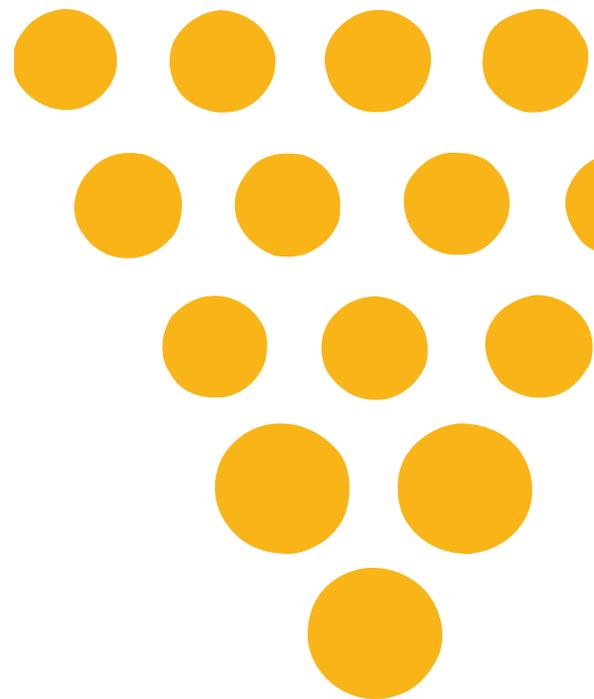




# Cornwall Cares for Carers

## Draft Adult Carers Strategy 2020-2029

Version 0.10 AN  
Adult Social Care



# Draft Adult Carers Strategy 2020-2029

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# 1. Introduction

**“I didn't realise how much I was caring for my Father until I had to have a rest from work. As my Father is actually quite fit and able I hadn't realised that 'helping' him with his finances/paperwork and heavy physical jobs had greatly affected me. I hadn't thought of myself as a carer. People who are caring as I was won't label themselves as carers and as such won't put themselves forward for help offered to carers. So much more to caring than the obvious physical caring many people do.”** Carers Survey respondent, 2019

A person is considered **a carer** if they provide unpaid care, (practical help and/or emotional support) to someone with a medical or emotional problem. They can be a parent, a partner, other family members or a friend. Sometimes children or young persons may also be involved in the caring process.

Cornwall Adults Carers Strategy and its vision **Cornwall Cares for Carers** have been developed and co-designed by carers and practitioners. Cornwall Council worked together with NHS Kernow, voluntary sector, carers, Healthwatch and other stakeholders to create a joint vision for carers. By saying “we” we are referring to the Council, NHS Kernow and their partners who are committed to meet Carers’ Outcomes co-produced by Carers.

Every day thousands of people in Cornwall support a family member, a partner or a friend who may have needs related to physical health or/and mental health. It is impossible to underestimate the importance of the role that informal carers play in supporting people needing support to live their daily lives. The work that carers do to support those they look after and to work closely with health and social care teams is invaluable. This strategy aims to ensure that the critical role of carers is acknowledged and respected - and that carers’ needs are recognised and met.

The key aims of this strategy are to:

- Explain the vision Cornwall Cares for Carers
- Describe the Outcomes that carers told us they would like to achieve
- Describe the new proposed service offer that would meet Carers’ Outcomes



Carers tell us that caring for another person can be very challenging during difficult times. Feeling so worried and focused on supporting a family member or friend can be overwhelming. Carers often forget about themselves, neglecting their own health and wellbeing needs. Life can seem on 'hold' whilst all energies go into supporting the person they look after and trying to meet their needs. Our Carers Strategy recognises the huge contribution that carers make. It is critically important to plan the future carers support offer that can make a real positive and sustained impact.

With practitioners across health and social care and other organisations recognising carers and considering how best to support and meet their individual needs we would like to ensure that carers continue supporting the person they look after, whilst also looking after their own wellbeing.

## Key Outcomes-What Carers have told us

According to feedback these are the key outcomes that are important to Carers:

Many people admitted not having much choice and support, feeling trapped in their caring role and feeling bad about feeling resentful at times.

