



**PEOPLE DIRECTORATE**



*Halton Clinical Commissioning Group*

**RECOGNISING, VALUING AND  
SUPPORTING CARERS IN  
HALTON**

**2016 – 2019**

**NHS Halton CCG & Halton Borough Council**

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# 1. Foreword



Cllr Marie Wright

*Carers make an enormous contribution to health and social care locally through the provision of essential care and support for relatives, friends and neighbours. Their efforts in providing this care improves the quality of life of the people they care for and often goes unrecognised, even by carers themselves who may not see themselves as 'a carer'.*

Halton Borough Council, together with NHS Halton CCG, is pleased to present its Carers Strategy 2016 – 2019, which sets out the key challenges, objectives and priorities to support carers in Halton over the next three years.

The council, together with its health, voluntary sector and community group partners, have achieved a lot over the past years. The Care Act however, has set us a challenge, creating a fundamental shift in the way carers are viewed and supported, focusing on their health and wellbeing and giving them parity of esteem with service users and patients. We are pleased to respond to that challenge, knowing that it will bring improved benefits for carers and the people they care for.

Our strategy, 'Recognising, Valuing & Supporting Carers in Halton', is based on the findings of our Carers Joint Strategic Needs Assessment, national best practice and discussions with our partners in the voluntary sector. It presents our vision of Halton as a place where carers are better-recognised, healthier and happier.

A handwritten signature in black ink, appearing to read 'Marie Wright', with a small flourish at the end.

**Cllr Marie Wright**

# Foreword



Cliff Richard

Caring is part of our existence it's part of being human. Caring strengthens communities and holds people and families together. Caring is part of the fabric of our everyday lives.

However for some, the burden of caring is heavy; seeing loved ones struggling with ill-health and needing to be cared for is difficult both physically and emotionally. Many selflessly give their lives over to supporting others who require care. The effort of this is compounded by the emotions involved in caring for a loved one who is struggling and failing before one's eyes.

In Halton we hope to recognise this and do our best to support carers in their role; whether this be support from well organised social services, or good quality healthcare and importantly, recognition of the importance of the caring role. We aim to support carers, and through this strategy, offer what we can to make the job of carers less difficult.

A handwritten signature in black ink, appearing to read 'CRS' followed by a long horizontal stroke.

**Dr Cliff Richards. M.B.E**

**Chair NHS HALTON CCG**

## 2. Introduction

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Carers play an important role supporting vulnerable people, enabling those cared for to stay in their own homes and local communities. Carers often do this because they want to support their loved ones. We recognise that caring can impact negatively on carers' health and wellbeing and value the key role that carers play in supporting the cared for person.

This is a joint strategy between Halton Borough Council (Adult Social Care) and NHS Halton Clinical Commissioning Group providing a local framework and action plan which:

- embodies both national and local priorities for carers
- addresses statutory responsibilities and good practice guidance
- outlines a framework for the continued development of services for carers in Halton
- details our proposed actions over the next three years

Within this strategy the term carer is taken from the Government's National Carers' Strategy:

"A carer is someone who spends a significant proportion of their time providing unpaid support to a family member, partner or friend who is ill, frail, disabled or has mental health or substance misuse problems."

Our definition of carers includes those who no longer do caring for up to a year after the caring role ceases.

This group of carers is not to be confused with paid Care Workers or Personal Assistants, Shared Lives Carers or Volunteer Carers.

