



**Blaenau Gwent
Carers Strategy
Development Group**

MAKING IT HAPPEN FOR CARERS

**A strategy for meeting the needs of Carers
In Blaenau Gwent**

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Blaenau Gwent**

The next three years 2011 – 2014

CONTENTS:	Page No
▪ Introduction - Who does the strategy cover	3 - 4
▪ Statutory Responsibilities	4 - 7
▪ Background	7 - 8
▪ Outcome Indicators	9
▪ The five identified priorities	9 - 11
▪ The proposed service model and the six key actions	
▪ Information/advice/guidance/identification	11 - 14
▪ Advocacy/Befriending	15 - 16
▪ Training for carers/professionals	17 – 19
▪ Signposting	19 – 21
▪ Service Provision	21 – 22
▪ Carers Network	22 - 23
▪ Membership of Blaenau Gwent Carers Group	24

Appendices:

- Appendix 1 – Proposed service model
- Appendix 2 – Carers Pathway
- Appendix 3 – Carers UK good practice guide

INTRODUCTION - WHO DOES THE STRATEGY COVER?

Carers play a vital role in our community by looking after those who are in ill health, disabled, vulnerable or frail. It is acknowledged that carers often provide unpaid care by looking after an ill, frail or disabled family member, friend or partner.

Who is a carer?

A carer is anyone who provides a great deal of care on a regular basis for a member of their family or a friend – but is not employed to do so. Carers don't choose to become carers, it happens out of a feeling of duty and they do it because of an overwhelming concern and compassion for the person they care for. Many carers do not consider themselves to be a carer, they are just looking after their mother, son, or best friend, just getting on with it and doing what anyone else would in the same situation.

A carer is someone who provides help and support to someone who could not manage without their help. This could be due to age, physical or mental illness, addiction or disability.

Young Carers

A young carer is a child or young person under the age of 18 carrying out significant caring tasks and assuming a level of responsibility for another person, which would normally be taken by an adult.

Young carers are children who care for a parent, grandparent or sibling who has some form of illness or disability. Young carers face serious caring responsibilities and the physical and emotional strain is sometimes very demanding. As well as the daily tasks completed for their parents such as housework, cooking and bathing, young carers live with the added pressure of school and often, a lack of understanding of the role they play from their contemporaries.

As a carer you may be able to get extra help both for yourself and the person you care for.

Carer's assessment

Any carer providing regular and substantial care is entitled to an assessment of their needs by Blaenau Gwent County Borough Council Adult Services Department. The Carer's Assessment is an interview or a series of interviews with the carer, to see what help the carer may need to be able to go on looking after the person being 'cared for'. It gives the carer the opportunity to think about themselves and what is needed.

Local perspective for supporting carers

The overall aim of this local carers' strategy is to recognise the immense value that carers provide in the care of others and put simply, 'to aim to offer appropriate support to improve the lives of carers'. Supporting this is the aim

to ensure that, wherever possible, services provided are responsive to individual needs and circumstances, and appropriate to the needs of the person cared for. Additionally, that the commitments offered within this document 'fit' with recent, current and future national strategic directives.

National perspective

The previous Government's National Carers Strategy – *Carers at the heart of 21st century families and communities* – was published in June 2008. It set out a vision that by 2018:

“Carers will be universally recognised and valued as being fundamental to strong families and stable communities. Support will be tailored to meet individuals’ needs, enabling carers to maintain a balance between their caring responsibilities and a life outside caring, while enabling the person they support to be a full and equal citizen.”

The outcomes identified for 2018, as set out in the strategic vision of the National Carers Strategy, are:

- Carers will be respected as expert care partners and will have access to the integrated and personalised services they need to support them in their caring role
- Carers will be able to have a life of their own alongside their caring role
- Carers will be supported so that they are not forced into financial hardship by their caring role
- Carers will be supported to stay mentally and physically well and treated with dignity
- Children and young people will be protected from inappropriate caring and have the support they need to learn, develop and thrive, to enjoy positive childhoods and to achieve against all the *Every Child Matters* outcomes.

STATUTORY RESPONSIBILITIES

Blaenau Gwent recognises the contribution made by family carers to the long-term care of vulnerable people and offers information, support and services, to enable them to continue to provide this care for as long as they wish. We are committed to the principles embodied in the Carers Charter and will meet the stated needs in the soon to be developed Carers Strategy.