On the contrary several carers indicated that they accepted their caring role and "just get on with it". Some respondents suggested that carers should be more proactive in seeking support and making the most of their relationships with friends and family.

Almost 80% respondents thought that "to have a break from their caring role" is the most important

**Outcome 1: I have a choice about my caring role.**

respite which could include befriending and wellbeing support service. Carers could have some mutual arrangements when one carer could look after more than one person to allow other carers to have a break or a volunteer could be arranged.

**Outcome 3: I can easily find the information and advice I need in my caring role**

Almost 70% of survey respondents agreed that information about support for carers is easily accessible. Although there was a consistent thread that finding out about the information initially is often difficult. Some people felt the face to face communication and support would be the best and would like to join peer support groups and attend a drop in advice centre. Others indicated that they “don’t need anyone to talk” and they would rather practical advice or access information online, via email or a carers app so they can do it in their own time when they can.

**Outcome 4: I find support in my community and from local community organisations**

There was a number of negative comments when people reported having no help or not knowing how to access it. Although many people are aware of support groups in their local area, they might not be able to get involved due to transport challenges or times of the day when people are at work. It was emphasised that support should also be offered by local support groups and organisations such as surgeries, schools and others. Any practitioner who is in contact with carers ought to check their wellbeing and offer help, information and guidance.

**Outcome 5: I am able to share my experience and skills as a carer with other carers**

Many respondents praised community spirit and great support networks where they can talk to people in a similar situation, support each other and share their experience. Some carers also suggested more opportunities for intergenerational support between young and adult carers.

**Outcome 6: I am respected as an expert partner in care and my views are taken into account**

For most carers the experience of looking after someone close is rewarding and has a positive impact on the people they care for, however, too often carers feel they are on their own, do not feel respected, valued and supported for the huge contribution they make.

**Outcome 7: I am given information of what to expect from mental health and learning disability services in terms of care planning and treatment.**

Our survey shows that carers involvement in discussions about care for their cared for seems to vary. It was reported that many practitioners don't seem to recognise carers' vital role. There need to be more promotion and awareness of carers and the way how they can be supported.

Many carers spoke about how difficult they found it to balance work, look after their own health and wellbeing and perform a caring role, and in some cases how they needed to give up work altogether because there were no alternatives. Some carers have supportive employers who allow them to work flexibly. Others reported that had to reduce their working hours and find their employers not being considerate and understanding of their caring responsibilities. There was evidence of the short and long term impacts on carers and their finances from having to make compromises around work.

**Outcome 9: I can access support in a crisis/emergency situation and have a contingency plan agreed for when I cannot care**

Many carers worry about what will happen in case of an emergency where they are unable or are not willing to care or the person they care for needs urgent treatment. This should be included in in conversations with practitioners for example GPs.

Carers UK <sup>1</sup> have identified that of carers who responded to their survey in 2019 who had an emergency admission for the person they care for, 29% felt that the admission could have been prevented if they'd had more care and support for the person they care for and 18% felt that more support for them as the carer (eg breaks from caring) would have prevented the admission.

Many respondents emphasised the importance of training that would help carers in their caring role. Two areas related to coping with stress and practical information regarding care were most frequently chosen. They would also like to access support in crisis.

People also value support with home adaptations and technology access to online training and information and other available resources help them in their caring role.

**Outcome 11: I am helped to maintain my own health, wellbeing and independence**

One of the biggest challenges for carers who responded to our survey were their own deteriorating physical health and feeling lonely and socially isolated. Emotional/mental health wellbeing support was second the most important area for support.

Many carers reported feeling frustrated about not having any support in their caring role.

**Outcome 10: I am helped to care safely, confidently and effectively**

According to the survey carried out by Carers UK<sup>2</sup> 64% respondents have focused on the care needs of the person they care for, and not on their own needs. 81% of all Carers reported having ever felt lonely or isolated as a result of their caring role.

<sup>1</sup> CUK State of Caring 2019 [carersuk.org/stateofcaring](https://carersuk.org/stateofcaring)

<sup>2</sup> CUK State of Caring 2019 [carersuk.org/stateofcaring](https://carersuk.org/stateofcaring)

### Outcome 12: I am supported when I stop being a carer through choice or bereavement

It has been noticed that support for carers shouldn't end when there is a change in circumstances or a cared for dies. Carers should be supported with bereavement and any other changes that impact their life and their caring responsibilities.

