

---

<b>Report</b>	<b>Community Health &amp; Care Partnership Sub Committee</b>	<b>Date:</b>	<b>10 January 2013</b>
<b>Report By:</b>	<b>Corporate Director Inverclyde Community Health &amp; Care Partnership</b>	<b>Report No:</b>	<b>CHCP/01/2013/HW</b>
<b>Contact Officer:</b>	<b>Head of Planning, Health Improvement &amp; Commissioning</b>	<b>Contact No:</b>	<b>01475 711833</b>
<b>Subject:</b>	<b>Review of the Implementation of the Inverclyde Carers And Young Carers Strategy 2012 - 2015</b>		

---

## **1.0 PURPOSE**

- 1.1 To provide an update to the Committee on the Implementation of the Inverclyde Carers and Young Carers Strategy 2012-15, launched in December 2011.

## **2.0 SUMMARY**

- 2.1 This paper provides a progress report around the seven key themes contained in the Carers and Young Carers Strategy 2012-15.

## **3.0 RECOMMENDATION**

- 3.1 Members are asked to note the progress made on the implementation of the Inverclyde Carers and Young Carers Strategy 2012 – 15 in its first year since sign off; and
- 3.2 Members are asked to note the resource allocation to supports for carers across the CHCP in 2012/13.

**Corporate Director  
Inverclyde Community Health & Care Partnership**

## 4.0 BACKGROUND

- 4.1 The Inverclyde Carers Strategy was launched in December 2011 following an extensive three month period of consultation with carers. A Co production model was employed where carers were actively involved in shaping, prioritising and producing the Strategy in an editorial context. For the first time, the Carers Strategy also incorporated a Young Carers Strategy, which was also based on consultation work with young carers.
- 4.2 The Strategy adopts the principles of the Scottish Government Social Policy Framework, and makes reference to developing outcomes for Getting It Right or Every Child, Citizen and Community, as per the Inverclyde Single Outcome Agreement.
- 4.3 This three year strategy and action plan is set against a background of increased demand for services and changes in the demographic profile of our area, with numbers of older people increasing and the number of potential carers likely to be reducing in the same period as budgets become more restricted within the service sectors. This presents us with challenges and opportunities to work in partnership with carers in shaping the future direction of care and support, to help us address these realities.
- 4.4 It is estimated, by Carers Scotland, that 8% of the population is likely to be an informal carer in Scotland. This would suggest that there are approximately 7000 carers in Inverclyde. The Carers Strategy sets out the commitment of Inverclyde CHCP, Inverclyde Council and NHS Greater Glasgow and Clyde to work closely with carers, as partners, to enable them to continue with their caring role, whilst maintaining their own health and wellbeing.
- 4.5 The Strategy contains an action plan and a variety of interagency task groups are charged with taking forward work around the seven key theme/outcome areas identified in the Strategy;
  1. Carers felt included and involved;
  2. Carers are enabled to develop their own support and have access to short breaks from the caring role;
  3. Carers of people with long term caring needs have planned support as well as responsive inputs at times of crisis;
  4. 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 wellbeing;
  5. Carers are well informed and can access supports they need;
  6. Carers housing requirements are addressed; and
  7. Carers have the opportunity to access employment, training, leisure and volunteering.
- 4.6 The Young Carers Strategy is structured around the 7 key outcomes of Getting It Right For Every Child; that young carers, as children and young people first, should be Safe, Healthy, Active, Achieving, Respected and Responsible, and Included.
- 4.7 Work on the 7 key themes is reported to the multi agency Carers Development Group, which monitors the implementation of the Strategy. Carers are involved via our local Carers Network and annual reviews of the strategy will take place each year. A Young Carers Steering Group exists to oversee the implementation of the Young Carers Strategy

4.8 Finance from a range of sources across the CHCP is utilised to help meet the needs of carers and support their role as partners in care. The table below shows the range and amount of resource employed, not including respite costs from mainstream budgets:-

<b>Funding</b>	<b>Project/ Activity</b>	<b>2012/13 Funding</b>
<u>NHS Carers Information Strategy Funding</u>	Funding brought forward from 2011/12	£40,000
	Macmillan Benefits Advice Service	£15,000
	Emotional Support	£10,000
	Financial Inclusion	£30,000
	Young Carers	£35,000
	Kinship Care Short Breaks	£6,500
	Carers Voice	£2,000
	Funding Still to be Allocated Sub Total	<u>£12,100</u> <u>£150,600</u>
<u>Council – Main Stream Funding</u>	Carers Centre Costs	£101,300
	Carers Centre Sitting Service	£ 14,000
	Carers Centre Group Holidays	£ 5,000
	Carers Council Costs	£ 6,200
	Short Breaks Bureau	£ 60,100
	Short Breaks Fund	<u>£ 71,200</u>
	Sub Total	<u>£257,800</u>
<u>Change Fund</u>	Production of Carers Information Packs	<u>£97,000</u>
	Carer Befriending	
	Emergency Planning	
	Supporting Hospital discharge	
	<b>Total of all Funding Sources</b>	<b>£505,400</b>

