

Priority 1 - Carers are listened to, valued and respected				
Action	What needs to happen	How	Who needs to be involved	Completion Month/Year
<p>1a. Carers, including young carers are included in care planning (for example at hospital discharge).</p> <p>Identified Lead: Val Cross</p> <p>Themes Training Consultation Publicity/awareness/campaigns Assessments/pathways/protocols Commissioning and contracts Desk top research and direct meetings</p>	<p>System in place to ensure carers are consulted to see if they are able to take on the responsibility of caring for the person, upon discharge. Including if that person is a child or young person.</p> <p>Providers work with carers to see how carers (including young carers) can be involved in care planning where appropriate, and the option of a 'combined assessment' is understood. Staff training to enable this should be provided, which includes preventative and legislative obligations. Care plan documentation should reflect this also.</p> <p>Draw up an agreement (or use power of attorney?) that will be recognised by all agencies stating the 'rights' of the carer with regard to the cared for person.</p> <p>Signposting.</p>	<p>Hospital discharge pathways. Carer involvement in medication discussions, so side effects etc. are understood (all ages)</p> <p>Included in care plans for cared for and carer health assessments. Build in to pathways. Falls awareness</p> <p>Internal, external or on-line training packages. Identify national good practice. Carer involvement in training.</p>	<p>Shrewsbury and Telford Hospitals Trust (SaTH), Redwoods, ASC, Children's services, P2P, Hospital pharmacy</p> <p>ASC, Children's services, CT4A, GP Practices</p> <p>Joint training/Team Managers/ identified training provider</p>	December 2017
<p>1b. 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.</p>	<p>Joint training to extend training to all customer facing departments and staff working with carers to reach the expected levels of knowledge and skills. Include; understanding of emotional impact of caring, access to appropriate respite care and Health and Social care guidance. Look at (http://carers.ripfa.org.uk)</p> <p>Review current 'consent to share information' arrangements to ensure that full carers profile (assessment) information is able to be shared, given consent from carer, with other local / national organisations more often / as standard.</p>	<p>Internal, external or on-line training packages, Identify national good practice. Carer involvement in training.</p> <p>Partners working directly with carers meet and review their 'consent to share information agreement' protocols and how information could be shared as appropriate.</p>	<p>Joint training/Team Managers/identified training provider</p> <p>Partners who work with carers</p>	
<p>1c. All professionals are able to identify carers, to enable easier access to carer support, which includes feeling safe and supporting wellbeing.</p>	<p>Raise awareness throughout organisations and community services. The audience should be 'everyone/everywhere', maybe though the use of social media, posters, working with employers, etc.</p> <p>Skill-up staff in housing, Early Help, Pharmacies, FPOC etc. to help recognition.</p> <p>Work with pharmacies to help carer identification incl. young carers</p> <p>P2P Carers factsheet.</p> <p>Community Care Co-ordinators in GP Practices.</p>	<p>Publicity, which pose questions about a person's caring responsibilities/caring role. Descriptions of what is a carer and how to access an assessment could be included.</p> <p>Via training and e-learning packages, Carer Aware, Young Carers. (Queens nurse)</p> <p>Carers Trust checklist for pharmacists. And toolkit</p> <p>Upcoming update to P2P Carers factsheet.</p> <p>Awareness and knowledge review/check & training</p> <p>Make Every Contact Count (MECC),</p>	<p>CT4A and partners</p> <p>Training providers, housing, pharmacies, Early Help, FPOC, Education providers, school nursing</p> <p>P2P</p> <p>GP Practices/Commissioner CCG, ASC, CYP, SEND</p> <p>Help 2 Change, ASC</p>	

