

Report To: Community Health & Care
Partnership Sub Committee

Date: 20 October 2011

Report By: Robert Murphy
Corporate Director
Inverclyde Community Health &
Care Partnership

Report No:
CHCP/47/2011/HW

Contact Officer: Helen Watson
Head of Planning, Health
Improvement and Commissioning

Contact No: 01475 715369

Subject: Inverclyde Carers Strategy 2012 - 2015

1.0 PURPOSE

1.1 The purpose of the report is to present to Sub Committee members the Inverclyde Carers' Strategy 2012-15 following robust public consultation and seek agreement that the Strategy be issued with a companion document relating to Young Carers on Carers Right's Day in December 2011.

2.0 SUMMARY

2.1 The Inverclyde Carers' Strategy 2012-15 outlines our proposals for how we intend to recognise, value and support carers over the coming three years.

2.2 Carers have been involved in the co production of the strategy. An Editorial Group of carers was set up to support the writing of the strategy as a true joint effort between officers and carers. That process has identified 7 key common themes, which build on the work of the previous strategy, and will be addressed through the action plan.

2.3 The seven key themes are that:

- Carers are supported to live healthy, active lives
- Carers of people with long term caring needs have their specific needs met
- Carers feel included and involved
- Carers are well informed and can access supports they need
- Carers have opportunity to access employment, training, leisure and volunteering
- Carers housing requirements are addressed
- Carers are enabled to develop their own support and have access to breaks from their caring role.

2.4 The action plan within the strategy is based on these themes, and the specific actions therein are derived by building on the review of what the previous Carers' Strategy delivered, and also from a range of engagement mechanisms with local carers

2.5 The process has been very inclusive and regarded by carers and officers as a positive way of working, and we have begun using a similar approach with young people to create a companion document relating to Young Carers.

3.0 RECOMMENDATIONS

3.1 Members are asked to note the inclusive co-production approach used to develop this draft strategy.

- 3.2 Members are asked to note the co-production approach with young carers to develop a companion Young Carers' Strategy.
- 3.3 Members are asked to approve the Carers Strategy 2012 – 15, and the companion Young Carers strategy (when complete) for publication.

Robert Murphy
Corporate Director
Inverclyde Community Health & Care
Partnership

4.0 BACKGROUND

- 4.1 Inverclyde Carer Strategy 2012 – 2015 has been developed by Inverclyde Community Health and Care Partnership and its partners to acknowledge the important role played by carers in providing unpaid care in our community for loved ones, friends and relatives. It promotes the need to recognise carers, as key partners, in the delivery and planning of care and it contains the key messages identified by carers, as being important in assisting them to carry on with their caring role, whilst maintaining a life of their own.
- 4.2 The Scottish Government's national Carers Strategy estimates that 1 in 8 of the population are carers at some point in their life. So on that basis it is estimated that there are approximately 9892 carers in Inverclyde. It is anticipated that these figures will grow considerably over the next 10 years with the expected demographic change in the numbers of older people and shift in the balance of care towards providing more support in the community.
- 4.3 Carers have been involved in the co production of this strategy to address key issues which have been prioritised for action in 2012-2015. An Editorial Group of carers was set up to support the writing of this strategy as a true joint effort between officers and carers. This particular strategy has identified 7 key common themes, which build on the work of the previous strategy, and will be addressed through the action plan.
- 4.4 The need for a local Carers Strategy is driven by a requirement from Scottish Government to produce a local plan for carers, which reflects the commitment made by both NHS Greater Glasgow and Clyde and Inverclyde Council to prioritise support and services for carers in recognition of the major contribution that they make to our communities and the need to support them as partners in the delivery of care. In Inverclyde the CHCP is committed to working in partnership with carers and other agencies to deliver quality services and supports for carers, whilst upholding the principles of Inverclyde Carers Charter.
- 4.5 Our local strategy for young people who are carers (young carers) is being developed through Children and Young People's services, involving young people themselves in the writing of the strategy. Both strategies will be launched together, as partner documents, on Carers Rights Day in December 2011 and will be monitored by carers over the course of the lifetime of the strategy.

5.0 PROPOSALS

- 5.1 It is proposed that the Carers Strategy 2012 – 2015 acts as a means of restating our committed to Carers, as per the Inverclyde Carers Charter. Our commitment is that carers should:
 - Have a life of their own
 - Have a right to choose whether or not to be a carer
 - Be supported in their caring role and have access to an independent assessment of their needs
 - Be supported to deal with the costs of caring (financial, time, health, wellbeing and opportunity)
 - Have a say in the design of the package of care being provided for their loved one
 - Have access to a short break in their caring role ranging from overnights to a couple of weeks.

5.2 It is proposed that the Carers Strategy 2012 – 15 delivers on 7 key themes via the action plan.

- Carers are supported to live healthy, active lives through access to quality services for their loved ones and through promotion of their own health and well being (GP registers; hospital experience ;access to services; and supports at carers centre)
- Carers of people with long term caring needs such as children with disabilities/older carers have their specific needs met (appropriate planning at transitional stages and by emergency planning through care planning processes)
- Carers feel included and involved (assessment, care planning and review, emergency planning, communication with staff as well as strategic and service development opportunities)
- Carers are well informed and can access supports they need (information; carers assessment and financial advice)
- Carers have opportunity to access employment, training, leisure and volunteering (training; leisure; volunteering for former carers)
- Carers housing requirements are addressed (aids adaptations; housing requirements)
- Carers are enabled to develop their own support and have access to short breaks from their caring role (self directed support and alternative breaks).

5.3 It is proposed that the Strategy and Action plan are reviewed annually, involving carers, in order to ensure that progress is on track and that any additional actions required are initiated.

5.4 It is planned that Part 2 of the Strategy related to young people who are carers (Young Carers) is completed using the same method of co-production, for publication alongside the adult Carers Strategy on Carers Right's day on December 2011.

6.0 IMPLICATIONS

6.1 Legal: None

6.2 Finance:

Cost Centre	Budget Heading	Budget Year	Proposed Spend this Report	Virement From	Other Comments

6.3 Personnel: None

6.4 Equalities: An Equalities Impact Assessment of the Strategy and Action Plan will be completed following sign off by Committee and prior to publication.