## 5.0 PROPOSALS

5.1 It is proposed that Sub Committee members note the following key areas of development/ progress since the Strategy was launched in December 2011:

### 5.2 Carer Identification

- A new self assessment process for carers has been piloted by the Carers Centre in conjunction with the CHCP to test the usefulness of the tool before rolling it out across the CHCP. To date, 20 carers have participated in this and the planning group will consider feedback from carers on its ease of use and effectiveness before adopting it in a final form;
- The process will enable carers to come in to the Carers Centre, as a single point of access for support and services to meet their needs. Should carers require a further assessment of their needs, the staff will make a referral to the CHCP which will be allocated to designated staff who will undertake a full carer assessment; and
- In addition, through Carers Information Strategy monies, we have introduced support around income maximisation for carers in a number of ways. This includes the funding of a part time post within the CHCP to identify known carers who require income maximisation. In addition, we have funded the third sector organisation Financial Fitness to hold surgeries for carers within the Carers Centre and the Macmillan Welfare Benefits Project, who are also in contact with carers through their work in relation to people affected by cancer.

### 5.3 Young Carers Identification.

- The referral form currently used to refer to the Young Carers Service has been reviewed and is being revised;
- A Young Carers Assessment Tool is currently being revised to better reflect GIRFEC principles and wider family need; and
- A presentation to Head Teachers and Guidance Staff is being delivered to ensure the needs of young carers are identified and incorporated into their personal learning plans.

### 5.4 Short Breaks

- The CHCP has recently developed a Short Breaks Strategy which outlines the vision of the CHCP for future delivery of Short Breaks which will be brokered through the Short Breaks Bureau. The Short Breaks Bureau will play a pivotal role in encouraging staff to assist service users and their carers to encourage a wide range of options for a break from their caring responsibilities;
- The advent of Self Directed Support will also provide opportunities for the Short Breaks Bureau to assist individuals to arrange alternative type breaks based on their own preferred options.
- The Strategy promotes the development of more flexible, personalised breaks, based on the needs and aspirations of individuals, which will result in better outcomes for carers and their loved ones. This will tie in with the development of the CHCP Commissioning Strategy in developing more suitable alternative breaks with third sector organisations; and
- The CHCP continues to fund breaks for carers directly through the Carers Centre where carers can access sitting services and group breaks with other carers. In 2011/12 (latest reported annual figures) a total of 1258.5 hours of sitting service were delivered and 40 carers benefited from a group break.

### 5.5 Short Breaks for Young Carers

- Currently, there are 5 Young Carers Groups operating, supported by staff from the Youth Support Team and, more recently, from Community Learning and Development's Youth Work staff. 43 young people between the ages of 10 -18 attend these; and
- 6 Activity breaks have been organised since April 2012 with a total of 68 places. 28 young carers from Inverclyde also attended the Scottish Young Carer Festival.

### 5.6 Information

- Leaflets have been produced on Carers Services, Short Breaks and Care and Support at Home;
- Young Carers Services are currently redrafting young carers leaflets for both young people and the general public;
- Information on the CHCP website and SOLUS information screens are regularly updated with features on developments, activities and services for carers;
- Young carer information is on the Inverclyde Council and CHCP websites;
- The Carers Centre is being funded through the Older People's Change Fund to produce information packs aimed at the carers of older people about services and support available in the area and how to access these; and
- Circles, an advocacy provider, are now available to support carers in addition to the information and advice provided by the Carers Centre.

### 5.7 Workforce Training

- A training subgroup for carers has been established through the Carers Development Group. The Development Group consists of representatives from different agencies charged with the implementation of the Carers Strategy. The training subgroup has worked to meet the training needs of carers and Carers Information Strategy monies have recently funded a post to coordinate and arrange training for carers on a wide variety of topics; and
- Training for staff has been somewhat piecemeal to date and requires a planned and coordinated approach. A recent briefing was organised by Inverclyde CHCP and the Scottish Health Council around public involvement and carers issues for Practice Managers within GP practices. However, training for current staff within the CHCP is required at different levels and the NHS is currently conducting research around requirements for competency training on carers' issues for staff. The CHCP's lead officer for carers is participating in the

development of this research. Future training is planned for assessment care management staff around outcomes in the New Year and this will also incorporate training around carers' assessments and standards for engaging with carers.

### **5.8 Health and Wellbeing**

- Stress management and counselling, funded through the Carers Information Strategy monies, continues to be available to carers at the Carers Centre, on an appointment basis. Demand continues to grow for these services;
- The Keep Well programme is now being extended to carers throughout Inverclyde. The Prevention and Support Nurses are currently identifying carers in individual GP practices and inviting them to attend for cholesterol and blood pressure checks; and
- Health Improvement staff have arranged the Inverclyde Timeout Programme for carers over a ten week period to start in early 2013.

### **5.9 Support at Times of Transition**

- Discussions are ongoing with the Carers Centre in relation to supporting Young Carers at times of transition into Adult services;
- A Dementia Forum had now been established which brings together service providers, staff and management from the CHCP, family carers, consultants and staff from the acute sector to oversee the implementation of the Dementia Strategy and Standards for care to help move forward the aims of removing the stigma of dementia and making Inverclyde a 'Dementia Friendly Community'.

