are women and 43% are men. In the Carers Trust survey, over half of those not working said that they wish to do so.⁹ Across the UK, 2.3 million adults (35% of carers) report having given up

² Census (2011)

³ Carers UK, University of Sheffield & University of Leeds, (2015) Valuing Carers – the rising value of carers support.

⁴ Carers UK Facts about carers briefing (2015)

⁵ Carers UK Facts about carers briefing (2015)

⁶ The State of Caring – Carers UK (2018)

⁷ Carers UK State of Caring (2018)

⁸ NHS Digital (2017) Personal Social Services Survey of Adult Carers in England (SACE) 2016-17

⁹ Carers Trust (2016) Facts about carers and the people they care for

work to care and almost 3 million (16% of carers) have reduced their working hours in order to support the person they care for, whilst 20% of carers said they had retired early, or taken a less qualified job.¹⁰

12. There are estimated to be at least 376,000 young adults with caring responsibility aged 16-25, this represents an increase of 28% (52,219) since 2001.¹¹ 56% of young adult carers in college or university are reported to be struggling because of their caring role, Young adults with caring responsibilities appear to be more than four times more likely to drop out of their college or university course than their peers.¹²
13. Children are not exempt from caring. The average age of a young carer in the UK is 12, with some children as young as four undertaking a caring role. The Children's Society report that many young carers remain hidden for a number of reasons, including loyalty to family, stigma, bullying and not knowing where to go for support.¹³ In a survey by the Carers Trust, it was reported that only half of young carers have a designated person at school who recognises that they are a carer and provides support. Nationally, young carers are reported to have missed or cut short many school days every year; on average 48 school days were missed or cut short because of their caring role, each with the associated risk of affecting wellbeing, educational attainment and life chances.

¹⁰ Carers UK State of Caring (2018)

¹¹ Census (2011)

¹² Carers Trust (2016) Facts about carers and the people they care for

¹³ The Childrens Society (2013) Hidden from View

The local context

14. Staffordshire has a population of 868,760, with an adult population of 700,580, which is expected to rise to 705,880 by 2019. During 2016-17, over half of new entrants to the long term social care system were aged over 65¹⁴. The number of people in the county who are aged 85+ will increase seven-fold between 1987 and 2037¹⁵. Over a similar period however, the number of working adults will reduce. By 2030, it is estimated that for every retired adult, just two will be in work, reducing the number in the working age population who may choose to work in the care sector.
15. Together with the increase in the number of elderly people, Staffordshire is experiencing increases in the number of people with long-term conditions, many of which are age related. There are currently 24,000 frail elderly people, and 240,000 people with a long-term condition (including 11,000 people with dementia)¹⁶. Older people are more likely to have co-morbidities, develop conditions such as Age Related Macular Degeneration and are at increased risk of falls, which puts them at increased risk of requiring care and support.
16. In addition to age related conditions, more people in Staffordshire are living with conditions related to lifestyle factors. It is estimated that 69 of every 100 people aged 18+ carry excess weight¹⁷, putting them at higher risk of diabetes, heart disease and stroke. There are significant health inequalities within the county, with the incidence of long-term illness and mortality rates, being higher in more deprived areas.
17. A further factor, and one clearly not just related to Staffordshire, is that technological advances in medicine are keeping people alive longer. Whilst a triumph for modern medicine, it means that as a society, people are living for longer, often with complex conditions and needs.
18. The impact of these trends is that demand for NHS and social care services is increasing, at the same time that funding is reducing in real terms. Staffordshire enjoys almost full employment and for the health and care system this means fewer people available to care for their own relatives and greater employment competition for people who might otherwise enter the health and care workforce: as more people require care, there are fewer people in real terms to provide it.
19. The work that is done by carers becomes ever more crucial and hence we must ensure that they are supported for as long as is practicable and find new and sustainable ways of doing this. To put this into context, if just 20 carer breakdowns resulting in admission to residential care are avoided in Staffordshire, there is a cost avoided to the public purse of c.£0.5m per year¹⁸.