## 3. Carers support offer

We are aiming to further strengthen our relationship with carers, communities and the organisations that support them by working collaboratively to empower communities to prevent, reduce and delay the needs of carers. By working together with carers and key organisations, we can ensure we are taking a 'whole systems approach' to supporting carers in Cornwall. To achieve this, we have engaged with carers and other stakeholders and have reviewed our commissioning arrangements. As a result, we co-designed the new proposed service delivery model which reflects people's views on what is needed and wanted.

### Our plan

Our objective is to offer a three-level support service for Carers which would deliver key Outcomes based on the feedback received from carers and practitioners and ensure those in need have **the right support at the right time**.

#### Level 1



- **Carers identified early**

Carers and the essential role they play should be identified at first contact, or, as soon as possible thereafter:

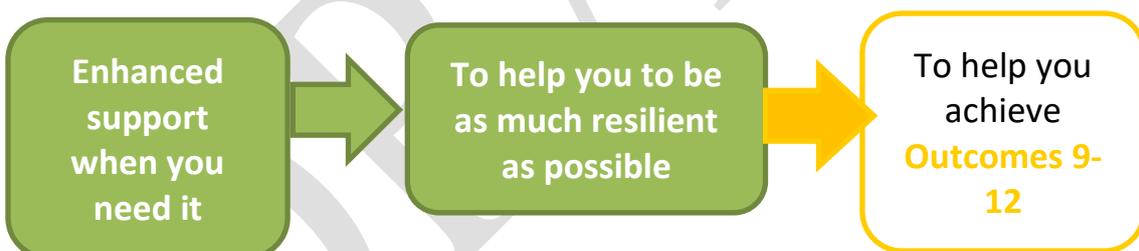
- We will be working with health and social care organisations to ensure carers can be identified and supported by practitioners, whether that is providing information or being referred on to any specialist support and / or a carer’s assessment/wellbeing check.
- We will develop guidelines and training for health, social care and wellbeing practitioners to ensure they are “carer aware”.
- Carers emergency card will be in use to-identify the person as a Carer, advise emergency services that there is a person with care needs dependant on the Carer and where to find the contingency plan;
- **Information, guidance and support for carers**
  - A single point of access to information and guidance on support services will be in operation. This will include information condition related (for example, specialist mental health, learning disabilities and/or dementia services), digital support, carers breaks and other resources and facilities that can help carers fulfil their caring role and improve their own health and wellbeing. The information will be presented in a variety of formats to suit the needs of the carers including working carers, ensuring that support/information is available over the telephone, online and via leaflet if appropriate.
  - We will develop working links with partner organisations to establish clear referral protocols and practice for families/carers to be referred to and be received from Carers support services when appropriate.
  - We will ensure that carer peer support networks are developed to offer carers advice, emotional support and an opportunity to socialise and/or have a break.
  - We will stimulate development of an infrastructure and resource for support services for carers including carers local peer support groups to ensure consistent support offer for carers across the county
- **Carers involvement**
  - We will empower health and social care practitioners to recognise the carer as an expert partner and integral to planning care for the person who they care for. This will be part of the carer awareness training. Staff members will also receive training in the following areas: policy and practice protocols about confidentiality and sharing information are in place.

- We will provide clear policies, protocols and procedures for carers to enable them to be proactively involved in the care planning and treatment process across the care pathway, for inpatient, home treatment and community. This will include guidelines on confidentiality and for sharing information, highlighting this is a three way process between the person using services, carers and professionals.
- Carer support workers will be working closely with acute and community hospitals, and other CHSC teams, irrespective of service to ensure carers are involved in discharge planning and aftercare support as early as possible.

### ● Support for employers

We will raise the awareness of a caring role to increase the number of employers who understand the impact of caring responsibilities on their workforce. We will aim to underpin and develop initiatives to support employers to improve working practices and flexible working to help carers to stay in work, as well as to support carers returning to work and improving advice on financial support for carers.