7.0 CONSULTATION

7.1 The process of developing the Carers Strategy 2012 – 15 (and part two relating to young carers) has involved significant public consultation, and staff consultation via the multi-agency Carers Development Group.

8.0 LIST OF BACKGROUND PAPERS

8.1 None.

Inverclyde Carers Strategy 2012-15

Inverclyde CHCP



Foreword

On behalf of Inverclyde Community Health and Care Partnership (CHCP), the carers of Inverclyde and our partners, we are delighted to introduce the Inverclyde Carers Strategy 2012 – 15.

For the first time our new Strategy has been coproduced with local carers. Carers have always had the opportunity to influence our Carers Strategies, but this time it has truly been a joint effort through the involvement of an Editorial Group of carers who have helped write the Strategy along with CHCP staff, making use of evidence gathered from carers via a wide engagement process. In another first we are delighted to present our Local Strategy for Young People who are carers (young carers), alongside the main strategy.

As carers we have been pleased to fully participate in this process and will continue our involvement through the monitoring of the strategy. There have been many positives coming from the last strategy and we are keen to keep working more on these. There is still more that partners need to work together on and we hope to address this through the course of this strategy.

The role that carers play in supporting loved ones to live their lives has never been more important, or had such a high profile. Services are reliant on the partnerships that exist between individuals, services and carers to ensure the best possible outcomes for people. The wellbeing and safety of carers themselves should never be forgotten, however, and we hope our strategy reflects this aspiration. We truly do want to try our best to 'Get it Right for Every Carer' including those who are caring in a hidden way for loved ones.

We have continued to make good progress locally through our interagency approach to supporting carers, but we can not be complacent. Carers have a right to a healthy, active and fulfilling life of their own and we are committed to working together to ensure this, and to promoting carers rights and entitlements to support from local agencies and community groups, as well as what carers can do to support each other.

Around one in eight of us is estimated to be a carer and can become a carer at any time. Our aim in this strategy is to ensure we all work well together to deliver the quality services and outcomes we would all wish for ourselves, our loved ones, friends and neighbours.

Councillor Joe McIlwee
Chair
Inverclyde Community Health
& Care Partnership (CHCP)

Lynn Kane
Carer
Member of Carers Strategy
Editorial Group

Contents

Foreword	2
What is the Inverclyde Carers Strategy?	4
Our Commitment to Carers Living in Inverclyde	5
Who is a Carer?	5
Profile of Carers in Inverclyde	5
National and Local Policy Drivers	6
Working for Carers in Inverclyde	7
Our Progress and Next Steps	9
Key Outcomes	20
Action Plan	22

1. What is the Inverclyde Carers Strategy?

Inverclyde Carer Strategy is simply a plan. It has been developed by Inverclyde Community Health and Care Partnership and its partners to acknowledge the important role played by carers in providing unpaid care in our community for loved ones, friends and relatives. It promotes the need to recognise carers, as key partners, in the delivery and planning of care and it contains the key messages identified by carers, as being important in assisting them to carry on with their caring role, whilst maintaining a life of their own.

Carers have been involved in the coproduction of this strategy to address key issues which have been prioritised for action in 2012-2015. An Editorial Group of carers was set up to support the writing of this strategy as a true joint effort between officers and carers. This particular strategy has identified 7 key common themes, which build on the work of the previous strategy, and will be addressed through the action plan.

The need for a local Carers Strategy is driven by a requirement from Scottish Government to produce a local plan for carers, which reflects the commitment made by both NHS Greater Glasgow and Clyde and Inverclyde Council to prioritise support and services for carers in recognition of the major contribution that they make to our communities and the need to support them as partners in the delivery of care. In Inverclyde the CHCP is committed to working in partnership with carers and other agencies to deliver quality services and supports for carers, whilst upholding the principles of Inverclyde Carers Charter.

Our strategy is developed around feedback from carers and issues identified by carers, living in Inverclyde, as being key to enabling them to continue with their caring role. The feedback was drawn from a variety of sources including events organised by Your Voice, feedback given to the Care Commission about local services, issues identified by carers using services of the Carers Centre and from a range of focus groups organised for carers around specific themes. This information was then analysed by the Planning and Performance section of the CHCP and taken forward with an Editorial Group of carers, CHCP staff and the interagency Carers Development Group.

We hope this strategy, like its predecessors, can be used as a working document by carers and key agencies alike, to work together towards delivering the outcomes which carers have identified as being the most important.

Our local strategy for young people who are carers (young carers) is being developed through Children and Young Peoples' services, involving young people themselves in the writing of the strategy. Both strategies will be launched together, as partner documents, on Carers Rights Day in December 2011 and will be monitored by carers over the course of the lifetime of the strategy.

2. Our commitment to carers living in Inverclyde

As set out in the Inverclyde Carers Charter, our commitment is that carers should:

- Have a life of their own
- Have a right to choose whether or not to be a carer
- Be supported in their caring role and have access to an independent assessment of their needs
- Be supported to deal with the costs of caring (financial, time, health, wellbeing and opportunity)
- Have a say in the design of package of care being provided for their loved one
- Have access to a short break to their caring role ranging from overnights to a couple of weeks.

3. Who is a carer?

A carer is anyone who provides unpaid care to a relative; partner; family member neighbour or friend, who has a physical or mental disability/ illness or an addiction issue.

A carer can be of any age and come from any background or ethnic group. In fact anyone of us could become a carer with estimates that 1 in 3 of us will become a carer at some point in our lives. Some carers have a lifetime of caring, as in parents following the birth of a child with a disability, others can be in a caring position for just a short period. Support is available to assist individuals with their caring responsibilities not only to cope with their caring role, but also to have a life outside of caring. Children can often find themselves in a caring role for a parent or a brother or sister and for the first time a Young Carers Strategy for Inverclyde is being developed with a range of partners, and young carers, to identify the best possible ways of supporting young carers.

This plan also acknowledges the important contribution that former carers can make in a volunteer capacity supporting other carers through buddying, befriending or advocating and acknowledges the valuable contribution and experience they have to offer.