¹⁴ Staffordshire Better Care Fund 2017-19

¹⁵ Staffordshire Better Care Fund 2017-19

¹⁶ Staffordshire Better Care Fund 2017-19

¹⁷ Staffordshire Health and Wellbeing Strategy 2018-23

¹⁸ Based on a weekly cost for adult residential care of £484 per week

20. In 2011, 98,442 people in Staffordshire identified themselves as providing unpaid care for another person. Of these, 23% provide 50 hours or more per week. The gender split indicated that 57% of these carers are female, which aligns with the national trend of (58%)¹⁹. Recent analysis shows that the number of people identified as carers is rising at the rate of 6% per annum. This means that in Staffordshire, the true number of carers may be nearer 148,000²⁰.
21. Unfortunately, children are not absent from the picture of caring. The 2011 census identifies that there are 1,696 Young Carers in Staffordshire but national statistics suggest that this is a significant under-representation, particularly since census information is completed by adults and not by children. Nonetheless, in Staffordshire, this represents an increase of 15% since the 2001 census.
22. In Staffordshire, the number of young carers we know about is small. Many are not known until they, or their families, identify other issues which require intervention from statutory services. The Council, CCGs and our partners must get better at identifying and supporting young carers, so that they are protected from inappropriate levels of caring and thus have improved life chances, the opportunity to lead fulfilling lives and to contribute to society.

¹⁹ Census 2011

²⁰ Healthwatch England: What's it like to be a carer October 2018

Legislation and national strategies

Adult Carers legislation

23. The Care Act 2014 gave carers, for the first time, parity of esteem with those they care for. The principle of wellbeing, which is central to the Act, applies equally to carers.
24. Within the Act, Local Authorities have a statutory duty to:
- Provide information, advice and guidance to carers, making this available in a range of formats
 - Provide services to carers (general duty) which prevent, reduce or delay the need for support from the Local Authority
 - Offer carers an assessment based on *the appearance of need*; those who meet eligibility criteria as set out in the Act must be offered a support plan setting out how those needs will be met
 - Carers who have 'substantial difficulty' in participating in the assessment process must be offered an advocate if they need and are eligible for one
 - Parent carers whose cared for child is approaching adulthood must be supported through this transition
 - Carers who want to must be supported to maintain or re-enter education, training or employment

Young Carers legislation

25. The Council is committed to ensuring young carers are identified and supported. Young carers are entitled to a fulfilling childhood, but all too often can experience poorer mental and physical health and miss out on opportunities in education and employment as a result of their caring responsibilities.
26. The **Children and Families Act 2014** places emphasis on the needs of the whole family, including the role which young carers play, meaning that when a young carer is identified, the needs of the whole family, including adults, are considered. It significantly strengthened the law (over previous Children Act 1989 provisions) for young carers by stipulating:
- A strategic duty to take steps to *identify* the young carers in their area who may have needs for support
 - All young carers under the age of 18 have a right to an assessment regardless of who they care for, what type of care they provide or how often they provide it (an assessment was only previously a requirement under the Children Act 1989 if the young person specifically requested it)
 - A young carer has the right to an assessment *based on the appearance of need* – which means that young carers will no longer have to request an assessment or be undertaking a 'regular and substantial' amount of care - an assessment can also still be requested as per the Children Act 1989)
 - Recognise that circumstances affect the whole family and that, where there are needs for support, these must either be met under the Children Act 1989 (Section 17), or the local authority must ensure that the needs of the cared for person are met to provide a level of care and support which prevents the young carer from carrying out inappropriate levels of care

- The Local Authority has a duty to provide support planning for a young carer as they approach adulthood
- Young Carers' (Needs Assessments) (England) 2015 require that assessments are:
 - Appropriate and proportionate to the needs of the Young Carer (Reg 2)
 - Carried out by trained staff with appropriate knowledge and skill (Reg 3)

27. The **Care Act 2014** reinforces these rights by requiring that local authorities:
- Take a whole family approach to assessing and supporting adults so that young carer's needs are identified when undertaking an adult or adult carer's needs assessment
 - Should ensure that adult's and children's social services work together to ensure assessments are effective

28. This means when a child is identified as a young carer, the needs of everyone in the family should be considered and vice versa. This should trigger action from both children's and adults services – assessing why a child is caring, what needs to change and what would help the family to prevent children from taking on inappropriate levels of this responsibility in the first place.

