



A New Deal for Carers Issues for consideration in developing a National Carers Strategy

1. Introduction

ADASS welcomes and fully supports the review of the National Carers Strategy. It is particularly pleased that the government is keen to ensure that the views of carers are fully reflected in the strategy, so that their needs can be met and their experiences are more positive. The ADASS Carers Reference Group has had opportunity to discuss the new strategy with the Department of Health, and ADASS is represented on the various task groups and the Interdepartmental Group. This has provided fertile ground for some innovative approaches which we hope will be pursued as the strategy is developed. The purpose of this contribution is not to list these again, but to bring out some key issues of principle and delivery which ADASS wishes to see reflected in the strategy. ADASS is totally committed to ensuring that Local Authorities play their full part in implementing the new carers strategy, and believes attention to delivery mechanisms, as well as strategic intent is critical. This must be in the context of the new concordat, Putting People First, which recognises carers as partners in care, and describes a reformed social care system towards which all councils are working.

The commitment to prevention and investment in community based services has significant implication for how carers can be supported. There are opportunities for the NHS to work in partnership with Local Authorities and other partners including Third Sector Organisations to improve support for carers. ADASS believes that a cross organisation approach locally will be most effective in delivering it. The role of the Local Strategic Partnership, and the Local Area Agreements could ensure translation of the strategy into local delivery to meet local needs, whilst ensuring a consistent 'core offer' is made available for carers.

2. Vision

ADASS would like to have the following vision realised by the Strategy:

- Carers will have confidence in the support available to them, freedom from financial insecurity as a result of caring and be secure in the knowledge that should they be unable to continue caring, the person they care for would receive the care they need.
- Carers will be treated with respect and their dignity will be preserved.

3. Principles

Definition

There should be a consistent nationally agreed definition of a carer in the National Strategy. Misuse of the term 'carer' causes much confusion and this can prevent carers becoming aware of their rights. A national definition could be established by the Strategy. The ADASS Carers Reference group recommends the following, which is a modification of the Carers UK definition:

'CARERS look after family, partners or friends in need of help because they are disabled, ill or frail. The care they provide is unpaid.'

Early Intervention

Carers have a right to support, which prevents stress and ill health. Early intervention is one of the DH social care priorities and we know carers benefit from information and support early on before they reach a crisis.

Choice and control

Carers themselves are the best judge of what support would help them continue to care and have a life outside caring. Carers need to be fully included in the personalisation agenda.

Information

Carers have a right to full and accessible information about their rights and the services available to them. We need to ensure that carers receive better quality, more timely information as a result.

Dignity and Respect

Carers are individuals in their own right with a life and an identity beyond caring. Carers have a right to be treated with respect by services and professionals and their experience and knowledge valued.

4. Health and Social Care

Health

Revising the Strategy reinforces the need for Health to recognise the role of carers as partners in the delivery of care but it is also an opportunity to enhance the crucial role that Health has in identifying hidden carers, referring carers for assessment and for providing information and support to carers.

ADASS welcomes the concordat "Putting People First" which will enable Health and Social Care to work together to improve support for carers. The NHS operating framework places clear expectations on the NHS to support carers. ADASS considers that all NHS Trusts should have a carers' lead/link person. This should be a significant role with clear responsibility for implementing the Strategy. NHS Carers' leads could actively promote the Strategy in a number of ways:

- Multi -agency Carers' Strategies play a vital role in delivering outcomes to carers locally and Health will need to be part of these groups as both a commissioner and a partner.
- Practice based commissioning provides an opportunity to consult with carers and deliver services which would enable carers to be supported. This also presents opportunities for Health to jointly commission services with Social Care.
- Use of GPs registers could be enhanced and can be a way of targeting information to reach more carers.
- Monitoring hospital admission and discharge procedures to check whether carers are receiving appropriate assessment and information at this time would ensure that carers are identify and routed appropriately for support.
- The Expert Carer programme could provide an opportunity to link into other health promotion and prevention services such as back care advice, regular check ups, and carers' support groups.
- In the long term, the Government may consider placing a duty on health services to assess carers' health needs.

Social Care issues

Carers need to be fully included in the personalisation of social care agenda. There is a need for carers to have control of the support they receive, with more flexible and personalised services being available including increased use of direct payments for carers. This is an important developing area of work and it will be essential that findings from the Individual Budget pilot areas be fully joined up with the review of the National Carer's Strategy. ADASS and the Care Services Improvement Partnership (CSIP) are working together with Individual Budget sites to explore these issues and develop guidance around individual budgets and carers. However, some of the issues for consideration in the strategy are as follows:

- Eligibility decisions must take account of the carer's needs and risk to the carer as well as the service user.
- Resource Allocation Systems (RAS) used as part of the Individual Budget process should reflect the carer's needs and rights and be sufficiently flexible to recognise different levels of need.
- Carer's support within the RAS should include breaks and support for the carer to access a life outside caring.
- Assessment of disabled parents should consider what support the adult needs to parent their children and ensure children and young people are not left with unreasonable levels of caring responsibilities.
- Greater use should be made of new technology in telecare and telemedicine which have been demonstrated to improve the quality of life of carers and to reduce costs
- New rules to permit direct payments could give carers more control over their lives in circumstances where the service user lacks cognitive awareness.