4. Profile of Carers in Inverclyde

The Scottish Government's national carers strategy estimates that 1 in 8 of the population are carers at some point in their life. So on that basis it is estimated that there are approximately 9892 carers in Inverclyde. It is anticipated that these figures will grow considerably over the next 10 years with the expected demographic change in the numbers of older people and shift in the balance of care towards providing more support in the community.

The statistics below are based on the 2001 census. At the time of printing the results of the 2011 census were not yet available. We have used the census information rather than GROS (General Register of Scotland) data because the census has some specific information about carers. While we accept that this information is quite old the general principles and scale, we believe, remain relevant. An update will be provided following the first review of the strategy, when new census information is available.

Table 1 Provision of hours of unpaid care per week in Inverclyde by age group and sex suggests most carers provide care for between 1 and 19 hours each week (59% of all carers) with a significant number providing over 50 hours per week (27% of all carers).

Age Group	1-19hrs of care		20-49hrs of care		50+ hours of care		Total
	Male	Female	Male	Female	Male	Female	
0-15	57	74	4	9	6	3	153
16-64	1574	2551	312	660	644	1018	6759
65-84	230	283	67	88	231	298	1197
85+	9	7	3	2	7	14	42
TOTAL	1870	2915	386	759	888	1333	8151

Source 2001 Census, data supplied by SCROL

Table 2 Number of Carers reporting 'Not Good Health' by age group and sex indicates the proportion of people with poor health increases as weekly hours of care rise – this varies between men and women; 1 in 4 men caring for 50 hours or more each week reported poor health, as did 1 in 5 women.

Age Group	1-19hrs of care		20-49hrs of care		50+ hours of care		Total
	Male	Female	Male	Female	Male	Female	
0-15	1	0	0	0	0	0	1
16-64	139	206	51	91	164	188	839
65-84	27	31	16	16	57	79	226
85+	3	0	0	0	3	5	11
TOTAL	170	237	67	107	224	272	1077

7.5% of female carers reported poor health as did 5.6% of male carers.

5. National and Local Policy Drivers

Our strategy is framed by national policies and legislation which recognise carers as partners in the delivery of care, as well as being based on issues identified by local carers. These are some of the key policy drivers:-

- NHS and Community Care Act 1990
- Carers (Support and Recognition) Act 1995

- Community Care and Health Act 2002
- Care 21-'The Future of Unpaid Care' 2005
- Caring together; Carers Strategy for Scotland 2010-15
- NHS Quality Strategy 2010
- Inverclyde Community Care Plan (2009-12)
- Inverclyde Joint Carers Strategy (2008-11)
- Inverclyde Community Engagement Strategy (2005-2015)
- NHS Scotland Quality Strategy (2010)
- Inverclyde CHCP Directorate Plan 2010 - 13
- Inverclyde CHCP Development Plan – Annual Update 2011/12
- Inverclyde Council Corporate Plan-2011-12
- NHS Greater Glasgow and Clyde Corporate Plan
- NHS Greater Glasgow and Clyde Carers Policy Framework
- Reshaping Care for Older People Change Plan

6. Working for and with carers in Inverclyde

The partners are committed to enabling carers to continue with their caring role with as little impact on their health and wellbeing as possible, whilst having a life outside of caring. While caring for a loved one, friend or neighbour can be a positive and enriching experience if properly supported, it does not come without challenge. The partners are heavily involved in supporting carers by working together across a range of issues. We are committed to continuing to respond to needs identified by carers, as has been evidenced over the life of the past 2 local carers strategies, within the financial constraints that we face. Indeed Inverclyde has been cited in the National Carers Strategy for 2 examples of best practice, namely the funding of a range of different types of breaks for carers by the Carers Centre, and the Timeout training programme organised by staff within the CHCP. We recognise that more needs to be done and that we are facing new challenges with the introduction of self directed support and the reablement agenda, not to mention the changing demographic and increase in the older population over the next 10-15 years.

The implementation of the strategy action plan will be centrally monitored by the partners to ensure that the outcomes are delivered for carers.

The partner organisations involved in the local response to the needs of carers are:-

- **Inverclyde Carers Council**

Inverclyde Carers Council is a voluntary organisation of carers who promote the interests of carers locally and lobby on their behalf. It was the Carers Council who were instrumental in establishing the Carers Centre in Inverclyde and the Carers Council, who are the leading partner in the promotion of the Carers Charter for all carers.

- **Your Voice - Inverclyde Community Care Forum**

Your Voice represents a large number of community care stakeholders throughout Inverclyde. In addition to their partnership role with the CHCP Your Voice is commissioned to undertake pieces of consultation and engagement on behalf of the CHCP. Your Voice organised a number of engagement events with carers for the purpose of informing this strategy and continue to play a role in its implementation, via the interagency Carers Development Group.

- **Inverclyde Carers Centre**

Inverclyde Carers Centre is a limited company run by carers and former carers for the benefits of carers living throughout Inverclyde. The centre employs 5 staff and provides a range of support to carers including information and advice; support groups; stress management; short breaks. The centre plays a key role in the identification and support of carers both at the Centre and through its outreach work and is a key partner in the implementation of the strategy.

- **Inverclyde Community Health and Care Partnership (CHCP)**

Inverclyde CHCP is a partnership of NHS Greater Glasgow & Clyde and Inverclyde Council. The CHCP delivers community health and social care services to the people of Inverclyde and employs over 1000 staff. The CHCP was established with the coming together under one management structure of Inverclyde Community Health Partnership (CHP) and Inverclyde Council Social Work Services in October 2010. The CHCP leads on the review and continual development of the Inverclyde Carers Strategy through the Carers Development Group.

7. Our Progress and Next Steps

This section takes a look at what we said in the last strategy and what actions we have taken to achieve these goals and what still requires to be done. The quotes under 'What have carers told us about this?' have come from the range of engagement activities we have undertaken with carers as part of the development of this strategy.

