



Date: Monday, 30 January 2023

Time: 10.00 am

Venue: Shrewsbury/Oswestry Room, Shirehall, Abbey Foregate, Shrewsbury, Shropshire, SY2 6ND

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## HEALTH & ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

### TO FOLLOW REPORT (S)

#### 8 **Carers Strategy** (Pages 1 - 56)

To receive the draft Carers Strategy and consider and provide feedback to inform the final version, report to follow

Report from Margarete Davies – Care Support Team Manager and Laura Tyler  
– Assistant Director Joint Commissioning

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## Committee and Date

Health and Adult Social Care Overview and Scrutiny Committee

30 January 2023

Item

All Age Carer Strategy Review 2022-2027

Public

**Report author** – please enlarge (100%)\* the "healthy" icon this reports relates to. Only chose the single Healthy icon which predominantly applies to this report.  
\*Right click on the icon, go to Size & Position, change Height to 100%



## Report heading

<b>Responsible Officer:</b>	Laura Tyler		
email:	Laura.Tyler@shropshire.gov.uk	Tel:	
<b>Cabinet Member (Portfolio Holder):</b>	Cecilia Motley Communities, Adult Social Care and Health		

### 1. Synopsis

The main purpose of our All-Age Carer Strategy is to provide a clear framework to the commissioning and provision of services that will support unpaid and family carers of all ages to:

- Identify as a carer,
- Maintain their own health and wellbeing,
- Plan for their future
- Participate in family and community life.

The strategy seeks to address local issues and strengthen integration of health, social and voluntary services to enable the priorities to be achieved to improve the lives of carers. Additionally, it sets out a plan on how we will maintain our progress and enhance those areas where we need to improve.

## 2. Executive Summary

2.1 The all-age carer strategy will support the achievement of outcomes in the Shropshire Plan, specifically relating to the priorities within healthy people:

This report will provide an overview of the All-Age Carer Strategy (AACS) Review 2022-2027 and will detail the priorities Carers have told us are most important to them to support them in their caring role.

This is an all-age carer strategy ensuring all carers are recognised, whatever their age, caring role or where they live in Shropshire.

The document will detail how we intend to work in partnership with our local strategic partners, carers and communities, ensuring everyone understands their role in making a difference to Shropshire carers' health and wellbeing, in making Shropshire a carer friendly place to live.

2.2 Shropshire Council recognise the significant role that unpaid and family carers play in supporting the Health and Social Care system in Shropshire and are committed to working to:

- Develop services that support carers and ensure they receive appropriate levels of support that is easy to access from whichever part of the sector carers first have contact with.
- Involve carers in service design when developing services intended to improve their health and wellbeing.
- Empower carers to create their own goals and aspirations and have a life outside of caring.

2.3 Our AACS review will support this by:

- a) Providing an action plan to supplement the strategy demonstrating how we will deliver the priorities and what measures are in place to monitor success.
- b) This is a live document and will be hosted on Shropshire Choices.
- c) The strategy and action plan will be monitored by the Shropshire Carers Partnership Board, to ensure it is coordinated and complements the wider agenda for supporting carers in Shropshire.
- d) The AACS and action plan will feed into local service plans and the Market Position Statement -currently being drafted.
- e) The action plan will utilise council initiatives to support carers, such as the robust support to Shropshire residents around the cost of living.

### **3. Recommendations**

3.1 The committee is asked to note the report and inform any additions to the current Draft All Ages Carers Strategy 2022-27 in appendix 1.

## **Report**

### **4. Risk Assessment and Opportunities Appraisal**

4.1 The council has a duty under the Care Act 2014 to support adult carers and put them on equal footing as people who are vulnerable and need a care act assessment.

4.2 The Care Act 2014 also puts a duty on the council to conduct transition assessments for young carers and parent carers when the child turns 18 years old and where there is a likely need for care and support.

4.3 The strategy has been co-produced with carers, former carers and key organisations representing carers; these include: PACC; Shropshire Health Watch, Crossroads Together young carer support; Alzheimer Society carer peer groups and AIMS Network for Carers

### **5. Financial Implications**

5.1 No additional budget pressures have been identified with the development of the All Age Carers Strategy. Further resources may be required once the Action plan is developed, however any actions will need to be delivered within existing resources.

### **6. Climate Change Appraisal**

6.1 The Council has declared a climate emergency and is committed to achieving 'net-zero' carbon impact by 2030. As procured goods and services make up a significant proportion of the Council's total carbon footprint, it is vital that providers understand the carbon impact of the services they provide and commit to working with the Council to help us achieve 'net-zero'. This strategy will not have a negative impact on climate change.

### **7. Background**

7.1 In the Census 2011 - 33,360 residents in Shropshire identified as a carer. The figures for Census 2021 are due to be released on 19/1/2023 and we expect these figures to have increased.

## 7.2 Plans to meet the demand

- Digital Support for carers contract –to identify carers previously unknown to services. 60% of carers Mobilise are in contact with are new to all services
- By working with local strategic partners, carers, and the community to ensure everyone understands their role in making a difference to Shropshire carers' health and wellbeing, in making Shropshire a carer friendly place to live.

## 7.3 Table of carers accessing information and support 2022

<b>Carer appointments at LTL hubs 2022</b>	<b>530</b>
<b>Carer assessments completed Apr 22 – Dec 22</b>	<b>452</b>
<b>Carers on Carer Register</b>	<b>981</b>
<b>Mobilise data Dec 21- Dec22</b>	

<b>Discover – unique visits to Mobilise site</b>	<b>Engage – unique hits on information e.g. guides, checklists</b>	<b>Support – unique no: attending virtual cuppas; coaching etc</b>
<b>13020</b>	<b>1719</b>	<b>679</b>

7.4 The all-age carer strategy will support the achievement of outcomes in the Shropshire Plan, specifically relating to the priorities within healthy people:

**Tackling inequalities** – by developing an all-age carer strategy to:

- Ensure all carers are recognised, whatever their age, caring role or wherever they live in Shropshire acknowledge all carers should be treated equally however recognising that everyone's caring role is unique, and each carer may have differing needs.

**Early interventions** – by increasing awareness and identification of carers of all ages within the whole Health and Social Care sector, including self-identification, so that information, advice and support can be given at an earlier stage to:

- improve carers experience of caring – the right information at the right time help to prevent crisis allow carers to achieve their full potential and lead their best lives.

**Partnerships** – by working with local strategic partners, carers, and the community to:

- ensure carers receive appropriate levels of support that is easy to access from whichever part of the sector carers first have contact with ensure everyone understands their role in making a difference to Shropshire carers' health and wellbeing, in making Shropshire a carer friendly place to live.

**Self-responsibility** – by empowering carers to:

- create personal goals and aspirations
- provide support to progress them have the confidence to take responsibility, own their plan and help them to do things for themselves.

7.5 In June 2022, Carers UK reported the numbers of unpaid carers remains higher than before the Coronavirus pandemic with 1 in 5 UK adults now providing support to a relative, close friend or neighbour and almost everyone will know family members, friends and colleagues who are carers. Carers come from a range of backgrounds and age groups.

7.6 This is an all-age strategy which covers all carer groups, and while all carers should be treated equally, it recognises that everyone's caring role is unique, and each carer may have differing needs

7.7 Following findings from the Carers Review in 2019 and engagement with partners and carers, the aim for this Shropshire All-Age Carers Strategy is: -

To identify, support and enable carers of all ages in Shropshire to remain healthy, fulfil their own potential and balance their caring responsibilities with a life outside of caring.

7.8 Carers have told us what is most important to them to support them in their caring role. Their views have been used to decide upon the outcomes that will be most important for us to achieve in the next five years.

7.9 This has led to seven key priority areas which are as follows:

Priority 1.	Early identification and support for carers of all ages.
Priority 2.	Building carer friendly communities in Shropshire where carers are recognised, listened to and respected.
Priority 3.	A life of their own outside of their caring role – supporting carers to balance their caring responsibilities with their own aspirations and needs.
Priority 4.	Carers have good physical, mental, and emotional wellbeing
Priority 5.	Access to timely, up to date information and advice in a variety of formats that is easy to read and understand and readily available.
Priority 6.	Co-ordinated services within the whole Health and Social Care Sector
Priority 7.	Transitions during the carer role. Ensuring carers, of any age, are supported through the stages of their caring role

7.10 The implementation of this strategy will be supported and advised by the Shropshire Carers Partnership Board (SCPB), which includes representatives from carers, statutory services, the voluntary and community sector, and health. Regular progress reports will be made to the Shropshire Health and Well-Being Board.

7.11 The table below sets out which all age carer strategy priorities are aligned to the 4 priorities of the Shropshire Plan 2022-25 and will support the achievement of outcomes in the 4 'Healthy' priority areas, contributing to our vision of 'Shropshire living the best life'.

