

Caring for Carers in Barking and Dagenham

Carers Strategy 2011-15



Helping you live the life you want

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Executive Summary

This strategy emphasises our continuing commitment to supporting carers using their expertise to shape and develop commissioning and appropriate service provision. This is not just about supporting their caring role, but recognising they are an individual in their own right, and that it is important to influence areas such as maintaining social networks and employment activities.

The aim of the strategy is:

To enable carers to lead as normal a life as possible and to be able to feel supported in their caring role

The national strategy for carers called 'Recognised, valued and supported: Next steps for the Carers Strategy', published in November 2010, highlights the key issues for carers in supporting them to carry out their caring role. We have developed our priorities to reflect the vision set out in the national strategy, and the needs of people living in the borough.



Through the work of key stakeholders from the statutory and voluntary sector in reviewing our local needs analysis, the action plan at the end of this document shows how we will turn the vision set out in this strategy into reality. The strategy also reflects the direction of travel towards personalisation set out in the document Personalisation and Market Development 2010 -2015 (London Borough of Barking and Dagenham May 2010)

The last census in 2001 reveals almost 16,000 people who identify themselves as carers in the borough. We are in touch with 2,400 people who are receiving services. As people are living longer the number of carers is expected to rise slightly over the next twenty years and this strategy investigates how we can provide services to known and unknown carers.



Carers in Barking and Dagenham have consistently highlighted that they can derive considerable benefit from breaks. Therefore, sections of this strategy specifically address respite and short breaks to help sustain carers enjoy a quality of life and sustain them in their caring role.

The key priorities for improvement in this strategy share the priorities of the national strategy:

- 1. Identification and recognition** – Supporting those with caring responsibilities to identify themselves as carers at an early stage, recognising the value of their contribution and involving them from the outset in both designing local care provision and in planning individual care packages.
- 2. Realising and releasing potential** – Enabling those with caring responsibilities to fulfil their educational and employment potential.
- 3. A life outside caring** – Personalised support both for carers and those they support, enabling them to have a family and community life.
- 4. Supporting carers to stay healthy** – Supporting carers to remain mentally and physically well.

Against a backdrop of an economic recession, the action plan in section 8 of this strategy seeks to use community based services to provide more information, advice and choice to carers. We want appropriate support, access to universal services and short-breaks to support carers in their caring role. The strategy seeks to develop innovative ways to engage the community and local organisations in order that support for carers can be delivered through mainstream mechanisms. The intention is to recognise the valuable role carers play in the borough, and to support people who are carers to help them live the life they want.

Caring for Carers: Carers Strategy 2011-15

1 Introduction

This strategy is a statement of how the London Borough of Barking and Dagenham (LBBD) and its partners will enable carers to lead as normal a life as possible and to be able to feel supported in their caring role. The strategy will set the agenda for supporting carers aged over 18 for the next five years and has been produced alongside a Young Carers strategy, addressing the issues of carers aged under 18. This document also sets out a strategy for the provision of respite for residents, their families and carers. The action plan will contain actions specifically relating to respite and short breaks.

This strategy has been developed in consultation with carers, health and social care professionals, commissioning staff and voluntary organisations - the partners supporting carers in this borough.

1.1 What our strategy will deliver

At a time when resources are scarce it is vital to support our carers in the borough. The borough's carers are under even more pressure as living costs rise and the current economic situation affects more families. This strategy aims to ensure that all carers and their families in Barking and Dagenham enjoy the benefits of the range of support available to carers. This is to enable carers to lead as a normal a life as possible and to be able to feel supported in their caring role. For many this will be in the form of information and advice and access to universal services that are available to all residents living in the borough. We will also support respite, where required, and seek innovative ways to recognise and augment the valuable contribution carers make to society.

This strategy will:

- ✓ Outline the vision and highlight the priorities of carers
- ✓ Propose a means of working with carers and carer groups alongside partners including service users and providers
- ✓ Set out a plan to enhance community awareness and understanding of potential effects of being a carer

1.2 Our Vision

'Our vision is that carers will be universally recognised and valued as being fundamental to strong families and stable communities. Support will be tailored to meet individual's 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, recognised, valued and supported.'

The vision for our local Carers Strategy reflects the national agenda. In order to deliver this agenda for carers, we are ensuring that personalisation works for both service users and

their carers. The vision for services to carers is shaped by what is set out in the overarching adult social care commissioning strategy 'Personalisation and Market Development Strategy 2010 -2015' (LBBD May 2010) and recognises the valuable contribution that carers make.

2 Who are our carers?

Carers care for a very diverse group. The borough has:

- Carers of a working age, some combining their caring role with employment and education
- Carers of older people, many of whom can be new to their caring role
- Family carers of people with learning disabilities possibly experiencing a lifetime of caring
- Carers who have an intermittent role helping people with drug and alcohol problems

Many carers in Barking and Dagenham (LBBD) do not recognise themselves as carers. Parent carers will often see themselves only as a parent rather than a carer, but their child will have considerable additional care needs. These caring roles and responsibilities can change within a household, for instance when the parent carer becomes elderly and more vulnerable and can then become dependent on the person they were originally caring for.