Respite/Short Breaks	What did we say we would like to achieve?	What did we actually achieve?	What have carers told us about this?	What do we still need to do?
	Develop equity in accessing short breaks service across client groups where gaps exist.	A broader range of care groups have accessed short breaks including mental health and families affected by drug issues.	'I don't feel carers of people with mental health issues get access to short breaks.' 'There is a gap in respite for kinship carers'	Ensure all care groups are able to access short breaks through all staff accessing the Short Breaks Bureau Action Plan Ref: Short Breaks1
	Shift the balance of care away from traditional models of respite towards alternative breaks where appropriate	The Short Breaks Bureau has arranged alternative breaks for carers out with the traditional models.	'Hillend has been a godsend-we need more units like that' 'Breaks through the carers centre are great'	Need to ensure all care groups are being enabled to access short breaks by all staff and direct payment recipients accessing the Bureau to arrange breaks. Action Plan Ref: Short Breaks 2
	Broaden the options of breaks available	The Short Breaks Bureau has enabled service users to access alternative breaks on their own or with other	'I would rather access respite for myself and my son to go away together.'	Need to promote alternative forms of family breaks if this is the wish of the individual and carer.

Respite/Short Breaks	What did we say we would like to achieve?	What did we actually achieve?	What have carers told us about this?	What do we still need to do?
		members of their families in lodges or caravans as family has met the care needs.	'Our break at an adapted house in North Berwick was great. It felt like a normal experience for us as a family'	Action Plan Ref: Short Breaks 4
			'Lack of suitably trained / experienced staff to provide respite (sitting service) for children with disabilities.' 'I've been trying to access direct payments for over 2 years' 'Kinship carers never get a break'.	Identify the gaps in particular care groups and promote the direct payments/self directed care model Action Plan Ref: Short Breaks 3
	Develop community based options within Sheltered Housing	2 Housing providers currently involved in community based breaks.	'The service at Rowan Gardens was invaluable. I got a good night's sleep.' 'It would be good to get someone in at night - sitter service - as my husband keeps getting up during the night.'	Need to tie in with Older Peoples and Learning Disability services strategies. Action Plan Ref: Housing 4
	Explore opportunity for former carers to be involved in promoting	Initial meetings held regards developing befriending role for former carers.	'Former carers need support once the caring role is over to help them	Develop befriending opportunities with former carers with a view to

Respite/Short Breaks	What did we say we would like to achieve?	What did we actually achieve?	What have carers told us about this?	What do we still need to do?
	Shared Care through Befriending		make new friends and continue to make a contribution'	developing shared care. Action Plan Ref: Training Employment and Volunteering Opportunities 1
	Budgets devolved to Inverclyde Carers Centre	Carers have been able to access group holidays as well as sitting services via the carers centre	'Have really appreciated the sitting service at the carers centre.' 'The break organised through the carers centre was fantastic. It allowed my husband and I to have a break from caring at same time.'	Further explore opportunities for carers to have breaks from their caring roles. Action Plan Ref: Short Breaks Bureau
	Develop access to overnight and emergency respite.	Short breaks Bureau has access to arranging emergency cover overnight	'In an emergency situation there is a lack of local respite' Assessment made me aware of what the Short breaks Bureau can offer me through my social worker'	Need to develop emergency planning in conjunction with carers and staff involved in care planning. Action Plan Ref: Short Breaks 2
	Promote the use of technological support (Telecare) to enable	Over 600 carers/families have benefitted from the introduction of telecare equipment such as	'Telecare staff are very helpful and proactive.'	Need to further develop benefits of this and telehealth equipment.

Respite/Short Breaks	What did we say we would like to achieve?	What did we actually achieve?	What have carers told us about this?	What do we still need to do?
	carers to have a break from caring with some security.	falls detectors and bed alerts.		Action Plan Ref: Housing and support at Home 4
	Further develop joint working in relation to transitional arrangements from children to adult services.	Some work has been undertaken with children and disabilities team and Short Breaks Bureau staff in preparation for adulthood.	<p>'I don't know what is going to happen after my son turns 18. Who is going to advise me about what services I can get?'</p> <p>'Need to be able to plan in advance and get information about college and other options'</p>	<p>Ongoing work in relation to children with disabilities but need to look at needs of young carers aged 18-25</p> <p>Action Plan Ref: Transitions 1</p>

DRAFT

Information for carers	What did we want to achieve?	What did we actually achieve?	What have carers told us?	What still needs to be done?
	Consolidate the carer assessment process and increase access to assessments.	New tool has been piloted and evaluated. Process agreed.	<p>'Carers should not have to ask for an assessment they should be offered one as a matter of course'</p> <p>The carers assessment made me think about the need to plan for emergencies. It also made me aware of services available and how to access these.'</p>	<p>Self assessment tool being developed in conjunction with Carers Centre.</p> <p>Action Plan Ref: Informed and Supported 1 and 2</p>
	Improve Hospital discharge and links with hospital for carers	NHS GG&C committed to undertaking assessment of carers needs to address key issues.	<p>'Carers are often left out at the point of discharge from hospital'</p> <p>'Staff ignore carers and do not give them their place in hospital'</p>	<p>Assessment to be conducted and work to be developed.</p> <p>Action Plan Ref: Health and Wellbeing 4</p>
	Improve the use of different media to develop promotional material.	Solas screens in Health Centres in use. Websites.	'Good step forward but the monitoring of the material needs to be regularly reviewed. The volume has been muted on some screens.'	<p>Action Plan Ref: Informed and Supported 5</p>

	More focused use of information packs	Carers Centre distributed over 1000 information packs.	'Sometimes you get all kinds of information and you don't take it all in, or fully understand what is actually being offered.'	Subgroup needs to consider more focused distribution of information. Action Plan Ref: Informed and Supported 5
	Develop staff network to ensure staff have up to date information on carers issues.	User/carer forum was established within social care prior to the reorganisation	'Is a bit hit and miss how you find out about things-should be social worker/CPN/nurse at that first point of contact, passing on relevant information'	Develop information network on carers issues for staff to keep up to date on developments. Action Plan Ref: Involvement 1