Complaints

Blaenau Gwent County Borough Council, Social Service Department, operates a formal “Complaints Procedure” and any individual who believes they have cause to complain about the service offered/provided, or the time it is taking to secure the service they believe they need, **has a right** to make a formal complaint to the “Complaints Officer” who is based at Anvil Court, Church Street, Abertillery NP13 1DB (Telephone 01495 355264). The complainant is expected to set out the nature of their complaint which should identify why the complainant is dissatisfied or suggestions of how the service could be improved.

Similarly Aneurin Bevan Health Board operate a “Complaints Procedure” common across Wales, called “Putting things Right” and should anyone have cause for concern over the care or treatment provided they **have a right** to complain. Complaints about Primary care eg. GP’s and Dentists should be made directly to the individual practice. Complaints about Hospital or Community Health Services should be addressed to the Chief Executive Aneurin Bevan Health Board, Mamhilad House, Mamhilad, Pontypool NP4 0YT

LEGISLATION

The Disabled Persons Act 1986: this Act highlights that when assessing a disabled person's needs consideration must be given as to whether the carer is able to care for that person.

The Carers (Recognition and Services) Act 1995: this Act recognises that the needs of carers may well be different to those of the cared for person and

- entitles family carers who provide, or intend to provide ‘a substantial amount of care on a regular basis’ to an assessment
- requires local authorities to make a separate assessment of carers' needs
- take into account the results of that assessment in making decisions about services

The Carers and Disabled Children Act 2000: this Act gives local councils the power to supply certain services direct to carers following an assessment. The Act

- enables Local Authorities to offer services which will support the carer in their caring role and help them maintain their own health and well being
- gives family carers the right to have services provided directly to them
- gives family carers the right to request an assessment in their own right even if the person they care for refuses an assessment
- gives Local Authorities the power to make direct payments to family carers (including 16 and 17 year old disabled people)
- gives Local Authorities the power to charge family carers receiving services.

The Carers (Equal Opportunities) Act 2004: this Act reinforces the need for carers to have greater information about their rights under the Carers and Disabled Children 2000 Act, ensuring that carers needs assessments consider leisure, training and work activities. The Act aims to ensure that family carers are able to take up opportunities which those without caring responsibilities take for granted. The Act makes three main changes to the law with the objective of providing further support for carers and helping to ensure that they are not placed at a disadvantage because of the care they provide:

- Local Authorities are required to inform family carers, in certain circumstances, that they are entitled to an assessment under the 1995 and 2000 Acts

- Local Authorities must take into account employment, training and leisure, when undertaking a carer's assessment
- The Act provides for co-operation between Local Authorities and other bodies in relation to the planning and provision of services that are relevant to carers.

Protection of Vulnerable Adults (POVA): In Safe Hands 2000
The Guidance, issued by the Wales Assembly Government, specifies that:

“A vulnerable adult is a person over 18 years of age who is or may be in need of community care services by reason of mental or other disability, age or illness and who is or may be unable to take care of himself or herself, or unable to protect himself or herself against significant harm or serious exploitation”.

A person's vulnerability will depend on his/her circumstances. There are many predisposing factors which may increase the likelihood of abuse occurring. Some factors may increase vulnerability to abuse include:

- Social isolation - those who are abused usually have fewer social contacts than those who are not abused.
- The individual has an illness such as dementia which may affect his or her intellect, memory or physical functions and cause unpredictable psychological or physical behaviour. The individual has behavioural problems or major changes in personality which result in repetitive behaviour, wandering or aggression.
- The individual is compliant and may not know that they are being abused or exploited, eg, some people with learning disabilities.
- The individual demands, or needs a level of care beyond the capacity of the carer.

Vulnerable adults may have or may lack mental capacity to make specific decisions. Their vulnerability, as defined above, entitles them to protection from abuse and neglect but if they lack capacity they may be especially vulnerable.

The Mental Capacity Act 2005 specifies that:

‘A person lacks capacity in relation to a matter if at the material time he is unable to make a decision for himself in relation to the matter because of an impairment of, or a disturbance in the functioning of, the mind or brain’.

A person is not able to make a decision if he/she is **assessed** as unable to do any one of the following:

- understand the information relevant to the decision; or
- retain that information; or
- use that information as part of the process of making the decision; or
- communicate their decision (whether by talking, using sign language or any other means).