We can all potentially become a carer at any time as a result of an accident or sudden illness, and many of us will be carers at some point in our lives. It may be a gradual process with a slow deterioration in the health of the person we care for. Caring responsibilities may be for short periods of time or in many cases, for many years. The condition of the person cared for may change on a daily basis. This makes it difficult to predict the amount of care and duration of care required and therefore the demands and effect on the carer.

This strategy recognises the complexity of the different caring roles and will address the issues of different carers. The strategy will use the following definition developed jointly by carers, carer organisations and commissioning bodies including the Association of Directors of Adult Social Services (ADASS) and Local Government Improvement and Development Agency has been adopted for our strategy:

'A carer spends a significant proportion of their life providing unpaid support to family or potentially friends. This could be caring for a relative, partner or friend who is ill, frail, disabled or has mental health or substance misuse problems.'

[Commissioning for Carers (2009)]

2.1 Facts and figures

Barking and Dagenham has a growing population which latest estimates reveal to be 176,000¹. About one in ten residents (15,899) identified themselves as carers, providing unpaid care to relatives, friends or neighbours, according to the 2001 census. Our partner voluntary organisations currently have approximately 2,600 local carers registered for support and advice. This suggests that a potentially large number of carers are not known to the local authority or any carer support services.



Age breakdown - Evaluation of the census data relating to carers in the borough shows most carers (96 per cent) are of an adult age²:

- 623 (4 per cent) of carers are under 18 years old
- 8229 (52 per cent) are between the ages of 18 and 49 and
- 7047 (44 per cent) are over 50

Ethnicity breakdown - The ethnicity breakdown of the borough's 2662 carers lists 60% of carers being White British or White Irish as opposed to 67% in the borough in total. The ethnic profile of the borough's carers roughly mirrors the ethnic profile of the borough, indicated that we are reaching carers of different ethnicities. The full British, Asian and Minority Ethnic (BAME) breakdown of our carers can be found in **Appendix 1**, Fig. 1.

Hours of care – According to 2001 census information, of the 15,899 carers in the borough in 2001, more than half provided fewer than 19 hours of care a week:

- 9,356 (59 per cent) stated that they provided up to 19 hours of care per week
- 2,136 (13 per cent) provided care of between 20 and 49 hours per week and
- 4,397 (28 per cent) provided weekly care totalling 50 hours or more³

Carers assessments - In the financial year 2009-10⁴, Barking and Dagenham undertook a total of 2,083 carer assessments or reviews, an increase of 79 people from 2008-09. The vast majority of carers assessed or reviewed during the year were caring for people with physical disabilities. However, it should be noted that this includes older people whose physical disability or frailty is age related.

Carer funded services - Below are details of the funded services received by carers in 2009/10 from RAP (Referrals, Assessments and Packages of Care):

¹ GLA 2010 Projections

² The results of the census in April 2012 will be included in an update of this strategy.

³ Following the census results in the summer, an exercise will be completed to map the age breakdown with the hours of care activity data.

⁴ Figures to be updated in May 2011

- 472 carers received a funded service such as a short break
- 1,111 carers received information and advice; 62 per cent of those receiving advice and information were 18 to 64.

2.2 Health of carers

The 2001 Census extract for London highlighted that carers had higher rates of self-reported ill health compared to non-carers, and that rates were significantly higher if they were providing more than 50 hours a week of care⁵. Noticeably the percentage of carers with ill health was substantially higher than those with good or fairly good health amongst carers of both sexes under the age of 50, highlighting the need to consider young carers and carers of working age in particular.

Barking and Dagenham was one of seven boroughs with the highest levels of self-reported ill health amongst carers, along with Tower Hamlets, Hackney, Camden and Newham, Southwark and Islington (see **Appendix 1**, Fig 2).

There is very limited published evidence about the specific aspects of health that are impacted by taking on a caring role although there is a general recognition that caring has a negative impact on health and wellbeing⁶. Policy briefings have drawn on health impact of caring focusing on work on the British Household Panel Survey in 2004 illustrated the increasing levels of distress and negative mental health associated with caring⁷. The General Household survey suggests that there is a significant physical health and injury aspect related to handling and lifting of dependants as well as physical health problems relating to stress⁸. These briefings tend to summarise the contributing factors as:

- Lack of appropriate support
- Isolation
- Financial stresses
- Lack of information



⁵ Carers in a Region: A profile for London.

http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/@ps/documents/digitalasset/dh_113520.pdf

⁶ Supporting the dementia family caregiver: the effect of home care intervention on general well-being. Schoenmakers B, Buntinx F, DeLepeleire J 08/12/2010 CRD

<http://www.crd.york.ac.uk/cms2web/ShowRecord.asp?AccessionNumber=12010002537&UserID=0>

⁷ Hearts and Minds: The health effects of caring. 2004. Social Policy Research Unit.