DRAFT

Carer involvement	What did we want to achieve?	What did we actually achieve?	What did carers tell us?	What still needs to be done?
	Consolidate funding for advocacy	Centre has now absorbed advocacy into the core role of staff	'As carers you can feel exhausted and tired and applying for things like aids and adaptations being fitted in your home can become another area where you have to fight your corner to get things done'	Continue to support carers with their issues. Action Plan Ref: Involvement 2
	Further develop Your Voice Training for carers, particularly hidden carers	Your Voice has delivered a series of courses for carers.	'I love getting out and meeting people' 'Can talk to other carers and share views-learn information'	Further training and development of peer support groups training planned including Health in the community courses. Action Plan Ref: Informed and Supported 2
	Consolidate a partnership approach to carer involvement and voice	Briefing sessions around recognition of carers as partners for social care staff. Carers Centre developing Carers network	'Felt left out of the loop when decisions were being made about the person I care for' 'Some care managers are really good, keep me informed and up to date with changes in service'	Partners are signed up to recognition and involvement of carers as partners in care planning as well as listening to views of carers. Action Plan Ref: Informed and supported 2

Carer involvement	What did we want to achieve?	What did we actually achieve?	What did carers tell us?	What still needs to be done?
	Ensure carers are involved in implementation of community engagement	Carers are engaged in Your Voice Stakeholders Network and Carers Network	'The carer support groups are excellent-a real lifeline'	Carer Network will feed into stakeholder advisory group. Action Plan Ref: Involvement 5
	Hold joint needs event to allow carers a voice about their health needs.	Carers Carnival held on an annual basis to celebrate carers.		Continue to work in partnership with carers organisations and agencies to host carers events. Action Plan Ref: Involvement 5

DRAFT

Training and Employment	What did we say we would do?	What did we achieve?	What did carers tell us about it?	What still needs to be done?
	Identify links with James Watt College	Due to restructuring of college this did not develop. However links have been made with Woopi /Community learning and other training providers.	'I felt the distance learning course I did on dementia taught me so much' 'Need support and help at initial diagnosis'	Further develop opportunities for carers to access learning and training for employment Action Plan Ref: Employment and Training 3
	Develop training courses for carers	Training sub group organised a series of training including Carers Survival course; Timeout Health improvement and Your Voice confidence training	'Training would have helped me cope with the condition of the person I am caring for. This would make for a better understanding of the condition and how to care for them.'	Training subgroup continue to develop and promote training available for carers Action Plan Ref: Employment and Training 3
	Raise staff awareness through briefing sessions	8 different briefing sessions were organised for staff in social care with the involvement of cares.	'I think the social workers found it really useful and were quite shocked at how caring affected my financial situation'.	Develop further briefings for staff around carers issues in health and social care. Action Plan Ref: Employment and Training 5
	Promote the use of Independent Learning	Independent Learning Accounts were accessed to a limited	Carers who took up courses found them very	Continue the work of the training sub group.

Training and Employment	What did we say we would do?	What did we achieve?	What did carers tell us about it?	What still needs to be done?
	Account to access learning opportunities.	extent	useful.	Action Plan Ref: Employment and Training 3
	Develop employability issues with key partners	Worked closely with Department of Work and Pensions (DWP) to promote new deal for carers.	'As a carer I miss going to work but had to give it up to be a full time carer-my mum gets stressed and anxious if I leave here with someone else-we do practically everything together..'	Need to work with employers around being more carer aware. Action Plan Ref: Employment and Training 2

DRAFT

Health and Wellbeing	What did we say we would do?	What did we achieve?	What did carers tell us?	What still needs to be done?
	Promote annual recall for carers health checks with GP practices, using carers registers.	PASS nurses been very proactive in establishing carers registers at GP practices. At Nov 10 1106 carers had been registered with their GPs and 212 health checks were conducted. PASS nurses been valuable in undertaking health checks at Centre and at carers events.	'Is there a system in place for carers health to be checked regularly?' 'My GP was the person who got the ball rolling to organise respite for my husband to attend day centre'	Ensure opportunities for carers health checks to be conducted. Action Plan Ref: Health and Well being 1
	Continue to offer alternative therapies to carers including stress management.	Carers Centre has been successful in securing funding for stress management and other forms of relaxation.	'Accessing therapies at the hospice was very beneficial'.	Ensure carers still have access to these services. Action Plan Ref: Health and Wellbeing 5
	Develop counselling for carers	Counselling sessions available at Carers Centre due to CIS funding.	'Really valued the counselling service'.	Action Plan Ref: Health and Well being 5
	To promote the use of technological support (Telecare) amongst carers	Over 600 families/carers have benefitted from the installation of telecare equipment.	'Telecare staff are very helpful and proactive.' 'Found out about telecare through GP'	Continue to promote telecare and telehealth benefits to cares. Action Plan Ref: Housing 4

