

Title of report: Carers strategy

Meeting: Health and Wellbeing Board

Meeting date: Monday 26 July 2021

Report by: Senior commissioning officer

Classification

Open

Decision type

This is not an executive decision

Wards affected

All wards

Purpose

To consider the attached draft carers strategy for 2021 to 2026 from the adults and communities directorate and to determine any recommendations the Health and Wellbeing Board wishes to make.

Recommendation(s)

That the Health and Wellbeing Board:

- (a) considers the draft carers strategy for 2021 to 2026 (appendix A) by the adults and communities directorate; and**
- (b) determines any recommendations it wishes to make to the council or relevant health bodies to improve the strategy and action plan alignment to the health and wellbeing strategy and/or to improve integration between health and social care.**

Alternative options

1. There are no alternative options. It is a requirement that Herefordshire has a carers strategy. Key stakeholders, including health and social care, have worked together to form this strategy and the high level actions within. It is a function of the board to

encourage those who arrange the provision of any health or social care services in Herefordshire to work in an integrated manner for the purpose of advancing the health and wellbeing of the people of Herefordshire. The carers strategy seeks to support this aim through joint working of key stakeholders to deliver against the actions and thus improve the health and wellbeing of carers in Herefordshire.

Key considerations

2. The health and wellbeing board carries out statutory functions as required by the Health and Social Care Act 2012 and other functions delegated to it. This includes encouraging those who arrange the provision of any health or social care services in Herefordshire to work in an integrated manner for the purpose of advancing the health and wellbeing of the people of Herefordshire. As such the board is asked to consider the content and plans for delivery of the Carers Strategy for Herefordshire 2021 – 2026 and how this will advance the health and wellbeing of carers in Herefordshire.
3. Family and other unpaid carers play an important role in supporting vulnerable older and disabled people in communities and have been the focus of wide ranging legislation and national policy over the past twenty years. Herefordshire's current carers strategy was adopted in 2017 and is due to be replaced by a new strategy in 2021. The 2011 census identified approximately 21,000 unpaid or family carers in Herefordshire, based upon a broad definition. 7,500 carers are flagged among the patient population of GPs in the county. Carers are people of all ages, as are those they support. Young carers form a particularly vulnerable group which has been a focus of particular development during the period of the current strategy.
4. The current carers strategy expiring in 2021 adopted six priorities:

Identifying carers	Information and signposting
Carers knowledge and employment	Networking and mutual support
Access to universal services	Assessment and support

Review of the strategy has indicated that the majority of actions and priorities have been addressed successfully, but that there is still work to be done. Some of the established priorities from that strategy are taken forward in some form by the new draft strategy albeit with different emphasis. There are multiple stakeholders in strategies of this kind and it is for each of those stakeholders to ensure implementation and continued engagement, in this case with carers. The council has limited resources with which to drive and co-ordinate whole system strategies. In the future, all strategic documents including the carers strategy will be subject to a formal mid-term review report. This review of the strategy will take place in 2023, culminating in a report to this board.

5. The current and new draft strategy both promote the council's strengths based approach, focusing on what people can do for themselves and with the support of their peers, their families and communities. There is a focus on trusted information and signposting and participation in communities, along with access to services and support when needed. This is also the context for the service for carers, which was recommissioned by the council in 2018/19 and makes the most of limited resources to address key needs among carers. Over the same period a new service was

established for young carers, delivered by children and families directorate as part of wider family support and early help provision. This complements some continuing support groups and activities for young carers provided by voluntary and community organisations.

6. The new strategy is informed by Talk Community, exploring both how carers can be supported by their communities and what they themselves can contribute to their local community.
7. The draft carers strategy is the product of extensive engagement with carers and stakeholders which began in September 2020 and has included a carers forum, a stakeholder group, a public survey and surveys of young carers and young adult carers. Feedback and ideas from the different interest groups has shaped the priorities and proposed actions in the strategy. Engagement will continue over the next few months until the strategy is considered formally by cabinet in September 2021. The timetable for completing the strategy includes:

April-May 2021	Further engagement with carers focus group and stakeholders Second draft of the carers strategy
June 2021	Health and wellbeing board review of the draft strategy
July-August 2021	Engagement with carers and stakeholder agencies Preparation of final draft of carers strategy
September 2021	Carers strategy considered by cabinet
Oct-Nov 2021	Strategy published in various forms and websites
8. The carers strategy was considered by Adults and Wellbeing Scrutiny Committee, with attendance by Children and Families Scrutiny Committee members, in March 2021. Recommendations were made by the committee that have informed the further review of the strategy content and will be taken into consideration to strengthen the delivery of the actions set out in the strategy. In particular reference to strengthening the delivery of the actions, recommendation h from the Scrutiny Committee sets out 'That system partners be invited to consider improving the experiences for carers in an integrated way across the system, with specific consideration given to carers as part of the emerging Integrated Care System.'
9. The draft strategy identifies five priorities to be taken forward over the next five years:
 - Carers voice
 - Carers in the community
 - Services offered to carers
 - Carers wellbeing
 - Financial stability for carers

In addition, the strategy encompasses two over-arching themes;

“Think carer”

“Carers and technology”

These are felt to be important across a number of priorities and have potential to develop over time. Considerations relating to young carers are identified at various points throughout the strategy.