Shropshire Plan 2022-2025 Priorities	Aligned to the following All-age carer strategy priorities
<p><b>Healthy People</b> Strategic Objectives</p> <ul style="list-style-type: none"> <li>• Tackle inequalities</li> <li>• Early intervention</li> <li>• Partnerships</li> <li>• Self-responsibility</li> </ul>	<p>Early identification and support for carers of all ages. Building carer friendly communities in Shropshire where carers are recognised, listened to and respected. A life of their own outside of their caring role – supporting carers to balance their caring responsibilities with their own aspirations and needs. Carers have good physical, mental, and emotional wellbeing. Access to timely, up to date information and advice in a variety of formats that is easy to read and understand and readily available. Co-ordinated services within the whole Health and Social Care Sector. Transitions during the carer role. Ensuring carers, of any age, are supported through the stages of their caring role.</p>
<p><b>Healthy Economy</b> Strategic Objectives</p> <ul style="list-style-type: none"> <li>• Skills and employment</li> <li>• Safe, strong, and vibrant destination</li> <li>• Connectivity and infrastructure</li> <li>• Housing</li> </ul>	<p>A life of their own outside of their caring role – supporting carers to balance their caring responsibilities with their own aspirations and needs. Access to timely, up to date information and advice in a variety of formats that is easy to read and understand and readily available. Co-ordinated services within the whole Health and Social Care Sector Transitions during the carer role. Ensuring carers, of any age, are supported through the stages of their caring role.</p>
<p><b>Healthy Environment</b> Strategic Objectives</p> <ul style="list-style-type: none"> <li>• Climate change strategy and actions</li> <li>• Safe communities</li> <li>• Natural environment</li> </ul>	<p>Carers have good physical, mental, and emotional wellbeing. Access to timely, up to date information and advice in a variety of formats that is easy to read and understand and readily available.</p>



<p><b>Healthy Organisation</b> Strategic Objectives</p> <ul style="list-style-type: none"> <li>• Best workforce</li> <li>• Absorb, Adapt, Anticipate</li> <li>• Communicate well</li> <li>• Align our resources</li> <li>• Strong councillors</li> </ul>	<p>Early identification and support for carers of all ages. Building carer friendly communities in Shropshire where carers are recognised, listened to and respected. A life of their own outside of their caring role – supporting carers to balance their caring responsibilities with their own aspirations and needs. Access to timely, up to date information and advice in a variety of formats that is easy to read and understand and readily available. Co-ordinated services within the whole Health and Social Care Sector.</p>
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## 8. Additional Information

8.1 Adult carer support in Shropshire has traditionally been outsourced to an external provider however the service was brought in-house from 01/2/2021.

- The (Adult) Carer Support team is made up of 3.4 FTE carer support practitioners (CSP); a team coordinator, Information officer and Shropshire Carer Manager.
- The service offers carers:
- 1:1 support – working with carers to explore the options available to them as a Carer, and support for carers to follow their choices
- Information and advice, and signposting to specialist services e.g. welfare benefits, advocacy
- Support line – operating Mon – Fri 9-00am till 5-00pm
- Check in and chats – minimum 6 monthly to maintain carer wellbeing and prevent crisis
- Assistance with planning ahead
- Peer support groups
- Events and activities
- Carer Register – to share information quickly, Emergency/ID card issued and emergency/contingency plan
- Carer Feedback – co-produced with a carer. An opportunity for carers to help shape services by giving their feedback on their experiences throughout all of Health and Social care, both what went well and what may need improving.

8.2 The timeline for the completion of the strategy is below:

- 30 January 2023 – Health and Adult Social Care Overview and Scrutiny Committee meeting
- January 2023 –finalise draft and send for consultation
- February 2023 –finalise draft based on consultation responses
- February 2023 – develop action plan
- March/April 2023 – Cabinet
- April 2023 – new AACS implemented

## 9. Conclusions

9.1 A clear All Age Carers Strategy is an important document which will inform the future plan to support Shropshire's carers health and wellbeing.

**List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)**

All Age Carer Strategy for Shropshire 2017-2022 – attached as appendix 2

**Appendices** [Please list the titles of Appendices]

**Appendix 1: Draft All Age Carer Strategy 2022-2027**

**Appendix 2: All Age Carers Strategy for Shropshire 2017 – 2022**

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# Shropshire All Age Carer Strategy 2022- 2027 Review





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# 1 Foreword

## 2 Executive Summary

In June 2022, Carers UK reported the numbers of unpaid carers remains higher than before the Coronavirus pandemic with 1 in 5 UK adults now providing support to a relative, close friend or neighbour and almost everyone will know family members, friends and colleagues who are carers. Carers come from a range of backgrounds and age groups.

This is an all-age strategy which covers all carer groups, and while all carers should be treated equally, it recognises that everyone's caring role is unique, and each carer may have differing needs


Following findings from the Carers Review in 2019 and engagement with partners and carers, the aim for this Shropshire All-Age Carers Strategy is: -

'To identify, support and enable carers of all ages in Shropshire to remain healthy, fulfil their own potential and balance their caring responsibilities with a life outside of caring.'

Carers have told us what is most important to them to support them in their caring role. Their views have been used to decide upon the outcomes that will be most important for us to achieve in the next five years.

This has led to seven key priority areas which are as follows:

Priority 1.	Early identification and support for carers of all ages.
Priority 2.	Building carer friendly communities in Shropshire where carers are recognised, listened to and respected.
Priority 3.	A life of their own outside of their caring role – supporting carers to balance their caring responsibilities with their own aspirations and needs.
Priority 4.	Carers have good physical, mental, and emotional wellbeing
Priority 5.	Access to timely, up to date information and advice in a variety of formats that is easy to read and understand and readily available
Priority 6.	Co-ordinated services within the whole Health and Social Care Sector
Priority 7.	Transitions during the carer role. Ensuring carers, of any age, are supported through the stages of their caring role



The strategy has been developed to provide an outline of a holistic approach to supporting carers and will support the achievement of outcomes in the Shropshire Plan 2022-25, particularly relating to the strategic objectives within the priority Healthy People:

- **Tackling inequalities –**  
by developing an all-age carer strategy to:
  - a) ensure all carers are recognised, whatever their age, caring role or wherever they live in Shropshire
  - b) acknowledge all carers should be treated equally however recognising that everyone's caring role is unique, and each carer may have differing needs.
  
- **Early interventions –**  
by increasing awareness and identification of carers of all ages within the whole Health and Social Care sector, including self-identification, so that information, advice and support can be given at an earlier stage to:
  - a) improve carers experience of caring – the right information at the right time
  - b) help to prevent crisis
  - c) allow carers to achieve their full potential and lead their best lives.
  
- **Partnerships –**  
by working with local strategic partners, carers, and the community to:
  - a) ensure carers receive appropriate levels of support that is easy to access from whichever part of the sector carers first have contact with
  - b) ensure everyone understands their role in making a difference to Shropshire carers' health and wellbeing, in making Shropshire a carer friendly place to live.
  
- **Self-responsibility –**  
by empowering carers to:
  - a) create personal goals and aspirations
  - b) provide support to progress them
  - c) have the confidence to take responsibility, own their plan and help them to do things for themselves.

The implementation of this strategy will be supported and advised by the Shropshire Carers Partnership Board (SCPB), which includes representatives from carers, statutory services, the voluntary and community sector, and health. Regular progress reports will be made to the Shropshire Health and Well-Being Board.

### 3. Shropshire Carers Partnership Board

The Shropshire Carers Partnership Board (SCPB) has a strategic role in overseeing the development, commissioning, and implementation of services for unpaid carers in Shropshire, whatever their age, to ensure carers are supported. Meetings are quarterly and are usually blended, via MS Teams and face to face.

It is important that carers, communities, the voluntary sector and health organisations are part of the Board so that:

- key issues facing unpaid carers are understood and can be addressed
- carers expert knowledge has a role in co-producing how services intended to improve their health and wellbeing are designed and shaped.
- the sector is working cohesively and reducing duplication
- all areas within the health and social care sector are aware of services and new developments to support carers.

### 4. Purpose of the Strategy

The main purpose of our All-Age Carer Strategy is to provide a clear framework to the commissioning and provision of services that will support carers of all ages to:

- Identify as a carer,
- Maintain their own health and wellbeing,
- Plan for their future
- Participate in family and community life.

The strategy seeks to address local issues and strengthen integration of health, social and voluntary services to enable the priorities to be achieved to improve the lives of carers. Additionally, it sets out a plan on how we will maintain our progress and enhance those areas where we need to improve.

### 5. Who is the Strategy for?

Our Vision is:

‘To identify, support and enable carers of all ages in Shropshire to remain healthy, fulfil their own potential and balance their caring responsibilities with a life outside of caring.’



This strategy is for all unpaid and family carers who provide support to an individual who lives in Shropshire and may be ill, frail, with disabilities, have poor mental health or drug and alcohol problems, meaning they're unable to manage without this care and support.

It includes adult carers, working carers, parent/family carers, young adult carers and young carers under 18 and recognises that all carers have a diverse and unique range of needs, priorities and interests.

## 6. Who Is a Carer?

A 'carer' is an adult who provides or intends to provide care for another adult without pay (an 'adult needing care' s.10 *Care Act 2014*)

A 'Young Carer' is a person under 18 who provides or intends to provide care for another person s.96 *Children and Families Act 2014*



Carers may not recognise themselves as carers and may prefer to continue to identify primarily as a husband, wife, partner, sibling, parent, child or friend rather than a carer. It is important for carers to consider themselves carers' so their role can be recognised, and they are able to access advice and support they may need.

A 'parent carer' means a person aged 18 or over who provides care for a disabled child for whom the person has parental responsibility s.97 *Children and Families Act 2014*

Source: Care Act 2014 and Children and Families Act 2014

# 7. Carer Demographics

## Carer Demographic Census 2021

Page will be updated with Census 2021 information when available from the Office of National Statistics.