## 3. National Legislation & Policy

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### 3.1 The National Carers Strategy

In 2014, the Government continued its recognition of the importance of carers by releasing the 'Carers Strategy: Second National Action Plan 2014-16'. This national plan prioritised the following issues;

- Identification and recognition; Supporting those with caring responsibilities to identify themselves as carers at an early stage,
- Realising and releasing potential; Enabling those with caring responsibilities to fulfil their education and employment potential
- A life alongside caring; Personalised support both for carers and those they support, enabling them to have a family and community life
- Supporting carers to stay healthy; Supporting carers to remain mentally and physically well

### 3.2 The Care Act

#### 3.2.1 Adult Carers

The Care Act, brought into effect from April 2015, gives carers the same rights as the person they care for. The Act is based on the principle of promoting wellbeing, meaning that local authorities must make sure that people that live in their area;

- receive services that prevent, reduce and delay their care needs from becoming more serious
- can get the information they need to make good decisions about care and support; and
- have a good range of providers to choose from

The Care Act also ensures that carers have the same rights to assessment and support as the people they care for. This right is based on the appearance of needs regardless of financial resources or level of needs for support. The assessment will consider;

- the impact of caring on the carer
- the day-to-day life outcomes the carer wishes to achieve
- if the carer is able or willing to carry on caring
- whether they work or want to work
- whether they want to study or do more socially

When the assessment is complete, the local authority must decide whether the carer's needs are 'eligible' for support from the local authority, depending on the carer's situation. The Care Act puts in place a national eligibility threshold, setting one national level at which needs are great enough to qualify for funded services.

If none of the needs identified meet the eligibility criteria, the local authority must still provide a written record of advice on what could be done to reduce, prevent and meet needs.

Where the needs identified meet the eligibility criteria and the person they care for lives in the local authority area, the local authority is under a duty to agree with the carer a support plan which will set out how those needs will be met. Carers also have a right to request that the local authority meets some or all of such needs by giving them a direct payment, which will give them control over how their support is provided.

### 3.2.2 Young Carers

A young carer is 'a person under 18 who provides or intends to provide care for another person'. For the purposes of transition, a young carer is 'a person under 18 who provides or intends to provide care for an adult'. In both cases, care does not include volunteering or employment in care services, but it does include a young person providing practical support, personal care and/or emotional support to an adult (usually a parent, but it can also be a sibling, grandparent or friend of the family) who may, for example, have a disability, serious illness, or needs relating to old age or as a result of the misuse of substances.

Children's Social Care in Halton have recently agreed a young carers strategy from 2016 – 2019. The strategy focuses on 5 priority areas;

- The Young Carers Strategy monitoring group
- Raising awareness of young carers
- Schools awards
- Understanding young carers needs
- Effective commissioning & resources

The Care Act 2014 places a duty on local authorities to conduct a transition assessment when it will be of 'significant benefit' to the person to do so. Significant benefit relates to the timing when the young person is ready to have an assessment and will get the most out of the process

### 3.3 The National Health Service

The NHS 5 Year Forward View also recognises the contributions made by carers;

*'We will find new ways to support carers, building on the new rights created by the Care Act .... This will include working with voluntary organisations and GP practices to identify them and provide better support.'*

Guidance issued by the NHS in 2014, Commissioning for Carers, outlines 10 principles to achieve the best outcomes for carers;

1. Think Carer, Think Family; Make Every Contact Count
2. Support what works for carers, share and learn from others
3. Right care, right time, right place for carers
4. Measure what matters to carers
5. Support for carers depends on partnership working
6. Leadership for carers at all levels
7. Train staff to identify and support carers
8. Prioritise carers' health and wellbeing
9. Invest in carers to sustain and save
10. Support carers to access local resources



