



“Caring for Carers” – North Yorkshires all ages carers strategy

Presented by: Avril Hunter

Summary: This is the final draft for approval ,after formal consultation, of “Caring for Carers” which outlines the themes and actions for Health and Wellbeing Board members to support unpaid carers of all ages from 2017-2022.

Which of the themes and/or enablers in the North Yorkshire Joint Health & Wellbeing Strategy are addressed in this paper?

Themes	✓
Connected Communities	✓
Start Well	
Live Well	✓
Age Well	✓
Dying Well	✓
Enablers	
A new relationship with people using services	✓
Workforce	✓
Technology	
Economic Prosperity	✓

How does this paper fit with other strategies and plans in place in North Yorkshire?

- The strategy links with ‘Hope, Choice and Control’, North Yorkshire’s Mental Health Strategy
 - The strategy links with North Yorkshire Dementia Strategy, “Bring me Sunshine
 - The strategy links with North Yorkshire’s draft Learning disability strategy, “Live Well, Live Longer”
-

What do you want the Health & Wellbeing Board to do as a result of this paper?

- The Health and Wellbeing Board to approve the final draft of the strategy to be launched and agree to receive a report on progress in implementing the strategy annually starting in October 2018.



NORTH YORKSHIRE COUNTY COUNCIL

REPORT PREPARED FOR
NORTH YORKSHIRE HEALTH AND WELLBEING BOARD
21ST JULY 2017

“CARING FOR CARERS” - NORTH YORKSHIRE’S ALL AGES CARERS STRATEGY

1.0 PURPOSE OF REPORT

- 1.1 To present the final draft for approval, after formal consultation, of “Caring for Carers” which outlines the themes and actions for Health and Wellbeing Board members to support unpaid carers of all ages from 2017-2022.

2.0 CONTEXT AND BACKGROUND

- 2.1 North Yorkshire is home to around 65,000 people who have identified themselves as providing unpaid care in the 2011 Census. In reality the number is likely to be far higher than this, accounting for people who provide unpaid care but do not identify themselves as a carer. This accounts for over 10% of the overall population who give up their own time to support friends, families and loved ones who need help.
- 2.2 Local authorities and the NHS have a duty through the Care Act 2014 to support carers in their role. In addition Carers UK and the University of Sheffield report that nationally unpaid carers save the state £132 billion a year – close to the cost of a second NHS. In austere times it is imperative that unpaid carers are supported from a local level up to support their health and wellbeing and keep on caring.
- 2.3 The unpaid carers’ agenda in North Yorkshire was previously underpinned by the ‘North Yorkshire Carers Strategy 2012-2015’, a joint strategy developed by North Yorkshire County Council and the NHS in North Yorkshire.
- 2.4 The actions contained in the strategy above were taken forward or are now incorporated into this carers strategy. For example, a number of issues were taken forward through the commissioning of the carers advice and information service. This strategy for unpaid carers is intended to cover the period from 2017-22 and covers all ages.

3.0 ENGAGEMENT AND CONSULTATION WITH CARERS

- 3.1 Over the summer of 2016 an extensive programme of engagement with unpaid carers was undertaken. This included online feedback, face to face meetings and a ‘one question’ postcard which was available through carers centres and libraries across the County. Several user forums have also been attended to gather feedback including North Yorkshire Older Peoples Forum and North Yorkshire Parent Carers Together (NYPACT).
- 3.2 A small reference group of unpaid carers was also brought together to input into the development of the strategy and to provide a ‘sense check’ on the work undertaken by officers.

- 3.3 Over 200 responses were received from the engagement with a wide range of issues raised which resulted in the key themes being determined.
- 3.4 The formal consultation period ended on 23rd June. An Easy Read summary of the Strategy and questionnaire was produced to facilitate participation.
- 3.5 Appendix 1 outlines the outcome of the formal consultation which had 70 responses. The feedback supported the themes and key commitments. There were no specific comments relating to adults which required amendments to the strategy. A number of comments related to the level of detail which will be addressed in the implementation plans for all the partners of the Health and Wellbeing Board.
- 3.6 The consultation gave a number of options about what to call the strategy and over 50% responded with “Caring for Carers”.
- 3.7 In response to feedback from parent carers of disabled children, some amendments have been made.
- 3.8 Further social media (Appendix 2 for comments) was arranged and the advert was viewed by 19,237 people, shared 42 times, received 39 likes, three love hearts and one angry face.

4.0 NEXT STEPS

- 4.1 The final draft to be designed including images from North Yorkshire carers.
- 4.2 A joint launch to take place with “Bring Me Sunshine” in October 2017. .
- 4.3 Health and Wellbeing board members to draw up implementation plans and report progress to Health and Wellbeing Board annually.

5.0 RECOMMENDATIONS

- 5.1 The Health and Wellbeing Board to approve the final draft of the strategy to be launched and agree to receive a report on progress in implementing the strategy annually starting in October 2018.