Initial broad data results from the Census 2021 issued 19 January 2023 shows the following:

- 29, 448 individuals identified as an unpaid carer in Shropshire

Hours of unpaid care provided	% <u>figure</u>	Approx. number of unpaid carers
19 hours or less	4.9%	15,857
20-49 hours	1.7%	5,501
50 hours or more	2.5%	8,090

Further detailed information will be added when available from the Office of National Statistics.

## Information on Young Carers and Parent Carers

There are a dispersed population of children and young people with special educational needs and disabilities in Shropshire. There are approximately 4300 children and young people who are under the age of 18 and have some level of additional need. (This figure does not include any children and young people who live in Shropshire but access their education outside of the County). 2006 of these young people have been identified as having a significant level of special educational need and as such are likely to be receiving a high level of support from family carers.

The Young Carers support service had 128 young carers registered with them in December 2022, with 61 young carers actively engaged during that quarter. We don't yet have the Census 2021 data on how many young people identify as a carer in Shropshire. This is likely to be an under-representation as nationally it is recognised many young carers are hidden from the view of others.

To improve identification of young carers:

- The support service provider employs a School Project officer to provide weekly term time support in schools for those young carers already identified and to identify more through working with school staff;
- Children and Young People's service have analysed information on where referrals are made to target awareness raising and training on identifying a young carer.

## Findings from the 2021/22 National Survey of Adult Carers

See appendix C for full information

When asked **how much control** carers have over their daily life **16%** said they have **enough control**, **67%** have **some control**, but not enough, and **17%** have **no control at all**.

**191** carers said they had used support services in the last 12 months as follows:

- 71%** Information and advice
- 74%** Carers groups
- 2%** Training for carers
- 4%** Support to remain in employment

Of the carers who tried to find information and advice on support, services and benefits **58%** said it was easy or fairly easy to find it. **42%** said it was fairly or very difficult to find.



**96.5%** Of carers state that their health has been impacted by their caring role. The most common impacts are **feeling tired** (86%), **disturbed sleep** (74%) and a **general feeling of stress** (70%)

**75%**



Of carers spend **more than 20 hours a week** looking after or helping the person they care for.

**7.7%** of carers spend their time doing the things they want; **77.4%** do not have enough time to do the things they want; and **14.9%** do not have the time to do anything they value or enjoy.



**25%**

Of carers have as much social contact with

people as they like. **53%** have some, but not enough social contact and **22%** feel socially isolated.

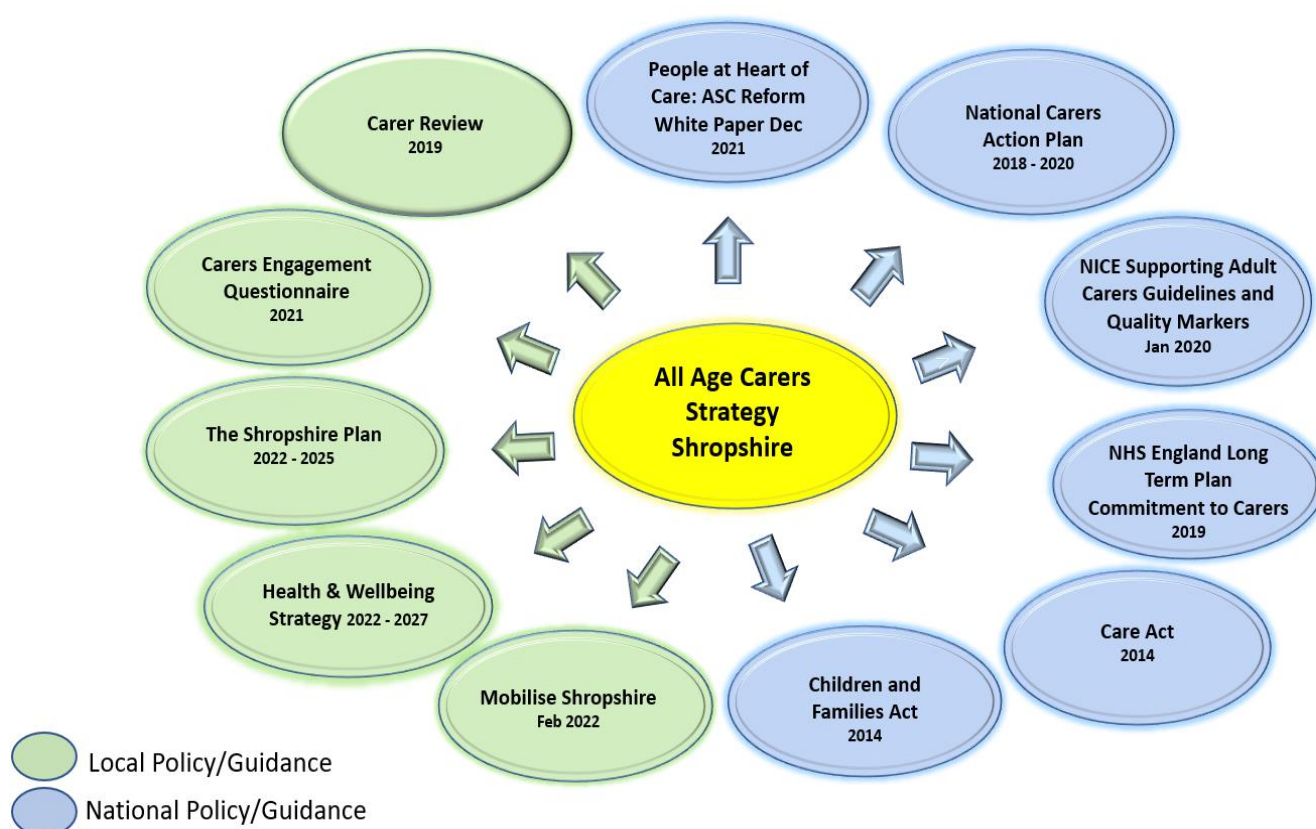


Caring has caused financial difficulties for **42.3%** of carers in Shropshire and is similar to the national figure of **42.8%**. In Shropshire the figure has increased from **40.6%** in 2018/19 and **38.4%** in 2016/17.



## 8. How This Strategy Was Developed

The strategy has been developed with a working group of carers and former carers, as well as key organisations representing carers. Information was drawn from national and local documents and legislation, principally the Shropshire Plan 2022-2025, which support and have an impact on the strategy. The key motivation informing this strategy has come from what carers in Shropshire have told us they need.



See [appendix A](#) for details of how the local and national documents and legislation has informed this strategy.

## 9. What We Have Achieved Since the Last Strategy?

Greater number of adult carers accessing a direct payment

Carer Register launched to provide swifter communication with adult carers

Increase in numbers of carers being identified and receiving information and support

Growing number of peer support groups across the county

Carers Feedback launched to gather carer experiences with Health and Social Care

Text messaging service now live – reaching more adult carers

Launch of Digital Support for Adult Carers

Growth in number of carers completing a contingency plan

Increase in numbers joining the SEND All In Scheme- now over 700 families.

Parent and Carer Council (PACC) secured extra funding to offer summer programme supporting families to re-engage after lockdown.

## 10 Challenges in Delivering the Last Strategy

- The Covid -19 pandemic significantly increased waiting times for carer assessments.
- The pandemic also had a significant impact on the provision of a variety of breaks for carers.
- Culture shift for many people as service delivery became primarily through digital methods/technology only.
- Identification of carers through primary care

## 11. What Did Carers Say About Their Experience of Caring?



## 12 How the All-Age Carer Strategy aligns with the Shropshire Plan 2022-2025

The All-age Carer strategy priorities align with those set out in the Shropshire Plan 2022-2025 and will support the achievement of outcomes in the 4 'Healthy' priority areas, contributing to our vision of 'Shropshire living the best life'.

The table below sets out which all age carer strategy priorities are aligned to the 4 priorities of the Shropshire Plan 2022-25.

Shropshire Plan 2022-2025 Priorities	Aligned to the following All-age carer strategy priorities
<p><b>Healthy People</b> Strategic Objectives</p> <ul style="list-style-type: none"> <li>• Tackle inequalities</li> <li>• Early intervention</li> <li>• Partnerships</li> <li>• Self-responsibility</li> </ul>	<ol style="list-style-type: none"> <li>1. Early identification and support for carers of all ages.</li> <li>2. Building carer friendly communities in Shropshire where carers are recognised, listened to and respected.</li> <li>3. A life of their own outside of their caring role – supporting carers to balance their caring responsibilities with their own aspirations and needs.</li> <li>4. Carers have good physical, mental, and emotional wellbeing.</li> <li>5. Access to timely, up to date information and advice in a variety of formats that is easy to read and understand and readily available.</li> <li>6. Co-ordinated services within the whole Health and Social Care Sector.</li> <li>7. Transitions during the carer role. Ensuring carers, of any age, are supported through the stages of their caring role.</li> </ol>
<p><b>Healthy Economy</b> Strategic Objectives</p> <ul style="list-style-type: none"> <li>• Skills and employment</li> <li>• Safe, strong, and vibrant destination</li> <li>• Connectivity and infrastructure</li> </ul>	<ol style="list-style-type: none"> <li>3. A life of their own outside of their caring role – supporting carers to balance their caring responsibilities with their own aspirations and needs.</li> <li>5. Access to timely, up to date information and advice in a variety of</li> </ol>

<ul style="list-style-type: none"> <li>• Housing</li> </ul>	<p>formats that is easy to read and understand and readily available.</p> <p>6.Co-ordinated services within the whole Health and Social Care Sector</p> <p>7.Transitions during the carer role.</p> <p>Ensuring carers, of any age, are supported through the stages of their caring role.</p>
<p><b>Healthy Environment</b> Strategic Objectives</p> <ul style="list-style-type: none"> <li>• Climate change strategy and actions</li> <li>• Safe communities</li> <li>• Natural environment</li> </ul>	<p>4.Carers have good physical, mental, and emotional wellbeing.</p> <p>5.Access to timely, up to date information and advice in a variety of formats that is easy to read and understand and readily available.</p>
<p><b>Healthy Organisation</b> Strategic Objectives</p> <ul style="list-style-type: none"> <li>• Best workforce</li> <li>• Absorb, Adapt, Anticipate</li> <li>• Communicate well</li> <li>• Align our resources</li> <li>• Strong councillors</li> </ul>	<p>1.Early identification and support for carers of all ages.</p> <p>2.Building carer friendly communities in Shropshire where carers are recognised, listened to and respected.</p> <p>3.A life of their own outside of their caring role – supporting carers to balance their caring responsibilities with their own aspirations and needs.</p> <p>5.Access to timely, up to date information and advice in a variety of formats that is easy to read and understand and readily available.</p> <p>6.Co-ordinated services within the whole Health and Social Care Sector.</p>



## 13. What We Want to Achieve

We have developed 7 key priorities based on subjects' carers have informed us means the most to them and will make the biggest difference to their lives.

