



Social Services for Adults
Gwasanaethau Cymdeithasol i Oedolion



Commissioning Strategy

2006/09

Support for Carers

**This document is available in Welsh, large print, audio CD, BSL DVD, easy read and .pdf.
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Wrexham County Borough

Commissioning Strategy for Services for Carers (2006-2009)

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Summary

The Carers Commissioning Strategy brings together the main issues that affect informal carers, what we know of their needs and what our current support services are for carers. It sets out the steps that a partnership of relevant Departments of Wrexham County Borough Council, Health and organisations in the Voluntary Sector plan to take in addressing any gaps in service and in developing the most appropriate services to meet the needs of informal carers.

Definition of 'carer' :-

A Carer is defined in law as 'a person (aged 16 or over) who provides or intends to provide a substantial amount of care on a regular basis for an adult or a disabled child. The person may or may not be a relative and may or may not be living with the person for whom they are caring. A young carer is defined as any carer below the age of 18.' (Foster carers and carers of looked after children do not fall within this definition of 'carer')

Legal rights for carers

The Carers (Recognition and Services) Act 1995 gives carers the right to request an assessment as part of the community care assessment.

The Carers and Disabled Children Act 2000 gives carers the right to their own services and assessment regardless of a community care assessment.

The Carers (Equal Opportunities) Act 2004 gives carers the right to be informed and the rights to have work, lifelong learning and leisure included in the assessment

Carers UK

It is the local authority that has the overall legal duty to ensure that carers' rights are met. The local authority can provide the necessary publicity and services itself, or contract with voluntary or private organisations to provide on its behalf

Demographic Information for Wrexham county borough –population 128,476

- 14,875 people in Wrexham, representing 11.6% of total population, identify themselves as providing unpaid care
- 3,391 people representing 2.6% of total population identify themselves as providing unpaid care for 50+ hours per week
- 457 children and young people were identified as being young carers

(Population Census 2001)

Local carers can register with the North East Wales Carers Information Service (NEWICIS) and receive a regular newsletter of information – this can be utilised as a form of local register of carers. However, at present there are only approximately 380 on this register. There are around 60 children and young people in Wrexham county borough receiving services from the Wrexham NCH Young Carers service.

Strategic Context and Scope

This Strategy is the Department's response (in terms of its intentions with regard to support for carers) to the Health, Social Care and Wellbeing Strategy, (HSC&WbS) - the over-arching document guiding the strategic direction of social care services in Wrexham county borough.

The Commissioning Strategy for Carers addresses the local current and future support for carers, provided either directly by the statutory organisations or indirectly through their provision of funding to various voluntary organisations. These are services whose outcomes are specifically for carers, rather than for the cared-for (although we are aware of the direct benefit to carers of good quality services for those they care for).

Action Planned

The planned action is set out in the Action Plan under one overarching priority with three main outcomes to be achieved. Beneath this, three priority objectives for work are identified and a table of actions that the local partners intend to take towards achieving those main outcomes is set out.

The overarching priority is that ‘there is equity of access to a flexible range of support for all carers throughout the county borough’

The three main outcomes are that:-

1. more people recognise themselves as carers and claim their right to support
2. key professional groups have systems in place to identify carers and link them to support
3. there is a range of services that supports the emotional, mental and physical health of carers, including appropriate and flexible short term break provision

The Objectives for Action are to:-

1. increase the uptake of assessments
2. develop a flexible range of services to support carers
3. develop short term break provision to include family based support

Resources and Commissioning

Government policy has switched the focus of assessments from services to outcomes. Focussing on outcomes rather than specific services helps design and deliver support that can be more flexible to meet individual need.