## 4. The Impact Of Caring

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- 4.1 A carer may help with tasks such as washing, dressing, using the toilet, getting someone up or helping them to bed, shopping, cleaning, laundry and making meals. The caring role can also include providing emotional support, and childcare responsibilities. The care may mean keeping an eye on people who are confused or at risk if not supervised, or encouraging them to do everyday things for themselves. Many carers don't see themselves as carers and it takes them an average of two years to acknowledge their role as a carer.
- 4.2 Caring responsibilities can have an adverse impact on the physical and mental health, education and employment potential of those who care, which can result in significantly poorer health and quality of life outcomes.
- 4.3 NHS Commissioning for Carers (2014) identified that;
- Between 2001 and 2011, the number of unpaid carers grew by 600,000 with the largest increase being in those who provide fifty or more hours of care per week.
  - Increasing hours of care often results in the general health of carers deteriorating incrementally. Unpaid carers who provide high levels of care for sick, or disabled relatives and friends, are more than twice as likely to suffer from poor health compared to people without caring responsibilities, with nearly 21% of carers providing over 50 hours of care, in poor health, compared to nearly 11% of the non-carer population
  - Carers attribute their health risk to a lack of support, with 64% citing a lack of practical support.
  - 70% of carers come into contact with health professionals, yet health professionals only identify one in ten carers with GPs, more specifically, only identifying 7%
  - There is an increasing prevalence of 'sandwich carers', those looking after young children at the same time as caring for older parents.
- 4.4 National research undertaken by the Carers Trust showed that;
- 58% of carers said that their mental health had been adversely affected by being a carer
  - 66% of carers said their relationship had suffered as a result of their caring responsibilities
  - Three-quarters had not had a regular break from caring in the past 12 months and just over a third had not had a single day off

- 59% of carers said that being a carer had a negative impact on their working life; with 17% having to stop work; 15% having to reduce their paid working hours; 15% having to use holidays for caring duties
- More than two thirds (67%) of carers reported they were financially worse off as a result of caring.

4.5 A report commissioned by Carers UK titled 'Valuing Carers 2015' found that;

- The economic value of the contribution made by carers in the UK is now £132 billion per year, almost double its value in 2001 (£68 billion). £132 billion is close to the total annual cost of health spending in the UK, which was £134.1 billion in the year 2014-2015
- Carers' contribution is growing. The 2015 figure is 7% higher than the figure for 2011. This is mostly because carers are providing more hours of care (82%) and partly due to the increased hourly cost of paid homecare (18%)
- Care needs are greater because between 2001 and 2015, the number of people nationally aged 85 and over increased by over 431,000 (+38%), and the number of people with a limiting long-term illness increased by 1.6 million (+16%)
- In Halton, the economic contribution made by carers is £351 million

4.6 In December 2015, Marie Curie published a report titled 'The Hidden Costs of Caring', which looked at the impact of caring for someone with a terminal illness. The report concludes that 'carers of people with a terminal illness face significant challenges to getting the high quality and timely support that should be available to them, both while they are caring and after bereavement. These challenges include:

- Not having their needs recognised by support services
- Not being supported to look after their own health, wellbeing and finances, and not knowing where to find support when they need it
- A lack of help with preparing for the future, both following their loved one's diagnosis and after bereavement'

The report recommends the following fundamental principles that should underpin the support available to carers of people with a terminal illness;

- People who provide care for someone who is approaching the end of their life have specific needs, which should be assessed as a matter of priority
- Information for carers should be available and accessible in a form that is most useful to them
- Carers are not trained professionals, and they should not be expected to behave as such. Carers should be treated sensitively by professionals

and, where appropriate, provided with training and support to help them look after their loved one and themselves

- No one providing care to a loved one with a terminal illness should suffer financial hardship as a result of their caring role
- Health and social care professionals need to be ready and able to help carers identify themselves in this role and to plan for their future. This must include a sensitive explanation of what supporting a death at home entails, and a recognition that carers' needs will often continue after bereavement

4.7 In March 2016, the Directors of Adult Social Services (ADASS) produced the 'Guide to Supporting Carers through Technology Enabled Care Services. This guide said that;

- Over 60% of carers surveyed said telecare/telehealth had given them peace of mind as a carer
- One in eight carers said telecare/telehealth had helped them stay in work or return to work alongside caring
- Almost two thirds of carers not using telecare/telehealth were unaware of the support available from technology
- Of carers not currently using telecare/telehealth, one in four would like it but simply did not know where to find it
- When asked about telecare, in a Carers UK/YouGov poll, there was very low awareness of telecare technology, with only 12% of the population saying that they would use it. When the term was explained to them, 79% of people said they would use it and this was even higher for the over 85s

The guide also identified a number of key principles local authorities need to consider when providing technology enabled care services for carers.