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Date: July 2017

Appendix A: Consultation Summary
Appendix B : “Caring for Carers”

Appendix A: Carers Strategy Consultation Summary

1.0 Background

- 1.1 In 2016 the North Yorkshire Health and Wellbeing Board asked for a new strategy to support unpaid carers to be developed to replace the previous strategy which ended in 2015.
- 1.2 Over the summer of 2016 a wide ranging engagement exercise took place to ask carers what the big issues currently were for them. There were over 200 responses to this which were summarised to the Health and Wellbeing Board. A draft strategy was developed on the basis of this feedback.
- 1.3 The draft strategy was released for public consultation lasting 6 weeks from 15th May 2017 to 23rd June 2017. The consultation was widely publicised through a variety of methods which are detailed in the communications plan at Appendix A.
- 1.4 70 responses were received to this consultation process.

2.0 The findings of the consultation process

- 2.1 A detailed summary of responses from the consultation can be found at Appendix B.
- 2.2 Of the 70 respondents, around half who responded described themselves as an adult carer, with the other major groups of respondents being former carers, parent carers or people being cared for.
- 2.3 The highest response rate in terms of age categories was 50-64 (38%) and the majority of respondents were female (79%).
- 2.4 The areas of North Yorkshire that people were responding from was split relatively evenly apart from Richmondshire which had a lower rate of response.
- 2.5 Six themes were set out as part of the strategy and the consultation asked people how important each theme was on a scale of not important at all to very important. The following feedback was given:

Theme	% who thought the theme was Important or Very Important
Improving identification of carers	98%
Improving information and advice	99%
Enabling carers to take a break	96%
Improving carers health and wellbeing	94%
Enhancing financial wellbeing	98%
Involving carers as experts	97%

- 2.6 For each theme a set of actions was outlined and the consultation asked if people agreed with these actions on a scale of not agreeing with any of the actions to agreeing with all of the actions. The following feedback was given:

Theme under which the action was categorised	% who agreed with...			
	None of the actions	A few of the actions	Most of the actions	All of the actions
Improving identification of carers	3%	3%	33%	61%
Improving information and advice	4%	4%	29%	62%
Enabling carers to take a break	4%	4%	22%	70%
Improving carers health and wellbeing	4%	4%	29%	62%
Enhancing financial wellbeing	4%	4%	30%	61%
Involving carers as experts	4%	3%	21%	72%

2.7 When asked for comments about any actions that they disagree with, 38% of the feedback was relating to the amount of detail included in the actions, 25% was regarding lack of funding and carers not being a priority for organisations, 25% was around information and commitments to parent carers and other issues made up the final 12%.

2.8 When asked for comments about any actions that hadn't been included that they though were important, the following categories of feedback were received

Comment category	No. of Comments
Respite/Breaks	4
Funding/Resource to implement	3
Consultation with parent carers	2
Information availability	2
Doctors recognising carers	1
Childcare	1
Speed of help to carers	1
Exclusions of disabled children	1
Children moving directly into highly specialised support	1
Health and education appointments for parents	1
Help for retired carers	1
Mental health	1
Use of educational institutes to recognise carers	1
Coproduction of the strategy	1

2.9 The consultation also asked if respondents agreed with the key commitments outlined in the draft strategy. 65% said they agreed with all of the commitments, 26% agreed with most of the commitments, 3% agreed with some of the commitments and 5% disagreed with some, most or all of the commitments.

2.10 When asked for comments if they disagreed with the commitments the following categories of responses were received:

Comment category	No. of Comments
Parent carer commitments	4
Hope that the commitments are implemented	1
Want the plan to be easier to read and understand	1
Listening to carers commitment	1

2.11 When asked for any additional comments with regard to the commitments, the following categories of responses were received:

Comment category	No. of Comments
Disabled children	3
Not enough detail of how they will be met	3
Schools should be extended to all higher learning institutions	1
Better communications between health and social services	1
No commitment for older people	1
Government approach	1
Seeing it from the view of the carer	1

2.12 Part of the consultation asked respondents to select a name from the strategy from a short list, or suggest a name themselves. 51% selected 'Caring for Carers', 20% selected 'By your side' and the remaining vote was split over 8 others suggestions, or indications that the name of the strategy did not matter to the respondent.

2.13 When asked if there was anything else the respondent would like to say about the strategy, there were 21 comment left. These were regarding the following issues:

Comment category	No. of Comments
More detail and actions required	4
Talking to parent carers, developing the strategy in terms of parent carer content and further consultation with parent carers	3
The need to support carers	3
Resources to implement the strategy	2
Recognising 'hidden' carers	1
Consistency of service across the County	1
Attitude of NYCC managers	1
Negative feedback on the purpose and underlying reasons for producing the strategy	1
Informing people about how the strategy will be implemented and asking how it has impacted them	1
Supporting lone Carers	1
Raise awareness of caring	1
Having one organisation to provide carer services to avoid confusion	1
Taking notice of Carers	1



Draft Carers Strategy 2017 - 2022

Supporting the health and wellbeing
of carers in North Yorkshire



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Foreword

To follow post approval

Scope and purpose

This document sets out North Yorkshire’s over-arching strategy for promoting carers health and wellbeing from 2017-2022. It has been produced by the Health and Wellbeing Board for North Yorkshire, working on behalf of local residents.