To facilitate this development of flexibility in services and improve cost effectiveness, the Social Services Department (SSD) and the Local Health Board (LHB) intends to pool available monies that come either from core funding or W.A.G. grants and use it across traditional client groupings wherever appropriate. The Strategy identifies that there is a need to re-configure some services using recent research as a guide and this is more easily and effectively achieved if an overview of the bigger picture is taken. For some types of support there will be tenders put out to commission for new ranges and groups of services. The initial steps are outlined in the Purchasing Plan contained within the Strategy.

The partner agencies intend to work together to establish a Carers Centre in the town so that people can have easy access to information and more carers can be advised of their rights and supported in their role.

INTRODUCTION

Government legislation places duties and responsibilities on local authorities in respect of their citizens who provide informal, unpaid care to others. There are now several pieces of government legislation, the most recent coming into force in April 2005, that recognise carers as vulnerable people who are potentially at risk of suffering ill-health and social exclusion as a result of their caring responsibilities. The legislation gives carers rights to an assessment and support services for themselves and confers duties on local authorities in respect of these rights.

This Commissioning Strategy summarises the main issues that affect carers, what we know of their needs and our current support for carers. It sets out the steps the partner agencies plan to take in addressing any gaps in service and in developing the most appropriate services to meet carers' needs.

The Strategy brings together, up dates and develops information previously set out in the Wrexham Carers Strategy published in 2002. It has been informed by research by organisations such as Carers UK and by local consultations. The Strategy and the separate document, the Needs Assessment carried out for it, can therefore be used as source documents on data and information relating to carers both locally and nationally. The Needs Assessment is available on application to the SSD Planning and Commissioning Team.

SSD Planning and Commissioning Team

Approved WCBC Executive Board July 2006

Definitions:-

- A Carer is defined as 'a person (aged 16 or over) who provides or intends to provide a substantial amount of care on a regular basis for an adult or a disabled child. The person may or may not be a relative and may or may not be living with the person for whom they are caring. *'
- A young carer is defined as any carer below the age of 18.

Carers and Disabled Children Act 2000 and Carers (Equal Opportunities) Act 2004 Combined Policy Guidance, DoH August 2005

- foster carers and carers of looked after children do not fall within this definition of 'carer'

Context of Commissioning Strategy

Legal Context

The Carers (Recognition and Services) Act 1995 gives carers the right to request an assessment as part of the community care assessment.

The Carers and Disabled Children Act 2000 gives carers the right to their own services and assessment regardless of a community care assessment.

The Carers (Equal Opportunities) Act 2004 gives carers the right to be informed and the rights to have work, lifelong learning and leisure included in the assessment

Carers UK

Demographic Context

A new question in the 2001 population census asked whether each household member was a carer and if so to indicate how much unpaid care they provided; 1-19 hours per week, 20-49 hours per week or over 50 hours per week.

In Wrexham County Borough:-

- 14,875 people representing 11.6% of total population identify themselves as providing unpaid care
- 3,391 people representing 2.6% of total population identify themselves as providing unpaid care for more than 50 hours per week
- 457 children and young people were identified as being young carers
(*Population Census 2001*)

In Wrexham County Borough, carers are encouraged to register with the North East Wales Carers Information Service (NEWCIS) and then receive a regular newsletter of information – this can be utilised as a form of local register of carers. At present there are approximately 300 on this register.

There are approximately 60 children and young people in Wrexham county borough registered with the NCH Young Carers service.

Two significant trends in social change are that people have become separated from extended family members and women expect to have an equal choice in pursuing a career and full-time work. However, as can be seen from the statistics, it is still the cultural norm that female relatives undertake the informal caring role. These will have implications for developing services to support carers in that:-

- Women are such a key part of our local workforce
- Carers now have stronger rights to be supported in pursuing their careers
- Since the Wanless report, Government trends in health and social care policy are moving even more strongly towards care in the community

Economic Context

a) Savings carers make for public services:-

Research has been carried out to identify the financial value of informal carers by comparing their provision with a comparable cost in paid domiciliary care (see 'Background Information' for more detail). This shows that the cost of the average input of care informal carers provide is virtually the equivalent to that spent by the Government on health services:-