- The statutory right to a social care assessment should always include a consideration for technology enabled care and other support services – “think tech”
- All commissioners should develop simple, accessible and easy to find information that lists what technology is available to support carers in their local area. This information
- Providers should take into account the specific needs of carers when developing care services that use technology
- It is absolutely critical that all local authorities providing assistive technology should also provide corporate training on this topic – having information available is not enough

## 5. Key Issues Identified In The Needs Assessment

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- 5.1 A Joint Strategic Needs Assessment (JSNA) looks at the current and future health and care needs of local populations to inform and guide the planning and commissioning (buying) of health, well-being and social care services within a local authority area. Halton's 'Adult & Young Carer, 2016' can be found as an appendix to this strategy.
- 5.2 The key findings of the JSNA were;
- Unpaid carers make up a significant 'workforce' at 15,010. This will probably continue to rise
  - 'Caring' has traditionally been seen as a female role. Whilst there are a higher proportion of carers who are female, the split is not so significantly skewed towards women; with 57% of carers being female and 43% are male. Whilst a higher percentage of carers aged 25-49 are women a higher proportion of those aged 65+ are male
  - The health and wellbeing of carers tends to be poorer than their non-carer peers. Levels of poor health amongst carers increases as the number of hours of care per week increases, with those providing 50 hours of more care per week having the poorest health. Halton has the 4<sup>th</sup> highest percentage of carers providing 50 or more hours care a week and also some of the highest levels of ill health and disability. The mental wellbeing of Halton carers is poorer than that of the general population of the borough
  - Only 10% of carers in Halton are known to their GP
  - Only 44.9% of people identified as carers on GP records received their annual influenza vaccination in 2014/15. This means that only about 5% of all carers receive an annual vaccination against influenza. At a GP practice level uptake varied from 26.7% to 68.3% so no practice achieved the national target of 75%
  - In terms of outcomes of being a carer, data for 2014/15, for those carers known to adult social care, shows Halton carers experience is similar to that seen across the North West and England
  - Of known carers, a lower proportion of Halton carers provide help with physical care but more provide emotional support than comparator areas. This reflects the higher proportion who stated they cared for a person with mental health problems. However, the percentages are high across all areas of care showing unpaid carers provide multiple roles
  - Census data shows that 14% of carers reported a long-term health problem/disability, which limited their day-to-day activities a lot. A further 17% stated they had a disability that limited their daily lives a little. These proportions were higher than for North West and England carers
  - Halton has a higher proportion of people with long-term conditions, including multiple conditions, than the national average. These numbers are projected to rise, especially older people with three or more conditions

5.3 Halton's 'Adult & Young Carer, 2016' JSNA identified the following considerations for the commissioners of carers services;

- To close the gap between the number of carers currently known to services and the number identified through the 2011 Census
- To identify more individuals who are caring for 50+ hours per week, and those carers with a long term disability that limits their day to day activities
- To increase the number of carers registered with their GP
- To improve the uptake of flu vaccinations by carers
- To improve information sharing between social care, NHS services and the voluntary sector to support integrated, personalised care
- To reduce financial hardship through improved access to welfare rights advice
- To improve carers levels of satisfaction with social care services
- To ensure the implementation of NICE guidance, particularly with regards to; mental health; drugs and alcohol; the transition between inpatient hospital settings and community or care home settings for adults with social care needs; dementia - supporting people with dementia and their carers in health and social care; older people with social care needs and multiple long-term conditions; and end of life care
- To ensure that carers receive the support that is appropriate to them maintaining and/or improving their physical and mental health
- To ensure that carers receive advice and information regarding home equipment and assistive technology services
- To ensure the implementation of the 'triangle of care' for mental health