## Level 2



For carers who find themselves in a challenging situation and/or when they are showing signs that they are starting to struggle, we will offer:

### ● Wellbeing support

Wellbeing checks will be an opportunity to work creatively and positively with carers. During a wellbeing check Carers will be supported to develop a better understanding of their own needs and what will maintain or improve their wellbeing including making better use of their own abilities, networks and community resources. It will also consider how the carers needs for support can be reduced, delayed or prevented. Support will be delivered on one to one basis or in a group setting and/or may include signposting to the most appropriate service in a community.

- **Welfare support**

Welfare support delivered on 121 basis and/or in a group setting will provide welfare advice on carers grants, benefits and other entitlement avenues of financial support. This will include help with completing forms.

- **Training and coaching for carers**

A wide range of learning opportunities including face to face and online will be available to Carers to help them develop practical skills, knowledge and confidence to maintain their caring role for as long as they wish.

- **Carers grants**

Grants will be available to support carer peer support groups to help Carers to self-manage their health and wellbeing, carer breaks and to informal carers to meet any unforeseen circumstance that prevents them from fulfilling their caring role and the need cannot be met from elsewhere (e.g. repair or replacement for essential domestic equipment, provision of private care equipment).

### Level 3



Carers will be given the opportunity to request a formal review (carer's assessment) to identify their needs and how they can be met. We may ask Carers to do a self-assessment online to understand the Carer's needs. The review will consider the impact of caring on the carer and the things that a carer wants to achieve in their own day-to-day life. It will also consider other important issues, such as whether the carer is able or willing to carry on caring, whether they work or want to work, and whether they want to study or have a hobby/socialise.

Guided by the Care Act 2014, our aim is to carry out a review proportionately using a strength based approach to ensure that it is person centred and recognises the Carer's own knowledge and capacity. The review will:

- consider the Carer's own strengths and capabilities, and what support might be available from their wider support network or within the community,
- identify the Carer's strengths – personal, community and social networks – and maximise those strengths to enable them to achieve their desired outcomes, through meeting their needs and improving or maintaining their wellbeing,
- result in Carer's support plan if a carer has eligible needs. The support plan will explain the carer's needs, how they can be met and carer's personal budget if applicable.

### **Carer's Personal Budget**

If the above community support and universal services options (Level 1 and Level 2) have been exhausted and the carer still has unmet needs, it may be appropriate to consider supporting the carer with a one-off, small amount of funding to purchase items or services that will improve their health and wellbeing.

### **Safeguarding**

We will ensure that safeguarding for Carers is given adequate consideration including carers being able to speak up about abuse or neglect within the community and care settings, carers experiencing harm or carers who unintentionally or intentionally harm or neglect the person they support.

### **Intergenerational care and support**

Our carers service will be jointly commissioned to support young carers and adult carers to ensure close links and allow smooth transition between Young Adult carers to adult carers. There are many studies showing benefits of intergenerational care and support which brings older and younger people together to build stronger communities. The research shows that older people who are in contact with the younger generation may feel less lonely and socially isolated; therefore their health, emotional and mental wellbeing would improve

having a positive impact of their quality of life. It is worth noting those relationships also benefit young people by improving their own welfare and life chances.

## Our measures

We are committed to regularly reviewing our services to ensure they are fit for purpose and meet the needs of people who engage with them. To be able to identify if carers are able to access the right support and if there are any gaps in the provision we will analyse the feedback received formally and informally from:

- Contract and performance management of any future commissioning arrangements for carers, to include outcomes monitoring and regular service user engagement and co-production to shape the delivery and development of services.
- Exploring ways in which we can undertake meaningful and regular engagement and co-production with carers and those with lived experience.
- Carers Partnership Board -with support from smaller carers groups will work collectively and collaboratively across organisations and with Carers to oversee the implementation of this strategy and Our Plan across partner organisations.