Our priorities are in line with the objectives set out in National Carers Action plan 2018-2020 and People at the Heart of Care: ASC Reform white paper 2021 and the Shropshire Plan 2022-2025, priority Healthy People strategic objective of developing a comprehensive carer support offer and contributing to its vision - Shropshire living the best life.

Early identification and support for carers

Carers have good physical, mental, and emotional wellbeing

Building carer friendly communities in Shropshire where carers are recognised, listened to, and respected

Carers have access to timely, up to date information and advice in a variety of formats that is easy to read and understand and readily

Carers have a life of their own outside of their caring role – supporting carers to balance their caring responsibilities with their own aspirations and needs

Coordinated services within the whole Health and Social Care sector

Transition  
Transitions during the carer role. Ensuring Carers, of any age are supported through the stages of their caring role.

## 14. Our Priorities

### **1. Early identification and support for carers – increased awareness and identification of carers of all ages and assist citizens to recognise they are carers so that information, advice and help is available earlier in their caring journey**

Actions we will take to address this include:

- Awareness raising and Carer Aware training for Health and Social Care professionals, including primary and secondary care, pharmacies, and dentists to assist them to identify carers.
- Develop opportunities to contact carers who are not currently known to services.
- Raise awareness in schools and colleges to identify young carers and young adult carers and refer/signpost them to the support available.
- Analyse data on referrals received by the Young Carer Support service provider to identify target areas to raise awareness on identifying a young carer.
- Analyse data on referrals received by Shropshire Carer Support team to target areas to raise awareness on identifying carers.
- Raise carer awareness and support available for carers with the business community, including statutory bodies.
- Ensure the offer of support is clear.

### **2. Building carer friendly communities in Shropshire where carers are recognised, listened to and respected**

Actions we will take to address this include:

- Actively involve carers, including young carers, wherever possible, as expert partners in the planning of care and support which the person they care for receives e.g. at hospital discharge
- Improve information sharing systems across services, to avoid carers having to repeat their story to different professionals.
- Involve carers in service design when developing services intended to improve their health and wellbeing
- Promote awareness of carers rights.
- Raising awareness of caring in wider communities to ensure organisations and services provide flexible services that carers can access.
- Raise public awareness of carers and their contribution to society by supporting annual celebratory events recognising carers e, g, Carers Rights day; Carers Week.

### **3. Carers have a life of their own outside of their caring role – supporting carers to balance their caring responsibilities with their own aspirations and needs**


Actions we will take to address this include:

- Supporting carers to recognise and look after their own health and wellbeing needs as well as those of the person they are supporting.
- Provide person centred support to carers that is tailored to their own individual needs and aspirations
- Communicate and promote available respite, including community support, so that carers have time for themselves.
- Young carers need time to be children.
- Support carers to plan for the future so they feel confident they can manage any changes to the caring role and achieve personal outcomes.
- Ensure carers are financially well informed by promoting and supporting their access to a range of financial support information and to services that advise on welfare rights.
- Actively work with employers to raise awareness of carers in their workforce - how to recognise and support them
- Support carers to fulfil their employment and educational potential.

### **4. Carers have good physical, mental, and emotional wellbeing**

Actions we will take to address this include:

- Carers are provided with information on how to manage the cared for person's condition to support them to care safely and confidently.
- Carers have the opportunity to attend training to help them manage their own physical, mental and emotional health e.g. managing stress; self-advocacy for carers, first aid.
- Carers feel supported and can talk with someone who understands their situation. This may be through support from other carers and carer networks.
- Link carers to a range of support to help them stay connected to their communities and maintain relationships that are important to them and reduce loneliness which can affect carers physical, mental, and emotional health.
- Carers are able to find information on support easily and throughout all of the Health and Social care sector.



**5. Carers are able to access timely, up to date information and advice in a variety of formats that is easy to read and understand and readily available**

Actions we will take to address this includes:

- Provide carers with personalised information and help
- Raising awareness of the different methods carers can access information
- Ensuring all information is jargon free and easy to understand
- Provide professionals with the information to allow them to offer informed advice to carers
- Information is available to carers through all parts of Health and Social care, whichever part of the sector they have contact with.

**6. Coordinated services to support carers**

Actions we will take to address this include:

- Encourage organisations providing services, for carers or patients/cared for people, to work together to ensure services provided meet the needs of carers.
- Provide equitable support to all carers, whatever their caring responsibility, area they live, or personal circumstances.
- Improve information sharing systems across services, to avoid carers having to repeat their story to different professionals.
- Raise awareness and promote best practice to staff across the whole sector on identifying, valuing and supporting carers.
- Examine assessment procedure for all carers to ensure all carer groups are offered an assessment, if appropriate.
- Develop a data strategy for the better understanding of the carer community.

**7. Transitions during the carer role. Ensuring carers, of any age, are supported through the stages of their caring role**

Actions we will take to address this include:

- Provide the right information and support at the right time to improve transitions for carers as they move through specific phases or life events in their caring role.
- Establish a transition pathway from children and young people's service to adult services for young adult carers and parent carers.
- Awareness training for health and social care professionals so that they can confidently identify young carers and parent carers and refer/signpost to support available.

## 15. Appendix A

### Local/National Information and Legislation that has informed this Strategy

National Outcomes	Local Outcomes
<p><b>National Carers Action plan 2018-2020</b></p> <p>This outlines the government's commitment to supporting carers through 64 actions across 5 priorities. The priorities are:</p> <ol style="list-style-type: none"> <li>1. Services and systems that work for carers</li> <li>2. Employment and financial wellbeing</li> <li>3. Supporting young carers</li> <li>4. Recognising and supporting carers in the wider community</li> <li>5. Building research and evidence to improve outcomes for carers</li> </ol>	<p><b>Health and Wellbeing Strategy 2022-2027</b></p> <p>The all-age carer strategy will support the achievement of outcomes in the 4 key priority areas for Shropshire:</p> <ul style="list-style-type: none"> <li>• Joined up working</li> <li>• Improving population health</li> <li>• Working with and building strong and vibrant communities</li> <li>• Reduce inequalities</li> </ul>
<p><b>People at the Heart of Care: ASC Reform White Paper 2021</b></p> <p>Builds on the foundations of the NHS Action plan 2018-2020 and sets out a new strategic approach centred around 3 core strands</p> <ol style="list-style-type: none"> <li>1. Working with the sector to kick-start a change in the services provided to support unpaid carers</li> <li>2. Identifying, recognising and involving unpaid carers</li> <li>3. Supporting the economic and social participation of unpaid carers</li> </ol>	<p><b>Carer Engagement Questionnaire 2021</b></p> <p>Main themes:</p> <p>Carers felt the existing 5 priorities were still important:</p> <ol style="list-style-type: none"> <li>1. Carers are listened to, valued and respected</li> <li>2. Carers are enabled to have time for themselves</li> <li>3. Carers can access timely, up-to-date information and advice</li> <li>4. Carers are enabled to plan for the future</li> <li>5. Carers are able to fulfil their educational, training or employment potential</li> </ol> <p>Additionally, carers advised the following were important:</p> <ul style="list-style-type: none"> <li>• Keeping safe – both for carers and their cared for person</li> </ul>