<http://www.york.ac.uk/inst/spru/pubs/pdf/Hearts&Minds.pdf>

⁸ In Poor Health: The impact of caring on health. P5 (Carers UK. 2004)

2.3 Future Demand

The analysis of the future demand for carers is based on the projected needs of the population. A number of indicators below suggest that the demand for carers will increase over the next twenty years:

- By 2030, it is projected that the borough will have 226 more people with mobility problems
- The number of people unable to self-care will increase by 475 people in the next 20 years.
- Demand for carers may fall slightly over the next five to ten years but rise considerably in the 10 years after that.
- Long term conditions, defined as men and women unable to work in borough because of conditions that cannot be cured, is predicted to rise by 414 in the next 20 years.

This is significant for the borough in terms of being able to provide resources for formal care to meet future need. As resident life expectancy increases, the associated rise in people likely to take on a caring role will increase.

In addition to the indicators above, Barking and Dagenham has a high incidence of mental health problems. Given the high levels of deprivation which contributes to poor mental health, the number of carers helping their people with mental health problems may be high.

This strategy will put in place a series of action of the next five years that will help the borough cope with the rise in carers over the next twenty years.

Appendix 1, Fig. 3 to 5 provides more detail on the future demand for carers in the borough. We will also be feeding in the results of the Census to help acquire more information on future demand. The strategy will be updated in 2012 when we receive the Census 2011 data.

3 National drivers for change

This strategy acknowledges that carers across the country have been hit hard by rising living costs and the economic downturn. The action plan has been developed in the context with a range of affordable solutions for both the Council and carers. The new government also wants to develop less of a reliance on the state, and to encourage community groups and volunteers to provide services directly. The voluntary and community sector are facing substantial reduction in funding, but also new legal opportunities to take on services through a range of new legislation, including the Localism Bill.

Our Carers Strategy has also been guided by national strategies and legislative direction. The legislative framework that has shaped the context of this strategy can be found in **Appendix 2**.

3.1 National Carers Strategy (2010)

This strategy has been shaped firstly by the 2008 national Carers Strategy '[Carers at the Heart of the 21st Century Families and Communities](#)'. This was superseded in November 2010 by the Carers Strategy refresh '[Recognised, valued and supported: Next steps for the Carers Strategy](#)'. This update mirrored the last government's strategic direction but was based on a consultation conducted by the Department of Health in the summer of 2010. The key messages from the responses to the consultation were:



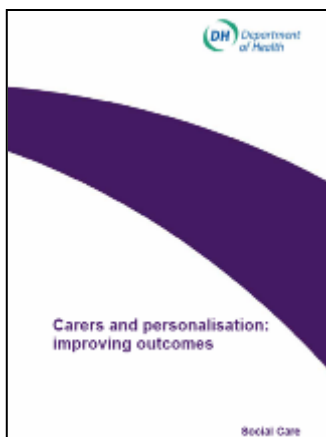
- **Information** – carers need better and timely access to information
- **Health** – carers can often feel excluded by clinicians – both health and social care professionals should respect and involve carers more as expert partners in care. Carers also often neglect their own health to care.
- **Assessment** – carers find assessments overly bureaucratic and slow
- **Employment** – carers often feel forced to give up work to care
- **Respite** – carers need breaks from caring in order to sustain their role as carers
- **Benefits** – carers feel the Carer's Allowance is inadequate and the rules around overlapping benefits are unfair
- **Young Carers** – the Memorandum of Understanding should be embedded (see Appendix 6)

These key messages reflect some of the feedback we have been getting at a local level. We look to address these concerns in the action plan. We also use the four of the priority areas as the underpinning themes for our action plan:

1. **Identification and recognition** – Supporting those with caring responsibilities to identify themselves as carers at an early stage, recognising the value of their contribution and involving them from the outset in both designing local care provision and in planning individual care packages
2. **Realising and releasing potential** – Enabling those with caring responsibilities to fulfil their educational and employment potential
3. **A life outside caring** – Personalised support both for carers and those they support, enabling them to have a family and community life
4. **Supporting carers to stay healthy** – Supporting carers to remain mentally and physically well

The fifth priority area is 'Developing the evidence base for supporting carers'. The national strategy states that the census question will be repeated in 2011. We will monitor the response to this but this priority area does not warrant a priority area for our local strategy.

3.2 Carers and Personalisation: Improving Outcomes (2010)



Alongside the Carers Strategy, '[Carers and Personalisation](#)' was also produced by the Department of Health. It covers the following topics, providing examples of good practice:

- carers as expert care partners and whole-family approaches
- early intervention and prevention
- making self-directed support processes work
- market and provider development

The learning from this document is included in the action plan.

3.3 National Carers Survey 2009/10 – Headline Findings

The results of the [Personal Social Services Survey of Adults Carers in England 2009/10](#) were published in June 2010. This national survey addresses many of the key themes and concerns of our residents so please note the findings on the experiences, health and quality of life of carers in **Appendix 3**.

4 Local drivers for change

After the consideration of the national agenda, our strategy has been guided by the local policies and strategies as well as the thoughts of the carers themselves.

4.1 Corporate Vision

The corporate vision for the borough is 'Better Together, Better Home, Better Health and Wellbeing, Better Future'. For the most vulnerable, and those less able, we believe in giving independence and choice – and we will continue to deliver quality social care to those who need it as well as supporting the carers of the vulnerable.