Best interests and Duty of Care

Where the vulnerable adult has been assessed as lacking capacity to ensure his/her own wellbeing, it may be necessary to take decisions on their behalf to protect them from further abuse. In these situations the appointment of an advocate, or in specific circumstances an Independent Mental Capacity Advocate (IMCA), should be considered, particularly when the person does not have friends or family who can represent them through the adult protection process.

The person taking such decisions must act in the best interests of the vulnerable adult and with regard to their duty of care.

BACKGROUND TO THE DEVELOPMENT OF THIS STRATEGY

Those involved in the production of the previous local strategy gave a strong commitment to supporting a Blaenau Gwent Carers Strategy Development Group and also agreed to develop a more effective co-ordinated approach to cross cutting carers' issues. This group aimed to oversee the implementation and delivery of the strategy 2007-2010 and ensure that there was a direct carers' influence over the ways that services would be planned and delivered over the three year period. This has not been as effective as anticipated due to a number of factors including the inability to organise regular meetings.

In developing this revised local carers' strategy, this Department co-ordinated a carers' strategy development workshop and listened carefully to and took full account of the views expressed by carers based on their individual perspective and experiences and sought their opinions concerning the provision and potential development of services.

The information gathered through this process, together with information obtained from the audit of service provision of each provider has enabled the Department to better understand the range of activities that exist and the value carers' place on the services provided.

Additionally, the workshop reinforced the following principles to underpin the overall strategy and its implementation:

- There should be a common concern for the well being of the person being 'cared for'
- Carers should be supported to have a short break from the caring role
- Freedom for carers to have a life of their own
- Recognise the need to assist in maintaining the carer's health
- Carers and those 'cared for' need to have confidence in services provided
- Carers need to have a say in service provision.

A new 'model' was established based on the services that were reported to be of most value together with the specific needs outlined by carers at the development workshop. This 'model' was then presented to the same group for comment and subsequent approval.

Through these local consultation arrangements, Blaenau Gwent has identified five key future priorities. These are:

- 1) Carers Support Service
- 2) Workforce Development and Planning for the future
- 3) Carer Information
- 4) Identification of Carers
- 5) Respite/sitting provision

Members of the Carers Strategy Development Workshop acknowledge that it will not be possible to achieve all the things it might wish to see in the short term, but confirms the imperative to focus on some short term priorities, as well as slightly longer term commitments. In this way it feels that it will be able to demonstrate a shared commitment to providing better services for carers whilst being realistic and honest about what can be achieved and when.

Involvement of, and consultation with, service users and carers who access or may in the future access the services of the Adult Services Department requires continuous dialogue. To support this dialogue, key groups need to be established to improve the process and practice of involvement and consultation. The group will consist of service users and carers from a range of situations working together with a variety of working tools to ensure there is improvement in involvement and proper and meaningful consultation is achieved.

Finally, the importance of monitoring and reviewing implementation of the service 'model' is considered crucial and to enhance carer confidence it is felt that a process needs to be created to advise and inform carers of progress. The specific actions expected is that there will be:

- a mechanism to ensure the successful implementation of the new 'model'
- on-going feedback from carers
- full and proper account taken of future changing needs and
- the Department will act to embrace the requirements and expectations outlined in any National Strategy.

The guidance also needs to promote how improvement can be achieved by focusing on the needs of Carers and giving priority to the outcomes which are determined through the Carers assessment. Measures need to be identified and agreed to determine whether actions taken are having the desired impact. The following template could help form the basis for measurement:

Outcome Indicators for Carers

How Much Did we Do (effort)	How well did we do it (effect)
<ul style="list-style-type: none"> • Number of referrals from NHS • Number of other referrals • Number of carers identified • Number of assessments offered/ completed • Amount of information/support/ services provided • Age/type of cared for • Number of support plans developed • Number of carers with a contingency plan • Number of people admitted to hospital/long term care due to carer related issues • Number of carers who have had to give up work • Number of people who stop caring 	<ul style="list-style-type: none"> • Carer satisfaction with support/services • Timeliness of support (referral – assessment – support) • Units/type of service provided • Information packs sent out • Range of services/options available • Level of integration across H&SC
Is anyone better off? (impact)	
<ul style="list-style-type: none"> • Carer satisfaction (peace of mind; listened to) (surveys and reviews) • Contingency plan in place • Improved health and well being of carer • % of agreed outcomes met • % of carers accessing services • Case studies 	

Considerations that have been made against the five key future priorities:

1. Carers Support Service

A carer can feel very alone and uncertain who to approach for advice. A Support Service will give them the opportunity to discuss problems with professionals and also with other carers sympathetic to their issues.