NHS Commitment to Carers 2014

29. NHS England has developed 37 commitments against eight priorities:
- Raising the profile of carers
 - Education, training and information
 - Service development
 - Person-centred, well-co-ordinated care
 - Primary Care
 - Commissioning support
 - Partnership links
 - NHS England as an employer

The NHS Long Term Plan

30. The NHS Long Term Plan states that carers will benefit from greater recognition and support. It acknowledges that, with an ageing population, increased long term conditions, promoting wellbeing and preventing ill health as well as providing better support for carers, are critical to the future of the NHS.
31. The plan states the NHS will improve how unpaid carers are identified and strengthen support for carers to address their individual health needs, through introducing best-practice Quality Markers for primary care that highlight best practice in carer identification and support.

CCG Improvement and Assessment Framework (IAF)

32. The Integrated Assessment Framework was introduced in 2016 and aligns key objectives and priorities. CCGs are required to report on a suite of indicators; for carers they are asked to report on the proportion of carers with a long-term condition who feel supported to manage their condition.

33. More carers present to NHS services than to social care and the Council and CCGs will work together to ensure that there are better systems for identification and support, preventing and reducing acuity and crisis.

Other national influencing factors

34. The Department of Health undertook a national Call to Evidence in 2016. This resulted in the Department of Health (DoH) Carers Action Plan 2018-20²¹, which identifies the following five priorities to support carers:
1. Systems which work for carers
 2. Employment and financial wellbeing
 3. Supporting young carers
 4. Recognising and supporting carers in the wider community and society
 5. Building research and evidence to improve outcomes for carers
35. The Action Plan puts a focus on current delivery, ahead of the social care Green Paper. The Action plan sets out that progress will be reviewed by Government against the following:
- Increase the number of employers who are aware of caring and the impact this has on their workforce
 - Support health and social care professionals to be better at identifying, valuing and working with carers
 - Improve access to appropriate support for carers, including respite care and carers breaks
 - Improve the evidence base on carers to inform future policy and decisions
 - Ensure that the needs of carers are recognised in relevant government strategies such as Fuller Working Lives, Improving Lives: the Future of Work, Health and Disability and Loneliness

Healthwatch England

36. Healthwatch's report²² outlines that people do not always get the support they need and the conclusions and recommendations from the report are:
- Local authorities should start routinely collecting service user level data on waiting times for carers' assessments and services and that this data should be published.
 - The Department of Health and Social Care should develop guidance for councils on fulfilling their statutory information and advice services in an accessible and consistent manner.
 - Local authorities and CCGs should have an understanding of the number of carers in the local area, developing a profile of their level of need so that they can consistently identify carers before they reach a point of crisis. Support services should be planned and commissioned around this data, focusing on addressing current gaps in provision and unmet need.

²¹ DoH Carers Action Plan 2018-20 Supporting Carers Today

²² Healthwatch England What's it like to be a carer October 2018

Achievements and challenges

Achievements

37. Since 2015, there have been a number of improvements for carers in Staffordshire, including:
- The development of a new carers support service, in response to carers telling us that they wanted to be able to access information in one place and talk to someone to explain their experiences and needs
 - The provision of information and advice for carers through a digital solution, Staffordshire Connects and First Contact Service
 - The opportunity for carers to have separate or joint assessments, personalised to identify and respond to their needs
 - The introduction of assessments and support for young carers, delivered by The Carers Hub
 - The development of the 'You Can' programme for young carers in Staffordshire Schools
 - Participation in a national pilot focussed on how working carers can be better supported: Staffordshire County Council and Stoke on Trent City Council were one of nine councils in the Employers for Carers pilot project, funded between 2015 and 2017 by the Department of Health and Social Care, Government Office for Equalities and the Department of Health to examine and propose solutions to issues faced by carers trying to juggle working and caring.