- The carers of people who fund their own care should have the same rights and support as those who receive care from Local Authorities and the NHS.

There will be a need to look at how a national information line can link to existing local information resources and help lines. Local authorities and carer's organisations will have an important role in information provision, including through comprehensive web pages for carers. An information strategy needs to be pro-active and ensure that information reaches all carers, particularly those who suffer social exclusion as a result of their caring or as a result of their race, gender etc.

5. Employment

The 1999 Strategy was largely aspirational in relation to carers and employment. A new Strategy needs to link together the achievements to date and give further impetus for new developments. There is a strong business case for supporting working carers through flexible working and such policies have been adopted by many major businesses such as British Telecom. Further issues for consideration for supporting working carers in the new Strategy are as follows:

- A National Care Strategy for the provision of services to help carers of adults to work is needed along similar lines to that for parents of disabled children. This could include measures such as extended care during the day, out of hours care for carers who work in the evening and weekends and use of direct payments to assist carers to juggle work and care.
- Local authorities, PCTs and other NHS organisations have an important role in promoting the new right to request flexible working under the Work and Families Act 2006.
- In the longer-term, the government should consider introducing a right to flexible working for carers.
- Local authorities have a duty to provide carers with an appropriate range of information and this includes signposting working carers to their rights at work. Such information needs to be a standard part of a carer's information pack, and designed into new arrangements such as First Stop Shops.
- Carers' organisations also have a role in providing information and advice in relation to training and work issues.
- Work place carers groups can be a very effective support mechanism for working carers.
- Both the National Strategy and local strategy groups need to ensure that local employment advice services are able to support former carers to retrain for work as well as people who are currently caring. There is a need to build on involvement/commitment from the DWP to support carers to return to work and to build better links between carers' strategy groups and DWP at local level.
- Clause 6 of the Childcare Act 2006 will improve the availability of services that enable parent carers to work or undertake vocational training. This should be included in the

National Strategy and regional carer's strategy groups should have a role in implementation at local level.

- Local Authorities will need to develop local strategies to ensure that carers and employment issues are genuinely addressed within carers' assessments and that support is available to carers in relation to work and training.
- Learning and Skills Councils need to be enabled to provide funding for carer specific programmes such as City and Guild's "Learning for Living" programme. This may require some adjustment of funding criteria recognising that many carers who have been out of the work place need additional support to get back into work regardless of previous educational achievement or experience.

6. Equal Opportunities and Social Inclusion for Carers

Carers' needs are increasingly being incorporated into the equalities and social inclusion agenda. Seeing carers, as individuals in their own right with a life beyond caring must become a key part of this.

The National Strategy should highlight the need for carers' issues to be included in agencies' equalities policies at a local level. Equal opportunities for carers should be promoted through inter-agency carers' strategy groups within their community as a whole. Carers' issues need to be addressed by the new National Equalities Commission and included in local authorities' equalities policies. The strategy needs to properly address issues of diversity and in particular:

- The needs of black and ethnic minority carers should be well reflected in the new Strategy and the National Black Carers' Network needs to be fully engaged in the process.
- The Strategy also needs to identify methods of improving support to gay and lesbian carers, as this is an area where many councils and carers organisations have struggled to make real progress.
- Professional codes of conduct in Health and Social Care can influence and help to deliver the cultural changes needed to recognise the role of carers.

Leisure/Recognition

Leisure and other services can have a valuable role in giving support and recognition for carers. There are a range of good practice initiatives across local authorities. Local Area Agreements could provide the vehicle for local agencies to consider their 'offer' to carers, particularly in the area of:

- Access to leisure facilities.
- Access to learning opportunities.
- Safety and consumer advice.
- Access to transport, generally or for specific reasons e.g. hospital appointments.

7. Income

The benefits system should promote carer's social inclusion and opportunities to train or work (where this is the carer's choice). Current benefit rules undermine the ability of carers to undertake training without fear of losing benefits. ADASS supports proposals to increase Carers Allowance to a realistic level and increase the earnings limit to end the current poverty trap this causes. LGA have submitted detailed proposals about this.

There is a duty for local authorities to offer or "sign post" benefits advice for all carers making an enquiry about services, whether or not they have a carer's assessment. Again, this needs to be designed into new arrangements such as First Stop Shops.

Changes arising from the Pension Bill benefiting carers are welcomed. If pension credits for periods of caring of over 20 hours a week were to be given, it is important that this is not restricted to those claiming benefits and that the circumstances of those with multiple caring responsibilities are recognised.

Local authorities and/or GP practices will have a role in providing confirmation of caring responsibilities. Such confirmation could be used for other purposes e.g. leisure passes, fast tracked medical appointments, subject to local agreements. There are potential resource implications for this requirement of local authorities which need to be acknowledged and supported.