It is often important that companionship is provided to isolated people, who may benefit from the opportunities to develop new relationships and participate in wider social activities.

Opportunities also need to be created for carers to form relationships with other carers and to learn from and support each other.

2. Workforce Development and Planning for the future

There are two elements to this priority. The first is to develop the skills of staff who work in support of carers and the second is to assist carers to undertake their caring roles appropriately.

Staff

It is important that staff recognise the demanding role that carers often undertake and make provision to ensure that full and proper account is taken of the needs of carers. Within this, staff have to understand how to structure their assessment around the right of carers to have a life of their own; how to assist the carer in maintaining good health; and help carers and those 'cared for' to have confidence in services provided.

Carers

The aim is to offer all carers participation in structured sessions which prepares them for the caring role by giving them the core information and practical skills training needed by anyone in a caring role. The program would also need to have the flexibility to address individual and or disabling-specific issues.

3. Carer Information

There is a need to ensure that all carers have the opportunity to access consistent high quality information.

The objective is to create a partnership between staff and service users, through a sharing of information and knowledge, which is to be based on mutual respect and trust. Staff and carers will identify the type and range of information needed for both to undertake their respective roles more effectively. The information will be accessible from one location and will be developed for access electronically.

4. Identification of Carers

Early identification and preparation of people taking on a caring role has the potential to reduce concerns and added stress both currently and in the future. It is important that carers look after themselves, as they will not be of much assistance to the person 'cared for' if they themselves become ill as a result of the pressures of caring.

The emphasis is to understand the issues that are of concern, the type of support that is needed and to deploy the appropriate level of resource to enable the carer to manage their caring role effectively.

5. Respite/sitting provision

The aim is to create a more flexible respite arrangement which will better meet need and individual situations through more targeted actions. The type and range of respite provision needs to be extended to include: Residential and nursing respite provision; with foster carer service, day and night sitting provision, time out, relaxation initiatives, adult placement schemes and a more flexible day care arrangement.

The merits of this range of provision is clearly defined and the concern is that the time limits need to be increased and the challenge is to create a more seamless and planned overall package of support to carers.

It is important to note that the Strategy and Action Plan prepared have been agreed in principle by members of Blaenau Gwent Carers Strategy Development Group. It is acknowledged that certain elements will be subject to formal contractual negotiations by provider organisations. It is anticipated however that the 'in principle' acceptance already given will realise the necessary commitments within the timescales indicated.

THE WAY FORWARD/OUR KEY PRINCIPLES AND PRIORITIES

The new carers 'model' established by carers at the development workshop reported the following areas to be of most value to carers:

- Information, advice and guidance
- Advocacy and befriending
- Training
- Signposting
- Service providers
- Carers network

Specific actions required to meet the future priorities which are set out in the proposed service model – see appendix 1.

Information, advice and guidance

The purpose of the Blaenau Gwent Carers Charter is to promote the health and wellbeing of carers in the borough by improving the practical and emotional support available. There are a number of areas which carers have identified as being very important to them:

Identification of carers

Currently there is no one central source of information in existence. Because information is patchy, even practitioners do not know everything available. Some family carers may actually be bombarded with information. We need to think about what information to put across and how to do it so carers are better able to plan for their future and the future of the cared-for person.

Lots of carers have not yet been reached because many people do not realise that they are actually carers. It is important to raise awareness about carers and identify those that are, as yet, unknown.

Choice

There should be choice and flexibility in the services being offered to carers according to their individual needs. Blaenau Gwent recognises the need for choice in these areas and will endeavour to promote as wide a range of services as possible to carers including opportunities for carers to have a break.

This service is to be developed further in the near future through the 'one stop shop' service, and will consist of a central point of contact using all available contact sources. The service is available to all Carers.

Having a voice

Blaenau Gwent recognises the vital role that carers undertake for the people they care for and will seek to involve carers and their representatives in all aspects of the planning, commissioning, inspection and evaluation of services.