The document is intended for all those who come into contact with carers or who commission and deliver services in the County or who have an interest in improving these services: North Yorkshire County Council; District/Borough Councils; the Clinical Commissioning Groups who cover this area; the acute hospital trusts, and community trusts; and a wide range of voluntary and independent organisations.

References to “we” in the text of the strategy are intended to include all of these bodies, working together and in partnership with those who use our services and those who care for them.

When we refer to ‘carers’, this is defined as: Anybody who looks after a family member, partner or friend who needs help because of their illness, frailty or disability. All the care they give is unpaid.

Introduction

Three in five people will be a carer at some point in their lives and almost everyone will know family members, friends and colleagues who are currently carers. Carers play a vital role in maintaining the health and wellbeing of those who need help. We know that most carers are happy to support the person they care for and want to be able to continue offering that support, but the caring role can often affect their own health and wellbeing.

Carers UK estimate that the value of care now stands at £132 billion, which is almost the equivalent to the annual spend on the NHS. The role that carers play in our communities is to be celebrated, but providing care can come at a great personal cost to those who sacrifice their own time, effort and money to become a carer.

This strategy reflects what carers have told us in North Yorkshire, along with other local and national evidence about the effects of being a carer. The strategy sets out the ways in which carers in North Yorkshire will be supported and how we can protect the health and wellbeing needs of carers alongside the needs of the people they care for.

The Care Act recognised that the mental and physical health and wellbeing of both carers, and those being cared, for should be considered equally. As a result local authorities now have a statutory duty to assess the impact of caring on a carer's mental and physical health and wellbeing and to agree a support plan with the carer, to meet the carer's needs. The Care Act Guidance recognises that the best way to meet a carer's needs may be to provide care and support directly to the person that they care for, for example, by providing replacement care to allow the carer to take a break providing the person needing care agrees.

The vision of the Act is to actively promote wellbeing and quality of life, and not just wait to respond when people and their carers reach crisis point

Wellbeing includes:

- personal dignity;
- good physical and mental health;
- protection from abuse and neglect;
- control over day-to-day life;
- participation in work, education, training or recreation;
- social and economic security;
- domestic, family and personal relationships;
- suitability of living accommodation; and
- making a positive contribution to society.

It makes real sense that at a time when we have increasing financial pressures to continue to make sure that carers are supported and valued as partners and experts. Supporting carers helps to reduce the need for more formal services and it also helps families and vulnerable people to continue to live in the community as they would wish. Carers should be helped to maintain both their caring role and their own health and wellbeing, which at times will include having access to good alternative care and support for the people they care for when they need a break or are unable to provide care. Just as importantly we need to listen to carers and recognise the contributions they make and the skills and understanding they have.



We should also recognise that the 'carer's journey' does not come to an abrupt finish when their caring role ends. Increasingly we hear from carers of the impact of the loss of the person they have cared for. A carer might well need support through the transition of adjusting to no longer being a carer; a role that may have been a big part of their life for many years.

Our vision

We have set out a vision that people in all communities in North Yorkshire have equal opportunities to live long, healthy lives. For carers, this will mean that:

Carers themselves can live long and healthy lives and be able to continue to care as long as possible and as long as they would want to. We want to encourage more carer friendly communities, and promote carer issues across wider society.

How does it fit together?

The North Yorkshire Joint Health and Wellbeing Strategy 2015-20 sets out our ambitions in respect of five areas: Start well, Live well, Age well, Dying well and Connected communities. All of the commitments within the strategy apply to carers including the specific outcomes that; carers have a life of their own (Living well) and all individuals, their carers and families experience good end of life care (Dying well).

Our other strategies also recognise the role and importance of carers in North Yorkshire. These strategies specifically address autism, young people, learning disabilities, mental health, dementia, extra care/supported housing and end of life care. Carers have helped to shape these strategies and are seen as a key partners in addressing the challenges that face us in each of these areas. A comprehensive list of these strategies and where to find them can be found in the further information section of this document.

The carers strategy as a separate strategy brings together the key messages from all carers about what matters to them *as carers* and sets out the ways in which we will specifically work to support our carers. The strategy will shape the specific 'carers offer' and it will also enable the delivery of the other strategies by setting out our commitment to carers.

North Yorkshire County Council's vision is for people in North Yorkshire to have every opportunity to live longer, healthier, independent lives: "We will make sure that support is centred on the needs of people and their carers, allowing them to take control of their health and independence and we will work to keep vulnerable people safe, with individuals, organisations and communities all playing their part". With programmes such as Stronger Communities, North Yorkshire County Council is investing in helping communities and individuals build resilience and find local support.

As part of this, North Yorkshire County Council is well on its way to transforming social care services in North Yorkshire, by developing and strengthening services, such as the Living Well Team and the Children and Families Prevention Service, to help people remain independent and prevent them from requiring more formal care services. The way assessment, review and support planning is done is also changing to support people to stay independent for longer in their own homes. Future assessments and reviews will look at solutions involving friends, family and the wider community and will maximise every opportunity for people and carers to remain or become more independent, or achieve their outcomes through creative care and support planning where appropriate.

