

# Carers Commissioning Strategy 2016 -18

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# Introduction

This Carers Commissioning Strategy 2016-18 reaffirms our commitment to recognising, valuing and supporting a greater number of Lincolnshire's carers. This strategy, which builds upon the foundations and priorities of the 'Joint Carers Strategy 2014-18 'And how are you?', provides our response to the lives and aspirations of unpaid carers in Lincolnshire.

While we wish to support people to take up and sustain a caring role we also acknowledge that caring can result in poorer outcomes in terms of health and wellbeing, finance and employment for the carer. Adult Care, as the lead for this strategy, aims to work with a range of strategic partners such as our colleagues in Children's Services, Public Health and the wider NHS to ensure carers are able to access early help and support that will enable them to care safely with confidence. We will also work in partnership to identify young carers to offer support and advice as well as helping them to avoid taking on inappropriate caring roles.

In recognition of the importance of the Carers Service we will continue to invest and financially support this area going forward. Although there are many current financial constraints and pressures being enforced upon the Council through Government funding cuts and reductions, the Carers budget for 2016/17 will remain at the same level as last year at £2,04 million for the year.

While we are committed to supporting the caring population of Lincolnshire we also need to work with local communities to encourage families to take increasing personal responsibility for their wellbeing, management of long term conditions and planning for the future. This includes taking responsibility for caring for our families and friends.

In Lincolnshire we have 79,262<sup>1</sup> carers who save the local health and social care economy an estimated £1,558 million by annually providing unpaid care

to their families and friends who live with ill-health, frailty or a disability<sup>2</sup>. Without this support Lincolnshire's health and care system would not cope. As such we recognise the importance of the relationship public agencies have with people as carers.

We know that carers who feel well informed and supported are more able to sustain their caring role and the ability of the person they care for to live where they want to be – typically at home, amongst family and friends. Providing support can also reduce or delay costly impacts on primary and acute health services, and long term social care.

By improving the rights of carers in England, through the implementation of the Care Act 2014 and Children and Families Act 2014, the government has acknowledged the valuable contribution many carers make towards enabling people to live in the community while receiving care at home.

Identifying and supporting carers is therefore a shared priority for health and care at both a local and national level. This strategy and the accompanying delivery action plan will play a vital role in ensuring partners work together to achieve improved outcomes for Lincolnshire's carers.



**Glen Garrod**  
Executive Director for Adult Care  
Lincolnshire County Council

<sup>1</sup> Population and caring hours taken from Census 2011 (Office for National Statistics).

<sup>2</sup> Estimated savings p.9 'Valuing Carers 2011' by Leeds University and Carers UK.

# The Lincolnshire caring population

The Census 2011 identifies that there are 79,262 unpaid carers in Lincolnshire. The following breakdown details the caring population for each of Lincolnshire's Clinical Commissioning Groups (CCGs).

## Lincolnshire West CCG

- 24123** Carers
- 538** Young carers (aged up to 15)
- 435** Young carers (aged up to 15) caring 0-19 hours a week
- 1224** Young carers aged 16-24
- 151** Young carers aged 16-24 caring more than 50 hours a week
- 5715** Older carers aged 65 and over
- 16646** Adult carers aged 25-64
- 5788** Adults caring more than 50 hours a week
- 37%** % of above who are aged 65 and over
- 26123** Carers predicted by 2018

## Lincolnshire East CCG

- 27475** Carers
- 661** Young carers (aged up to 15)
- 543** Young carers (aged up to 15) caring 0-19 hours a week
- 1223** Young carers aged 16-24
- 152** Young carers aged 16-24 caring more than 50 hours a week
- 7747** Older carers aged 65 and over
- 17844** Adult carers aged 25-64
- 7941** Adults caring more than 50 hours a week
- 43%** % of above who are aged 65 and over
- 29753** Carers predicted by 2018

## Lincolnshire South West CCG

- 13167** Carers
- 297** Young carers (aged up to 15)
- 247** Young carers (aged up to 15) caring 0-19 hours a week
- 515** Young carers aged 16-24
- 48** Young carers aged 16-24 caring more than 50 hours a week
- 3353** Older carers aged 65 and over
- 9002** Adult carers aged 25-64
- 3124** Adults caring more than 50 hours a week
- 42%** % of above who are aged 65 and over
- 14259** Carers predicted by 2018

## Lincolnshire South CCG

- 14497** Carers
- 314** Young carers (aged up to 15)
- 256** Young carers (aged up to 15) caring 0-19 hours a week
- 559** Young carers aged 16-24
- 64** Young carers aged 16-24 caring more than 50 hours a week
- 3833** Older carers aged 65 and over
- 9791** Adult carers aged 25-64
- 3345** Adults caring more than 50 hours a week
- 45%** % of above who are aged 65 and over
- 15699** Carers predicted by 2018