Carers own health

Blaenau Gwent aims to ensure that individual carers' needs, including their health, are recognised and addressed. Therefore, services and information should be coordinated and consistent within and across agencies in order to be able to meet the needs of carers. Sensitive policies and practices towards carers will be encouraged, particularly around admission and discharge policies in hospitals, care establishments and community based services.

Emotional support

Blaenau Gwent recognises the importance of providing emotional support to carers and to help the carer and the "cared for" person to make adjustments in their lives and to help the carer to become better prepared for their caring role. It is acknowledged that this can be achieved through the provision of specific information which can then be used to discuss the thoughts and feelings of the carer, but it can also involve specific counseling principles and skills, some of which can be provided by a health professional or social worker, but also by counselors who have been specifically trained to facilitate more deep seated emotional issues.

Financial advice

Blaenau Gwent recognises the importance of emotional support and financial advice for carers and will promote services in collaboration with other statutory bodies and voluntary organisations that meet these needs. Carers may not know what they can claim for (there are many unclaimed benefits) and may need help with form-filling – forms need to be easy to read, easy to fill out and one off. This is very often done well for those known to services, and local authority representatives can be very helpful.

Assessment of need

Blaenau Gwent will provide an effective assessment process.

Raising awareness in society of the carer's role and contribution

Recognising and raising the status of family carers will encourage the allocation of resources and help their inclusion. A marketing campaign would also help carers to identify themselves and raise awareness among support workers. Support providers need staff training. Commissioners need cooperation on, and commitment to, a carers' strategy at the highest level. The necessary partners are therefore all those from the top down and co-operation could involve a review of existing services, with a clear understanding of family carers' needs, steering groups which include family carers, and joint training units.

Action Required	Action to date	Timescales
Publicity to all agencies in the Public Sector.	Yet to be focused on in any meaningful way	Jan 2013
Carers Champions from each team to ensure family carers' issues are a regular agenda item at all Health & Social Service team meetings	Representatives of each social work team attend the Carers Forum and have the necessary information, on actions agreed to advise team members	Need to seek representation from health at the Carers Forum. Completion – Dec 2011
Work with GPs to develop a standardised system of identifying family carers and sign-posting them to appropriate services.	Discussions with Health colleagues reveals there is a requirement for GP's to register Carers with the outcomes framework	Awaiting further advice from Health March 2012
Improve access to and the timing within which training programmes are delivered and services provided.	Discussions continuing with Workforce Development Team to develop specific training programmes	December 2011
Social Care and Health to share and provide local relevant information.	This will evolve through the Carers Measure. Task and finish group to be established	Sept 2012
Use local and all forms of media, including voluntary sector newsletters to deliver specific messages.	The information website is developing so that all newsletters can be viewed and discussions taking place for announcements on 3VTV	Third sector providers can include messages/newsletters on the website. Discussions continuing with 3VTV Dec 2012
Embed family and carers' needs across all user groups and raise awareness of support through current service provision.	Presentations made to a number of local Carer Groups to enable them to understand the value of a Carer Assessment	March 2012

Develop a central register of all known carers within the Borough and cross reference with care service providers	Action has been identified and agreed to ensure the carer is identified against the named service user but increased efforts required to identify unknown carers	An "on-line" registration form has been devised on the Carers web-site so that people can identify themselves. To be completed March 2012
Provide central source of timely, relevant and updated information through Council/Carer website.	This is now being achieved through the development of an information web-site which is being publicized through the Connect magazine	Completed
Develop a family carers' handbook	The information web-site is now regarded as the appropriate means of providing information	Completed
Meaningful engagement at Carers Forum from Health & Social Service staff to ensure that all "front line" services are encouraged to listen, identify and engage with carers and to provide appropriate information in a timely manner.	Good representation is required and currently there is "buy-in" from all but colleagues from Health This may be resolved through the Carers Measure?	Sept 2010
Guidance needs to be established for the provision of information and should set out to ensure that the information needed by Carers is: Timely Rights based Readily accessible Service Based Satisfies criticality (i.e. right to assessment) Contextualised (i.e. age of carer, experience of carer, are they a new carer?)	The web-based information system is geared to achieving this but more needs to be done to ensure that the information content reflects that which carers believe to be necessary	On-going discussions at the Carers Forum September 2012

Advocacy and Befriending

What is Advocacy?

A simple definition of advocacy is helping and supporting someone else to speak up for what they want. This can involve expressing their views or acting on their behalf to secure services that they require or rights to which they are entitled. Key concepts in advocacy are: equality, inclusion, empowerment and rights.