Average value of informal care provided in Wales	= £3.52 billion
Government expenditure on health in Wales	= £3 billion

b) Issues for local workforce:

People have a 3 in 5 chance of becoming carers at some stage in their lives. For women, this rises to a 50:50 chance by the time they are 59. People aged between 45 and 59 are the most likely to be carers. People often become carers with little or no warning. We know that the number of people in the older population will increase concurrently with a decrease by 8.2% of numbers of women aged between 35 and 55 ie a decrease in precisely that age group which includes the most numbers of both informal (unpaid) and professional care workers. These facts obviously have economic implications for our local workforce, particularly as the trend is for an increase of care in the community, potentially increasing reliance on informal carers.

Whether someone has grown up with a caring role, taken the role at short notice or gradually increased their caring responsibilities, caring impacts on a person's ability to seek or remain in paid employment. This fact has serious implications for the provision of services to support informal carers in the light of carers newly increased rights to be supported to work if they wish.

c) Financial costs to individuals and families:-

Numerous surveys reveal how caring carries significant financial risks for carers and their families e.g.

- nearly 8 out of 10 carers find they are financially worse off in becoming a carer
- after 5 years of providing substantial amounts of care, carers report their financial situation as being significantly worse.
(see 'Background Information' for further details).

Financial pressures carry the risk of social exclusion and add to the risks of stress and mental ill health already inherent in the role of caring.

Strategic Context

This Commissioning Plan supersedes the 2003 Carers Strategy and is the local partner's response (in terms of intentions with regard to support for carers) to the Health, Social Care and Wellbeing Strategy, (HSC&WbS) - the over-arching document guiding the strategic direction of social care services in Wrexham county borough.

The creation of the Health and Social Care Department within the Welsh Assembly Government is intended to push forward the Wanless agenda and to bring about much closer working between health and social services. This Carers Commissioning Plan therefore follows the key priorities agreed by the HSC&WbS Carers Programme Group and should be wherever possible developed jointly with partners and stakeholders.

A Joint Review of Wrexham Social Services was published in February 2004. This commissioning plan is in part a response to the recommendations made within this review.

Carers themselves point out that what counts most for them is good quality support for those they care for. Thus in supporting carers, this Plan needs to be read and developed in conjunction with other relevant Plans such as the Commissioning Plan for Services to Older People.

Scope and boundaries of this Strategy

This Commissioning Strategy summarises what we know from review of current support for carers. These are services whose outcomes are specifically for carers, rather than for the cared-for (although we are aware of the direct benefit to carers of good quality services for those they care for).

The Carers Programme Group of the Health, Social Care and Wellbeing Strategy (HSC&WbS) is concerned with the needs of all carers including Young Carers and their Action Plan is intended to be addressed as a joint inter-agency responsibility. Where needs of children are identified either for young carers or disabled children, the Programme Group transfers responsibility for addressing those across to the Wrexham Framework for Partnership.

This Commissioning Strategy supersedes the 2003 Carers Strategy and is the local partnership's response (in terms of its intentions with regard to support for carers) to the Health, Social Care and Wellbeing Strategy, (HSC&WbS) - the over-arching document guiding the strategic direction of social care services in Wrexham county borough.

It should be noted that there is a growing need to address transitional service issues relating to young carers becoming adult carers. The HSC&Wb Strategy Carers Programme Group currently maintains an overview of need and development of services for this group of people.