Across North Yorkshire work is under way to link our health and social care services for adults. This may differ from area to area, but increasingly we will see adult social care staff working alongside GP's, community and primary health services. This will aim to make services more joined up and easier for carers to understand.

On a national scale, the government has consulted on a review of the National Carers Strategy and is analysing the results. The revised strategy is due to be published in 2017. The government says that the national strategy needs to reflect carers' lives now, their health and financial concerns, and give them the support they need to live well while caring for a family member or friend. Some of the issues that are important to carers can only be considered at a national level, particularly in relation to national welfare benefits and changes to employment legislation. We will review the national strategy when it is published to see how it can help in North Yorkshire. NHS England's Commitment to Carers sets out the importance of carers to the NHS and their commitment to supporting them. Plans for the future of the NHS (Five Year Forward View) also emphasise and recognise the importance of carers.

Who are carers in North Yorkshire?

There are around 65,000 people in North Yorkshire across all age groups who identified themselves as providing unpaid care in the 2011 census, which is more than one in ten people. This is higher than the average both nationally and through the Yorkshire and Humber region. Only Richmondshire (9.2%) had a lower rate of identified unpaid carers than the national average. In reality there are likely to be many more people providing unpaid care, who either do not recognise themselves as a carer or do not wish to be recognised as a carer.

The number of people providing unpaid care has increased by almost 15% (8,250 people) since the 2001 Census compared with a 2.3% increase in the county's overall population. Almost one in four (24.3%, 15,538 people) of the female population aged 50-64 are providing unpaid care, which rises to 25% in Ryedale and 26.6% in Craven, compared with a national average of 23.5%.

Being an unpaid carer at different times of life can present different challenges. Over a quarter of carers in North Yorkshire are over the age of 65. There are also over 18,000 carers aged 25-49 and over 3,000 under the age of 25, including young carers under the age of 18. We are aware that many carers will also have their own care needs, and some to a level that means they may also require social care support in their own right.



In 2015/16 the Carers Centres, funded by North Yorkshire County Council and the Clinical Commissioning Groups had over 1,800 referrals and supported over 1,200 new, previously unidentified adult carers. 476 young carers have also been supported through Carers Centres.

In the same time period over 3,200 carers assessments have been undertaken to help adults look at the different ways caring affects their lives, and agree how their own needs will be met

What's the evidence of how caring affects health and wellbeing?

Our Public Health Team has undertaken a review of evidence on the impact of caring for the Joint Strategic Needs Assessment. It is clear that a caring role has significant impacts on the carer, in terms of their physical and mental health, relationships, ability to socialise and manage their finances. Across all ages of carers this includes the following examples:

- Carers report that they find it hard to look after their own health, doing less exercise and not eating a balanced diet because of their caring roles and responsibilities. When finances are tight, they will ensure that the cared for person gets enough food but the carer will 'make do'.
- Health being affected by the need for hands-on care which is physically exhausting (especially for young people caring for adults). This is often combined with sleep deprivation, injury and strain.
- Carers can experience loneliness at work and say that colleagues do not understand the impacts of caring and that occasionally they cannot give work their full attention.
- Social isolation and impact on mental wellbeing.

The following examples show how caring affects young people in particular.

- Young carers can be reluctant to disclose that they are a carer due to the stigma associated with certain illnesses.
- They can experience bullying and poor behaviour at school because of their caring role.

- They are also are at risk of missing school trips, not completing homework and have poor school attendance. This impacts on the young person’s education attainment and in later years this can affect employment outcomes, lifetime career prospects and income.
- Emotional wellbeing: stress, tiredness and mental ill-health are common for young carers.
- Feeling different or isolated from their peers and with limited social opportunities.
- Lack of a stable environment: traumatic life changes such as bereavement, family break-up, losing income and housing, or seeing the effects of an illness or addiction.

What do carers in North Yorkshire tell us?

Over the summer of 2016, we asked members of the public to tell us what they thought the big issues affecting carers were. We did this through a widely publicised ‘one question’ postcard, online and by attending carers groups across the County to speak face to face. Over 200 responses were received and we talked to a wide range of carers of all ages about their experiences. In addition to this work, we have received feedback from carers who were consulted about the North Yorkshire Dementia Strategy and the new North Yorkshire County Council Care and Support Pathway.

“I’d like a place within my community to take my daughter and myself that accepts us for who we are and can meet people of our age groups to talk to and have a cup of tea. This would make us feel included within the area, the isolation of North Yorkshire and villages and rural environment does not always allow this for people who are carers.”

The feedback from these conversations has given us a rich picture of what matters to carers. From these messages we have identified a number of themes that affect carers which have underpinned and shaped this strategy.

We got a clear message that carers do not see themselves as carers but as lifelong partners, sons, daughters, siblings, neighbours and friends. People do not resent being carers, but the commitment and social isolation can be overwhelming at times.

Identifying yourself as a carer can be a difficult process, especially for young carers, and even after this many found it hard to get the information they need at the right time for them.

