

Worcestershire Health & Well-being Board

Worcestershire Carers Strategy Consultation

The Carers Strategy for Worcestershire - Carers at the Heart of Worcestershire's Families and Communities 2010 - 2014 is being refreshed. This document will set out the background to how Carers will be able to access support through various means and the commitments by stakeholders to support carers.

Please read through the [strategy document](#) and then answer the questions below by 8th March 2015. If you have any questions or queries, please contact Martin Heuter, Joint Commissioning Manager at mheuter@worcestershire.gov.uk

Please consider the following questions in relation to the Carers Strategy refresh 2015

Paragraph 9: this vision was developed with Worcestershire carers.

Do you agree or disagree with this statement?

Agree

Disagree

As the statement is consistent with the one in the previous version of the strategy, it can stay as it is. However, it would be helpful for it to feature earlier in the document, and to include an explanation about the fact that it's based on the previous one and is consistent with the national vision for carers.

Paragraph 10: Worcestershire's Commitment to Carers is based on what many carers in both Worcestershire and nationally have said that they want to see.

Do you agree or disagree with these statements?

Agree

Disagree

If you have any comments you wish to share with us please write them in the box below.

This paragraph sets out principles within which the strategy should be developed and implemented. As aspirational statements, carers tell us that they are happy with the principles, but they are concerned that there is no detail about how these will be measured or monitored, and little detail about what they mean in practice.

The paragraph does not make it clear that these are not just principles for WCC, but should be endorsed and applied by health bodies, e.g.CCGs, Acute Hospital Trust, Health & Care Trust and GP Practice staff. The Carers Charter is included as an Annex, but it's unclear how it relates to these principles, or how it will be used, promoted and evaluated.

Paragraphs 13-14: Information and Advice. This section suggests how the key stakeholders are proposing to ensure that carers have access to the right information and advice to continue to care and to have a life outside of caring.

Do you agree or disagree with these proposals?

Yes

No

We have concerns about the emphasis on information and advice being provided on line, and that paragraph 14 suggests that carers will only be supported to access the internet, rather than being supported to access information and advice in a format appropriate to them and their needs. Carers expressed concerns that whilst information from the internet may be helpful, they value 'person to person' contact for advice, and would like this advice to be independent.

Paragraphs 15-16: this section suggests how the key stakeholders are proposing to ensure that carers have the right support available to them. Do you agree or disagree with these proposals?

Agree

Disagree

If you have any comments you wish to share with us please write them in the box below.

Paragraphs 15 and 16 set out a very limited offer to carers for support in the community, focusing on access to services and carer groups. From our experience, we know that carer groups can be beneficial for some carers, but not for all, and very few groups are truly self-sufficient as many carers do not want to take on additional responsibilities in addition to their caring roles.

The paragraphs could usefully be expanded to include some of the other preventative services which help them to remain independent, many of which happen before an assessment. Carers were also concerned that emotional support is not included i.e having someone to talk to which they felt helped them to cope. They also said that they were unsure what would be in place to help them identify that they were in fact a carer - many just 'cope' for a long time before anyone helps them understand that they are a carer, and that information, advice and support is available.

**Paragraph 17: this section proposes a training programme for carers.
Do you agree or disagree with this proposal?**

Agree

Disagree

If you have any comments you wish to share with us please write them in the box below.

We agree with this proposal - feedback from carers on the training offer in Worcestershire has been good. There may be a need for some additional training on the Care Act and its implications.

**Paragraphs 18-19: this section proposes how Health and other partners will become 'Carer Aware' and support adult and young carers.
Do you agree or disagree with this section?**

Agree

Disagree

If you have any comments you wish to share with us please write them in the box below.

Whilst 'Carer Aware' training is useful, these paragraphs would benefit from more detail about how partners will be encouraged to use the training with staff. How will these organisations be held to account for how they use the training, and how 'Carer Aware' they really are? Will organisations, for example the Clinical Commissioning Groups, the Acute Hospital Trust, Health & Care Trust and WCC monitor and report on Carer Awareness?

We would like something included in the strategy about how employers will be encouraged to become 'Carer Aware' and support carers in the workplace

Paragraphs 20-23: this section talks about Social Care assessments for carers, a statutory duty under the Care Act. Please let us know your thoughts on how we intend to carry out these assessments.

We welcome the introduction of whole family assessments, with carers being able to opt for individual assessments if they choose to do so.

Without more detail, it is difficult to know how the assessment process will work in practice. On line assessments may be useful for some carers, but there need to be other options available.

Paragraph 24-25: personal budgets and direct payments. Please give us your views on our proposals.

Carers were unclear about what was meant by a personal budget for carers, as opposed to that for the people they care for.

It is not clear whether carers will be charged for services provided to them - whilst this is possible under the provisions of the Care Act, we believe it would be inadvisable for WCC to apply it. It would be helpful to have a specific statement about this in the strategy.

Carers were also concerned about what support would be available to help them through the assessment/Personal Budget/Direct Payment process - they felt that the process could be stressful and add to their responsibilities as a carer.

It might be helpful to distinguish between social care and health personal budgets, particularly as more carers are likely to seeking advice on the health version.

Paragraph 27: please give us your views on how you feel carers can be giving the commissioners and providers their views on proposals for service design and change in the future.

We believe that WCC should involve carers both in discussions about services and support for them and the people they care for at an individual level, and also when planning service developments. Carer involvement requires support - from a financial perspective, this may include enabling carers to attend meetings by providing replacement care and covering their travel costs. It also involves having resources in place to support carers to be involved - many official documents are difficult to understand and interpret, and good support makes these more accessible to carers who wish to be involved. Good carer

representatives are able to reflect the views of many carers, not just their own experience, and they often need to be supported in this role to be as effective as they can.

There is space here for any other comments/ suggestions you may have/ want to make.

Paragraph 28: We would like more information about what the engagement mechanisms will be, and how they will differ from what is currently in place. Whatever it's called, there needs to be a forum in place where carers and organisations can hold commissioners to account for the delivery of the strategy in line with the agreed principles, receive reports on achievement of outcomes, can raise issues with commissioners and can inform action plans and service developments

This list is not exclusive - there will need to be clear terms of reference in place to avoid the arrangement becoming meaningless, and to ensure that carers feel it will make a difference if they attend and participate.

Overall, the draft strategy is inaccessible to carers - even those who have read it say that they're unsure about what it will mean to them. They are unclear about whether services and support they currently have will change.

Response submitted by Worcestershire Association of Carers