Need

National

A survey by Carers UK in 2003 found that “Chronic under-funding of social care is leaving carers to plug the gaps with significant consequences for carers – poor mental and physical health, no job prospects, strained relationships and even a disregard of their fundamental human right to family life”. Despite the spate of recent legislation and guidance, there is still evidence that “hard won rights have yet to deliver real choices for carers.” The Princess Royal Trust for Carers carried out research which found need to be grouped under 3 main areas:-

- Information
- Consulting and involving carers and carers assessments
- Carers health needs and local services

Local

Given the very low numbers of carers registered with services and known to the Department, the evidence of local need is limited. Fundamental to service improvement will be the development of information capturing systems and monitoring of information held by commissioned services

The HSC&WbS Carers Programme Group, in association with the Carers Forum identified 3 key areas that are considered fundamental in meeting the needs of carers:-

- Raising awareness
- Improving identification
- Increasing assessment rates

The Group’s 3–year Action Plan identifies three priority objectives, listed below, which are distilled from the results of the HSC&WbS Strategy Needs Assessment:-

- To increase the uptake of carers assessments
- To develop a flexible range of services to support carers
- To develop short-term break provision to include family based support

Summary of current services

The table of services below lists those available for carers locally that are known to the Carers Programme Group as being in receipt of public funds from the SSD or LHB or from the WAG Carers Grant and as such, services the Carers Programme Group can have some direct influence on. It should be noted that this is not a fully comprehensive list as there are other organisations that are independently funded and provide direct support in specialist areas.