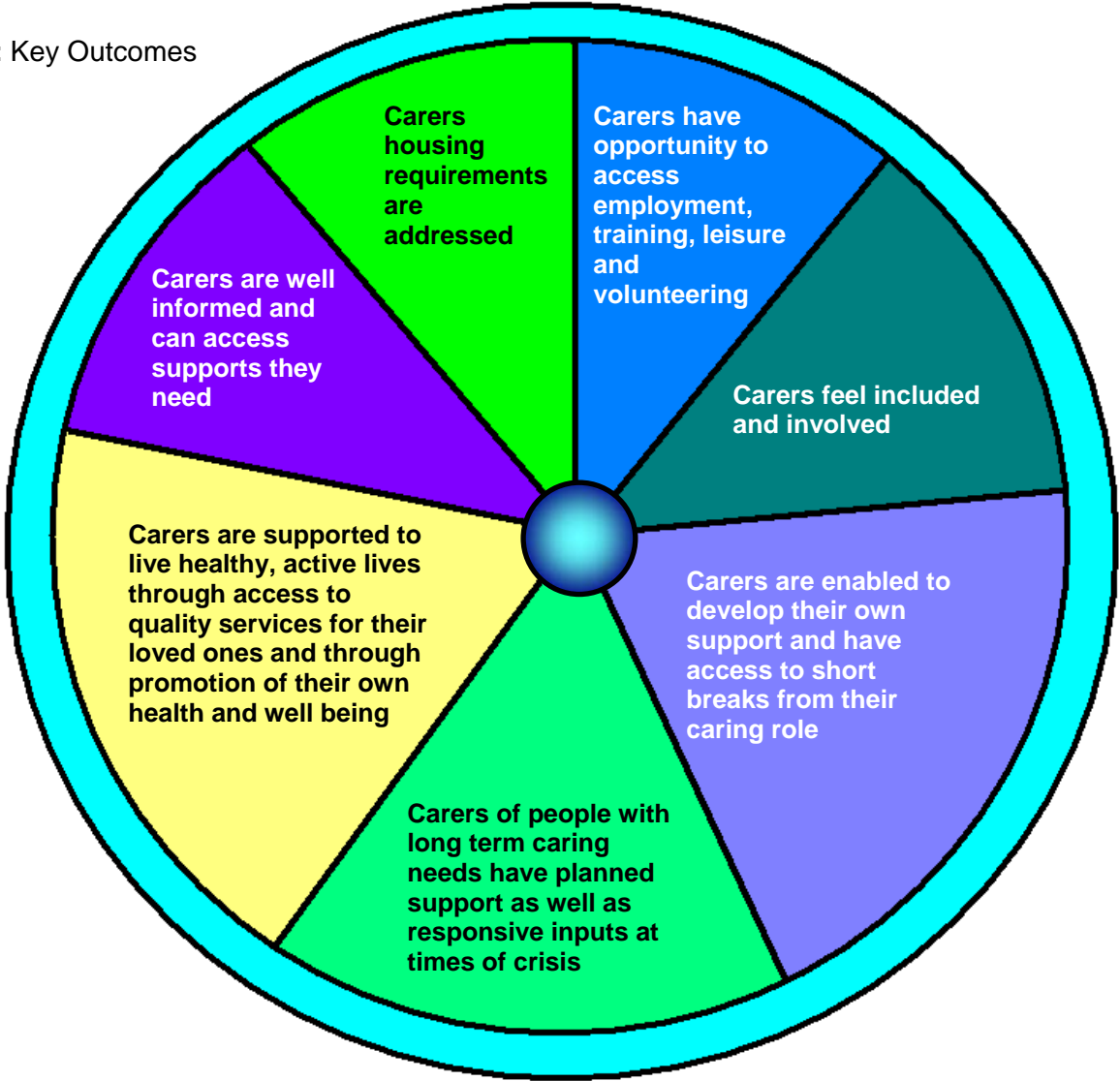
8. Key Outcomes

The following key outcomes for carers in Inverclyde will result from our commitment to this strategy

- Carers are supported to live healthy, active lives through access to quality services for their loved ones and through promotion of their own health and well being(GP registers hospital experience access to services and supports at carers centre)
- Carers of people with long term caring needs such as children with disabilities/older carers have their specific needs met (appropriate planning at transitional stages and by emergency planning through care planning processes)
- Carers feel included and involved (assessment, care planning and review, emergency planning, communication with staff as well as strategic and service development opportunities.)
- Carers are well informed and can access supports they need (information; carers assessment and financial advice)
- Carers have opportunity to access employment, training, leisure and volunteering (training; leisure; volunteering for former carers)
- Carers housing requirements are addressed(aids adaptations; housing requirements)
- Carers are enabled to develop their own support and have access to short breaks from their caring role (self directed support and alternative breaks).

Our key outcomes are represented visually in diagram 1.

Diagram 1: Key Outcomes



am 1: Key Outcomes

9. Action Plan

Our action plan sets out what we will do in the lifetime of this strategy, who will be involved, and how we will know we have achieved each action. We will do more work on evidencing how each action fits to the wider agenda (strategic fit) when actions have been finalised.

CARERS HEALTH AND WELL BEING

Carers are supported to live healthy active lives through access to quality services for them and their loved ones

Key issues identified to be addressed

- Emotional and physical support
- Relationships with GPs and development of registers
- Annual health checks
- Access to alternative therapies
- Counselling

Ref.	Where do we want to be?	How will we get there?	How will we know that we have got there?	Strategic Fit	Who will be involved?	Timescale
H&WB 1	Carers have access to health checks.	GPs take responsibility for organising Health Checks on an annual basis.	Gather information from GP practices regarding number of carers health checks carried out.	National Carers Strategy	Community Nursing	Ongoing

Ref.	Where do we want to be?	How will we get there?	How will we know that we have got there?	Strategic Fit	Who will be involved?	Timescale
H&WB 2	Better links between Carers Centre and GP practices.	Agreed protocol with GP practices through briefing sessions at GP forum.	Recording of source of referrals at Carers Centre and how many from GP practices.	NHS Quality Strategy	Practice Managers/ Carers Centre staff	Ongoing
H&WB 3	Increase number of GP practices proactively supporting carers.	GP's will call carers fro health checks on an annual basis.	Increased numbers of practices offering support to carers and feedback received from carers.	National Carers Strategy	Community Nurses/Carers Centre/ GP Practices.	Ongoing
H&WB 4	Carers find it easier to access appointments from receptionists.	Briefings for receptionists and GP staff on Carers Charter.	Carers feedback.	National Carers Strategy	GP practices/ Community Nursing/ Carers Centre	Ongoing
H&WB 5	Promote a range of alternative supports, therapies and counselling for carers.	In addition to direct provision at Carers Centre encourage carers to access other support services.	More Carers have accessed relaxation and allied health services.		Carers Centre/CHCP	Ongoing
H&WB 6	Hospital discharge experience improved	Hospital staff will be working with	Carers feedback on how they have been		CHCP Health Improvement/	Ongoing

Ref.	Where do we want to be?	How will we get there?	How will we know that we have got there?	Strategic Fit	Who will be involved?	Timescale
	and carers feel better informed.	carers and informing carers with relevant information about condition, medication and caring role.	informed and received information on condition of cared for person.		Carers Centre	

DRAFT

SHORT BREAKS

Carers are enabled to direct their own support and have access to a break

- Direct Payments
- Alternative breaks
- Breaks with families
- Families are being enabled
- Carers feel supported.