## Caring Commitment



69% of people supported are aged 65 and over<sup>1</sup>



Physical disability (57%), long standing illness (45%) and problems connected with ageing (37%) are the most common reasons for support<sup>1</sup>



85% of carers co-habit with the person they support<sup>1</sup>



36% of carers provide more than 100 hours of care per week<sup>1</sup>

## Health and Wellbeing

TIME FOR FUN FUN FUN FUN FUN

82% of carers do not spend enough time doing things they value or enjoy<sup>1</sup>



72% of carers do not have enough control over their daily lives<sup>1</sup>



14% of carers feel they are neglecting themselves<sup>1</sup>



14% of carers have some worries about their personal safety<sup>1</sup>



62% of carers have a disability or long standing illness<sup>1</sup>

## Finance and employment



19% of carers are not in paid employment because of their caring responsibilities<sup>1</sup>



Carers UK report that 34% of carers have missed out on the chance of promotion<sup>2</sup>



Carers UK report that 26% of carers have taken out a loan or fallen into debt because of their caring role<sup>2</sup>



Carers UK report that 67% of carers face higher transport costs because they care<sup>3</sup>

## ASCOF (Adult Social Care Outcomes Framework)



65% of carers who find it easy to find information about services

CIPFA\*: 64%



71% who feel involved or consulted in discussions about the person they care for

CIPFA\*: 71%



49% of carers who are satisfied with social services

CIPFA\*: 42%



37% of carers have as much social contact as they would like

CIPFA\*: 35%

<sup>1</sup> Results of Survey of Adult Carers in England (SACE) 2014-15 for Lincolnshire. 520 respondents (95% level, +/-5% confidence interval)

<sup>2</sup> Carers Week 'Prepared to Care?' report

<sup>3</sup> Carers UK The Caring and Family Finances Inquiry

\*Lincolnshire's CIPFA (Chartered Institute of Public Finance and Accountancy) benchmarking group contains 16 local authorities who share similar socio economic characteristics.

# Aim 1: Early help and support

Providing early help is more effective in promoting the wellbeing of carers than reacting in a crisis. Early help means providing support as soon as the caring role starts, from the point of diagnosis through to the end of the caring role.

## Priorities

- Empower carers to be adequately prepared and supported for the role as it develops
- Support carers to look after their own physical and mental wellbeing, including developing coping mechanisms
- Help carers to access the information, advice and support they need including financial and entitlements
- Support carers to care effectively and safely for themselves and the person they support
- Support carers to plan for the future, including emergencies, to make choices about their lives such as combining care and employment
- Ensure carers and professionals recognise carers and the role and know where to go for information, advice and support
- Improve self-serve options for carers and connect them to local services and the community
- Young carers to be identified and supported through the Early Help service arrangements

## Year 1 (2016-17) Milestone:

- Create and implement an Information and Advice Plan



*I am prepared and have a system in place so that I can get help at an early stage to avoid a crisis*

# Aim 2: Collaboration

Work together to improve carers outcomes

## Priorities

- Work with partners to provide an integrated and seamless carers journey that allows for the whole family approach
- Work with partners to ensure appropriate support is in place for the person being cared for to reduce the impact on the caring role
- Work with health and care professionals to ensure carers are listened to from the outset and involved in the care of the person they support
- Ensure the health needs of carers are recognised by GP's and that carers can access timely emotional support and counselling when necessary
- Encourage information sharing and collaboration with professionals and agencies
- Work with strategic partners to ensure early/earlier identification of carers from the point of diagnosis and signpost to appropriate support and services
- Work together to identify young carers and prevent them from taking on inappropriate caring roles
- Work with the education sector to ensure young carers are identified and have a supportive learning environment which is sensitive to their needs and promotes educational attainment
- Engage and co-produce with carers to develop and improve services

## Year 1 (2016-17) Milestone:

- Working with health, schools and the further education sector we will create and implement a strategic plan that will promote the early identification of carers to enable them to access timely and appropriate support.