What do we mean by the term 'Advocacy'?

- Advocacy ensures that individual carers have a voice and are listened to.
- Advocacy is about enabling carers to feel equal and empowering them to speak up for themselves.
- Advocacy is about helping carers to tackle issues with which they need help, support or information.

In what situations might a carer need an advocate?

- At meetings with Statutory Agencies etc where a carer may lack confidence or need support
- When there is conflict between the needs of the cared for person and the carer.
- When a complaint letter needs to be written
- When a carer is unsure of his/her rights as a Carer
- When important decisions are being taken and representation is required
- When dialogue needs to be reopened between a carer and another agency

What is Befriending?

The underpinning emphasis of a befriender is to help change attitudes in the carer and assist the individual to exercise more personal choice.

The level and type of intervention can occur at various levels, all of which should be targeted towards reducing feelings of isolation and loneliness by encouraging and supporting carers to take advantage of social networks and group activities. In this way the time of the befriender is used for positive purpose and is a constructive use of time. This intervention can occur at:

- The point a referral is received indicating the carer needs support
- As part of an assessed plan and package of care and support for the carer, or

- Providing additional support to carers who need to discover new interests and to feel more connected with their community

Integration into peer led groups should prove to be invaluable as the carer should be able to use this opportunity to discuss their caring role with other carers in similar situations, highlighting to them they are not alone. The peer led groups can also encourage friendships which should help relieve some of the tensions and difficulties many carers experience whilst relieving the isolation that is often felt.

Action Required	Action to date	Timescale
Develop a service to offer one to one advocacy/befriender sessions to identify carer issues and concerns	Working with RSVP a “befriending” initiative funded by the “Big Lottery” is to be introduced in 2012	First planning meeting arranged for Jan 2012
Develop a ‘listening ear’ and formally organized service to assign individual advocates/ befrienders		June 2012
Conduct an audit of existing social networks and group activities	Done with the support of Age Cymru	Mar 2012
Ensure care planning reflects the need for advocacy/befriending overall	Discussions are taking place with respective teams and Senior Practitioner involved in steering group meetings	Mar 2012
Raise awareness among all professionals about the value and purpose of advocacy and befriending		June 2012

Training for carers and professionals

Learning and Development – service elements

- **Specialist training for carer tasks** - the aim is to offer all carers participation in structured sessions which prepares them for the caring role by giving them the core information and practical skills training needed by any carer. It is acknowledge that information and skills training can be as helpful in reducing carer stress as counselling or through the involvement of support groups.

- **Understanding key aspects of caring** - it is often very stressful caring for someone else and it can make an individual susceptible to illness and injury. The aim is to provide a flexible series of “learning” sessions, to include:
 - What it is like to be a carer
 - Understanding the psychological effect of chronic disease/dependence
 - Dealing with difficult behaviour/frustration
 - Relaxation techniques for carers
 - Moving and Handling
 - Back care
 - Skin care
 - Nutrition
 - Medication management
 - Planning for an emergency
 - Financial information
 - Accessing support services
 - Equipment/aids
- **Engagement of carers in planning** – it is acknowledged that there is a growing need to consult with users and carers over service provision to ensure that services evolve to meet, wherever possible, the expectations of the different client groups. Engaging with a representative group of users and carers from a range of situations, all working together to ensure there is improvement in the level and extent of consultation to achieve a more meaningful outcome is critical to meeting need or aiding understanding.
- **Consultation with carers** - the key to involvement and consultation has to be the partnership that evolves between officers and service users which has to be based on mutual respect and trust which can only be developed through a sharing of information and knowledge

Social care workforce development

- **Understanding carer needs** – the emphasis is to provide staff with insight into the demands of the carer; the specific difficulties experienced and the ‘core’ information necessary to develop a response arrangement that is flexible but takes account of the individual needs and circumstances of the carer
- **Completing assessments** – need to promote the value of an assessment through recognition of the entitlement carers have to an assessment in circumstances where regular and substantial care is being provided. Helping staff to understand the need to consider the contribution that other agencies can make in support of the carer and facilitating the engagement of such supports.
- **What other services exist offering support** – staff being provided with the knowledge of what services are available; the location of the service and the contact details