4.2 Consultation with Carers

The main driver for local change are the carers. Carers have regularly, over the years, been given the opportunity to comment through different programmes of consultation in the borough. The responses mirror the findings from national consultations particularly around the following themes:

- Information and advice – Carers feel there are gaps in information available particularly around direct payments.
- Respite – Provision of breaks and carers are deemed the highest priority by carers with more emergency and planned respite needed.
- Training – Carers would like more training opportunities for staff and carers.

- Quality assurance – Carers would like the opportunity to comment on and ensure the quality of services.

This strategy will put actions in place to respond to the comments regularly received, to help carers live the life they want. Where specific additional information is required we may consult further. For instance, to get more detail regarding the information and advice concerns, the Council produced a questionnaire for Carers week 2010 to be completed by carers. We received 34 completed surveys. 19 carers were happy with the information and advice received and 15 were not. Carers were looking for more information on universal and mainstream services in leaflets and The News, the local borough wide newspaper.

4.3 Personalisation and Market Development 2010-15

[This document](#) defines how the Council and its partners will support the challenges in Barking and Dagenham associated with the transformation of adult social care as set out in the national Putting People First agenda. The strategy is applied equally to all people over 18 years of age, requiring support including older people, people with disabilities and sensory impairment, learning disabilities and mental health needs.



4.4 Joint Strategic Needs Assessment (2009 & 2010)

The Joint Strategic Needs Assessment (JSNA) identifies 'the big picture' in terms of the health and wellbeing needs and inequalities of the Barking and Dagenham population. The [2009 document](#) predicts an increase in the number of people taking up a caring role. The JSNA warns that failure to meet the needs of carers will result in increased need to provide services such as emergency respite. The annual refresh, published in [October 2010](#), does not contain much information on carers, but the analysis from 2009 still applies. The action plan at the end of this strategy will ensure more information on carers is included in the next annual refresh of the JSNA.

4.5 Barking and Dagenham Health and Wellbeing Strategy 2010-2013

[This strategy](#) sets out how the Barking and Dagenham Partnership will play its part in improving health and wellbeing by maximising our impact in improving health and reducing health inequalities. However, in the light of the changing economic climate and reduced health funding the document will be reviewed this summer.

5 Budgetary Context

Historically, local authorities received funding for the provision of carers services through the Carers Grant. The Carers Grant formed part of the government's strategy for carers and was designed to stimulate diversity and flexibility in the provision of breaks for carers or direct services to carers to support them in their caring role.

Despite these conditions subsequently being lifted and the ring fencing of the budget coming to an end in 2004 – 2005, the Council has continued to dedicate significant funding to carers services in the borough. The budget for 2011/12 is set at approximately £700,000.

The Council also funds Carers projects from other funding sources. For instance, the Council has just commissioned a project about working with family and carers coping with substance misuse problems.

In addition to local authority funding, NHS Barking and Dagenham have funded a carer's projects totalling approximately £35,000 a year out of a carers baseline budget of £300,000. Projects include part funding Face to Face Parents Befriending Scheme which provides experienced and independent support to assist parent(s) new to the problems of disabilities or experiencing difficulties with disabilities affecting their child. The NHS also fund projects for carers of people with mental health problems.

Our local third sector partners also apply for and receive grant funding for projects which have benefited carers across the borough.

6 Current achievements

This section outlines what is currently in place for carers in Barking and Dagenham. The examples of recent progress are divided into the four priority areas of the national strategy (see 3.1). For full details, a self assessment completed in August 2010 can be found in **Appendix 4**. A table of services the Council commissions to assist carers in the borough can be viewed in **Appendix 5**.

6.1 Identification and recognition

Voluntary sector organisations and partnership groups help **identify carers** and **support** them in their caring role:

- ✓ A Carers Networking Group has been established, made up of representatives from various voluntary sector organisations, health care providers, mental health services and BAME groups, with the purpose of working in partnership to provide expertise on various areas of service delivery.
- ✓ The adoption of a single carer assessment form and an information sharing protocol with Adult and Community Services and Health partners provided there is consent from carers and service users.
- ✓ The Learning Disability Partnership Board has a Carers Champion working at a local and national level linking with our carer focused organisations.

To recognise the role of carers in the borough, partners work together each year to celebrate **Carers Week**. This week is a national event held every year in June and locally partners use this as an opportunity to promote the carers agenda. This includes access to information, advice and support networks for carers, at co-ordinated events at Dagenham Heathway, Queen's Hospital and Vicarage Fields Shopping Centre.

We also make a particular effort to identify, recognise and support **young carers**. Barking and Dagenham is committed to seamless working between Children’s Services and Adult Social Services to ensure that both carers of disabled children, and children who are themselves carers in a caring role for a parent or sibling with a disability, feel supported, valued and able to thrive.

6.2 Realising and releasing potential

In the current financial climate it is vital that carers are given the best possible **financial support** to enable them to live the life that they want. Access to relevant information and support is the key to enabling carers to improve their employment chances and mitigate some of the effects of being employed whilst having a caring duty. The following work in the borough has focussed on ensuring our partner agencies are in a position to provide appropriate support and advice to carers:

- ✓ Organisations helping signpost carers on to other specialist services such as the Community Legal Advice Centre, its outreach venues, and three local Job Shops.
- ✓ There is support to help carers claiming Incapacity Benefits and Employment and Support Allowances.