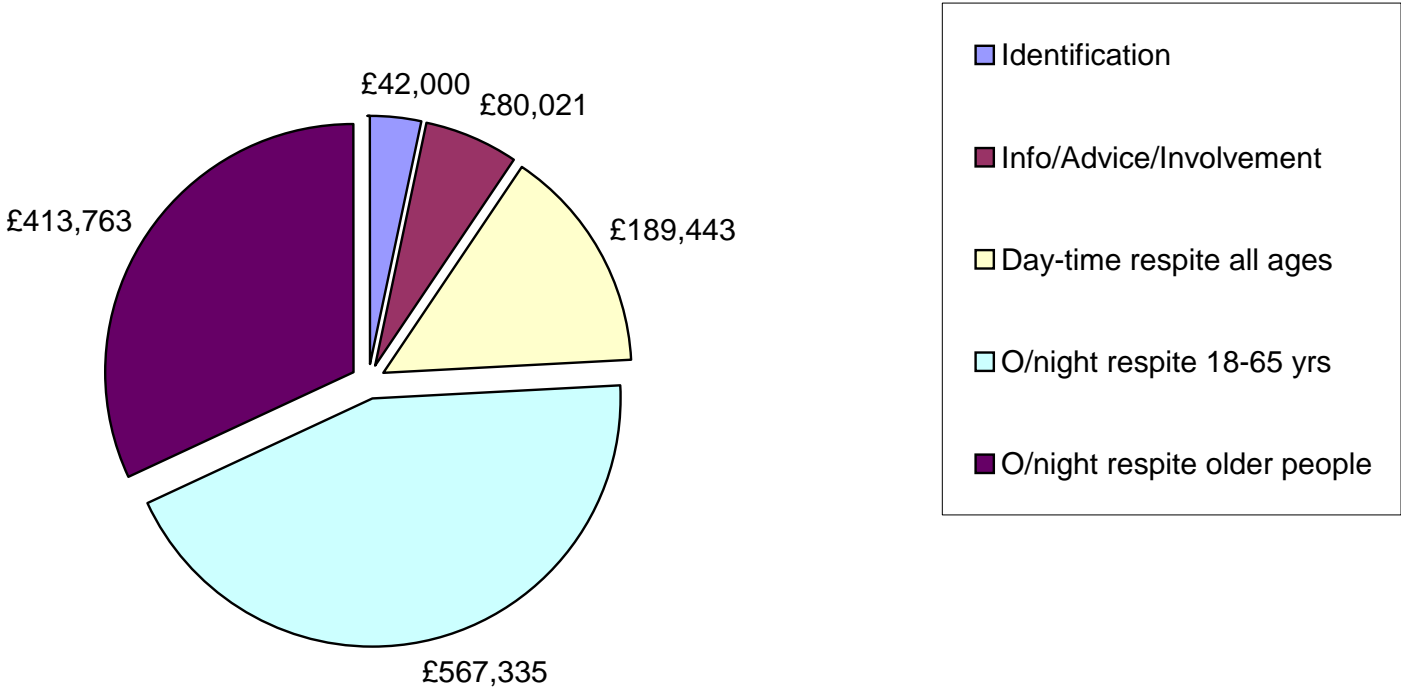
Summary Table of Current Services

Primary function	Info/ Advice/ Involmt.	O/night Respite	Daytime respite	Identific- ation	£'s p.a. (05-06 total)	Source of £'s: CG=Carers Grant; LA=LA grant; LHB=LHB grant; other = other grant SSD = core funding
Services available to all carers: £277,551 (CG=£153,304)						Total = £2,006,027
Carers Facilitation Officer				✓	35,000	£35,000 =CG
NEWCIS	✓				51,468	£21,502 =LA; £29,966=CG; £5,062=LHB
British Red Cross Home from Hospital			✓		25,821	£8,449 =LA; £2,000 =CG; £15,372 =LHB
British Red Cross Carers Card				✓	7,000	£7,000 =LA
SSD p/t Welfare Rights Officer	✓				15,000	£15,000 =CG
Crossroads			✓		129,709	£41,746 =LA; £41,543 =LHB; £46,420 =CG

Primary function	Info/ Advice/ Involmt.	O/night Respite	Daytime respite	Identific- ation	£'s p.a. (05-06 total	Source of £'s: CG=Carers Grant; LA=LA grant; LHB=LHB grant; other = other grant SSD = core funding
Wrexham County Forum (Learning dis only)	✓				13,553	£13,553 = SSD
Services specifically for carers of adults 18-65yrs - £ 601,248 (CG=£18,000)						
Hafal (mental ill health)			✓		33,913	£15,913 = LA; £18,000 = CG
G.A.T.E. short-term care house (phys dis)		✓			274,456	£274,456 = SSD
Short-term (ST) care houses x2 (l. dis)		✓			292,879	£292,879 = SSD
Services specifically for carers of older people - £413,763 (CG=£0)						
ST care in independent. residential care homes (older people)		✓			187,036	£187,036 = SSD
ST care in independent care homes (EMI)		✓			44,693	£44,693 = SSD
ST care in independent nursing homes (older people)		✓			39,660	£39,660 = SSD
ST care in independent nursing homes (EMI)		✓			15,974	£15,974 = SSD
Night sitting service		✓			126,400	£126,400 = SSD
Services for young carers or parent carers of children - £713,465						

Primary function	Info/ Advice/ Involvmt.	O/night Respite	Daytime respite	Identific- ation	£'s p.a. (05-06 total	Source of £'s: CG=Carers Grant; LA=LA grant; LHB=LHB grant; other = other grant SSD = core funding
(CG=£77,874)						
Dynamic (Daybreak childcare scheme)			✓		33,500	£30,000 = CG; £3,500 = other
NCH Young Carers			✓		55,152	£24,352 = LA; £30,800 = CG; £4,846=LHB
Homestart			✓		10,701	£10,701 = CG
Family friends for 5's to 11's			✓		6,373	£6,373 = CG
Tapley Ave short term care house		✓			607,739	£607,739 = SSD
Family Placement		✓			N/a	SSD on individ. basis - no discrete budget

**Generic Support to Carers and Support to Adult Carers (ie excluding young carers and parent carers of children)- all funding sources included as per table on previous page
Total = £1,292,562**



Evaluation

Issues arising from 2004 review of carer's services provided through the WAG Carers Grant:-

Services revealed weaknesses in the following areas, and therefore needed to:-

- focus more on meeting agreed prioritised outcomes for carers
- reach out and benefit as many as possible
- develop in response to monitoring feedback
- develop on the basis of agreed strategic direction
- deliver across the range of client groups
- deliver according to agreed standards
- be delivered on the basis of assessment