## 6. Achievements From The Previous Strategy

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6.1 The previous carers strategy achieved many successes, the most notable of which were;

- The successful implementation of a new carers assessment
- 98% of carers receiving direct payments
- Higher than the national average carer reported quality of life scores
- 79% of carers reporting that they had been included or consulted in the discussion about the person they care for
- 79% of carers reporting they found it easy to find information about support
- Higher than the national average scores for carers reporting that they had as much social contact as they would like
- Pooling and maintaining the level of Halton Borough Council and NHS Halton CCG budgets to more efficiently commission carers services
- Significant investment into refurbishing the Carers Centre

## 7. Delivering Carer's Services in Halton Today

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### 7.1 Adult Social Care

The Care Act gives local authorities the responsibility to assess a carer's needs for support. In Halton, these statutory assessments are carried out by the borough council's care management teams.

The assessment looks at how caring has an impact on an individual, what support they may need if they want to carry on caring, and what they want to achieve in their day to day life. At the end of the assessment a support plan will be agreed. The support plan will include how a person's needs are going to be met and, if a direct payment is to be made, how much it will be and how often it will be paid.

### 7.2 Halton Adult Placement Service

Halton Adult Placement Service provides care for people who need support due to age, illness or disability. The Service provides day care and short breaks to enable people to live an ordinary life in the community. The service supports the families of people needing care by providing them with a break from their caring role. The service can also provide a homely environment for adults living alone and missing the company of family and friends.

Adult Placement Carers are members of the local community who have been selected to work for the service after a long and detailed assessment process. This includes checks with the Disclosure & Barring Service and employment, health and character references. Carers are approved by an independent panel. Carers are provided with ongoing training and support to ensure they maintain high standards of care.

### 7.3 Bredon

Bredon Respite Service is situated in the Palacefields. It is managed by Community Integrated Care (CIC) a non-profit making organisation. They provide short term breaks for up to four adults aged between 18-65 years old with a learning disability or complex health need.

### 7.4 Halton Carers Centre

Halton Carers Centre provides a range of both universal and targeted services for carers. Commissioned jointly by Halton Borough Council and NHS Halton CCG, the centre aims to improve the quality of life for carers and to prevent or delay peoples need for care and support.

As a primary point of contact for carers in the borough, Halton Carers Centre will;

- Increase the number of carers known to them, particularly within underrepresented groups
- Work with a range of local agencies and initiatives to promote and improve carers' health and well-being
- Provide advice and information which supports carers to make informed choices about issues such as; the care and support which is available; their health and well-being; the types of home equipment, telehealth and telecare facilities that are available; and any changes in the welfare benefits system that may have an impact on them as a carer
- Ensure that carers are an integral part of the design, delivery and quality assurance of both the Carers Centre and health and social care services
- Commission community based peer support groups that help carers to cope with their caring responsibilities and alleviate some of the isolation they experience
- Ensure intensive, short term support is provided where there is a high risk of 'carer breakdown'
- Co-ordinate, provide and publish a programme of training for carers and health and social care professionals
- Offer a range of volunteering opportunities for carers, ex-carers and members of the local community
- Provide an advocacy service that ensures that carers' are assisted and enabled to say what they want, to secure their rights, to represent their interests and to obtain the services they require

#### 7.5 Community Based Support

Each year, small community groups and local organisations apply to the directorate for a small amount of funding to support carers. In their application, groups should be able to demonstrate how they will increase the number of Carers known to them; support individuals to have a life outside of caring and have a positive impact on carers well-being.

At present 16 groups and organisations receive funding supporting people caring for individuals with dementia, learning disability, autism, substance misuse, stroke, mental health and physical disability.



## 8. Case Studies

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### 8.1 Case Study 1

John is 27 years of age. He has autism, a learning disability and mobility difficulties, which means he requires a calliper for support. John's mum and dad support him with all of his daily living activities and personal care tasks. They receive Direct Payments which are used to increase John's support hours. This means that whilst John's mum and dad can take regular breaks, they rarely have a short break or night out together.