6.3 A life outside caring

The borough is striving to improve **information** regarding the variety of services available to carers. Listed below is what the Council and partners are doing currently to offer information and advice to carers:

- ✓ An Information, Advice and Advocacy strategy has been developed. The purpose of this strategy is to ensure residents, many of whom have been previously directly or indirectly excluded from access to social care related support and services, can benefit from the opportunities available.
- ✓ The borough’s social care website has been revamped to make it more accessible and user friendly. It provides up-to-date information for carers as well as information on universal services: <http://adultsocialcare.lbbd.gov.uk/i-need-help-with/being-a-carer.aspx>



- ✓ The new website software is available online, not just on the Council website, but through free touch-screen 'Information Points' known as Elephant Kiosks at four locations in the borough.
- ✓ Following consultation with carers, a Carer's DVD was produced providing a wide range of accessible carer information, tips and guidance on the services available and how they can be accessed. These are available in various GP surgeries, hospital receptions and benefit offices.
- ✓ A variety of partner organisations provide useful information, advice and advocacy services in the borough.

It is vital that carers get respite from their caring role. Having a short break while someone carries out your caring duties can give carers time to relax. **Respite care** is the provision of short term break which benefits the person cared for as well as the carer. Respite should be a positive experience for the person cared for and the carer to enhance the quality of their lives and support their relationship. The length of the short break is not fixed. It may extend from a few hours to a few weeks.

The carer and the person cared for are likely to require an assessment to find out what support is needed. Ideally respite should be planned, giving both the carer and the person cared for a chance to consider the options and make a decision that suites both. Take up of planned respite in Barking and Dagenham is good. There are a variety of respite options available allowing carers a break from their caring role:

- ✓ Charitable organisations provide a variety of accessible respite breaks for people with physical disabilities, learning disabilities or sensory impairments.
- ✓ Coffee mornings, quiz nights and other activities provide a welcome break from caring and a chance to meet other in a similar situation.
- ✓ Trips are organised that cater for people with disabilities and their carers.
- ✓ Some nursing and residential homes can provide respite care
- ✓ Families are benefiting from the Short Breaks programme for parent carers

Sometimes, respite has to be organised on an emergency basis. Emergencies can happen at any time when, for instance:

- where the carer is suddenly admitted to hospital
- if the carer has an accident
- during a family emergency, such as a close relative being taken ill and a person needs help or support
- for support at the funeral of a close friend or relative
- where there is a real risk to the carer's job on a particular occasion

The Carers Strategy action plan will look to analyse the take-up of **emergency respite options**, which are currently underutilised in the borough.

6.4 Supporting carers to remain healthy

A variety of different projects are undertaken in the borough in partnership with organisations and groups offering **emotional support** to carers. The respite schemes above

help with emotional support but also charitable organisations provide good support to culturally specific groups, or age related services. Below outlines examples of services to help provide emotional support for carers:

- ✓ The following groups in the borough provide advice, support and information to carers from different ethnic groups, aiming to meet religious and cultural needs:
 - Gurdwara Singh Sabha London East – Sikh Community
 - Barking Muslim Social and Cultural Society
 - Barking and Dagenham Somali Women’s Association
 - Barking and Redbridge Chinese Community Association
 - Romakey International Educational & Empowerment Services (RIEES)
- ✓ A dedicated BME support officer who works with carers from black and minority ethnic communities. This has resulted in better signposting, increased awareness amongst carers of their role and an increased take up of carer services and direct payments.
- ✓ The Daybreak drug project for families and carers is a drop in service for those with drug and alcohol issues.

Skills training for carers can often result in improved outcomes in their caring role and empower their dealings with care professionals. A variety of **training** courses are currently offered for carers, for example:

- ✓ Challenging Behaviour Training for Parents/Family Carers
- ✓ Council Safeguarding training for carers
- ✓ Carers of Barking and Dagenham offer an annual programme of training which includes a few training sessions every month including conciliation skills; anger/stress management; Open University taster session; mental health awareness; dementia awareness; money management; first aid; and lifting and handling

A range of **leisure** activities are very important for carers providing a period which is spent doing things other than work or the caring role. Leisure activities can de-stress a person and carry the attention away from work and can have a positive impact on a carer’s health. The Council places a great emphasis on ensuring all residents have access to a range of leisure and community activities:



- ✓ There are many different sports and leisure centres to choose from in the borough. They offer a range of facilities and exercise classes.
- ✓ There are 25 parks and open spaces across the borough. They are great for walking, picnics, and family days out. Many of the parks have bowling greens, sports pitches, and children's playgrounds.
- ✓ There is plenty of history and heritage to explore in the borough. You can visit Valence House Museum, Eastbury Manor House, and many other great places.

Furthermore, the Council’s three leisure centres are free to use for carers and the people they care for if they go to the leisure facilities together.

7 What we are going to do?

This section describes the priorities and commitments for improving the way support for carers will be delivered in the borough. These intentions have informed an action plan for 2011/12 in Section 8 which will also detail timescales for delivery.