We heard that carers do not think that they are valued by professionals as experts in care and are often excluded from important decisions and not kept informed. Carers were often frustrated that professionals did not seem to communicate with them and have to tell the same story over and over.

We heard how much carers valued being able to talk to people in a similar position to get things off their chest. Many carers told us how valuable they had found help from the local Carers Centres across North Yorkshire and other groups.

Carers of people with mental health problems who made comments as part of the mental health strategy development echoed the themes: a great many said that carers were undervalued, that they wanted better links with GP’s, that it takes too long for carers to be recognised and that they should have a role in assessing the safety and quality of services offered to the person they care for.



What carers are saying nationally

National organisations that support carers are continuing to provide information about carers views across the UK.

The Carers UK State of Caring UK 2016 report says that “Without practical support with caring from health and care services, carers cannot get the time they need to look after their own health and maintain relationships with others. Replacement care for the person they support is essential in enabling carers to juggle work, study or have hobbies and interests alongside caring, or to manage care with other family responsibilities such as childcare.”

“I would like to feel confident that my husband would be looked after if anything happened to me”

The Carers UK reports regarding ‘Carers at Breaking Point’ and “Caring and Family Finances Inquiry” also report that

- Six in ten felt they had been pushed to breaking point
- 46% said they had fallen ill but just had to continue caring
- One in five carers were forced to give up their jobs because they were in crisis
- 61% of the carers said they had been in debt as a result of caring

NHS England’s ‘Commitment to Carers’ reports that:

- 70% of carers come into contact with health professionals yet health professionals only identify one in ten carers with GPs, more specifically, only identifying 7%
- 66% of carers feel that healthcare staff don’t help to signpost them to relevant information or support, and when information is given, it comes from charities and support groups

Views that carers have given in North Yorkshire reflect many of the issues being raised in national reports. Information about national carers organisations can be found in the further information section of the strategy.

Diversity of carers

What is very clear from talking to carers and their responses, is that carers are a diverse group who have a variety of different needs that depend on a range of factors including the needs of the cared for person, gender, age, as well as employment and family circumstances. It is clear from this information that good assessment of both the cared for person and the carer is critical if we are to support carers.



There are particular challenges faced by some groups, which are not mutually exclusive, including the following examples:

- Young carers are children and young people under 18 who provide care to a family member who is physically or mentally ill, disabled or misuses substances. Being a young carer means balancing the caring role with education, which may lead to anxiety and stress. It can also affect young people’s health, social life and self-confidence. The tasks and level of caring undertaken by young carers can vary according to the nature of the illness or disability and the structure of the family as a whole.
- Young adult carers are aged between 16 and 25. They usually face similar challenges to young carers, but are at an important time of life in terms of school progression, further education, career decisions and taking on the responsibilities of becoming an adult. There

are also difficult decisions about leaving the person they are caring for or dealing with bereavement at an early age.

- Parent carers are defined by Carers UK as someone who is over 18 who provides care to a disabled child for whom they have parental responsibility. Parent carers are likely to be carers for a longer time period than others and often have to plan long term for how to balance their caring role with their life outside of caring.
- Working age carers are those who carry out a caring role and are of working age. The main challenges for working age carers is gaining and maintaining employment and being able to strike a balance between the caring role and life outside the caring role.
- Older carers are those individuals who have a caring role into their older age. Older carers often provide long hours of care and support, but can be at additional risk of doing this to the detriment of their own health and wellbeing. Older carers can also need additional support with more demanding and physical tasks.
- 'Sandwich' carers or 'dual' carers have a caring role for more than one person, often of different generations. The term can also be applied to carers who are caring for someone but also have additional responsibilities, such as having a child. Juggling two caring roles can be overwhelming, even before consideration is given to life outside the caring role.
- Carers of people with mental health or substance misuse - who are less likely to identify themselves or to be identified as carers
- Short term carers take up their role over a short time period for reasons such as illness and may have less time and experience to adjust to becoming a carer
- Lesbian, gay, bisexual and transgender carers reported a feeling of 'double isolation' – this being the usual feelings of isolation due to the fact they are a carer, but also because they need to talk to someone openly about the issues that are important because they are lesbian or gay.
- Carers from the gypsy, roma, traveller and show people (GRTS) communities - who are much less likely to access health and social care services.
- Carers from black, Asian and minority ethnic (BAME) communities - Language barriers and cultural traditions will impact on whether people see themselves as carers and able to seek support or whether it is seen as part of family responsibilities.
- Carers of people with HIV/AIDS, who can be reluctant to disclose that they are a carer due to the stigma associated with HIV/AIDS.

Case study

When Scarborough & Ryedale Carers Resource first received a referral for Penny she was 14 years old and living with her mother. They had fled domestic violence and were living in unsuitable temporary accommodation. Penny's mother has complex physical and mental health needs and Penny is her primary carer. They had no family and no friends to help support them. Penny's older brother had also moved north with them but he had mental health issues and had wrecked the room on a number of occasions so was no longer living with them. He was staying in a flat locally and needed their support daily. Penny had not attended full time school for two years and was awaiting an assessment about her education. She did go into a local school for a day but struggled to cope. She had and still has some mental health issues of her own. Her mother and she are very close, spending all their time together and even sharing the same bed. Penny believed that if she doesn't look after Mum then nobody else will. At the time Penny felt that everyone else has or will let them down.