10. A number of actions are set out for each priority, these are summarised in an action plan towards the end of the document. Each individual agency will be responsible for delivering the actions within their services. To offer challenge and support in delivering these actions a carers partnership board will be established and be maintained for the life of the strategy. In addition a formal mid-point review will be reported to the health and wellbeing board for review, challenge and to hold each agency to account in the delivery of the action plan.
11. The carers strategy engagement and preparation has been taking place during the Covid-19 emergency. There has been considerable national and regional attention given to carers issues, recognising the additional pressures and risks which may attend carers lives, including social isolation, reduction in support and illness. During periods of lockdown, demand for and contact to the commissioned service provided by Crossroads 2gether was reduced. The provider developed new approaches and a more versatile model to maintain services and find ways of reaching and supporting carers at this time. Talk Community operations handled enquiries from carers, most notably during the first lockdown.
12. Unpaid family carers have been offered vaccination in February and March as part of Priority Cohort Six, with up to 10,000 individually identified carers being offered appointments for first doses. The government direction on this priority identifies that some carers of children will not be eligible and restricts vaccination for young carers to those aged 16 and 17 only.

Community impact

13. In accordance with the adopted code of corporate governance, Herefordshire Council achieves its intended outcomes by providing a mixture of legal, regulatory and practical interventions. Determining the right mix of these is an important strategic choice to make sure outcomes are achieved. The council needs robust decision-making mechanisms to ensure its outcomes can be achieved in a way that provides the best use of resources whilst still enabling efficient and effective operations and recognises that a culture and structure for scrutiny are key elements for accountable decision making, policy development and review.
14. This scrutiny activity contributes to the corporate plan – county plan 2020-24 ambition “strengthen communities to ensure everyone lives well and safely together”. The carers strategy in particular promotes involvement by and support of vulnerable carers in communities, whilst also promoting the plan’s theme of connectivity.
15. There are no particular implications of this report for the council’s role as corporate parent, although for some family carers of disabled children, the family will be experiencing the care system. Information, signposting and support for carers of disabled children should reflect and fulfil the council’s responsibilities as corporate

parent, where appropriate. There may be health and safety implications for partner and provider agencies delivering direct support for carers and these would be identified by those agencies and where applicable in any contract held by the council.

Environmental impact

16. There are no general implications for the environment arising from this report. The significant focus in the draft carers strategy on carers engaging with their local communities, including through Talk Community will tend to encourage carers to participate and seek support in their local area, so reducing need for travel or the transporting in of services to provide support. Therefore indirectly, the strategy may help to reduce carbon emissions in the county over time.

Equality duty

17. Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to:

- a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
 - b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
 - c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
18. The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services. The carers strategy addresses the experience and opportunities of a significant population group who include large numbers of people sharing protected characteristics. Many carers are people over 65 and therefore share the protected characteristic of age, as do young carers under 18, who are a much smaller but very vulnerable group of carers. A majority of carers are women and otherwise carers are drawn from all walks of life and so include representation of other groups sharing protected characteristics.
 19. Carers are supporting people, often family members, who belong to groups sharing protected characteristics, including older people, but most notably, disabled people of all ages, including people with mental health needs. The draft carers strategy is intended generally to improve the experience of and services or opportunities for carers, including those sharing protected characteristics. The carers strategy is not expected to have any negative or adverse impact on anyone belonging to a group sharing protected characteristics.

Resource implications

20. The draft carers strategy has no direct resources implications for the council as it sets out a general strategic direction for the whole local system, which will be dependent on the existing resources of multiple partner agencies. There is no specific impact on council resources currently directed to carers.

Legal implications

21. Both the Care Act 2014 and The Children and Families Act 2014 introduced responsibilities on local authorities to assess a carer's need for support, and where appropriate, consider the impact of what being a carer has on their wellbeing.

Risk management

22. No risks are identified specifically in relation to this covering report; health and wellbeing board is a key element of informing decision making and may make recommendations to strengthen the content and delivery of the plan, with particular interest to encourage those who arrange the provision of any health or social care services in Herefordshire to work in an integrated manner for the purpose of advancing the health and wellbeing of the people of Herefordshire.

Consultees

23. There has been extensive consultation with carers and with a wide variety of stakeholders since September 2020 in preparing for the draft carers strategy. Those consulted include;

Carers

NHS partner agencies, including Wye Valley NHS Trust, Herefordshire and Worcestershire Clinical Commissioning Group, Taurus and Herefordshire and Worcestershire Health and Care NHS Trust.

Voluntary and community organisations including commissioned providers

Commissioned providers of domiciliary care and nursing and residential care

Members of the council

Parish Councils

Herefordshire Making it Real Board, advising on adult social care provision

24. The method of engagement with these stakeholders has included;
 - Formation of and multiple virtual meetings with a carers focus group, reflecting a wide range of different carers, by age and demography, geography and cared for user groups. A variety of support has been offered to carers to enable them to participate and contribute.

- Multiple meetings with stakeholders from voluntary and community organisations, NHS and other partners
 - An online survey of carers via the council website promoted through various routes including parish councils, with around 70 responses
 - A survey of young carers, supported by the council's young carers service, eliciting 21 responses
 - Attendances at provider forums for domiciliary care, care homes and community providers and two attendances at Making it Real Board
 - A members' workshop
 - Adults and wellbeing scrutiny committee
25. The content of the draft strategy has been shaped and directed entirely by the engagement conducted, so it is not practicable to pick-out particular contributions or influences. The carers focus group and other carers engaged with have directed the priorities and cross cutting themes. The wider stakeholder and member engagement has contributed to elements of the priorities and to the form and scope of the actions in the strategy. The Making it Real Board raised questions and suggestions about the wider engagement and the form and accessibility of the eventual publishing of the finished strategy.
26. The engagement on the draft strategy will continue beyond the health and wellbeing board and on a final draft document. This will include further consideration by the carers focus group and stakeholder group before the final draft of the strategy is considered by cabinet.

Appendices

Appendix A Draft carers strategy

Appendix B Review of previous strategy

Appendix C Recommendations and executive responses – Adult and Wellbeing Scrutiny Committee

Background papers

None identified.