7.1 Identification and recognition

It is important that carers are **identified** when they are visiting their GP or hospital. A system will be developed to help carers and the people cared for be identified through their mobile phone called ICE (In Case of Emergency). The idea behind ICE is that police, ambulance and hospital staff can access the next of kin details from a mobile phone under the name ICE. This would aim to give carers peace of mind by providing a back-up service which will put in place replacement care if care cannot be provided because of an emergency.

To improve the support carers get in the primary care setting, the action plan will seek to increase appointment times for carers.

To help identify **young carers**, a Young Carers Strategy is being developed by the Council's Children's Services department. To ensure the work of Children's Services and Adult and Community Services is joined up and coordinated, we will sign a Memorandum of Understanding (**Appendix 6**).

Each year, the Council and partners will continue to work together to celebrate **Carers Week** with a range of events across the borough.



7.2 Realising and releasing potential

It can be hard to stay in **education** particularly with the challenges of being a carer. The learning opportunities available for adults in the borough will be publicised to carers at every opportunity.

Combining the caring role with work can be a real challenge. Carers have additional **employment** rights to enable carers to stay at work. In line with the aspirations set out in the vision for Barking and Dagenham it is important to recognise the value of work and employment for carers, in terms of self worth and self esteem. The Council has a leadership role to play, to enable carers to be better able to combine paid employment with their caring role and re-enter the job market after their caring role has ended through:

- ✓ Encouraging flexible working opportunities
- ✓ Increased training provision
- ✓ Employer awareness and support

We will also ensure the take-up of care related **benefits** and carers allowances is increased in the borough, building on the work of the voluntary sector in providing welfare benefits advice. Carers will need assistance in navigating the new benefits systems

7.3 A life outside caring

A priority is to provide even better **information** and signposting. This should enable and empower carers to take full control over their lives and make more informed choices about the care and support they need to lead as normal a life as possible. Our recent survey completed at Carers week revealed that while the majority of carers were happy with the information and advice received, a significant minority wanted more information. There is a need to co-ordinate the range of information and advice available through voluntary and community organisations as well as through statutory services, and to seek carer's views on how to make it as accessible as possible. We will:

- ✓ Review our commissioned information and advice services and bring them in line with our strategic intent.
- ✓ Continue to work with partners to ensure our website and leaflets are as up to date and useful as possible.
- ✓ Increase partner participation in maintaining and updating the Carer webpages.

Universal or mainstream services are key to enabling the widest choice and accessibility to hobbies, activities, support and respite; encouraging their use helps the life of a carer and typically, universal services offer better value for money. The Council, together with partners will work with local businesses and clubs to facilitate access to mainstream activities to improve carer/life balance. Providing access to universal services will also reduce duplication of provision and increase the opportunities for socialisation and meaningful activities within the wider community.

We will work in partnership with all providers to accommodate the needs of more carers by increasing the choice of **respite** and **short-breaks**. This work will ensure that there will be a wide range of short break options and services that meet the existing as well as future health and social care needs of residents and the identified needs of their parents/family carers. Respite should be a positive experience and meet the cultural and religious requirement of everyone who needs them.

To ensure this happens, Commissioners from the Council and Health will develop the following:

- ✓ Clear, accessible information about short break services, particularly emergency respite
- ✓ Develop the opportunities for the voluntary sector to support the development of more preventative, flexible and personalised short breaks
- ✓ Develop an ICE (see 7.1) system to provide emergency respite or support
- ✓ Review the Shared Lives scheme
- ✓ Audit Residential homes that provide respite

We will develop a **Peer Brokerage** service. The Peer Brokers will have experience of going through the planning process and has been trained to deliver the support for others. The

Broker's role will be to enable people to identify the changes they want to make to their lives and navigate the support services and community opportunities. Brokers will cost and write a support plan that meets assessed needs and also ensure health care needs are included.

7.4 Supporting carers to remain healthy

We will improve the **emotional support** offered by the local authority and the third sector to carers through:

- ✓ Awareness raising for frontline staff and health professionals
- ✓ Support groups, text or email support systems, cyclical universal carer networking events, smaller special-interest groups with links to universal provision

In order to help reduce carers suffering health related problems we intend to find ways to train carers to enable them to strengthen them in their caring role and to empower them in their dealings with care professionals. The need for more **training** to educate professional staff and our partners has also been identified, this would also include:

- ✓ Carer awareness training for GPs and practice nurses and additional mental health training for staff.
- ✓ Carer specific training, with more training carried out in their home.
- ✓ Support and training during/after cared-for person's hospital stay
- ✓ Reduce social isolation and improve social inclusion to help maintain a satisfactory quality of life.



We want to ensure that there are no barriers for carers using the borough's **leisure** facilities by strengthening the links between carers and leisure. We will:

- ✓ Promote the free leisure offer in place for carers and the people they care for when they go to leisure centres together.
- ✓ Develop a discount offer for carers (going to leisure centres without the people they care for)
- ✓ Ensure that the activities that carers want are available at times that are convenient.

Carers will also be offered an opportunity to make the most of the new leisure centre in Becontree Heath through the offering of tours to carer groups.