This was the situation when the Young Carer Service began to support the family. They provided one to one contacts as well as small targeted group sessions for Penny and supported her within a range of professional meetings. The team have been part of a multi-agency support system to getting appropriate housing for the family. They helped to arrange for specialist advice on moving and handling for Penny and supported her to formulate an emergency contact plan for when Mum is ill. Penny now feels safe during times that her mother is in hospital. We arranged for dental care and GP appointments for Penny so that she could start focusing on her own health and wellbeing.

Case study continued

The team encouraged her self-confidence and she attended activities, workshops and a residential trip. Penny had support to process a funding application and help with decorating her own bedroom to give her personal space. They also encouraged Penny to apply for a local College course, helped her get to the interview and took her there on her first day. The team supported Penny to apply for a computer and printer for her personal use. This was successful and has helped Penny to be able to complete her coursework.

Penny's mum was referred to the Scarborough & Ryedale Carers Resource in her role as carer for Penny's brother and was given help to apply for the appropriate benefits. We also helped mum find a new source of support through the MIND befriending service. By taking Penny shopping for essentials such as food and clothing the team encouraged her to think about value for money as well as budgeting skills and helped Penny take responsibility for her own future and financial security.

The themes and priorities for improvement

The six themes that have come through clearly when talking to carers and organisations who are supporting our carers are in line with themes that have been identified nationally:

- Improving identification of carers
- Improving information and advice
- Enabling carers to take a break
- Improving carers health and wellbeing
- Enhancing financial wellbeing
- Involving carers as experts

The following sets out our objectives for each of these themes. In addition to these areas we will commit to take into account what carers see as important to them to continue their caring role when redesigning or delivering services.

Identifying carers

One of the most important steps for carers in accessing support is being able to identify themselves as a carer. This is not always easy as many carers do not like to ask for help for a number of reasons. For some they do not want to feel like they are losing control, or that they might be judged. Some carers worry that safeguarding workers may become involved if they say they need help or that the person will be taken out of their care. Many also see themselves not as a carer, but as fulfilling a family duty. This makes it difficult to get services to carers that can help them in their role. Carers are less likely to identify themselves or to be identified as carers if they are caring for someone with mental health or substance abuse issues rather than physical health conditions or illnesses.

"I would like to see help for people to recognise themselves as carers, because often they just see themselves as being neighbourly or family"

What happens now?

- Carers Centres are currently commissioned across North Yorkshire to actively identify new carers in the community.
- North Yorkshire County Council currently identify carers through social care and through schools.
- In some areas carers are identified through NHS settings such as GPs.

To increase awareness of carers of all ages and help carers access support services, we will:

- Explore how we can effectively identify carers, particularly in hospitals, schools and GP practices and point carers in the right direction for support.
- Make it easier for people to identify themselves as carers, especially those who may not come into contact with health or local authority organisations and those caring for people with mental health or substance misuses issues
- Increase awareness of carers across communities and wider society
- Encourage communities and organisations to become more 'carer friendly'.
- Make it easier for carers for people with mental health or substance abuse issues to identify themselves

Information and advice

A vital part of being able to help carers in their role is by ensuring they have the right information and advice at the right time. This can be crucial in building a support mechanism to help a carer in their role. When we spoke to carers about what they thought the biggest issues around caring are, the most common response was regarding the availability of information. In addition, the North Yorkshire 'Survey of Adult Carers' 2014/15, showed that 92% of respondents had used information and guidance services during the previous 12 months. This shows that information and advice plays a large role in being able to maintain a caring role.

"I'd like to explain to people (public) that saying you are a carer can bring benefits and doesn't necessarily mean that you'll get bombarded with a whole menu of officialdom. I.e. That you can just get information, advice and guidance"

What happens now?

- Carers Centres, alongside a number of other voluntary organisations, are currently commissioned across North Yorkshire to provide information and advice for adult carers.
- Some Carers Centres and Action for Children are currently commissioned across North Yorkshire to provide information and advice for young carers and schools.
- North Yorkshire County Council currently provide information to carers through the customer service centre and assessment process.
- North Yorkshire PACT (a collective voice for parents of children with disabilities and additional needs) support parents and carers by helping them find relevant information about what support is available for their children and how to access this support.
- NHS provide information and advice in a variety of ways, for example GP practices may have their own carer's policy, and try to identify carers

In order to help improve information and advice for carers of all ages, we will:

- Think creatively and find new ways to inform carers.
- Work better together to more effectively get information and advice to carers.
- Get the right information to carers at the right time in the right formats and not overwhelming them at the most stressful times.
- Give the same level of information and advice to carers who fund their own care.
- Continue to support carers services to give information and advice to all carers.
- Adopt a proactive approach to supporting carers to plan for the future

Giving carers a break

To help carers of all ages in maintaining a life of their own outside their caring role, it is important that there are options for them to be able to take a break from caring. When we spoke to carers about what they thought the biggest issues around caring are, the second most common response was regarding the ability to have a break from their caring role. By taking a break, it allows carers to recharge their batteries and help build up long term resilience. However, carers want to be sure that the cared for person is safe and supported. It is essential therefore that we have a range of options to support the cared for person and always take into account the carers needs when agreeing support plans for people

What happens now?