Action Required	Action to date	Timescales
Training for all health professionals re family carers and information sources	It is hoped that this will be central to the strategy resulting from the Carers Measure and will seek to influence this through the “task and finish” group	2012
Local mapping exercise to identify current training programmes and identify gaps	Discussion with Learning and development Team seeking to identify all existing training programmes which could be of benefit to carers	2012
Improve dementia recognition and training for carers through stronger links with Health, Social Services and GPs		2013
To develop a transition pathway for young carers into adult services	Early discussion with the Transition worker – need to identify and agree process	2012
Through joint training using family carers, health professionals are trained and encouraged to recognise the carer as an expert partner and co-worker.	Initial discussion with Learning and development Team taken place	2013
Ensure all carers have the opportunity to develop a training support plan	This it is felt should be part of the Carer Assessment – discussion with Team Managers to be arranged	February 2012
Develop stronger awareness among adult services workers as to the service needs of young carers		2012
Develop positive attitudes to caring across all sectors and ultimately across the wider community		2012 -2013

Training for all health professionals re. assessment process and information sources.		2012
Train and develop peer support and mentoring arrangements using befriender service and past carers.		2012 - 2013
Health Providers to be given the same information through training in Carers' Rights and Responsibilities.	Training has been provided to Support Workers operating within the "Frailty" programme and will continue	Started and on-going in to 2012

Signposting

If care to the individual is working well and is consistent then the carer understandably feels valued and supported but too often there is conflict with different agencies and carers feel alone and then have to fight for their rights. This position needs to be changed and a co-ordinated approach is required to effectively meet the needs of carers. In order to achieve a cohesive system all agencies must seek to collaborate and determine the contribution that can be made from each agency to support the needs of the carer.

We need to ensure that services are delivered in a way that it is easy for carers to access so that carers have the opportunity to engage with the appropriate services which take account of their health, welfare, financial, emotional and social needs. To achieve this all agencies must consider how they can help facilitation to universal services such as employment, leisure, health care and education as well as specialist carer services.

In the absence of this contribution, health and social care services in the Borough will be placed under intolerable pressures in achieving the degree of support needed by carers.

In working collaboratively it should help all agencies to focus on improving the carers sense of health and well-being and overall quality of life. If a collaborative approach can be effectively designed and delivered it will ease the carers worries about how they can access support in an emergency, whilst giving them greater insight and understanding of how their own individual needs can be attended to.

GPs are often the first port of call in asking for help and often primary care teams often do not know how or where to refer them for help. Having someone to talk to in the surgery would be helpful. Similarly, minimising the impact of the costs of caring on families by supporting carers to stay in or return to work is important as is the provision of good quality benefits advice

and organising services for the cared for in such a way that the carer feels able to take advantage of leisure and recreational pursuits.

Action Required	Action to date	Timescales
Statutory agencies recognise the important contribution carers make and are therefore committed to working with them to identify how services can be developed and delivered to meet their needs	Carer Forum established with clear "Terms of Reference" to specifically include this action	2012
Agencies identify gaps in provision and work with colleagues from across the statutory and voluntary sectors to look at ways of building support for carers	Discussion with the Carer Forum	On-going
Initiatives to work more closely with Jobcentre Plus to improve the help and advice available to carers wishing to re-enter the job market	JCP involved in the Carer Forum	On-going
Access to training and employment. Promotion of Job and volunteering opportunities to facilitate re-entry into job market	No formal process established	2012
Support for carers in employment by encouraging employers to adopt more carer friendly employment policies		2012 -2013
Health to provide regular check ups and advice to carers on how to manage their health better.	Initial discussion at the "Health & Well-Being" partnership	2012 - 2013
Good quality information and benefits checks to be available across the Borough and made available routinely to carers	Arrangements to be established	2012
Access to emotional support and counselling to include those whose care role has come to an end	No formal process exists	2012 - 2013
Access to services to relieve stress and facilitate exercise and or relaxation	Access to Leisure Services through the GP referral scheme has been agreed	2011
Assisting carers so that their health is not adversely affected by their caring duties.	Social Workers encouraged to focus on this in any Carer Assessment	On -going

Service Provision – an integrated approach

There is an urgent need to identify the type and range of services that are required to support both the cared for person and the carer. There is also a need for Providers to work more closely together in order to avoid competition and duplication of services. In order to achieve this each organisation needs to understand the specific functions and boundaries of their work and the arrangements to engage other Providers who may be able to offer a different, complementary and more appropriate type of service in meeting the needs of the carer.