John's mum is happy to continue supporting him for as long as she is able, but feels that she and her partner have limited opportunity to spend time together as a married couple. A carers direct payment has enabled them to take short breaks together and to contribute to their disabled persons holiday club annual membership.

### 8.2 Case Study 2

Julie cares for her daughter Marie. Marie has had encephalitis, a rare but serious condition that causes the brain to become inflamed, which has affected her mobility and resulted in her becoming epileptic. For the past year she has been admitted to hospital many times. Marie regularly has seizures throughout the day and night and the family use monitors so that she can be observed at all times. Julie regularly has sleepless nights as she cares for her daughter. Marie's illness has greatly impacted on her and her family, both physically and emotionally. They all say that they are at breaking point.

Working with the Complex Care Team, Julie and Marie now receive additional support around Marie's personal care from a specialist agency; some additional assistive technology to help with the monitoring of Marie's medical condition; Julie has been put in touch with a number of local services to help her with advice on her financial situation, where there are leisure activities she might be interested in taking up, and details of a befriending service for people in a similar situation to herself. As the carer, Julie has also been provided with a Direct Payment which she could use to fund a respite break.

## 9. Our Vision & Principles

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9.1 Our vision is that carers in Halton are recognised and valued for their essential contributions to our communities and the people they care for. Our services will provide practical, emotional and social support so that carers are able to live their own lives.

9.2 In delivering this vision, the partners to this strategy commit to the following underlying principles. To;

- Recognise the vital contribution made by carers to the lives of people who are vulnerable, ill, disabled or misusing alcohol and/or substances
- Recognise that the unpaid support provided by carers allows individuals to retain their independence and improves their quality of life
- Work with carers to ensure that they get the support they need from health and social care, to help carers maintain their caring role for as long as they want to
- Develop responses that make a real difference to carers' lives, ensuring that our responses meet their needs
- Recognise carers as 'experts' on the person they care for and we will be putting carers at the forefront of partnership work with commissioners and providers to identify needs, priorities and responses
- Recognise the diverse needs of carers in and will address equality of access to information, appointments, meetings etc.
- Work to ensure that carers not currently known to services are made aware of support available to them
- Recognise the wide range in the ages of carers and will help them to access support that is appropriate to their age
- Work in co-production with carers to ensure that their right to lives of their own is a practical reality
- Build on our co-production practices and build carers' capacity to lead on activities, events and services that affect their lives

# 10. Recognising, Valuing & Supporting Carers in Halton, 2016 – 19; Outcomes

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10.1 Halton's Carers Strategy will focus on achieving the following four outcomes;

Carers will be;

1. Supported to stay mentally and physically well (Outcome 1)
2. Supported to have a life of their own alongside caring (Outcome 2)
3. Recognised as expert partners, and will be supported in their caring role by integrated and personalised services (Outcome 3)
4. Provided with accessible advice and information that will assist them in making informed choices regarding their caring roles (Outcome 4)

# 11. THE MODEL OF SUPPORT FOR CARERS IN HALTON 2016 – 2019

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11.1 The model of support for carers in Halton is based on the principle that most of the time, people are perfectly able, with the support of their families and communities, to manage their lives and respond effectively to any events or crises that occur. Sometimes however, the difficulties brought about by life events mean that people may need some practical and emotional support to achieve this. Our model encourages individuals and communities to find the solutions that work for them so that they retain independence and control over their health, well-being and quality of life. The four components of the model are;

## I. Prevention & Early Intervention

- Putting carers on an equal footing with those they care for
- Identifying, assessing and supporting a wider range of carers across the health and social care system
- Providing accessible information to support carers to make informed choices
- Avoiding crisis escalation through early intervention