## 4. Local and national context

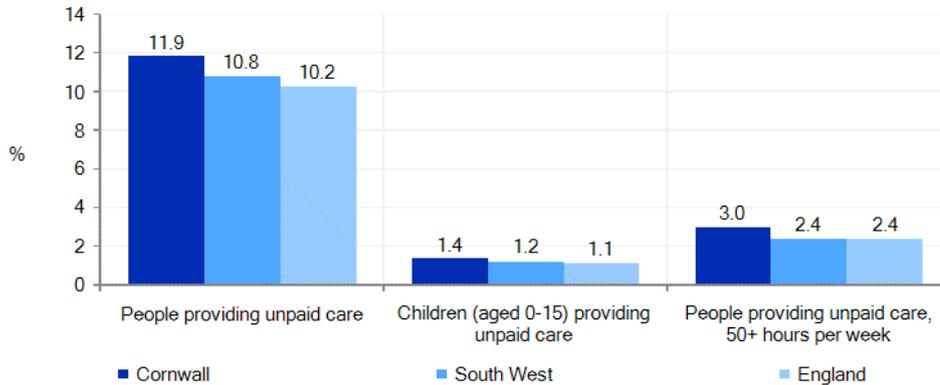


Over **63k** residents in Cornwall **provide unpaid care**-this equals to nearly **12% of residents**-this is an additional 7.5k carers compared to 2001 (Census 2011).

In 2011 **3%** of residents in Cornwall-that is almost **16k people provided unpaid care for 50 or more hours per week** -this is an increase of over 2,700 people compared with 2001 (Census 2011).



- When compared to the South West (SW), and England and Wales (EN&W) census data; it is evident that the number of Cornwall's informal Carers is above both regional and national levels.

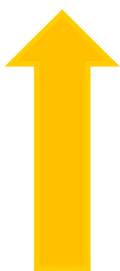


**The work of carers** in Cornwall has been **valued at £1.3 billion** per annum (Carers UK, Valuing Carers 2015 report based on the number of hours a carer spends on providing care).

- **Carers population is dynamic.** An aging population contributes to more people becoming carers than leaving a caring role (43% increase from 2011 to 2019). The usual trend between census is 10% increase.

**There could now be as many as 8.8 million adult carers in the UK,** compared to 6.3 million adult carers recorded in the 2011 Census (State of Caring 2019).

Improving support for carers must be at the heart of how we address our ageing population as demand for health and social care increases.



The total population of people aged 65 and over is predicted to increase by about 33% by 2030. The percentage of the population in Cornwall aged 18-64 with a learning disability, autism, physical disability, visual impairment or mental health need is predicted to remain stable; however the percentage of the population aged 65 and over with those needs is expected to dramatically increase.

### ● Hidden carers

It is estimated that there are at least an additional 10% of carers who are not known to health and social care services. Hidden carers are those who may not recognise themselves as carer and consequently be less likely to access support. Some studies suggest that identification as a carer and consequent seeking of support may vary across the spectrum of caring work, with some carers being more at risk of being hidden carers, for example for those who don't care for people with very complex and/or more intensive needs. Sometime there is also a resistance to adopting the label of 'carer' and a guilt because of close family relationships.

### ● Sandwich carers

There is an increasing number of 'sandwich carers' (Carers UK estimated 2.4 million in the UK) – those looking after young children at the same time as caring for older parents. This terminology can also be used much more broadly to describe a variety of multiple caring responsibilities for people in different generations . As increasing numbers of people are working longer, often beyond retirement age it is anticipated that the support needed for Carers will need to adapt and change.

Around **one in nine working people are also carers** and therefore the largest proportion of carers are in employment, whether full or part time (Census 2011).



### ● Carers and Covid-19

Covid-19 has highlighted that there are times when Carers need additional support in order for them to continue with their role, including development of their digital skills to enable them to access support through different channels.

## 5. Strategy background

### ● The Care Act 2014

The strategy underpins which for the first time gives carers the legal right to recognition and entitlement to support in their own right.

### ● **Carers Action Plan 2018-2020<sup>3</sup>**

Prepared by the Department of Health and Social Care Carers Action Plan 2018-2020 recognises the increasing value and importance of carers to health and social care and broader society. It emphasises the need for Carers to access information and support to provide the best care they can. Carers need to be helped to balance their caring responsibilities with their own employment and to preserve their personal health and wellbeing.