Challenges

38. Against the context of reduced funding and increased demand, we need to improve how we work together, including with community partners. More work needs to be done on understanding local assets which could support carers in their communities, and where capacity needs to be developed. We are therefore undertaking work to help us understand the support available to carers, across each of the eight districts in Staffordshire.
39. As part of our Supportive Communities initiative, we aim to understand and promote local support options for citizens, particularly those in our communities who are most vulnerable. Carers are a one such group and hence carer support has been highlighted as a key theme within this work. This will, in turn, highlight local gaps in provision and inform understanding of what needs to be developed so that there is a credible local offer for meeting carer needs.
40. **Additionally, we need to:**
- Improve the way statutory agencies work together to improve systems for carers
 - Get better at identifying carers so that we help to avoid carer crisis
 - Be better at recognising and valuing the work that carers do
 - Improve our identification and support for young carers, who remain a largely hidden group

- Improve our digital platform for carers, including the availability and range of information and offer on-line assessments for those who want them
- Support our communities to become carer aware
- Build on the work done in the Employers for Carers pilots
- Make carers everyone's business by developing caring communities and supporting the development of capacity

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Our vision for carers

41. We will work collaboratively with partners in statutory services, business, the third sector and community groups, to develop a society which is carer friendly and which values and supports carers to fulfil their caring role and maintain their health and wellbeing.
42. This complements the overall vision of the Staffordshire Health and Wellbeing Strategy, *Living Well in Staffordshire*, which sets the following aspiration:

“Staffordshire will be a place where improved health and wellbeing is experienced by all. It will be a good place to live. People will be healthy, safe and prosperous and will have the opportunity to grow up, raise a family and grow old, as part of strong, safe and supportive communities.”
43. The Council and the CCGs have to consider how they can support its citizens and patients, including carers. This involves understanding how and why people access support, providing effective support in a crisis, designing effective prevention and enabling people to support themselves.
44. Our aspiration for carers is a society where caring is everyone’s business and carers are supported to help themselves. Therefore, we have placed emphasis on prevention to avoid, reduce or delay dependency on health and care services by increasing the resilience of individuals and communities. This Strategy will support the ongoing development of the communities where people live and the opportunities presented by technology to support carers, and we will improve the range and media of information, enabling them to keep well and manage their caring role safely.
45. We need to ensure that people understand that if they take control of their lifestyles and plan for their older age, they can reasonably expect more years of health and independence and avoid the need for care for longer. This will be addressed in wider strategies and plans which are separate but inter-related and therefore, complementary to this one.
46. We will help those carers who are eligible and provide support in times of crisis: we will ensure that they receive the right support, when they need it and develop plans to help reduce or delay longer terms support needs. We will do this in a way which is safe and financially sustainable.
47. We must not overlook young carers who provide care to family members and can miss out on a fulfilled childhood as a result. Presently, in Staffordshire, we only know about them when they or their families identify themselves. Many young carers are therefore ‘hidden’ and we do not know as many as we should. We must therefore improve the way we work with schools and other agencies who come into contact with children and young people, to get better at identifying young carers and help them to identify themselves and receive the support they need.

48. In Staffordshire, we want to prevent children and young people taking on inappropriate levels of care which impact negatively on their health, education, social interaction and ultimately, their chances in life. To do this, services which work with children and adults must work together in a more joined up, collaborative way, which addresses the needs of the whole family.

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Our priorities for carers

49. In response to legislative requirements, national themes and local knowledge, we have developed the following seven priorities:

- Priority 1: Identifying carers
- Priority 2: Improving information, advice and guidance
- Priority 3: Staying healthy: maintaining carer health and wellbeing
- Priority 4: A life outside of caring
- Priority 5: Assessment and support
- Priority 6: Crisis Management
- Priority 7: Recognition and value

Priority 1. Identifying carers

50. Many carers provide care within a family network and do not want or need additional support. However, some need support in order to prevent the escalation of their own needs, and those of the person they look after. Identifying carers early will help to ensure they get the help they need, keeping them well for longer and helping to avoid crisis which necessitates involvement from statutory services.

51. To achieve this, we will

- Train professionals in NHS, social care and other agencies to identify carers (particularly vulnerable carers who don't self-identify) in the course of their work and ensure that, where appropriate, they understand where to get information and advice.
- Focus on improved identification of young carers in schools and services which work directly with families
- Help GPs, often the starting point for a carer's journey, recognise carers and know where to refer them for support in their communities.
- Optimise opportunities to raise the profile of caring to help people to self-identify, such as Carers Week and Carers Rights Day

Priority 2. Improving information, advice and guidance

52. Information is a key requirement for carers and engagement and national surveys have identified this as an important element in sustaining caring. Good information will help to avoid, reduce or delay the need for assessment and more intensive support. However, all too often, Carers do not get the right information at the right time. Carers have told us they want to be able to access information as and when they need it. This needs to be easy to find and access and be clear. They also want to know when changes are made to services and understand what this means for them and the people they care for.