- We have a mixed offer for both carers and those they care for. Some services are currently offered as 'carers services' and some for the cared for person
- 'Carers sitting services' provide short breaks for adult carers in some areas of the County on a volunteer basis.
- North Yorkshire County Council provide and commission a range of short breaks in short stay centres, day services and care homes as part of support plans for cared for people
- North Yorkshire County Council can offer a direct payment which some carers choose to use to take short breaks
- A wide range of carer groups have been established in most areas of the County to give carers and cared for people a place to meet and speak with other carers
- Parent/carers of severely disabled children receive support and short breaks through the Disabled Children and Young People's Service. This could include services in the community, in families own homes and in day or overnight settings.

In order to improve the offer of giving carers a break, we will aim to:

- Review the way we undertake assessments for both carers and those they care for to ensure that where a carer needs help to take a break this is included in the support plan for the person they care for.
- Review the best way to give carers greater choice in the way they use carers personal budgets
- Review our carers sitting services to ensure these work well in conjunction with carers personal budgets
- Promote and raise awareness of what break options are available for adult carers.
- Promote the development of ways that all carers can get information and support from each other.
- Review how we assess and respond to needs of disabled children who do not meet the eligibility criteria for the Disabled Children's Service.

Carer health and wellbeing

It is essential for carers to maintain their own health and wellbeing in order for them to be able to continue in their caring role and to be able to do this to the best of their ability.

“I don't like to have to ask friends for help all the time and many of my friends have died.”

What happens now?

- Carers Centres and other voluntary organisations provide emotional support to carers on the phone or face to face if appropriate.
- A review of the needs of the cared for person can take place if carers are finding their caring role is putting their health or wellbeing at risk
- Carer groups have been established in some areas of the County to give carers and cared for people a place to meet and speak with other carers.
- Carers can access the universal mental health services and the Children and Young People Prevention Service.
- Over 3,200 adults have a Carers Emergency Card to help provide additional peace of mind by identifying carers as having a cared for person, should anything happen to them
- Carers Centres and North Yorkshire County Council undertake carers assessments with carers to help identify support that could be provided to assist the carer in their role
- Carers who have been assessed as eligible for a one-off personal budget in the form of a Carers Support Grant from North Yorkshire County Council to help them to pay for things which will help them in their caring role
- GP practices may offer flu jabs and health checks to carers, as well as signposting to Carer's Centres.

In order to improve the wellbeing of carers, we will aim to:

- Continue to highlight the importance and requirement for emotional support for carers.
- See how we can promote carers being able to support each other through groups, one to one contact and online.
- Raise awareness of the mental health of carers.
- Improve the range of places for carers to go where they feel safe and supported.
- North Yorkshire County Council will ensure that all carers have a keyworker if they have had an assessment
- Provide the right support for carers through end of life care and bereavement.
- Support carers to look at plans for emergencies and introduce a Carers Emergency Card for young carers.
- Give further consideration to wider issues of living in North Yorkshire that impact carers such as transport and accessing services.
- Encourage healthcare providers including GPs to recognise the effect caring can have on a carers mental and physical health.
- Review the best way to give carers greater choice in the way they use carers personal budgets

Financial wellbeing

Becoming an carer often means that financial circumstances can change. When we spoke to carers about what they thought the biggest issues around caring are, many responses revolved around finances, funding for carers and maintaining employment with the caring role. It is important that being an adult carer does not become a financial hardship and that they are aware of the assistance that is out there if required.

What happens now?

- Carers Centres work with local employers to raise awareness of carers in the workplace and how they can support them to stay at work.
- North Yorkshire County Council's supported employment service can provide help for carers who need support to continue working and caring.
- North Yorkshire County Council's income maximisation team support carers as part of their role to develop financial resilience in North Yorkshire.

In order to help prevent adult carers being forced into financial hardship as a result of their role, we will aim to:

- Maintain the principle that the caring role should not become a financial hardship.
- Raise awareness of the challenges carers in the workplace face and support employers to promote carer friendly policies.
- Provide the right support and information to support carers stay in employment or return to employment
- Encourage people to plan ahead for example through setting up power of attorney, living wills
- Ensure advice on how to maximise income continues to be available along with help filling in relevant paperwork.

Case study

The CReate project at Carers' Resource, Harrogate and Craven empowers carers to find and stay in paid employment alongside their caring role. Specialist advisers support carers through workshops and advice sessions to develop skills, think creatively about their caring role and advise on their employment rights. They work closely with employers to support them in developing a carer-positive working environment, through recognising the contribution of carers on their workforce and introducing carer friendly working practices. They also work with carers supporting them into employment or self-employment.