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<p>1d. Use carers experience and knowledge to plan future services and when commissioning services including integrated working.</p>	<p>Use known facts and data about our population to describe who our Carers are and what the landscape will be like in 5, 10 years.</p> <p>Develop clear process for gathering and mechanisms for using feedback and stories that evidence what is happening locally.</p> <p>Define C&CC (Community Care Co-ordinator) role in GP Practices to ensure consistency.</p> <p>Design an agreed set of statements to be used in all formal contracts and tenders so that the rights and needs of all carers are recognised and acted upon. E.g., GP's instructed to ask who supports in the care that a person is given and employees asked about their caring responsibilities – at recruitment stage and at supervision.</p> <p>Embed strategy findings into resource packs for commissioners.</p> <p>Obtain feedback from carers of all ages.</p>	<p>Let's Talk Local, Shropshire Choices</p> <p>Work with education providers to implement</p> <p>Use national and local data to inform commissioning and service monitoring and development such as; ASCOF returns, annual Joint Strategic Needs Assessment, Shropshire Council Local Account priorities and commitments. Contract monitoring arrangements.</p> <p>Information from NHS Carer Voice project Shropshire local account, Shropshire Choices, CT4A newsletter.</p> <p>CCG contracts with GP practices more prescriptive about what they have to do for carers.</p> <p>Agreed set of statements written and liaison with commissioner/legal team.</p> <p>Making use of feedback from user and carer groups including Making it Real, CT4A carers Groups (including young carers), RCC Circles, Mental Health, PACC etc. feedback should feed into (and out of) and be managed by Carers Partnership Board to influence future planning.</p>	<p>CT4A/Children's services/</p> <p>Data Intelligence – PH</p> <p>Commissioners – CCG/LA</p> <p>Commissioners – CCG/LA/Legal Teams</p>	

Priority 2 - Carers are enabled to have time for themselves				
Action	What needs to happen	How	Who needs to be involved	Completion Month/Year
<p>2a. Review assessment process for all carers and ensure understanding of replacement care needs.</p> <p>Identified Lead: Abi Butters</p> <p>Themes Training Consultation Publicity/awareness/campaigns Assessments/pathways/protocols Commissioning and contracts Desk top research and direct meetings</p>	<p>Review contract to assess whether it fully meets the needs of carers, with a view to informing contract review meetings and the next contracting round.</p> <p>Review assessment process</p> <p>Involve young carers in cared for assessments where appropriate and possible</p> <p>Young carer/young adult carer assessments to be carried out</p> <p>Continue to involve current carers groups and the community in the development of networks, knowledge and feedback of alternative forms of replacement care as part of work under (5-year project) P2P 'replacement care project' called Local Support Swop. Largely based upon volunteering, gifting, reciprocal care arrangements.</p> <p>Maintain regular update reporting to FCPB for ongoing project monitoring and carer / carer services input.</p> <p>Look at development of Brokerage system to make the process easier.</p> <p>Consider using well-established networks and building upon what is already in place, not just carer specific services.</p>	<p>Contract review.</p> <p>Review to see how it is meeting the needs of carers.</p> <p>Consideration to timing of assessment – e.g. not when young person is in school</p> <p>System in place for this to happen</p> <p>Through Local Support Swap groups due to start March 2017 and current carer groups. Promote Shropshire Support Finder https://issuu.com/carechoices/docs/shropshire_support_finder_2015_16_1, Shropshire Choices and Carers Trust 4All CERS service. Detailed local knowledge to identify, signpost and develop replacement care options within communities.</p>	<p>Commissioners – CCG, ASC, Children's Services, SEND</p> <p>ASC/Children's Services/P2P/CT4A</p>	
<p>2b. Communicate and promote available replacement care including community support.</p>	<p>Publicity and promotion for carers and the cared for.</p> <p>Identifying what specialist services there are/not and developing support where there are gaps.</p>	<p>Through Local Support Swop, other carer networks including PACC and young carer groups and community venues for example. Shropshire Choices/Community Directory.</p> <p>Commission and promote through commissioning role.</p> <p>Through Local Support Swop, other carer networks including PACC and young carer groups for example.</p>		
<p>2c. Identify and promote carer networks for all types of carer and develop support for where gaps exist</p>	<p>Promote carer but also non-carer specific groups across the county. - being involved in non-carer specific groups within the wider community, supports community integration and reduces isolation.</p> <p>Identify gaps.</p>	<p>Map provision, including non-carer specific groups. Ensure this information is available in varying and accessible formats. Link to hyperlocal directories and include education providers and employers.</p> <p>Need for 'support' networks (e.g. virtual groups, reciprocal care groups etc.) as identified by carers, will be created, developed, and supported as part of work under Local Support Swop. In addition, identification</p>		