	<ul style="list-style-type: none"> <li>• Loneliness –levels have increased since Covid 19</li> <li>• Integration of Health and Social Care services</li> </ul>
<p><b>NICE Supporting Adult Carers Guidelines and Quality Markers 2020</b> Sets out action orientated recommendations for good practice for professionals for better outcomes for adult carers. The recommendations are around:</p> <ul style="list-style-type: none"> <li>• Information and support for carers: overarching principles</li> <li>• Identifying carers</li> <li>• Assessing carers’ needs</li> <li>• Helping carers stay in, enter or return to work, education and training</li> <li>• Social and community support for carers</li> <li>• Training to provide care and support</li> <li>• Psychological and emotional support for carers</li> <li>• Support during changes to the caring role</li> <li>• Support for carers during end-of-life end of life care and after the person dies</li> </ul>	<p><b>Carers Review 2019</b> Recommendations from the review:</p> <ul style="list-style-type: none"> <li>• Improved communication between professionals and individuals and other organisations</li> <li>• Timely, easy to understand and find information</li> <li>• A joined-up system</li> <li>• Digital approach – technology that may assist</li> <li>• Showing how we value carers</li> <li>• See me – I am not ‘just’ a carer.</li> </ul>
<p><b>NHS England Long Term Plan – Commitment to Carers 2019</b> Sets out the key areas where the NHS will support carers including:</p> <ul style="list-style-type: none"> <li>• raising the profile of carers,</li> <li>• education, training and information,</li> <li>• well-coordinated care,</li> <li>• contingency planning,</li> <li>• support for young carers to have access to preventative health and timely referral to local support services</li> <li>• working with carers from excluded and marginalised communities</li> <li>• carer passports</li> </ul>	<p><b>Mobilise Shropshire – Insights Report February 2022</b> The main areas of concern highlighted by carers:</p> <ol style="list-style-type: none"> <li>1. Benefits</li> <li>2. Carer emotions - frustration, irritation, guilt, anticipatory grief, stressed, isolated, worry</li> <li>3. Carer Assessments</li> <li>4. Time for self</li> <li>5. Coping with dementia</li> <li>6. Other condition specific information and support</li> <li>7. Befriending Services</li> <li>8. Carer Health</li> <li>9. Carer Exhaustion</li> </ol>

	10. Arranging care at home
<p><b>Care Act 2014</b> Aims to put carers on an equal legal footing to the cared for person. Local authorities are required to carry out an assessment to assess whether a carer is eligible for support where a carer appears to have needs and implement a support plan.</p>	<p><b>The Shropshire Plan 2022-2025</b> The all-age carer strategy will support the achievement of outcomes in the 4 key priority areas of the Shropshire Plan:</p> <ul style="list-style-type: none"> <li>• Healthy People</li> <li>• Healthy Economy</li> <li>• Healthy Environment</li> <li>• Healthy Organisation</li> </ul>
<p><b>Children and Families Act 2014</b> Gives young carers and young adult carers in England a right to a carer's assessment and to have their needs met, if the assessment shows this is needed. It also puts a duty on a local council to provide an assessment to a carer of a disabled child aged under 18 if it appears that the parent carer has needs, or the parent carer requests an assessment.</p>	




## 16. Appendix B - Action Plan

The progress of the strategy will be regularly reviewed by the Shropshire Carers Partnership Board, who will monitor the delivery and implementation to ensure it is coordinated and complements the wider agenda for supporting carers in Shropshire.

The action plan is a live document which has been developed to support the strategy and will be delivered through successful partnerships between carers, health and care services, voluntary and community organisations and other partner agencies.



# 17. Appendix C – National 2021/22 Survey of Adult Carers




## Carers Survey 2021/22

Understanding the views and experiences of adult carers in Shropshire

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### The sample


**417** 

People who had performed the role of informal carer in the last 12 months were invited to participate in the survey.

An **informal carer** is someone who looks after a partner, family member or friend regardless of whether or not they receive a carers allowance


- 26%** Are supported and funded by the LA
- 74%** Are self funded

**75%** of people cared for had **physical** support needs, **10%** had **learning disability** support needs, **9%** had **memory and cognition** support needs. Others had mental health, sensory or social support needs.



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### Survey responses


**211** 

Surveys were completed and returned. **8** were returned blank and **198** surveys were not returned.

**72%** of surveys went to female carers and **28%** to male carers. **98.5%** of those who had a survey were White British. We managed to capture the views of people aged from **34 to 92**.

The age of people being supported by carers ranged from **18 to 95**.

**86%** of carers lived with the person being cared for and **14%** lived somewhere else.



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### Overall satisfaction with support received

**34.5%** are **extremely or very satisfied** with the support they received. **32.5%** are **quite satisfied**. **8.7%** are either **quite or very dissatisfied** and **2%** are **extremely dissatisfied**. Some are not sure (13.7%) or did not receive any support (8.6%).

**191** carers said they had used support services in the last 12 months.

- 71%** Information and advice
- 74%** Carers groups
- 2%** Training for carers
- 4%** Support to remain in employment

**7.7%** of carers spend their time doing the things they want; **77.4%** do not have enough time to do the things they want; and **14.9%** do not have the time to do anything they value or enjoy.



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### Life as a carer

When asked **how much control** carers have over their daily life, **16%** said they have **enough control**, **67%** have **some control**, but not enough, and **17%** have **no control** at all.

**47%** of carers have **enough time** to look after themselves, **31%** **need more time** to look after themselves and **22%** feel they are **neglecting themselves**. (These figures are similar to the national figures of 49%, 31% and 20%).

**79%** Have **no worries** about their personal safety.

**20%** have **some worries** and **1%** are **extremely worried** (carers were contacted in a follow up if they didn't feel safe).



## Social networks and family

**25%**

Of carers have as much social contact with people as they like, **53%** have some, but not enough, social contact and **22%** feel socially isolated.



**34%**

Of carers feel encouraged and supported. **52%** have had some encouragement and support. **14%** of carers feel they have no encouragement and support.

**3** out of **10** carers also have **caring responsibility for someone else.**

Of these carers **60%** say they do not have enough time to care for this other person.



## The impact of caring

**96.5%**

Of carers state that their health has been impacted by their caring role. The most common impacts are **feeling tired (86%)**, **disturbed sleep (74%)** and a **general feeling of stress (70%)**.

Caring has caused financial difficulties for **42.3%** of carers in Shropshire and is similar to the national figure of **42.8%**. In Shropshire the figure has increased from **40.6%** in 2018/19 and **38.4%** in 2016/17.



In addition to their caring role:

- 69%** of carers are retired
- 18%** are employed or self-employed
- 23%** are not in paid work
- 7%** volunteer
- 3%** undertake other activities

## Access to information

Of the carers who tried to find information and advice on support, services and benefits **58%** said it was easy or fairly easy to find it. **42%** said it was fairly or very difficult to find.



**78%**

Of carers have received information and advice. **87%** of carers found this very or quite helpful. **12%** found this quite unhelpful and **1%** very unhelpful.

**75%**

Of carers have had a discussion about the support or services provided to the person they care for. Of these carers **90%** always, or usually, felt involved or consulted as much as they wanted to be.



## Caring responsibilities

When asked how long they had been looking after the person they care for **7%** said less than 1 year, **46%** between 1 and 5 years, **30%** between 5 and 15 years and **17%** more than 15 years.

**75%**



Of carers spend **more than 20 hours a week** looking after or helping the person they care for.

The most common forms of support provided to the person cared for are **providing practical help (94%)**; **keeping an eye on them to make sure they were alright (93%)**; helping to **deal with care services and benefits (89%)**; and **giving medicines (89%)**.

The Survey of Adult Carers in England (SACE) is a bi-annual survey led by NHS Digital. You can find out more here: <https://digital.nhs.uk/data-and-information/publications/statistical/personal-social-services-survey-of-adult-carers>

Contact : Feedback & Insight Team, Communications and Engagement, Resources, Shropshire Council  
Email: [TellUs@shropshire.gov.uk](mailto:TellUs@shropshire.gov.uk)

# All-Age Carers Strategy for Shropshire

2017 - 2021



## Foreward

The 2011 census shows us that there are around 34,000 known carers in Shropshire. They may be caring for a family member, spouse, partner or friend.

The work they do is invaluable, but whilst caring can be rewarding, we also know that not receiving help at an early stage can lead to financial difficulty, poorer physical and emotional health, a need to give up work and social isolation.

There are also many people who do not identify as a carer, as they see it as part of being a family member, partner or friend. We want to send out a message out to our Shropshire communities that helping to look after someone who could not manage otherwise, is caring.

There are also more than 600 known young carers in Shropshire. A young carer is a child or young person from 5 years up to 18 years of age who may be helping to care for a parent, sibling or other family member. We have spoken to our young carers who have told us they want to be treated as individual children and young people first, and need to understand more about the medication the person they care for takes. This is reflected in the Strategy and Action Plan.

Caring has a known impact on young people through poorer emotional and physical health, and life chances such as education. However, the picture is not always gloomy, and with help and support, a balance between caring responsibilities and being a child or young person can be achieved.

We are delighted to support the All-Age Carers Strategy for Shropshire, which has been produced in consultation with Shropshire carers and partners. Through this, priorities have been identified for 2017-2021 to address the needs of our carers, and create better health and wellbeing outcomes for everyone.



**Andy Begley**  
Director of Adult Services



**Karen Bradshaw**  
Director of Childrens' Services

# All-Age Carers Strategy for Shropshire 2017 - 2021

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# 1 Executive summary

The contribution 'carers' of all ages make to society cannot be underestimated. A carer could be an adult, parent, young person or child. Some may not see themselves as a 'carer' because they see their caring role as part of being a partner, family member or friend.

Local carers have told us they are often reluctant to be labelled with the term 'carer.' It is important that carers are considered as individuals in their own right. Anyone we meet in our daily lives could be caring for someone, and most people will have caring responsibilities at some time in their life.

The 2011 census shows us that among the 34,000 people currently caring for relatives, friends and neighbours in Shropshire, there are over a third who spend more than 20 hours a week caring, and over a fifth who dedicate 50 hours or more a week to their caring role. There are 3,457 carers who indicated they had bad or very bad health. Three in four are over the age of 54.