### **5.10 Carers Capacity Building**

- The CHCP supports the Local Carers Network, which is being staffed by the Carers Centre. The development of a Carers Network will provide the opportunity for carers to raise any concerns and to work alongside the CHCP and other service providers on topics such as the CHCP Commissioning Strategy; and
- Opportunities to learn new skills and learn more about decision making processes are available through the training provided by the Carers Centre Training Worker, funded by Carers Information Strategy monies. Examples of this include courses around flower arranging and cooking, as well as seminars around Power of Attorney and Guardianship.

### **5.11 Reshaping Care for Older People Programme**

Around £100,000 of change fund funding has been committed to projects designed to directly benefit carers. A number of other work streams funded via the Change Fund aimed at the 'cared for' person will have a benefit to carers; these are termed indirect projects in relation to carers and the change fund.

### **5.12 Direct Projects – Projects Funded Aimed Directly at Benefitting Carers**

The Direct Projects have been funded by the CHCP for the Carers Centre to develop and manage on behalf of carers. These projects are funded directly from the Change Fund for a limited period, to support the reshaping of care via new approaches:-

- Information Packs - 1000 Information packs have been compiled for older carers and carers of older people on services and supports that are available and how to access these;
- Befriending - Former carers are being encouraged to develop their capacity by becoming involved as Befrienders, Advocates, Buddies of Older Carers or Carers of Older People.
- Hospital Discharge – a Carers Support Worker, employed by the Carers Centre, has been located in the Larkfield Unit at IRH. This work has been received most favourably by hospital staff and carers. Carers feel that their views are being listened to and have made contact with the Carers Centre to access services and support to avoid unnecessary hospital admissions linked to carer breakdown.
- Emergency Care and Future Planning - Carers are being assisted by staff to identify emergency contacts to be called on should they become ill and unable to care. In addition, carers are being encouraged to make future plans for when they are unable to continue in their caring role and in anticipation of alternative care plans having to be considered with the involvement of the cared for person.

### 5.13 Indirect Carers Projects

A number of other projects funded through the Change plan also have impacts on carers. Examples of these include:-

- Reablement, which assists carers at the most pertinent time in the recovery of the cared for person. Staff are able to offer guidance and support to carers and to signpost them to other care and support services should they require these in the future, as part of their role in seeking to rehabilitate and enable the cared for person to regain their independence. Pharmacy review, which effectively helps carers to become aware of the risks of medication non-compliance and how to administer drugs effectively. The project also helps reassure carers on any concerns they have around medication and its impact.

### 5.14 Equalities

Through the Participation Standard work undertaken by the CHCP, on which we are required to report to the NHS Board, processes are in place to ensure that we are identifying where we need to improve our representation of carers across all care groups. The Advisory Group to the CHCP has adopted the principles and practices of the Equality Standards and this is also being adopted with any internal consultation and involvement processes.

### 5.15 Impact and Outcomes

The CHCP as a whole is working on developing how it evidences impact and outcomes for its service users and carers. Community Care Services are developing processes for enabling service users and carers to identify their own personal outcomes. Reporting mechanisms for these systems for measuring the impact on carers are yet to be developed and will be incorporated into feedback systems, which will be rolled out across the CHCP.

### 5.16 Involvement

Carers will be involved through out the Commissioning process and development of commissioning plans. To date, the Carers Centre has been involved in the Joint Commissioning Improvement Plan seminars. Representatives of Inverclyde Carers Council and Inverclyde Carers Centre will be involved in the Change Fund Steering Group and discussions around Joint Commissioning. Carers will also be involved through the Carers Network which meets at the Centre and is supported by staff from the Centre and funded by the CHCP. In addition, carers may participate in the CHCP Advisory Network and CHCP Advisory Group to help ensure their voice is heard in the planning and delivery of services.

## 6.0 IMPLICATIONS

6.1 Legal: None

6.2 Finance: The total 2012/13 funding is detailed in paragraph 4.8 and is summarised in the table below

Cost Centre	Budget Heading	Budget Year	Proposed Spend this Report	Virement From	Other Comments
Various	NHS Funding	2012/13	£150,600		
	Council Funding	2012/13	£257,800		
	Change Fund <b>Total Funding</b>	2012/13	<u>£ 97,000</u> <b><u>£505,400</u></b>		

6.3 Personnel: None

6.4 Equalities: None

6.5 Repopulation: Ensuring that Inverclyde is a 'carer friendly' place to live may support families to remain in the area, or encourage individuals to come back to Inverclyde to care for loved ones.

## **7.0 CONSULTATION**

7.1 There is now a well established culture of consultation and engagement with carers in Inverclyde, which has grown over many years. There was significant consultation on the development of the Strategy and carers themselves have been directly involved in leading this process.

## **8.0 LIST OF BACKGROUND PAPERS**

8.1 Inverclyde Carers and Young Carers Strategy 2012 - 2015