		of need could be obtained through CT4A support groups countywide.		
2d. Develop a carer centred approach within services, (for example appointment flexibility and hospital visiting times).	<p>Define what carers want and need in terms of appointment flexibility and use formal contracting (part of priority 1 'commissioning of services') to define and deliver an appointments system that supports carers.</p> <p>Look at possibility of developing online self – service tools such as completing a simple carers assessment.</p> <p>Investigate whether GP Practices have protocol for identifying carers and have flexibility with appointments. If not, what could be done?</p> <p>Investigate education and employers re carers and flexibility. (links to Priority 5)</p>	<p>Consult with carers. E.g. through Local Support Swop, and other carer networks including PACC and young carer groups.</p> <p>Design of on-line assessment, and responsible body for actioning on-line results.</p> <p>Good practice examples. Link with CCG and GP lead to investigate implementation.</p> <p>Links to workforce and pledge.</p>	SPIC? Housing Shropshire CCG	
2e. Promote the use of Assistive Technologies such as GPS trackers and Telecare systems where appropriate	Carers and general public are aware of Assistive Technologies available.	<p>Locality demonstrations - linking with housing/CT4A 'Carer days' or if generic, using libraries for example.</p> <p>Commission where appropriate</p>		

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Priority 3 - Carers can access timely, to up to date information and advice				
Action	What needs to happen	How	Who needs to be involved	Completion Month/Year
<p>3a. 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. N.B Check contracts to see who is responsible</p> <p>Identified Lead: David Whiting</p> <p>Themes Training Consultation Publicity/awareness/campaigns Assessments/pathways/protocols Commissioning and contracts Desk top research and direct meetings</p>	<p>Comprehensive information service for carers (web based, paper based, etc.) that is kept up to date.</p> <p>Explore options for making information more widely accessible e.g. factsheets and newsletters etc. in GP, dentist, library.</p> <p>Ensure locality model takes account of this.</p> <p>Work with health providers such as GP's, to link carers with health and social care services earlier. This early intervention should help prevent escalation carer's own health, reduce their stress and contribute to the prevention of carer breakdown.</p> <p>Investigate if falls prevention can be Integrated to Carer Health Assessment. Promote fallsassistant.org.uk, which self-assesses the risk of falls on-line. Role of MECC.</p>	<p>Commission? Write in to contracts. Investigate what each agency does as part of providing information.</p> <p>Potential work under Shropshire Together. Communications Group. Links to Hyperlocal Directory. Locality hubs need to play a key role. Link to resilient communities etc. Shropshire Choices. Public health campaigns incl. flu, One You etc. Campaign in GP Practices, dentist library etc.</p> <p>Training or workshops? GP practice team meetings/ links with Boards, which GPs sit on? Work together to make the FCPB more robust arrangement / partnership for future.</p> <p>Local Support Swap and SPIC – looking to develop potential local carers offer around training in e.g. falls prevention, first aid etc.</p> <p>Falls prevention pathway under development.</p>	<p>Shropshire Together/PH Comms. Team, CT4A, Acute Services – hospitals</p> <p>CCG, GP Practices,</p> <p>ASC/SPIC</p> <p>Help2Change</p> <p>Shropshire Council</p>	
<p>3b. Work with education providers to promote information for young carers, young adult carers and parent carers</p>	<p>Ensure information and advice is young person and parent friendly, easily accessible within school, college site, training provider and for parent carers.</p>	<p>Link to Shropshire Choices' website, Shropshire Council website, PACC, schools, colleges, university, training providers' incl. Apprenticeships, websites.</p> <p>Work with young carers, young adult carers and parent carers around design, format and content of information through carer groups, school and college sessions and parent sessions.</p> <p>Employers Charter – see Priority 5.</p>	<p>Carers Trust 4All Education providers – schools, colleges, training providers, university School nursing, Children's Services</p>	