For the purpose of this strategy a carer is defined as:

*"Someone of any age who provides unpaid care for another person (of any age) who may be ill, frail, with disabilities, have poor mental health or addiction problems, meaning they are unable to manage without this care".*

The importance of carers' health and well-being is recognised in Shropshire, and following findings from the Shropshire Carers Survey, and engagement with partners and carers, the overarching aim for this All-Age Carers Strategy is:-

*"Carers are supported to remain emotionally, mentally and physically well and feeling safe"*

Some of the things Shropshire carers have told us they need are:

- Access to a variety of groups to provide a break from their caring role
- Time for themselves
- To be listened to and included as an equal in the care of their loved one or friend.
- Access to up-to-date and relevant information on all aspects of caring.

This has led to five key priority areas which are as follows:

1. Carers are listened to, valued and respected
2. Carers are enabled to have time for themselves
3. Carers can access timely, up-to-date information and advice
4. Carers are enabled to plan for the future
5. Carers are able to fulfil their educational, training or employment potential.

To deliver the strategy and make a real difference to these areas, we need to make sure that everyone plays a part in working together to improve health and well-being.

This means making sure that this thinking and action is embedded in existing health and social care work, including programmes such as the Better Care Fund, Future Fit and Community Fit, and work through the Children's Trust and implementation of the 2014 Care Act and the Children and Families Act 2014.

As this is an all-age strategy it covers all carer groups, and while all carers should be treated equally, it recognises the differing needs of all carers.

Our challenge also includes the fact that Shropshire is facing increased demand for health and care-related services, coupled with a future of large-scale budget reductions.

Shropshire is the largest inland county in England and is predominantly rural. This can present challenges for carers needing to access services and public transport.

Shropshire's population is ageing. In 2001, the 65 years and older population represented 18.1% of the total Shropshire population. This has now risen to 20.7% in 2011, compared to 16.4% for England and Wales. This is likely to impact on increased need for care and thus carers.

There is also a dispersed population of children and young people with special educational needs and disabilities in Shropshire. There are approximately 5,000 children and young people who are under the age of 18 and have some level of additional need. 1,600 of these young people have been identified as having a significant level of special educational need and as such are likely to be receiving a high level of support from family carers.

There are more than 600 known young carers in Shropshire. It should be recognised that young carers are children and young people first, and with help and support a balance between their caring responsibility and being a child or young person can be achieved. It is known that many struggle with educational attainment because of the additional burden of caring.

In light of our challenges we want to work with local strategic partners, carers and the community to draw together key programmes for carers to ensure that they receive appropriate levels of support that is easy to access and integrated.

We need everyone to understand that they have an important role in making a difference to Shropshire's health and well-being and that we must work together in order to achieve the best results.

The implementation of this strategy will be supported and advised by the Shropshire Family Carers Partnership Board (FCPB), which includes representatives from carers, statutory services, the voluntary and community sector, and health. Regular progress reports will be made to the Health and Well-Being Board.

## 2 Summary of our priorities

### Priority 1 - Carers are listened to, valued and respected

#### Action we will take to address this:

Carers, including young carers are included in care planning (for example at hospital discharge).

Improve information sharing systems across services, to avoid carers having to repeat their story to different professionals. This will include training staff who work with carers.

Raise awareness of the caring role to enable easier access to carer support, which includes feeling safe and supporting well-being.

Use carers' experience and knowledge to plan future services, and when commissioning services including integrated working.

### Priority 2 - Carers are enabled to have time for themselves

#### Action we will take to address this:

Review assessment process for all carers and ensure understanding of replacement care needs.

Communicate and promote available replacement care including community support.

Identify and promote carer networks for all types of carers, and develop support for where gaps exist.

Develop a carer-centred approach within services (eg appointment flexibility and hospital visiting times).

Promote the use of assistive technologies such as GPS trackers and Telecare systems where appropriate.



### Priority 3 - Carers can access timely, to up-to-date information and advice

#### Action we will take to address this:

Providers and partners communicate to ensure information is easily accessible and in different formats. This should include health information and interventions for carers to help avoid ill-health and injury.

Work with education providers to promote information for young carers, young adult carers and parent carers.

### Priority 4 - Carers are enabled to plan for the future

#### Action we will take to address this:

Embed planning for the future as a part of all-age carer health and other assessment discussions.

Provide appropriate workshops for all carers about planning for the future.

Inform future planning of services through carer experience and data collected about carers.

### Priority 5 - Carers are able to fulfil their educational, training or employment potential

#### Action we will take to address this:

Actively encourage all local organisations to adopt the Employer and Employee Pledge to recognise and support carers in their employment.

Increase carers' knowledge of their employment rights, responsibilities, including after bereavement.

Work with education and training providers to help enable access to vocational and non-vocational training and education courses for carers, which includes volunteering opportunities

## 3 Introduction

We are increasingly aware of the vital role that carers play in our community. Carers provide essential support to those who are in need of care, and without that dedicated care, would be unable to manage.

A carer could be an adult, parent, young person or child. Some may not see themselves as a 'carer' because they see their caring role as part of being a partner, parent, family member or friend. It is important that carers are considered as individuals in their own right. Anyone we meet in our daily lives could be caring for someone, and most people will have caring responsibilities at some time in their life

For the purpose of this strategy a carer is defined as:

*"Someone of any age who provides unpaid care for another person (of any age) who may be ill, frail, disabled, have poor mental health or addiction problems, meaning they are unable to manage without this care."*

This strategy has been developed by using and collecting information from local and national sources. These include:

1. National guidance, data and legislation
2. Statistical data about Shropshire carers and the people they care for
3. Findings from the Shropshire Carers Survey which was carried out in July 2016
4. Information from carer partnership meetings.

The key driver for this strategy has come from what carers in Shropshire have told us they need.



## 4 National context

There are a number of documents from key organisations and legislation which support and have an impact on this strategy:

### Legislation

The Care Act 2014 – Under the Act, carers are recognised in the law in the same way as those they care for. The Act gives local authorities a responsibility to assess a carer's needs for support, where the carer appears to have such needs. The assessment will consider the impact of caring on the carer, what the carer wants to achieve in their own day today life and whether the carer is able or willing to carry on caring. There are national criteria to be used to decide whether or not the carer's need is 'eligible' for support from the local authority. Those carers who are eligible may be given a personal budget and/or a direct payment to support their well-being and help them continue in their caring role.

The Children and Families Act 2014 – section 19 of this Act places families at the heart of decision-making in relation to children and young people (0-25 years) with special educational needs and disabilities.

Section 97 of the Children and Families Act (page 74) also gives individuals with parental responsibility for a child with disabilities the right to an assessment of their needs by a local authority, and requires that there is regard to the well-being of parent carers in completing that assessment.

### National documents

The Department of Health NHS Mandate 2016-17 and Next steps for the Carers Strategy

HM Government Carers at the heart of 21st-century families and Carers Strategy: Second National Action Plan 2014 – 2016

NHS England (2014) Commitments to Carers and Five Year Forward View

All relate to the recognition of, and the health and well-being of, carers.

### The 2011 Census

While the 2011 Census found that 5.4 million people in England were providing unpaid care (the same proportion of the population as reported in 2001), over a third were providing 20 or more hours care a week, an increase of 5% on 2001 figures.

The Census also found that there were over 166,000 young carers aged 5-17 in England – an increase of over 26,000 since 2001. The majority were providing 1 to 19 hours care, but over 8% were providing 50 or more hours of care. Significantly, more women than men in the age group 50-64 were providing care. But there has been a shift in the age group of 65 and above – more men were providing care than women in 2011.

## 5 Local context - What we are doing in Shropshire to support carers

Shropshire's Health and Well-Being Board has highlighted carers support as an area for development through the Health and Well-Being Strategy for 2016-2021, which focusses on three priorities:

- Health promotion and resilience: encouraging people to make good decisions at all stages of life and making sure that the right support is available when needed.
- Promoting independence at home: planning support so that people are able to stay in a place that is familiar to them and where they can have the assistance of their community to keep well.
- Promoting easy access and joined up care: making sure that people experience care that meets their needs and that they have the right information at the right time to help themselves or to get support from others.

These three priorities are to be embedded in all strategy and action planning for health and care services and partnerships. As such we are using these priorities as focus for developing a whole-system approach to working together for carers. By whole-system approach, we mean everyone involved with carers has a responsibility to work together to support the implementation of this strategy.



## Partnership boards, groups and involvement of carers

Taking a whole system approach requires strong partnership working and integration of services, where possible. To ensure that we are working together for the best interests of carers and those they care for, carers are represented at a number of partnership boards. Examples of these are:

- Family Carer Partnership Board
- Carer Strategy Group
- Health Economy and Dementia Group
- Shropshire Council adult social care 'Making it Real' advisory groups and Board
- Mental Health Partnership Group
- Shropshire Early Help Strategy 2016-2018 Strengthening Families through Early Help

Carers are involved in the development of strategies and action plans to ensure their voices are heard, and that the service is meeting their needs.

## Partnership working with neighbouring councils

Shropshire is partnership working with neighbouring councils to share good practice and joint work to support carers. In particular, young carers and young adult carers. More information can be found in the action plan in Appendix 2.

## Community assets

In line with strategic developments in Shropshire, the carers strategy and action plan takes into consideration how community assets can support well-being. By assets we don't just mean buildings and equipment, we consider an asset to be any factor (including people and their skills and abilities) or resource which increases the ability of individuals and communities to improve and maintain their health and well-being. By taking this approach, we can make best use of what is already available in communities to support carers' health and well-being; whilst ensuring that services are available to support people in the most appropriate way.