This Action Plan identified four primary themes related to adult carers which are:

- **Services and systems that work for carers** - There is no such thing as a "typical carer". Services and systems need to be aware of the diversity of carers and their circumstances, from an elderly neighbour, to a young adult carer even to someone serving in the armed forces. Services also need to be responsive and flexible, recognising and supporting carers at different stages in the caring journey.
- **Employment and financial wellbeing** - Where an employer is made aware of an employee with caring responsibilities, employers can take simple, but effective action to consider flexible working practices to enable carers to balance their caring and employment responsibilities.
- **Recognising and supporting carers in the wider community and society** - Many carers will have little contact with services for carers and will not be receiving formal support in their caring role. It is therefore vital that we work with partners beyond government to raise awareness of caring among the wider population to build carer friendly communities.
- **Building research and evidence to improve outcomes for carers** - This helps to better understand what solutions would be most effective and helpful for carers, to strengthen areas where we identified gaps and to ensure that the development and delivery of future policies are informed by a strong evidence base.

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<sup>3</sup> Carers action Plan 2018-2020

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/713781/carers-action-plan-2018-2020.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/713781/carers-action-plan-2018-2020.pdf)

- **Cornwall Council and NHS Kernow Adult Health and Social Care Market Position statement 2019-2022** lists the key strategic aims to help support carers:

- Jointly commission services to remain in their caring role
- Support carers where possible using direct payments/personal budgets
- Enable carers to access integrated support service to support carers in their caring role
- Improve services for carers through closer working between the Council and NHS Kernow.

- **The Triangle of Care**

The 'Triangle of Care' is a working collaboration, or "therapeutic alliance" between the carer, the cared for person and any professional working with them that promotes safety, supports recovery and sustains well-being



The Triangle of Care was initially developed by The Princess Royal Trust for Carers (now Carers Trust) to improve mental health acute services. It is widely accepted that these key principles can be applied to all service areas so that they underpin the support offer that should be provided to carers. The six principles include:

- 1) Carers and the essential role they play are identified at first contact or as soon as possible thereafter.
- 2) Staff are 'carer aware' and trained in carer engagement strategies.
- 3) Policy and practice protocols regarding confidentiality and sharing information, are in place.
- 4) Defined post(s) responsible for carers are in place.
- 5) A carer introduction to the service and staff is available, with a relevant range of information across the care pathway.
- 6) A range of carer support services is available.

## ● Co-production



**Co-production** is the relationship where professionals and citizens share power to design, plan, assess and deliver support together. It recognises that everyone has a vital contribution to make in order to improve quality of life for people and communities, (The New Economic Foundation -NEF)

Co-production is a new way of engaging people who receive services. We are committed to ensure the services for carers will be co-produced by carers and practitioners as much as possible.

NEF recognises six main important parts of co-production<sup>4</sup>:

- **Recognising people as assets:** People are seen as equal partners in designing and delivering services, rather than as passive beneficiaries or burdens on the system.
- **Building on people's capabilities:** Everyone recognizes that each person has abilities and people are supported to develop these. People are supported to use what they are able to do to benefit their community themselves and other people.
- **Developing two-way reciprocal relationships:** All co-production involves some mutuality, both between individuals, carers and public service professionals and between the individuals who are involved.
- **Encouraging peer support networks:** Peer and personal networks are often not valued enough and not supported. Co-production builds these networks alongside support from professionals.
- **Blurring boundaries between delivering and receiving services:** The usual line between those people who design and deliver services and those who use them is blurred with more people involved in getting things done.
- **Facilitating not delivering to:** Public sector organisations (like the government, local councils and health authorities) enable things to happen, rather than provide services themselves. An example of this is

<sup>4</sup> Public Services Inside Out, David Boyle, Julia Slay and Lucie Stephens, 2010  
[https://b.3cdn.net/nefoundation/946910eae8c00ae1c8\\_q6m6iveqt.pdf](https://b.3cdn.net/nefoundation/946910eae8c00ae1c8_q6m6iveqt.pdf)

when a council supports people who use services to develop a peer support network.

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Adult Transformation and Commissioning

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