Priority 4 - Carers are enabled to plan for the future				
Action	What needs to happen	How	Who needs to be involved	Completion Month/Year
<p>4a. Embed planning for the future as a part of All-Age Carer Health and other assessment discussions.</p> <p>Suggested Identified Lead: Children's Services</p> <p>Themes</p> <p>Training</p> <p>Consultation</p> <p>Publicity/awareness/campaigns</p> <p>Assessments/pathways/protocols</p> <p>Commissioning and contracts</p> <p>Desk top research and direct meetings</p>	Ensure consistent approach to assessments across organisations who work with carers of all ages.	<p>Review of assessments across all agencies to identify conversation triggers and actions including signposting. Look at CT4A templates and tools.</p> <p>Falls awareness</p> <p>Carers checklist</p> <p>Transition discussions take place for young carers</p>	<p>People 2 People, CT4A</p> <p>School Nursing</p> <p>Mental Health Trust</p> <p>SEND Team, Early Help, ASC</p>	
4b. Provide appropriate workshops for all carers about planning for the future.	Locality Workshops planned to meet the needs of carers. Inclusion of when the carer may no longer be in a caring role, and the way forward.	Look at adapting Carers Trust 4 All workshops or other providers. Consult with carers around content, as planning for the future will have a different meaning or implication, depending on type of care being given.	<p>Chamber of Commerce?</p> <p>Better Care Fund</p> <p>CT4A</p> <p>Voluntary sector</p> <p>Schools/school nurses</p> <p>SEND team</p> <p>Private sector – Law firms</p> <p>Health – End of life care</p>	
4c. Inform future planning of services through data collected about carers.	Decide what data needs to be collected, and how this will be used to inform future planning of services .	<p>Find out where to obtain the data and work with providers to collect this.</p> <p>Use data to assist with future planning – anticipated older population for example.</p>	<p>Data Intelligence Team (Public Health)</p> <p>CSU</p> <p>Early Help</p>	

Priority 5 - Carers are able to fulfil their educational, training or employment potential				
Action	What needs to happen	How	Who needs to be involved	Completion Month/Year
<p>5a. Actively encourage all local organisations to adopt the Employer and Employee Pledge to recognise and support Carers in their employment.</p> <p>Identified Lead: Chris Roberts</p> <p>Themes</p> <p>Training</p> <p>Consultation</p> <p>Publicity/awareness/campaigns</p> <p>Assessments/pathways/protocols</p> <p>Commissioning and contracts</p> <p>Desk top research and direct meetings</p>	<p>Employers sign up to the ADASS Employers Pledge.</p> <p>Take to the Health and Wellbeing Board to adopt as priority.</p> <p>Explore writing the pledge into Provider contracts.</p>	<p>Shropshire Council sign up to the ADASS Employer Pledge as a starting point, then partners, with an aim to cascade across employers in Shropshire. Use networks such as Chamber of Commerce, Business Boards.</p>	<p>ASC P2P Business Board – Public and Private employers Health & Wellbeing Board Chamber of Commerce Elected members</p>	
<p>5b. Increase carers knowledge of their employment rights, responsibilities, including after bereavement.</p>	<p>Carer 'rights' embedded into staff handbooks, starting with the Local Authority.</p> <p>Awareness campaign for carers in employment.</p> <p>Training.</p>	<p>Look at examples of good practice and start with Shropshire Council through liaison with HR.</p> <p>Includes the impact of stopping work. Have easily accessible information on benefits/pension/income.</p> <p>Explore options to develop specific training / information for staff working directly with carers - to increase confidence to speak about employment rights as part of conversation. Links with job centres/CAB/county training/schools & college awareness?</p>	<p>Shropshire Council HR</p> <p>Unions - UNISON</p> <p>Shropshire Council via contracts – CT4A, P2P etc. ADASS employee resources (West Midlands) ACAS</p>	
<p>5c. 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</p>	<p>Professionals and carers of all ages are able to access information appropriate to their needs.</p>	<p>Could include CV writing, applying for courses and training opportunities, access to IT and printing facilities.</p>	<p>Joint Training Learning pool (John Skelton) Online resources and training packages Job Centres Libraries</p>	
		<p>Existing Partners and those to be included:</p> <p>Health GP Practices, Hospital Trusts, Care Home Providers, (SPIC) CCG, School Nursing,</p> <p>Social care P2P, ASC, Children's Services, Early Help,</p> <p>Voluntary Sector CT4A, Alzheimer's Society, Age UK, Community Centres, Parish Councils</p> <p>Education Schools, colleges, university, training providers, Apprenticeships, Youth Sector</p> <p>Corporate Commissioning, training providers, Communication teams</p>		