## Association of Directors of Adult Social Service (ADASS) West Midlands - commitment to carers

The ADASS 16 point 'commitment to carers' is one of the national/regional adult social care drivers behind Shropshire's strategy. The commitments were developed by the ADASS West Midlands Carers Lead Network, Shropshire and all other authorities in the region have signed up to these priorities. Please see appendix 2.

## 6 Local demographic information

### Unpaid care in hours

The 2011 Census provides a breakdown of the hours of unpaid care provided in Shropshire by relatives, friends and neighbours.

### Unpaid care by general health and age

The 2011 Census showed that in Shropshire, 12.2% of carers providing 50 or more hours of unpaid care per week considered themselves in bad or very bad health.

### Unpaid care by age or gender

On 16 May 2013 more detailed information on the characteristics of the carer population was published by the Office for National Statistics. This showed a 55% increase in unpaid care being provided by people aged 65+ compared to 2011.



## 7 What carers have told us

### Health and Well-Being Strategy 2016-2020 consultation

Consultation was undertaken on the draft Health & Well-Being Strategy and action plan between 5 October and 29 November 2015. The public were invited to pass comment on the documents and also answered a series of questions around their thoughts on how exemplar provision and support for carers might look. A small number of focus groups were also held.

Questions were asked about the strategy's focus on health promotion and resilience, promoting independence at home, and promoting easy to access and joined-up care. Some specific questions were also asked around support for carers, these included:

- How do you think people can support themselves to continue to provide a caring role?
- What things do you think would help support an individual to continue to provide care for a partner, family member or friend?

The following themes were highlighted as important for supporting carers in Shropshire:

- Easy to access information and advice
- Health checks and care for the carer
- Support - family, friend, groups
- Flexible working/supportive employers
- Time to themselves and respite.

### National survey of adult carers 2014-15

This survey found that 66% of carers said they don't have enough control of their life, and 2 in 5 spend 100+ hours per week caring. More information about the findings can be found in Appendix 1.

## Carer feedback from differing sources

Carers have provided feedback through other means such as: Healthwatch surveys, consultation sessions, the annual Health and Social Care survey, and strategy development meetings.

Different themes that have arisen from these include: difficulties accessing information relating to their caring role, carers having to repeat their story, the provision of support that will enable carers to work – for example after-school support and support during school holidays, the need to consider the role of neighbours and friends who help to care for someone, having an opportunity to take a holiday without a caring responsibility, Short Break and respite services that are an affordable price or free – to ease the load, ie with sleep deprivation and to enable parent carers to spend time with non-disabled siblings and services built around people who need them, not around education, health and social care services. Young carers and young adult carers have cited the need to be told about the medication the person they care for takes, including side effects, as being important, as well as more awareness and knowledge about young carers in education settings.

## Shropshire Carers Survey summary

A survey was carried out between June and August 2016. 71 questionnaires were returned online and in paper format. Not all questions were answered fully – partly due to confusion with understanding the question, and comments of carer fatigue.

Respondents were asked to comment on six priorities which had been identified from previous surveys and consultation. The top three priorities were: Carers being supported to remain emotionally, mentally and physically well which was given the highest priority; followed by Carers being listened to, valued and respected; and thirdly, Carers receive support to enable them to have time for themselves.

The findings would inform which priorities were viewed as important and why.





The survey contained valuable first hand comments some of which are summarised below:

## Carers are listened to, valued and respected

### What carers told us this meant to them and what difference it will make

"It's very important that we're listened to and not told what's going to happen - this happens a lot and what we think doesn't count, it adds to my stress."

"Carers/ family (who) know the person best are within the intimate circle of support for that person, they hold the knowledge that makes plans work....."

"It should mean if we as carers go to any meetings, our ideas, worries etc. are listened and acted on, not just dismissed".

### Summary of what carers feel needs to happen to achieve this priority

More awareness of carers and young carers

Joint appointments with professionals, better communication between all parties

Carers and family members are the specialist of their situation, creating a solution from a multi-choice menu within budget

Well-designed services built around people who need them, not around health and social care

Carers helpline and website.

## Carers receive timely access to up-to-date information and advice

### What carers told us this meant to them and what difference it will make

"The booklets that are produced are very helpful and they let the carer know what activities are going on. The meetings ... also very good as all carers can get together and provide information to each other".

"This can be very different depending upon the issue and the mental state of the carer".

"Information about positive achievements, services, funding, etc. is important and can lift spirits".

"Vital - unfortunately there is too much information in one way and too much for someone to wade through. there is no simplicity".

"If carers are kept in the loop they will be able to access more services as and when they need".

### Summary of what carers feel needs to happen to achieve this priority

Sufficient time to read, understand and respond to letters / information sent, co-ordinate correspondence

One simple access place to support, info re trips/meetings/get-togethers, but most importantly someone to speak to

Easy access to information re legislation, statutory requirements, support entitled to, transparent eligibility criteria

Database of carers – support groups, put one another in touch, choose what info they receive, email updates

Let carers assess the accessibility and information provided first.

## Carers receive support to enable them to have time for themselves

### What carers told us this meant to them and what difference it will make

"Very important to have just a few hours to yourself".

"Just to think relax and keep up to date with things, Respite - relief, ability to have 'own' life and keep well, breathing space".

"Most important issue. Without having a break, I wouldn't be able to carry on, carers are carers often 24/7. They get mentally and physically worn out. They perhaps do not have family or friends to help out, so qtime out is needed".

"... time to sleep through the night, relax and regroup. Short breaks and services that carers / families can depend on need to be available".

### Summary of what carers feel needs to happen to achieve this priority

Funding available to community organisations which offer a whole host of different activities, alternative care provision e.g. a special crèche. Experiences and skills sharing so carers do not have to seek funding to enable participation.

Respite at an affordable price or free – to ease the load, ie with household chores, gardening.

As the patient/cared for person health worsens the carer needs more time allocated to their needs so they actually do get a rest and change of scenery.

A yearly assessment of the carer needs, and mandatory that carers are informed of this right.

## Carers are supported to remain emotionally, mentally and physically well

### What carers told us this meant to them and what difference it will make

"This is also very important. Must keep strong for the person you are taking care of. They need a lot of attention and support".

"Quite easy to become physically, emotionally drained. Good to have someone to help and talk to".

"This is very important because if I break down social services will have to step in. I need support to help me carry on caring".

"I have my own health problems which I don't always look after".

"Essential to avoid crisis..."

"My family hasn't had a holiday since 2006. My partner and I have never had a holiday, or even a weekend, alone together."

### Summary of what carers feel needs to happen to achieve this priority

A full care plan should be made for the carer also or a professional support package.

Lines of communication should be open with a key person, through email or other methods; don't have to explain concerns/situations to a different person.

Opportunities to use inclusive community facilities (sports village) for a range of activities at a discounted rate, ie keep fit.

Make GP surgery appointments available when I need them, and the community care co-ordinator.

Support groups available face to face, be creative about venues, somewhere that a carer can approach and chat about their concerns.

## Carers are supported in planning for the future

### What carers told us this meant to them and what difference it will make

"I dread to think of the future but with help and support of carers trust for all I don't feel so alone with it all having no family support."

"It would allow me to plan for my children's future after my death".

"It would relieve the worry of what would happen if I was unable physically to care for the person".

"This is a priority that worries us a lot. We have no-one who can step up and care for the long term future of the adult in our care".

"If we knew what is out there for us, it would ease our worries".

### Summary of what carers feel needs to happen to achieve this priority

Help and support (Carers Trust 4 All).

Carers and families should be central to the planning.

Facilitate the time to do this when provision has been made for the cared for.

Knowing what is out there, a service and how we access it for the right information.

An allocated professional available to support on an ongoing basis until no longer required; where possible the same person from start to finish.

A day workshop with speakers who can answer worries, ie about care, wills, living arrangements.

Service providers should be able to talk about this.

## Carers are able to fulfil their educational, training or employment potential

### What carers told us this meant to them and what difference it will make

"I enjoy my job and need to be able to continue to work".

"For younger carers who need to move on with their own lives this is a must".

"Carers need to think about themselves and their employability for when they no longer need to carry out their role as a carer".

"... without this priority, the long term future of carers can be greatly affected".

### Summary of what carers feel needs to happen to achieve this priority

Employers need to be supportive and flexible, workplace policies for leave/flexible working, medical appointments etc.

Funding and respite / support for the cared for so the carer can attend courses etc.

Educational and skills building courses to be made available for free to carers.

Utilise community assets for the benefit of carers educational, training needs.

## 8 Case studies

These case studies illustrate examples of carer support being provided within Shropshire, and young carer and young adult carer consultation work.

### Case Study: planning ahead

'Rachael' cares for her son 'Gavin' on a full-time basis. Gavin, who is in his 30s, has always lived at home with his mother; he has a learning disability and is confined to a wheelchair.

Rachael has been known to the carer support team for some time. She has a named carer advisor, 'Kim', who is very familiar with Rachael and her caring role. Kim ensures that Rachael is involved in support groups and activities in her area, giving Rachael opportunities for respite and a chance to build friendships with other 'carers'.