The review revealed a need for:-

- more holistic care planning with carers
- regular reviews of care plans
- wider publicity to reach hidden carers
- more information on services available

Priorities for Action

Based on the range of evidence and local evaluation, the local partnership over the next 3 years needs to:-

- a) **Raise awareness** of carers' rights amongst the public and professionals
- b) Strengthen and increase the distribution of **information for carers**
- c) Strengthen the **carers' assessment** process
- d) Develop an **audit cycle** to include information from carers assessments and the views of carers themselves
- e) Review and develop **short term break and respite care services**, both day-time and overnight, across all client groups
- f) Provide more **direct and practical or technical support** in people's own homes
- g) Improve the **support for employees** who are carers

Quotes from local carers

'His chronic condition is constantly changing which means that I can't leave him much...am restricted to where and when I can go out and everything needs planning...I feel the pressure of responsibility and am constantly tired...I worry that I may have an accident at home through being so tired and not concentrating'.*Daughter, married with baby and toddler, caring for father living with them – taken from Carers Assessment*

'I have general wear and tear on my spine which may affect my ability to care in the future...I suffer with high blood pressure and an under-active thyroid. The stress of dealing with everything wears me down' ..*Wife caring for husband – taken from Carers Assessment*

'I have never had anyone talk to me about my own feelings or needs – everyone is interested in how the cared for person is managing....My Carers Assessment has not been reviewed but my needs are changing - our son is a teenager now and my husband's condition is deteriorating, I have recently developed arthritis which created huge difficulties for us when I had to have an operation myself*Wife caring for husband –questionnaire completed at Carers Week Event*

'Without these services (SSD Home care and Crossroads) we could not manage. They give my wife comfort and myself some respite' ...*Husband caring for wife – questionnaire completed at Carers Week Event*

'In answer to my query as to what would happen if I complete the form (Carers Assessment) 'nothing' was the answer. As my time was stretched to and often beyond the limit, I did not follow it up'... *Husband caring for wife – questionnaire completed at Carers Week Event*

'A lot more attention should be paid by NHS professionals to carers views. They should be more open and honest with carers in providing information about patients and their condition.....There is poor communication between various departments and agencies. A massive amount of money is wasted on this and other red tape issues.'.... *Husband caring for wife - questionnaire completed at Carers Week Event*

'Any services that could take the strain off me and give me more time to be a family would help'...*daughter caring for father living elsewhere- – questionnaire completed at Carers Week Event*

'The social worker did not mention any support groups available in Wrexham. The list of services was 4 years old. When I asked about the new Act, I was told to phone AVOW, the number was in the book' *daughter caring for father living elsewhere-questionnaire completed at Carers Week Event*

'There needs to be support for siblings and support for parents to spend time with the siblings'..... *Carer giving feedback at Carers Week Event*

'Support needs to be flexible and not always about going out or being taken out'.....*Carer giving feedback at Carers Week Event*

'Carers views should be taken as a priority – they know what the cared for individual needs'
Carer giving feedback at Carers Week Event

Carers require opportunities for earlier input into planning and developing strategies affecting them in order to have a meaningful contribution*Carer giving feedback at Carers Week Event*

Aims and Vision

The Government's Beacon Authority Scheme (England only) has taken support to carers as the theme for 2005. The Advisory Panel bases its decision for the award on assessment against the following specific criteria (see 'Background Information' for more detail) which clearly, our own local services should also aspire to:-

- a) Clear outcomes
- b) User and community satisfaction
- c) Vision and strategy
- d) Consultation
- e) Partnerships
- f) Actions

By providing services that promote independence and choice and by providing flexible, responsive support for carers, the sustainable caring situation can be maintained. With appropriate support, carers are less likely to become marginalised while they care for someone and will be more able to return to work when their caring role ceases. *(DofH Carers web-site Sept 2005)*

In the development of this Commissioning Plan, the key components of services to carers within the Beacon Authorities have been identified and Wrexham aims to provide services to carers that are akin to those in the Beacon Authorities. It is these aspirations and the information from local and national research that have guided the identification of outcomes upon which commissioners will prioritise our service development.