To better enable the collaboration and integrated practices, Providers need to work within close proximity of one another, preferably the same building or have developed good, meaningful, electronic working links. The Local Authority will seek to create such a working environment within a “one stop” shop model.

Carers need to be at the centre of any determination of service need and in taking full and proper account of their needs the statutory bodies will organise regular meetings to ensure continuous dialogue and consultation with carers exists. To support this dialogue, there needs to be a focus on the needs of key and distinct groups so that the advice and the support is available following diagnosis of a deteriorating medical condition (for example, dementia). This, it is felt, is critical in aiding understanding, before structuring service provision to meet need.

It is felt that the **Essential requirements** which should be in place for all carers support services are:

- Carers are involved in the organisation
- The service works in partnership with all local agencies
- The service is clear about its principles, aims and how these will be delivered and monitored
- All staff are appropriately trained and monitored
- Support multi-agency working to provide more tailored services
- Introduce and monitor standards for performance such as waiting times for provision of service after assessment
- Contract for provision of quality services, with regular monitoring of Performance Indicators and inclusion of carers in the process
- Provide choice and equality of service

Action Required	Action to date	Timescales
Identify the contribution other statutory and voluntary agencies can make in support of carers	Constantly seeking to improve services through the Carer Forum and Regional Carer LIN	On-going
Barriers will be highlighted and plans adopted to ensure Providers work together.	Real efforts taken to fully engage Providers in discussions and actions relating to service developments	On-going
Develop a partnership guide with all contributing agencies and where possible protocols to be agreed on what is available for the benefit of carers		2012
Facilitate access to those services that are identified as important to the Carer	Need to develop a Carer pathway so that all are clear what is available	2012
Full account to be taken of issues and needs identified within carer assessments and relate to commissioning arrangements	Discussions to take place with Caerphilly over joint commissioning arrangements based on the amalgamation	2012
Where new or additional resources have been generated the benefits are to be evaluated to determine effectiveness	Tools to be established	2012
Contracts to reflect the need for regular and reliable updates on the actions taken and the outcomes achieved, in a common format, against the range of services provided		2012 - 2013

Carers Network

Carers need the opportunity to meet with other carers to share and learn from their respective experiences. The social isolation experienced by carers is of great concern and efforts need to be made to remedy such concerns. It is felt the development of a carers centre would serve as a catalyst to aid interaction with the following service elements being made available:

- **“Drop-in” café** – opportunity for carers to enter the service and feel comfortable in the knowledge that the service has a relaxed social focus as well as a ‘professional’ perspective
- **Carer support group meetings** – recognition that carer’s groups can be a great source of support and offer time and opportunity for carers to speak to other carers about experiences, issues and solutions
- **Group discussions** – the emphasis should be to enable people to meet others with similar needs and identify how they can support one another; meeting like-minded people; how they can access and used local facilities; developing wider social networks.
- **Providing information** – there is a need to ensure that all carers have the opportunity to access consistent, high quality information. A carer can feel very alone, and uncertain who to ask advice from and they need opportunities to discuss problems with care professionals and with peers.
- **Time out** – offering an environment where carers can (when time permits) get away from their normal duties and sit and relax and meet others who share similar caring responsibilities or interests

The following service elements have been identified as having a positive impact in helping people to develop their community networks. These are:

Action required	Action to date	Timescales
Better co-ordination and use of local services and facilities	A pathways document is to be developed	2012
Develop a directory of facilities that will enable carers to identify opportunities for engagement in developing their own social networks	This will be a focus for the befriending initiative	2012
Organise carers support groups to enable individuals to meet and share experiences with others who have similar issues and needs	This is a main focus for Age Cymru who are one of our contracted partners	On-going
Educate the general population on the demands of caring and how they could assist to “make things different”.		2013
Develop respite facilities to enable carers to have “time out” in the confidence that the cared for person’s needs will be fully met	Respite exists in various forms and further efforts are continuing to extend this	2012

Membership of the Carers Group

- * Minimum of 1 x Social Service management representative
- * Minimum of 1 x ABHB representative
- * Minimum of 1 representative from each Provider of services to carers
- * Each Provider of services to carers to identify a maximum of 2 carers to attend the work group meetings
- * 1 representative from each of the social work teams
- * Social work teams to identify 1 carer to attend the work group meetings

Names to be determined at the first carers meeting