More recently, Rachael, who is in her 60s, has started to experience repeated bouts of ill health - on more than one occasion this has led to short-term hospitalisation. Kim has registered Rachael onto the "Carers Emergency Response Service" which is an early response service whereby in the event of an unforeseen emergency (for example when Rachael gets admitted to hospital), a carer support worker will support Gavin at home, for up to 72 hours. This has enabled Rachael to go to hospital to attend to her own medical needs, safe in the knowledge that Gavin will be cared for by an experienced worker – in his home.

Kim has encouraged Rachael to think about Gavin's future, given that it is likely that he will outlive his mother. With Kim's support Rachael has been looking at local services that provide supported living facilities and Rachael is now planning the transition for Gavin to lead a more independent life. This means that Rachael can support Gavin in the transition towards a life that is less dependent on the care provided by his mother.

Source: Local Care Provider

Case study: How community support for carers can support both the cared for and the carer

*"I had difficulty in getting [father] to the doctor, as he was in denial that there was anything wrong with him ... [father eventually] agreed to attend the memory clinic ... specialist doctor ... diagnosed Alzheimer's, offered medication, brain scan promised monitoring follow up appointments with the mental health nurse and suggested I get power of attorney. Good advice, but there it ended, no further support was offered at this point, or any suggestion of where support and guidance could be sought, and it was some months before I heard from that service again. I am an only child so the responsibility was all mine." (Nar. 4).*

Fortunately, this carer happened upon a display by the Alzheimer's Society and they made contact with them, which relieved a lot of stress and provided support. The stress relief manifested through a variety of factors, but being listened to and venting emotions appears crucial.

"Straight away, I felt understood and supported and could ask silly questions and felt less alone ... advice on practical things (useful aids, strategies and finances) ... 'Singing for the Brain' sessions ... sharing my experience with other carers ... opportunity to share experiences and concerns and relief of bottled up emotions which are hard to share with family members as guilt and helplessness gets in the way." (Nar. 4).

Source: Action Learning Programme based on story telling from patients, carers and staff, Shropshire 2016 NHSE

## Case study: consultation with young carers

Consultation was carried out with young carers, young adult carers and young people between November 2016 and January 2017. This was a joint piece of work between Shropshire Council and Telford and Wrekin Council.

The purpose was to inform this new 2016-2021 All Age Carers Strategy and Action Plan, which had previously been an Adult Carers Strategy only. It was important to gather the views of young carers and young adult carers and ensure their needs were being represented.

Key findings included:

- Young carers want to understand more about the medication the person they care for takes, and any side effects it may have.
- The need for consistent support and awareness for young carers in schools.
- Treating each young carer as a young person first and an individual in his or her own right. What support may be appropriate to one may not be for another.

"There is a lot we don't know about, and should."

The information gathered has formed action points within the Action Plan.



## 9 Action Plan

An Action Plan has been developed based on the five identified priorities. This is a 'live' document which is updated regularly. This can be viewed on the Shropshire Together website.

## 10 Acknowledgements

The Carers Strategy from Cambridgeshire County Council, Sheffield City Council, Solihull Metropolitan Borough Council and Cornwall Council have been used for reference and format purposes.

## 11 Sources of further information

A selection of sources of information for carers is provided below. It is recognised, however, that there are many other national and local organisations also.

### Carers Trust

Carers Trust is a major charity for, with and about carers  
<https://carers.org/>

### Carers Trust 4All

The provider of commissioned carer services for Shropshire Council  
<http://www.carerstrust4all.org.uk/shropshire.html>

### Healthwatch Shropshire

Healthwatch work to help people get the best out of their local health and social care services. With the aim of ensuring that patients and the public are at the heart of decisions about service delivery, improvement and change.

### Shropshire Choices

Web-based information provided by Shropshire Council, to help people make the right choice to remain independent and stay well. Offers information and advice about adult social care, housing and health.  
<https://www.shropshirechoices.org.uk/home/>

### Shropshire Council

This web link provides links to information and services relevant to carers.  
<https://www.shropshire.gov.uk/health-and-social-care/>

### Shropshire Local Offer


Local Offer brings health, education and social care services together to improve outcomes in special educational needs and disability.  
<https://www.shropshire.gov.uk/local-offer/>

Preparing for Adulthood Factsheet: The Links Between The Children and Families Act 2014 and The Care Act

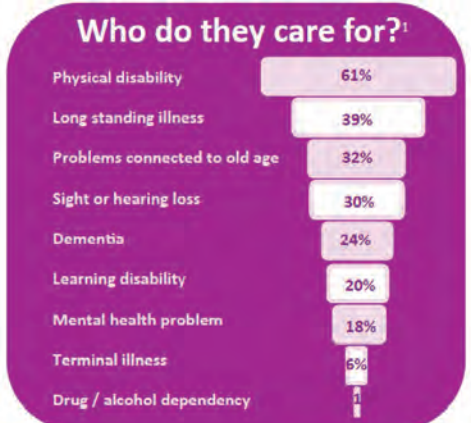
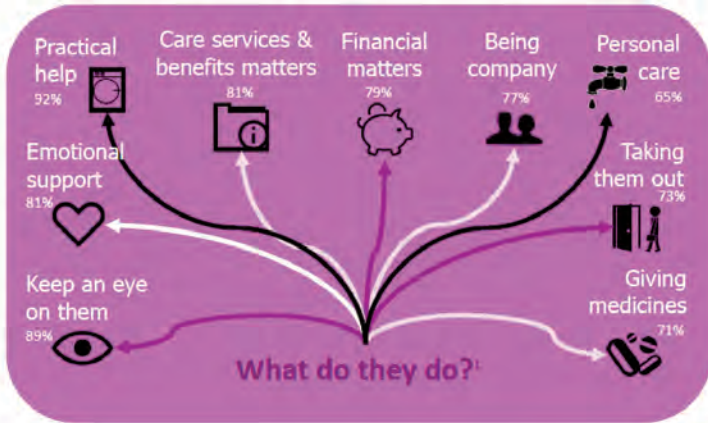
2014 [http://www.preparingforadulthood.org.uk/media/421323/care\\_act\\_revised\\_march\\_2016\\_online.pdf](http://www.preparingforadulthood.org.uk/media/421323/care_act_revised_march_2016_online.pdf)

# Appendix 1

**33,360** Shropshire people view themselves as a family carer<sup>2</sup>  
 (That's **1** in every **7** adults)




**66%** say they don't have enough control of their life<sup>1</sup>

**What carers say about...**

**Daily life**<sup>1</sup>



"When illness suddenly upsets your life you have no preparation and no prior knowledge and are thrust into a world where you feel lost"

"My husband and I are both in our 80's and worry for our future ability to carry on caring"

"Married for 53 years you have to do all you can for loved one while you can do it with help of your family"

**Carer support**<sup>1</sup>



"I am fortunate I go to a carers monthly meeting, and feel wonderful support, also the importance of contact with other people"

"Social Services have also created time for carers with trips, art classes, etc. which give me some 'me time' which I have enjoyed"

"I am also a person who needs help. However, I have never had any help offered as a carer and disabled person"

**Money**<sup>1</sup>



"Everywhere you go for help it comes at a cost which we cannot afford"

"Unable to claim carers allowance, unless my earnings dropped by £20 a month or I give up work altogether to look after my mother on a full time basis"

"Did not want to go back to full time work but due to financial problems... I have no choice and this makes life very difficult for both of us"

**Information**<sup>1</sup>









"Although organisations do present information you are not always able to take it all in at once and do not know what your needs will be"

"When you ring up and leave messages on an answer phone you never get a reply...It is frustrating surely there must be more than one person to speak to"

"Finding the right agency is an obstacle course...all carers information should be dealt with by one department"

**What carers want:**

-  Easy to find information
-  Own needs assessed
-  On-going support
-  Time out
-  Financial help
-  Certainty over future



## Appendix 2

### ADASS West Midlands - Commitment to carers

West Midlands authorities:

1. will endeavour to adopt the Care Act and Whole Family approach when carrying out their assessment and care planning functions.
2. Will endeavour to ensure that their practices and procedures are developed in line with the principles set out in Making it Real for Carers and the associated checklist.
3. Will endeavour to ensure that the impact on a carer's wellbeing is considered equally with that of the person they care for when carrying out its functions.
4. ensure that all providers of advice and information have good access to up to date and accessible information to promote consistency in advice giving.
5. are committed to involving carers in the production and implementation of their plans and strategies.
6. are committed to supporting a range of preventative services to support carers and those for whom they care.
7. are committed to improving carers' access to training, knowledge and skills.
8. will ensure that Independent Advocates, when required, are available equally to carers and the adults they care for.
9. will follow Care Act recommendations to support carers where there are any safeguarding concerns in respect of the carer or of the person they care for.
10. all teams and agencies commissioned to carry out carer's assessments will work from the same assessment template, however they are carrying out the assessment, to ensure a consistent approach and enable quality assurance.
11. are committed to the principle of ensuring that, if assessments of the carer and cared for person are carried out by different agencies, these are brought together to inform the care planning process.
12. are committed to developing flexible and proportionate support planning and personal budget monitoring processes for carers
13. are committed to developing and implementing a local memorandum of understanding based on No Wrong Doors to raise awareness of, identify and support young carers.
14. will adopt and implement the national protocol on cross border assessments.
15. will work with all Health partners across the region to promote and encourage implementation of the NHS England commitment to carers.
16. ADASS West Midlands is committed to ensuring the continuation of the Carers Leads Network to enable and enhance co-operation and collaborative working to support carers across the region.

## All-Age Carers Strategy for Shropshire 2017 - 2021