## II. Support to Care

- Providing coordinated, personalised support for carers enabling them to have a family and community life
- Promoting wellbeing
- Strengthening individual and community resilience, through self-sustaining peer support networks
- Improving access to adaptations, equipment and assistive technology

## III. Support In a Crisis

- Enabling carers to plan for and manage changes in their caring role thereby reducing the impact of crises
- Supporting improved access to information, advice and advocacy

## IV. Recognition of the Caring Role

- Achieving wider awareness and identification of carers across education, employment, health and social care
- Involving carers in the commissioning and quality assurance of services

## 12. DELIVERY OF THE STRATEGY

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- 12.1 The responsible body for the delivery of Recognising, Valuing and Supporting Carers in Halton, 2016 – 19, is the Carers Strategy Group. Membership of this group is drawn from carers that use our services and key delivery partners.
- 12.2 To achieve the outcomes identified in the strategy, an action plan has been developed with key partners. The Carers Strategy Group will monitor progress on the action plan on a quarterly basis, with the action plan also being refreshed annually.
- 12.3 Halton Borough Council and NHS Halton CCG currently commit £841,923 per annum to support the delivery of the strategy. This includes the commissioning of services for carers and the provision of direct payments.

## 13. Recognising, Valuing and Supporting Carers in Halton, 2016 – 19; Action Plan

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I. Prevention & Early Intervention				
Action	Responsibility	Timescale	Measure	Outcome
To carry out statutory assessments of carers (adults)	Halton Borough Council	On – going with an annual review	Number of carers assessments	Outcomes 1, 2, 3, & 4
To review the statutory assessment process for young carers in transition and implement a revised process in accordance with best practice and statutory duties	Halton Borough Council Halton Carers Centre	April 2017	Implementation of new assessment process	Outcomes 1, 2, 3, & 4
To increase the number of new carers known to health and social care, particularly from the	Halton Carers Centre	On – going with an annual review	Number assessments of carers not previously known	Outcomes 1, 2, 3, & 4

<p>following priority areas;</p> <ul style="list-style-type: none"> <li>• Substance Misuse</li> <li>• Long Term Conditions</li> <li>• Mental Health</li> <li>• Over 65s, particularly men</li> <li>• Those caring for 50+ hours per week</li> <li>• Dementia</li> </ul>			to HBC	
To increase the number of carers being referred to primary care for health checks	Halton Borough Council Halton Carers Centre	On – going with an annual review	GP carer reed code	Outcomes 1 & 3
To improve access to mental health services to ensure carers at risk of mental health issues are identified at the earliest possible stage and provided with appropriate support and treatment	NHS Halton CCG Halton Carers Centre	On – going with an annual review	Referral process in place	Outcomes 1 & 3
To provide information as to the types of care and support available	Halton Carers Centre	On – going with quarterly monitoring as per contract	Carers Survey. Halton Carers Centre website	Outcome 4

		management arrangements	activity data	
<b>II. Support to Care</b>				
Action	Responsibility	Timescale	Measure	
To increase the number of self-sustaining peer support and activity groups.	Halton Carers Centre	2017 onwards	Number of new peer support groups	Outcomes 1 & 2
To provide signposting to trusted sources of information that will enable carers to make informed choices about improving their health and well being	Halton Carers Centre	On – going with an annual review as per contract management arrangements	Carers Survey. Halton Carers Centre website activity data	Outcomes 1 & 4
To provide a range of volunteering opportunities for ex-carers and members of the local community.	Halton Carers Centre	On – going with a 6 monthly review as per contract management arrangements	6 monthly report	Outcome 1