*I feel respected, included and involved*

## Aim 3: Assurance

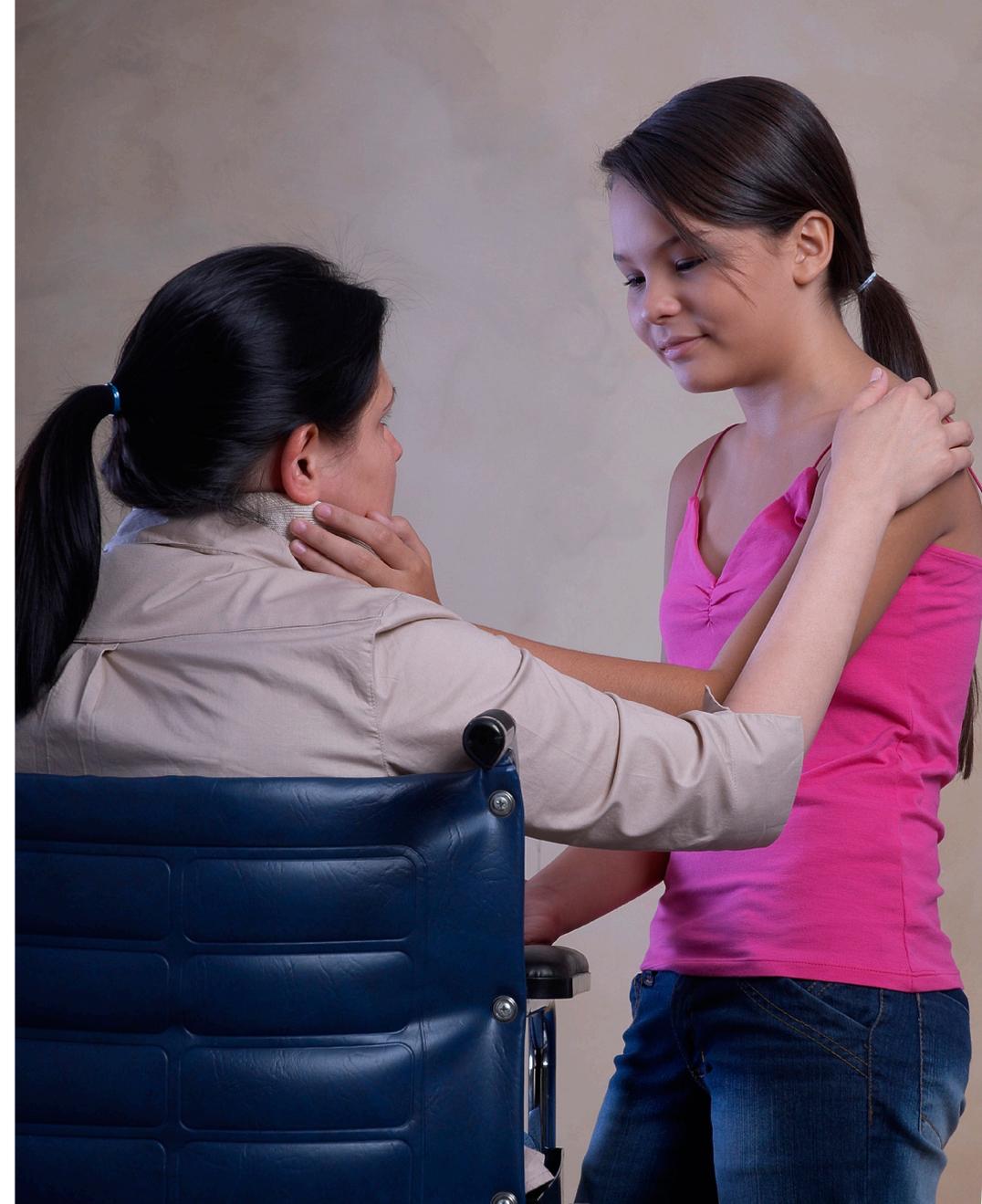
Confirm what we do makes a difference

### Priorities

- Through a phased approach meet our Care Act 2014 and Children and Families Act 2014 duties and responsibilities.
- Commission services that have a single point of contact and offer a wide range of support that enables carers to manage the caring role
- Improve our understanding of the local themes, trends and population around carers to influence and shape preventative measures and support services
- Target resources to meet needs
- Promote ways for carers to have time for rest or recreation and ensure that carers at risk of breakdown get the breaks they need
- Through a process of local audits and scrutiny, monitor legislative and practice standards
- Co-production – work with carers to produce a good range of information and advice that meets their needs
- Review and improve systems and processes to ensure effective delivery of service and measuring of outcomes
- Ensure the strategy's delivery action plan has appropriate governance which is accountable for its progress

### Year 1 (2016-17) Milestone:

- Create and implement a Quality Assurance Framework



*I am satisfied with the support I receive*

# Aim 4: Workforce development

Ensure we have an appropriately skilled and effective workforce

## Priorities

- Develop and deliver a workforce development strategy and delivery plan and monitor this through quality assurance
- Enable learning that is easy to access and is of high quality
- Enable all partners supporting carers to retain a skilled and qualified workforce
- Link workforce development strategy with other organisations and service area workforce plans to ensure carers are recognised and supported.

## Year 1 (2016-17) Milestone:

- Review the outcome of Year 1 of the workforce development strategy and identify priorities and create and implement a further workforce development delivery plan.



*I am recognised and well supported*

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