We aim to help improve the health and quality of life for **older carers** by addressing their social, financial and practical needs. We aim to:

- ✓ To provide older carers with relevant information and individual support
- ✓ To identify older carers and enable them to make better health choices
- ✓ To give older carers greater access to support services
- ✓ To ensure that older carers are able to engage with other carers and useful support networks
- ✓ To enable carers to look at their own health and make choices and decisions to choose a healthier lifestyle which in turn allows them to continue to care

8 Action Plan 2011-12

This action plan builds on the intentions in Section 7. It will be reviewed and updated annually, but monitored throughout 2011/12.

8.1 Identification and recognition

OBJECTIVE 1 - Supporting those with caring responsibilities to identify themselves as carers at an early stage

Aim	What	How	Who and When
To identify more carers at hospital/GP surgeries	Identify and support carers when signing up with a GP	Ensure residents are asked whether they are a carer during the GP sign up process and all carers are recorded on GP Systems	NHS ONEL Primary Care Contracting Team October 2011
		Develop support offer for carers when they identify themselves at GP practices	NHS ONEL Primary Care Contracting and LMC October 2011 onwards
		Ensure residents are asked whether they are a carer during the GP sign up process and all carers are recorded on GP Systems	NHS ONEL Primary Care Contracting Team October 2011
More support for carers at the GP practice and hospital	Extended appointment times of 20 minutes for all carers when with dependents	Investigate possibility of 20 minute health checks for carers	NHS ONEL Primary Care Contracting and LMC October 2011
	Deliver GP Awareness Training	2 x 1 hr training delivered at practice managers at their fortnightly meeting	Lorraine Goldberg Carers B & D September 2011
	Continue to provide carers packs at GP surgeries	Replenish information every six months	Lorraine Goldberg Carers B & D September 2011/ March 2012

Information for carers	Ensure links on the Council Carer's webpages are kept up to date and interface linked with Carers of Barking and Dagenham and other providers	Full check of all information on Carer's webpages quarterly	Karen West-Whyllie Adult Social Care & Adult Commissioning July 2011
	Staff in contact with carers to distribute information regarding services and support	Review content of service user factsheets	Karen West-Whyllie Adult Social Care Carers B & D June 2011 January 2012
Develop crisis support for carers	Develop ICE (In Case of Emergency) in mobile phones using an emergency contact number	Develop emergency plan template with alternative carer contacts	Ed Humphreys Adult Commissioning June 2011
		Develop emergency contact process with Emergency Duty Team or Careline	Adult Commissioning June 2011
		Promote ICE to existing database of carers	Lorraine Goldberg Carers B & D September 2011 onwards
	Promote and distribute 'Message in a bottle' for people who do not have a support plan	Distributed at Carers Week through stalls at Vicarage Fields and Dagenham Heathway	Ed Humphreys Adult Commissioning Sue Bernie Carers B & D June 2011
		District nurses to distribute on visits	Tudur Williams July 2011 onwards
Develop other areas of practical support for carers	Launch practical support for carers project to encourage carer participation in volunteering opportunities	Develop recruitment pool of 125 volunteers	Lorraine Goldberg Carers B & D October 2011
		Supports 250 carers annually	
Identify more hidden carers	Encourage our local third sector organisations to refer hidden carers to Carers of Barking and Dagenham	Article in CVS Newsletter and NHS Barking and Dagenham newsletter during Carers Week and presentation at Voluntary Sector Forum	Lorraine Goldberg Carers B & D June 2011

OBJECTIVE 2 - Recognising the value of the carers' contribution and involving them from the outset both in designing local care provision and in planning individual care packages

Aim	What	How	Who and When
Carer involvement in support plans	Whole family approach in support plans with service users staying in control but with carers needs taken into account	Training around support planning	Really Useful Training Company Adult Social Care June 2011
		Support plan not signed off until Carers Assessment and manager is satisfied	
Set up Carers Reference Group/Board to monitor Carers Action Plan	Fits under Health and Wellbeing Board	Details TBC (<i>awaiting confirmation of the new Health and Wellbeing structure</i>)	Karen Ahmed Adult Commissioning September 2011
Redesign Carers satisfaction survey	Design method of consultation to look at specific carer issues annually	Circulate annually at Carers Week	Adult Commissioning April 2012

8.2 Realising and releasing potential

OBJECTIVE 3 - Enabling carers to fulfil their educational potential

Aim	What	How	Who and When
Improve take-up of carers in adult education and volunteering	Adult education opportunities publicised to carers	Adult education advertised in Carers Week stall	Sue Bernie Carers B & D June 2011
		Information included in Carer's pack	
		Adult College and Barking and Dagenham College webpages linked to Carer's webpages. 40 family learning programmes publicised	Ed Humphreys Adult Commissioning July 2011
	Carer participation in Adult Education forum	Set up Adult Learning & Participation Forum	Alan Lazell Skills & Learning October 2011

		Carers B & D to present at forum	Lorraine Goldberg Carers B & D December 2011
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OBJECTIVE 4 - Enabling those with caring responsibilities to fulfil their employment potential