Ref.	Where do we want to be?	How will we get there?	How will we know that we have got there?	Strategic fit	Who will be involved?	Timescale
SB 1	Carers and their families across all client groups will have access to short breaks.	Promotion of short breaks by SBB and introduction of agreed processes within CHCP.	Staff are using short breaks bureau to arrange all breaks. More people accessing alternative short breaks.	National Carers Strategy Short Breaks Process	Short Breaks Bureau staff/ CHCP Assessment & Care Management staff	Ongoing

Ref.	Where do we want to be?	How will we get there?	How will we know that we have got there?	Strategic fit	Who will be involved?	Timescale
SB 2	Continue to develop range of alternative breaks for all care groups.	Short Breaks Bureau staff will identify and promote alternatives with staff and user and carers groups, including breaks which involved the provision of care.	Increase in reporting of alternative breaks and shift in balance of care.		SBB staff/ Assessment and Care Management Staff	Ongoing
SB 3	Carers will be better informed about option of Direct Payments and self directed care.	CHCP staff will advise carers of this option in care planning and briefing sessions will be organised for carers.	Numbers of carers/ families taking up Direct Payments/ Self Directed Support.	Self directed care policy	All CHCP staff/carers centre staff	Ongoing
SB 4	Carers and person they care for may have breaks together.	Promotion of option of carers having breaks with members of their family.	Identify numbers of families who have had breaks.	National Carers Strategy	CHCP staff/SBB and users and carers.	Ongoing
SB 5	Breaks for carers available through carers centre.	Continued promotion and funding of sitting services/ group holidays available through Carers Centre.	Reports of numbers of carers using breaks and feedback from them.	National Carers Strategy	Carers Centre staff/CHCP	Ongoing

BEING INVOLVED

Carers are included and involved

- Assessment care planning/reviews
- Emergency and long term planning
- Voice of carers
- Partners in care and informed of changes
- Involved in reviews

Ref.	Where do we want to be?	How will we get there?	How will we know that we have got there?	Strategic Fit	Who will be involved	Timescale
Inv 1	Carers are influencing policy and practice at a strategic level.	Through the carers network and involvement in CHCP stakeholder Advisory Group.	Active participation and report mechanisms established. Carers feel voice has been heard.	NHS Quality Strategy/ CHCP People Involvement Framework	Carers Network/Carers Centre staff/CHCP/Your Voice	Ongoing
Inv 2	Carers will be actively involved in care planning.	Carers will be involved in assessments and reviews.	Carers views recorded in paperwork.	National Carers Strategy	Assessment & Care Management staff/carers.	Ongoing

Ref.	Where do we want to be?	How will we get there?	How will we know that we have got there?	Strategic Fit	Who will be involved	Timescale
Inv 3	Evidence of emergency and long term planning with carers.	By ensuring carers have considered emergency arrangements in assessment process. Work with colleagues in care groups in relation to long term planning.	Cares assessments will record emergency details/information and work towards establishing a register initially for older carers in relation to work on long term planning.		Local Area Co-ordinator (Learning Disability)/. Short Breaks Bureau Coordinator/ Carers Centre staff	Ongoing.
Inv 4	Carers are viewed and recognised as partners in planning and delivery of care.	Carers are involved and informed of any changes in care plan.	Carers feel fully involved and kept up to date.	National Carers Strategy	Assessment & Care Management staff /Care staff	Ongoing.
Inv 5	Carers are involved in the monitoring and evaluation of the strategy.	Carers will be involved through the carers network and stakeholder Advisory Group.	Carers are invited to give comment on the strategy on an annual basis.	CHCP People Involvement Framework	Carers/ Carers Development Group	Annual

Ref.	Where do we want to be?	How will we get there?	How will we know that we have got there?	Strategic Fit	Who will be involved	Timescale
Inv 6	Carers able to attend meetings and participate with support available.	Carers are made aware of respite support available to enable them to attend meetings or participate in events.	Feedback from carers.	Carers Strategy/ Inverclyde Engagement Strategy.	CHCP staff/ Carers Centre.	Ongoing.
Inv 7	Carers feel involved in the planning and shaping of service and supported to make their voice heard.	Carers are supported by staff to become fully involved in making their voice heard.	Feedback from carers.	Inverclyde Carers Strategy/ National Carers Strategy.	Carers Centre/ CHCP staff	Ongoing

DRAFT

HOUSING, EQUIPMENT AND ADAPTATIONS

Carers housing needs are addressed

- Housing
- Aids and adaptations
- Development of telecare and telehealth

Ref.	Where do we want to be?	How will we get there?	How will we know that we have got there?	Strategic Fit	Who should be involved?	Timescale
Housing 1	More recognition of carers changing housing needs due to their caring role.	Making links with housing forum. Inviting RCH liaison officer onto Development Group.	Carers needs acknowledged within Housing Strategy.	Local Housing Strategy	RSLs/ CHCP Carers Development Group	Over 3 years.
Housing 2	Understanding of links between housing needs equipment requirements and caring role.	Clear information provided to carers and joined up approach between relevant agencies.	Carers report on their needs being met.	National Carers Strategy/ Inverclyde Housing Strategy/ Inverclyde Change Plan.	Housing associations/ Occupational Therapy	Ongoing.

Ref.	Where do we want to be?	How will we get there?	How will we know that we have got there?	Strategic Fit	Who should be involved?	Timescale
Housing 3	Recognition of carers housing needs.	Negotiating with Housing Forum and RSLs.	Reference to carers in common housing allocation policy	Local Housing Strategy	Carers Council/Carers Centre/RSLs	1 year
Housing 4	Continue to promote Telecare and telehealth equipment and its benefits for carers.	Continued involvement of telecare staff and health staff in promoting equipment amongst carers.	Increased numbers of carers benefiting from use of equipment and qualitative feedback from carers.	Older People Strategy/ Change Plan	Telecare staff / district nursing staff	Ongoing

DRAFT

CARERS WHO ARE FACING SPECIFIC CHALLENGES AT TIMES OF TRANSITIONS

Carers who are facing specific challenges at transition periods

Child to adult services, adult to older people, addictions, mental health and dementia have their specific needs met (Conditions training; information access to breaks)

Key issues identified to be addressed.