CReate has worked closely with Skipton Building Society, one of the Craven district's largest employers, over the last ten years. This positive relationship has culminated in the development and launch by Skipton Building Society of their new Carer Policy, supported by Carers' Resource. Carers' Resource has worked with managers to strengthen carer awareness throughout the organisation and has provided independent work-based support to carers working for the building society through workplace drop ins and one to one advice sessions.

Carers being more involved in care

Carers have told us that they do not feel they are recognised as experts, and are not included in important decisions about diagnosis and treatment for the person they care for. It is important that we acknowledge the role and knowledge of carers in both health and social care settings. Carers views should be valued and listened to and considered in any plans made.

What happens now?

"I would like a carers supporter in my GP surgery. I do not know if GP's fully understand you can have physical symptoms caused by the stress of caring"

- There are some good examples of involving carers in decision making in both health and social care settings.
- North Yorkshire PACT act as a collective voice for parents of children with disabilities and additional needs, supporting parents and carers by helping them find relevant information about what support is available for their children and how to access this support.

In order to make sure carers are included appropriately in the important decisions about the person they care for, we will:

- Make sure we use a 'whole family approach' and use carers as the experts.
- Support carers to develop new skills and techniques, for example through reablement or positive behaviour support training for family carers of those with more complex needs and whose behaviour can be challenging
- Continue to work with, and provide support to North Yorkshire PACT to understand the issues that are affecting parent carers.
- Extend staff training in Triangle of Care to include carers as partners and treat them with respect
- Provide staff training in how to effectively engage with carers. The experience of carers will be included in all relevant training.
- Clinical Commissioning Groups will promote carers involvement throughout the treatment of the cared-for person by GPs and hospitals
- Involve carers in service redesign and commissioning
- Ensure that GP's have a system for agreeing and recording who patients are happy to share information with so that carers do not experience difficulties communicating with professionals

Our key commitments for 2017 – 2019

As well as taking into account all the aims set out above in strategies and redesigning services, we are committed to focussing on the following twelve actions for the next two years. An action plan will be produced to show progress against these commitments which will be brought back to the board on an annual basis.

- We will commit to improving how carers are involved in the co-production and co-design of services at all levels including the way that young carers are involved.
- We will make sure that carers feel more informed and involved in the treatment of the person they care for.
- We will make sure that the Care Act principles for personal budgets are embedded in the adult carer offer from North Yorkshire County Council.
- We will work with employers to raise awareness of flexible working policies to help carers combine their caring role with paid employment.
- We will help carers take a break from caring.
- We will make it easier for carers to get the right information they need at the right times for them.
- We will listen to what carers say is important to them and look at solutions involving friends, family and the wider community when undertaking carers assessments
- We will work with schools to raise awareness of flexible policies to help carers thrive and be successful in their school.
- We will encourage schools to participate in the Young Carers in Schools Award scheme.
- We will ensure all young carers have been assessed using our comprehensive North Yorkshire Assessment and use the Signs of Safety model.
- We will support schools to recognise young carers and offer additional support as appropriate.

- The Disabled Children and Young People's Service will assess the needs of disabled children and their parent/carers to ensure they receive the right level of support and short breaks to support and sustain their parenting role.
- We will be working to ensure that all disabled children referred to the Council will receive an assessment and services made available where appropriate to meet those assessed needs. This will close the identified gap in service to those children with higher functioning conditions who do not meet the eligibility criteria for the DCS.

How will we measure success?

Our progress on these commitments will be measured in a number of different ways:

- Through the progress on the action plan which will be reported to the Health and Wellbeing Board on a regular basis
- Monitoring of key performance indicators from each partner on the Health and Wellbeing Board, such as:
 - Numbers of new carers identified (including those from harder to reach groups)
 - Number of carers referred to appropriate services
 - Number of services provided to carers
 - Number of carers assessments and reviews carried out
- Monitoring of feedback from the Survey of Adult Carers in England (SACE)
- Monitoring the outcomes of people accessing the carers sitting services and carers information services
- Monitoring the outcomes of carers accessing other carer services including Living Well service

Further information

North Yorkshire Carer Centres

Further Information and Contact Details Available at www.northyorks.gov.uk/carers

- Carers Resource (Adult Carers Only) – Harrogate and Craven Districts
- Hambleton & Richmondshire Carers Centre – Hambleton and Richmondshire Districts
- Scarborough & Ryedale Carers Resource – Ryedale and Scarborough Districts
- Carers Count (Adult Carers Only) – Selby District
- Action For Children (Young Carers Only) – Harrogate, Craven and Selby Districts

Related strategies

- [North Yorkshire Autism Strategy](#)
- [Care and Support Where I Live](#)
- [North Yorkshire Mental Health Strategy](#)
- [North Yorkshire Dementia Strategy](#)
- [Young and Yorkshire](#)
- [Live Well, Live Longer - Learning Disability strategy](#)
- [Five Year Forward View – NHS England](#)
- [North Yorkshire 2020](#)

National information

- [National Carers Strategy](#)
- [Carers UK](#)
- [Carers Resource](#)
- [Care Act](#)

Local information

- [Census Data](#)
- [North Yorkshire Carers Health and Wellbeing Evidence Review](#)
- [North Yorkshire PACT](#)