53. To achieve this, we will:

- Help carers access information about a range of entitlements to help them in their caring role
- Provide information in a range of formats, making sources of information, advice and guidance easy to find and navigate

- Develop and improve digital resources as the primary source of information, including on-line information
- Use sources of information which are consistent, credible and reliable
- Ensure that carers will be able to speak to someone if they need to
- Support carers to understand the implications of the cared for person's diagnosis when they are diagnosed and know where to get help and support
- Work to a principle of 'no wrong door': statutory agencies in particular will understand their respective roles, the types of support available to carers and will keep carers up to date on changes to their operations
- Support young carers to obtain information safely and provide information which is tailored to the needs of a child or young person
- Acknowledge and develop the role of the third sector and community assets in providing peer support
- Make information for professionals easy to access and signpost to for carers they are working with

Priority 3. Staying healthy - Maintaining Carer Health and Wellbeing

54. Our carers deserve to remain in good health and experience quality of life, including juggling their caring role with other responsibilities, such as working or bringing up a family. For young carers, poor health impacts on their life chances. It is especially important therefore that they should have a fulfilled childhood, including an education and have opportunities to achieve their aspirations. We want carers to be supported to maintain good physical and mental health.

55. To achieve this, we will:

- Adopt as a principle that carers can expect to experience improved health outcomes and have a good quality of life
- Encourage carers to be known to their GP in order that appropriate support can be offered when required.
- Ensure that schools and the Council know who their young carers are and that young carers know who to go to if they need support
- Train school and staff from other agencies to be alert to issues affecting the wellbeing of young carers and to respond appropriately
- Develop a culture where professionals working with cared for, acknowledge and respond to the needs of carers to maintain their health and wellbeing before the point of crisis
- Ensure the assessment process fully considers the impact of caring on the wellbeing of carers, identifies carers' eligible needs and responds to them appropriately
- Ensure that, should a crisis occur, carers are supported promptly
- Make reasonable adjustments to NHS and Council services to enable carers to access services to meet their own needs and the needs of those they care for
- Make safeguarding paramount

Priority 4. A life outside of caring

56. Carers should be able to expect to be able to maintain their social relationships with family, friends and others. Remaining socially connected has an impact on our mental and physical health, therefore, identifying and developing opportunities for carers to meet others, either in the same situation or otherwise, is a key priority.

57. To achieve this, we will:

- Support carers to be able to access social and leisure interests away from their caring role as they choose
- Identify and put carers in touch with other carers with the same issues and concerns and establish new connections;
- Promote digital solutions such as social media, to enable carers to form and sustain new networks of support
- Help hard to engage or reach carers, such as those in rural areas, to be better socially connected and experience fewer feelings of isolation
- Ensure that young carers have an education, the opportunity to experience activities outside school hours and to develop and sustain friendships with their peers
- Help carers who want to access education, work and training to do so
- Help working carers to remain in work and have a work life balance to enable them to work, care and maintain their wellbeing
- Help carers who have eligible needs to have relief from caring to enable them to maintain their social and family networks

Priority 5. Assessment and support

58. This Strategy supports the discharge of the council's legal duties to adult carers, parent carers and young carers under the Care Act 2014 and the Children and Families Act 2014 respectively, and to parent carers where their child is approaching adulthood and young carers who are approaching adulthood.