- Training and information on health conditions
- Health staff need to be more engaged with carer at hospital and community
- Training for grandparents
- Links with community learning partners

Ref.	Where do we want to be?	How will we get there?	How will we know that we have got there?	Strategic Fit	Who should be involved?	Timescale
Transitions 1	Planned transition from children to adult services for carers.	Track 2 case studies over a two year period.	Care plans evidencing clear planning towards transferring to adult services with carer involvement.	GIRFEC/ National Carers Strategy/ Inverclyde Children and Young People's Services Plan/ Young Carers Strategy/ SOA 7	Short Breaks Bureau/ Carers Centre	

Ref.	Where do we want to be?	How will we get there?	How will we know that we have got there?	Strategic Fit	Who should be involved?	Timescale
Transitions 2	Carers with long term caring role feel adequately supported.	Carers received information about conditions at point of diagnosis, e.g. dementia.	Carers feedback through questionnaires/ interviews on feeling better informed and supported.	Inverclyde Palliative Care Action Plan	Mental Health team will organise training sessions.	Ongoing
Transitions 3	Carers are supported to have an understanding of long term conditions.	Training on long term conditions will be organised for carers and other training needs identified by carers.	Numbers of carers who have participated in courses.	Long Term Conditions Strategy	Carers Training Sub Group	Ongoing
Transitions 4	Carers feel they are adequately supported on an equitable basis..	Ensure that gaps in supporting carers of children with disabilities' are addressed .e.g. sitting services/short breaks.	Increase of numbers of families with disabilities accessing sitting services and short breaks.	National Carers Strategy	Short Breaks Bureau /Carers Centre	Ongoing
Transitions 5	Reaching more older carers who tend to be more	By making contact with	Reported increase of	National Carers Strategy/ Older	Partners in Voluntary	Ongoing.

Ref.	Where do we want to be?	How will we get there?	How will we know that we have got there?	Strategic Fit	Who should be involved?	Timescale
	hidden.	agencies and services who are in contact with older people and voluntary organisations regarding supports available to older carers.	numbers of older carers accessing services at Carers Centre and CHCP.	People's Change Plan.	Sector/ CHCP/ NHS acute.	
Transitions 6	More carers aware of their entitlements to benefits and grants at transition stages.	Carers are assisted to claim benefits through individual advice sessions and briefing sessions and at point of assessment.	Measurement of number of claims made	National Carers Strategy	CHCP staff/ Financial Fitness/ Welfare Rights/ DWP.	Ongoing.

CARERS ARE WELL INFORMED AND CAN ACCESS SUPPORT THAT THEY NEED

Carers are well informed and can access supports they need

- Information from professionals
- Assessment
- Informed about different options
- Self directed Care/Direct Payments
- Discharge from hospital process
- Guardianship and other legal related matters
- Benefit entitlements

Ref.	Where do we want to be?	How will we get there?	How will we know we have got there?	Strategic Fit	Who will be involved	Timescale
Informed & Supported 1	Carers have access to assessments of their needs.	Carers assessment tool and process been in use by CHCP.	Numbers of assessments completed and feedback from carers.	National Carers Strategy/ NHS Greater Glasgow and Clyde Carers Policy Framework.	SBB Co-ordinator/ CHCP Community Care Teams	In year 1

Ref.	Where do we want to be?	How will we get there?	How will we know we have got there?	Strategic Fit	Who will be involved	Timescale
Informed & Supported 2	Self assessment for carers are in place.	Carers will access self assessment through Carers Centre.	Numbers of self assessments reported.	National Carers Strategy	Carers Centre/CHCP	2012
Informed & Supported 3	Information for professional staff	Staff are briefed about role of carers as partner and provide necessary information for them to care.	Numbers of briefing sessions organised for staff and feedback from carers.	National Carers Strategy	CHCP managers/ carer's organisations.	ongoing
Informed & Supported 4	Carers income is maximised	Through Financial Fitness service at Carers Centre and Information Workers within CHCP.	Carers are aware of their rights and entitlement to benefits.	Inverclyde Financial Inclusion Strategy	CHCP/Carers Centre/Financial Fitness	Ongoing
Informed &	Carers have access to appropriate information	Information will be targeted	Increase in hidden carers		Information sub group	Ongoing

Ref.	Where do we want to be?	How will we get there?	How will we know we have got there?	Strategic Fit	Who will be involved	Timescale
Supported 5	and can access services.	at carers at key points of service and through outreach work including public events.	who have been reached and made aware of supports available.			
Informed & Supported 6	Carers have access to specialist knowledge.	Information regarding guardianship etc or any other legal matters will be addressed through advertised training/briefing sessions.	Carers views will be sought on what areas of knowledge /information they require.		Carers Centre/CHCP staff	Ongoing

CARERS AND FORMER CARERS CAN ACCESS EMPLOYMENT, TRAINING AND VOLUNTEERING OPPORTUNITIES

Carers and former carers can access employment; training and volunteering opportunities.

- Training opportunities
- Volunteering within centre
- Befriending
- Working with employers
- Staff awareness / training carer awareness

Ref.	Where do we want to be?	How will we get there?	How do we know when we have got there?	Strategic fit	Who will be involved	Timescale
Employment & Training 1	Develop volunteering opportunities for former carers	Volunteer policy developed through carers centre	Former carers involved as volunteers in befriending, buddying advocating.	National Volunteering Strategy	National Volunteering Strategy	Begin by 2012
Employment & Training 2	Employers are more aware of carers issues	Briefing sessions for employers	Employers policies being carer aware		Carers centre/CHCP staff	Ongoing

Ref.	Where do we want to be?	How will we get there?	How do we know when we have got there?	Strategic fit	Who will be involved	Timescale
Employment & Training 3	Provide comprehensive training opportunities for carers based on identified needs of carers.	Develop links with community learning partners through training sub group.	Carers are provided with comprehensive training programme.	National Carers Strategy	All partners in training sub group	Ongoing
Employment & Training 4	Carers who are CHCP feel supported.	Through Healthy Working Lives approach	Completed Healthy Working Lives Silver award.	Healthy Working Lives	Inverclyde CHCP (Inverclyde Council/ NHS GG&C)	Ongoing
Employment & Training 5	Training of staff within CHCP are more aware of the role of carers as partners in care.	Through briefing sessions and reported increase of involvement of carers in care planning process.	Carers and staff feedback more positive attitudes of staff and recognition of their role as a partner in the delivery of care.	National Carers Strategy	CHCP staff/ Carers Centre staff and carers.	Ongoing

DRAFT