To provide links to national organisations who provide telephone and on-line support.	Halton Carers Centre	On – going with a quarterly review as per contract management arrangements	Halton Carers Centre website activity data	Outcome 4
To raise awareness of how to raise concerns about the safety and well-being of an adult who has needs for care and support	Halton Borough Council Halton Carers Centre	On - going	Carers questionnaire	Outcome 1
To improve the take up by carers of health related activities	HBC Health Improvement Team Well Being Project	On – going with an annual review	Referral process in place	Outcome 1
To support and signpost carers to obtain the welfare benefits advice & support they require	Halton Carers Centre Halton Borough Council	On – going with an annual review	Referral process in place	Outcomes 1, 3 & 4
To increase the number of carers accessing equipment, adaptations and telecare/telehealth assessments	Halton Borough Council Halton Carers Centre	On – going with an annual review	Number of assessments undertaken by HBC  Number of referrals made by	Outcome 3

			Halton Carers Centre	
To increase the number of people registered as a carer with their GP	Halton Carers Centre	On – going with an annual review	GP carer reed code	Outcomes 1 & 3
To increase the take up of flu vaccinations	HBC Public Health NHS Halton CCG	On – going with an annual review	GP carer reed code	Outcome 1
<b>III. Support In A Crisis</b>				
<b>Action</b>	<b>Responsibility</b>	<b>Timescale</b>	<b>Measure</b>	
To increase the range and availability of respite provision	Halton Borough Council	April 2017	Number of respite days provided	Outcomes 2 & 3
To ensure that carers are identified and involved at the earliest opportunity regarding pathways into and out of hospital, residential and nursing	Halton Borough Council Halton Carers Centre	On – going with a 6 monthly review as per contract management arrangements	Identification of carer within assessment process	Outcome 3

care				
To provide intensive, short term support to carers where a high risk of carer breakdown has been identified by health and social care professionals	Halton Carers Centre	On – going with a 6 monthly review as per contract management arrangements	The number of individual carers supported who were ‘at risk of carer breakdown’	Outcome 3
To ensure every carer has an ‘emergency plan’ in place	Halton Borough Council Halton Carers Centre	On-going with an annual review	Annual audit	Outcome 3
<b>IV. Recognition of the Caring Role</b>				
<b>Action</b>	<b>Responsibility</b>	<b>Timescale</b>	<b>Measure</b>	
To ensure that carers are an integral part of the quality assurance of health and social care services.	Halton Carers Centre NHS Halton CCG Halton Borough Council Halton Healthwatch	April 2017	Number of carers involved in quality assurance visits	Outcome 3

To promote and provide 'Caring with Confidence' courses for carers	Halton Carers Centre	On – going with a quarterly review as per contract management arrangements	Number of courses provided  Attendance of courses	Outcome 4
To provide advocacy that ensures that carers' are assisted and enabled to say what they want, to secure their rights, to represent their interests and to obtain the services they require.	Halton Carers Centre Halton Healthwatch	On – going with an annual review	Carers questionnaire	Outcome 3
To promote awareness of carers rights	Halton Carers Centre	On – going with a quarterly review as per contract management arrangements	Number of Promotional activities  Number of professionals attending carers awareness training courses	Outcome 3
To provide a programme of learning for;  <ul style="list-style-type: none"> <li>• Carers to support them in their caring role. And</li> <li>• Health and Social Care</li> </ul>	Halton Carers Centre	On – going with a 6 monthly review as per contract management arrangements	6 monthly report	Outcomes 3 & 4

professionals to increase recognition of carers rights and needs				
<b>V. Delivering Halton Carers Strategy 2016-19</b>				
<b>Action</b>	<b>Responsibility</b>	<b>Timescale</b>	<b>Measure</b>	
To review the terms of reference and membership of Halton Carers Strategy Group	Halton Borough Council	December 2016	Terms of reference and membership agreed	
To agree a performance framework for Halton Carers Strategy 2016 - 19	Halton Carers Centre	April 2017	Data sets and base line data identified. Improvement targets agreed	

## 14. GLOSSARY

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ADASS	Association of Directors of Adult Social Services
CCG	Clinical Commissioning Group
CIC	Community Integrated Care
GP	General Practitioner
JSNA	Joint Strategic Needs Assessment
NICE	National Institute for Health & Care Excellence