59. To achieve this, we will:

- Explain carers rights to an assessment and routinely offer one *on the appearance of need*, explaining the benefits of an assessment to the carer
- Build upon the delivery of carers assessments and support under the legislation through refresher training and awareness raising
- For all carers offer information advice and guidance, as well as signposting to support from their community.
- Where an assessment identifies eligible needs, we will look to meet these with support from their local community, avoiding the need for statutory provision wherever possible
- Work with other agencies so that they are aware of carers rights to an assessment and know how to refer a carer for an assessment
- Whenever possible, recognise carers as experts and essential contributors to the assessment of the person they care for
- Improve our identification, referral, assessment pathways for Young Carers and offer appropriate levels of support, taking into account the age and

needs of the young carer, its impact on other areas of their life and the issues affecting those they provide care for

- Adopt a whole family approach to assessment across the whole system, with practitioners from all parts of the system working in a spirit of collaboration so that the needs of adult carers, young carers and those they care for needs are identified and responded to appropriately
- Improve our assessment pathways for parent carers whose child is preparing for adulthood and for young carers approaching adulthood
- Undertake work to provide an option of a digital self-assessment form which carers can complete at a time to suit their caring commitments
- Record assessment information in a timely way, making sure it is comprehensive, accurate, stored safely and shared according to the standards required under data protection legislation so that the need for carers to repeat their story is kept to a minimum.

Priority 6. Crisis management

60. Though many carers manage their caring responsibilities independently of help from statutory agencies and have established family networks whom they can call on in a crisis, some do not have robust contingency arrangements and may need support. The Council and its partners will provide support to help carers to plan effectively should a crisis occur and provide a prompt response and support in the event of such an eventuality.

61. To achieve this, we will:

- Have arrangements in place to help carers to plan for a crisis, using their own resources wherever possible
- Ensure that carers know where they can get help in the event of a crisis
- Ensure that carers who are eligible can access a break from caring and provide this in a cost-effective manner, doing the best we can within the resources available
- Ensure that professionals working with families deploy a whole family approach, can recognise a potential crisis and help to put arrangements in place to prevent one occurring
- Have robust arrangements so that, in the event of a crisis, responses from the Council and the NHS are prompt, provide reassurance and respect the feelings of the carer and the person they care for
- Make sure that the carer is involved, where practicable, (and the person they care for has capacity and consents) in any forward planning once the crisis situation has subsided
- Make safeguarding a priority at all times

Priority 7 Recognition and value

62. The Department of Health cites the importance of 'working with carers as partners and taking a collaborative approach enables the contribution of carers to be a positive element in working towards a support plan'. We will actively engage with carers and their representatives throughout the assessment process, both in clinical and social care settings. We will involve and consult with carers when we

develop or review our services. We will ensure our carers are recognised and valued for the work they do.

63. To achieve this, we will:

- Use the experience and knowledge of carers as expert partners, ensuring that pathways and processes naturally involve seeking the views of carers in the assessment and review process
- Involve a paid advocate where the carer is eligible
- Maintain a dialogue with carers to ensure the needs of the cared for person are met
- Involve carers in clinical assessments and reviews wherever possible
- Involve carers in discharge planning
- Ensure that we involve carers in reviews, design and redesign of health and care services so that user experience is taken into account
- Establish a newly constituted carer representative body which is supported by partners to obtain carers views and address issues of significance to carers
- Use opportunities to understand the experiences of carers and use these to make improvements
- Use opportunities including Carers Week²³ and Carers Rights Day²⁴ to promote and recognise the work that carers do

²³ Carers UK national campaign held annually in June

²⁴ National campaign held annually in November

Governance

64. Once approved, a Carers Delivery Plan will be agreed, so that this Strategy can be implemented. This will set out the detailed actions and timescales to achieve the aims set out in the Strategy.
65. A revitalised Carers Partnership Board will be developed which will oversee the implementation across partner organisations. This may be supported by smaller groups responsible for specific work-streams within the Delivery Plan.
66. The Carers Partnership Board, involving carer representatives, will report to the newly formed Joint Commissioning Board, to ensure accountability and visibility of the work across the two main statutory partners responsible for overseeing the delivery of the Strategy.

DRAFT

References

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The Children's Society (2013) Hidden from View

Staffordshire Better Care Fund 2017-19

The Care Act 2014 [Link](#)

Department of Health Carers Action Plan 2018 *Supporting Carers Today* [Link](#)

Staffordshire Health and Wellbeing Strategy [link](#)

Sustainability and Transformation Plan *Together We're Better* [Link](#)

Healthwatch England Report *What's it like to be a Carer October 2018* [Link](#)

Personal Social Services Survey of Adult Carers in England

NHSE Annual Carers Survey [link](#)