Aim	What	How	Who and When
Increase information about employment and training opportunities	Support for carers about employment opportunities and help carers establish whether they are better off financially in work	Promote the three job shops through Carers of Barking and Dagenham and webpages for carers wanting full time work (16+ hours a week), part-time work and for benefit advice.	Terry Regan Employment and Skills Carers B & D Adult Commissioning July 2011 onwards
		£2 million European Social Fund Programme to engage with supporting carers through Third Sector organisations.	Terry Regan Employment and Skills Carers B & D September 2011 to March 2014
Increase carers awareness of employment rights	Engage with local employers to raise awareness about carers issues and promote carers rights in government legislation	Present to Skills Jobs and Enterprise Board	Lorraine Goldberg Carers B & D March 2012
		Article in Barking and Dagenham Economic Development Newsletter	Lorraine Goldberg Carers B & D July 2011
	Include links on Carer's webpages	Carers UK advice linked on our Carer's webpages: www.carersuk.org/Information/Workandcaring/Flexibleworking	Ed Humphreys Adult Commissioning June 2011

8.3 A life outside caring

OBJECTIVE 5 - Personalised support for both carers and those they support, enabling them to have a family and community life

Aim	What	How	Who and When
Ensure quality carer's assessments	Through the new FACE tool	Ensure carers assessments use the new FACE tool and report to Carers Board/Reference Group	Susanne Knoerr Adult Social Care July 2011
Research personal budgets for carers	Research individual approaches to deciding carer's allocation	Link with FACE to discover different Carers Budget tools Report to Carers Board/Reference Group and Operating Systems Group	Susanne Knoerr Adult Social Care March 2012
Access to assistive technology	Clear pathway for carers to be informed and encouraged to use assistive technology	Develop information around assistive technology and include on Carers webpages	Adult Commissioning July 2011
		Assistive technologies stall at Carers week	Adult Commissioning June 2011
Access to respite	Develop information and advice about full range of respite options	Steering group set up with attendees from Carers of Barking and Dagenham, LINKs and carers	Personalisation and Market Development September 2011
		Full menu of options included on Carers webpages detailing information that carers requested	Personalisation and Market Development January 2012
	Evaluate Shared Lives Scheme	Full review of scheme to be presented to Carers Reference Group/Board and Adult and Community Services DMT	Personalisation and Market Development March 2012
	Audit residential homes looking at the respite they offer.	Identify list of homes offering residential respite	Susanne Knoerr Adult Social Care July 2011

		Recruit volunteers to audit respite in the listed homes	LINKs September 2011
		Develop exit questionnaire for people leaving residential respite	Adult Commissioning September 2011
		Information gathered goes on Carers webpages and incorporated in My Support (when developed)	Susanne Knoerr Adult Social Care March 2012

8.4 Supporting carers to remain healthy

OBJECTIVE 6 - Prevention and early interventions for carers

Aim	What	How	Who and When
Increase awareness of training for carers	Caring with Confidence Skills for Care/Health Safeguarding training	New programme of training developed for professionals and carers	Lorraine Goldberg Carers B & D July 2011
		Carer's webpages updated to include training options	Karen West-Whyllie Adult Social Care August 2011
		Carers Reference Group to monitor training uptake and feedback	Adult Commissioning March 2012
Mental wellbeing	Increased access to counselling	Maintain and advertise the current network of support groups on Carers webpages	Amtul Irtiza Adult Commissioning July 2011
		Signpost IAPT in carer support packs and on the Carer webpages	NELFT September 2011

OBJECTIVE 7 - Supporting parent carers of disabled children

Aim	What	How	Who and When
Continue Face to Face training	Promote popular four day interactive course geared toward parent carers	Ensure continued funding is available for training of parent carers	NHS ONEL Borough Commissioning June 2011
		Monitor and review training quarterly	NHS ONEL Carers B & D September 2011 onwards
		Review training at end of year and report to Carers Reference Group / Board	NHS ONEL Carers B & D March 2012
Peer brokerage	Set up of peer brokerage model piloted by Carers B & D	20 young learning disabled adults and their families will be offered advice and information and brokerage support where a personalised care package has been agreed	Lorraine Goldberg Carers B & D March 2012
		Understand if peer brokerage model is brokering effective support planning	Lorraine Goldberg Carers B & D March 2012

OBJECTIVE 8 - Promoting health and wellbeing in local communities

Aim	What	How	Who and When
Reducing stress, ill health and exhaustion	Promote free health checks offered by pharmacies	Through Carers Newsletter and Carers webpages	Adult Commissioning Lorraine Goldberg Carers B & D July 2011
Improve access to mainstream facilities	Understand and reduce the barriers stopping carers from accessing leisure facilities	Questionnaire at Carers Week	Andy Knight Community Sport & Arts June 2011
		Pilot reduced rate carer leisure membership for when they attend leisure centres their own	Andy Knight Community Sport & Arts September 2011
	Promote free leisure offer for over 60s to 2,500 listed carers Promote free leisure offer for carers and the people they care for when they attend leisure facilities together	Mailshot to 2,500 listed carers outlining leisure opportunities for carers	Andy Knight Community Sport & Arts July 2011
Ensure there is a Carer's voice through LINKs	Proposal for carer representation as part of LINKs	Adult Commissioning to develop with LINKs	LINKs July 2011