8. Children's Services and Carers

Parent Carers

Local authority carers' lead officers have expressed significant concerns about the level of support that parent carers receive from social care services. Far less progress appears to have been made in implementing carers' legislation in relation to the Children Act 1989 than with Community Care legislation. This issue is being addressed as part of the joint treasury/DfES review of support for disabled children and their families and it will be essential to join up these agendas and to ensure that the National Carers' Strategy makes use of the information. There is a particular need for new resources to improve access to short breaks for parent carers.

Children's Services need to work with Adult Social Services to ensure that systems are in place to ensure that parent carers are offered their own assessment. Children's Services need to also understand their responsibility to address parent carers' needs in relation to training and work including through effective implementation of the Carers (Equal Opportunities) Act. Where Children's Services have eligibility criteria, this needs to be compliant with carer's legislation and that practice reflects this.

There is a need for active joint working between Adult and Children's services and for parent carers to be fully involved in inter-agency strategy groups. In some areas, this has been addressed and parent carers and or young carer reference groups are dual purpose and are shared by Carers Strategy and Children's planning groups.

Children's Services/ Children's Trusts need to have a lead for carer's issues and the development of these Trusts creates new opportunities for improving the focus on carers needs and providing support to them.

ADASS recognises that there is a need for further improvement in joint working between Adult and Children's services and for better outcomes for carers as a result of transition plans. ADASS and ADCS will jointly prepare a protocol to ensure best practice in this key area.

Young Carers

There is a commitment to improve support for young carers through the National Strategy and this is welcomed. It is essential that assessments for disabled people identify what support is necessary to prevent children and young people having to take on unreasonable levels of caring. This needs to be made explicit within eligibility criteria and included in training for a wide range of professionals whose paths may cross young carer's lives. Some key actions identified are:

- All schools should have a link person for young carer's issues.
- Curriculum packs for use in schools (e.g. ones produced in Surrey)
- Address young carer's issues in school bullying policies.
- Role for Connexions in supporting young carers including careers advice for 13-19 year olds
- Joint working between Adult and Children's services is essential
- Adult services eligibility policies address the rights of disabled parents to carry out their parenting role and the support they need to do this.
- Children's services eligibility or other funding criteria for S17 take account of carer's needs and their rights under the Carers (Equal Opportunities) Act.
- Children's Trusts need a designated lead with responsibility for young carers issues
- Training for all staff working with or who can identify young carers.

9. Implementation

ADASS believes there is a sound business case to support carers and this should be clearly articulated in the strategy.

This business case should set out indicators of success, and these should inform the approach to implementation. ADASS is keen that cross departmental accountability is retained and that individual departmental implementation plans are a contribution to this overarching strategy, rather than an end in themselves. Likewise, as previously indicated, at a local level, a partnership approach cross agencies is likely to be more effective, making use of Local Area Agreements to engage public services. It is clear that Local Area Agreements will have an important role in promoting inter-agency cooperation to support carers, monitoring outcomes for carers and also in allocating the area budget for carers. The national implementation programme will need to include advice and support to those managing the LAA process at local level.

The DASS has a key role in ensuring that carers assume equal priority in designing new ways of working as Putting People First is taken forward, and ADASS nationally will champion this. The DASS also has a role in the wider local government context of working with the local economy, to promote excellent employment practice by local employers, including of course local councils and NHS Trusts. In addition draft checklists have been developed which draw on the work of ACE National, Carers UK, ADASS and the Beacon local authorities for supporting carers. These checklists are specific to the different levels of responsibility and function that exist within organisations; at each level they highlight a range of targets whose achievement has been demonstrated to help with “carer proofing” the organisation.

It is important that changes in policy or any service developments being planned by local authorities and other organisations take into account the impact they may have on carers. A Carers and Equalities checklist has been prepared which outlines a set of key principles for promoting the welfare of carers and enables an assessment to be made of any such impact.

ADASS welcomes the new Commission on Carers, and expects inclusion of ADASS initial membership of this to be continued once formal appointments are made. The commission will oversee implementation in the long term, and ADASS can both inform the Commission of delivery progress and issues, highlighting good practice etc, as well as listen to the ongoing views of carers themselves, to ensure improvement is continued.

ADASS is keen to ensure that impact is effectively measured. The new performance framework must be developed to have a focus on outcomes, rather than process and ADASS will continue to provide leadership for this. In addition, it is vital that ongoing planning information continues to be available through the national census, and retention of a question for the 2011 census is critical to this.

10. Conclusion

ADASS is fully committed to working with Government departments and with our partners to construct and to deliver the Strategy and is pleased that issues have already been discussed and included in early consideration of the strategy. The involvement of carers in the development of the Strategy is entirely positive and constructive.

What is clear is that improvements in the quality of life for carers are achievable if the cross-Government approach is supported by all partners working together at a local level through Local Area Agreements. All agencies must commit to working together to enable carers to achieve the recognition and support they deserve.