Outcomes to be Achieved and Objectives for Action

Overarching Priority: That there is equity of access to a flexible range of support for all carers throughout the county borough

- Outcomes:-**
1. More people recognise themselves as carers and claim their right to support
 2. Key professional groups have systems in place to identify carers and link them to support
 3. There is a range of services that supports the emotional, mental and physical health of carers, including appropriate, flexible short term break provision

- Objectives for Action:-**
1. Increase the uptake of assessments
 2. Develop a flexible range of services to support carers
 3. Develop short term break provision to include family based support

Performance Indicators

As has been indicated above, work needs to be carried out to create a firm base on which to build up and develop services to support carers. Some of the areas or issues that could be measured to indicate progress have not been measured accurately to date.

Therefore an initial task is to establish baselines from which to measure progress where they do not already exist. This will be done from information gathered in the first quarter and we will then look to improve on these baselines in each subsequent quarter. Baselines will be set, and progress subsequently measured, on the indicators below.

Performance Indicators for which there are baselines:-	Baseline	Target March 07	%age Improvement
Number of carers registered with NEWCIS	400 (March 06)	500	25%
Number of nights of short-term breaks commissioned per 1,000 population aged 18 and over	141 (Dec 2005)	150	6%
Number of carers' cards registered (British Red Cross)	448 (Sept 05)	600	34%
Deliver briefing sessions on Carers issues to GP services	0 (March 06)	4	New
Number of carer identification systems in GP practices	0 (March 06)	4	New
Number of training sessions on Carers issues for assessment staff held in 2006/7	0 (2005/6)	3	New
Number of carers services tendered in 2006/7	0 (2005/6)	5	New

Performance Indicators for which baselines will be established by July 2006

- Number of queries from Carers received by Contact Assessment Team
- Number of families receiving short term breaks from the voluntary sector services (Adults)
- Number of families receiving short term breaks from SSD-run services (Adults)
- The percentage of identified carers of adult service users who were offered an assessment
- The percentage of identified carers of adult service users who had an assessment
- The percentage of identified carers of adult service users who had an assessment which was an assessment in their own right
- The percentage of identified carers of adult service users who were assessed who were provided with a service
- The percentage of identified carers of adult service users who are awaiting assessment

CARERS COMMISSIONING STRATEGY Action Plan 2007-08

Overarching Priority: There is equity of access to a flexible range of support for all carers throughout the county borough						
Outcome	<ol style="list-style-type: none"> 1. More people recognise themselves as carers and claim their statutory right to support. 2. Key professional groups have systems in place to identify carers and link them in to support. 3. There is a range of services that supports the emotional, mental, and physical health of carers including appropriate, flexible short term break provision. 					
Key Actions	Timescale (i.e. when this action will be completed)	Lead Officer (named individual, not a group)	Quarter 1 (what you expect to achieve by the end of Q1)	Quarter 2 Etc	Quarter 3 etc	Quarter 4 etc
Priority Objective1: Increase the uptake of carers assessments						
1. a) Current reconfigured Carers Information Service monitored and evaluated.	Full Report End March 08	KM	Monitoring template agreed <ul style="list-style-type: none"> • British Red Cross Carers Card reviewed • Forum for Learning Disabilities 	2 nd Quarter monitoring End September	3 rd Quarter monitoring End December	4thQuarter monitoring End March Year-end evaluation report received & feedback provided.

			<p>reviewed</p> <ul style="list-style-type: none"> • First Quarter monitoring <p>End June</p>			
<p>b) New Carers Information Service commissioned with 3-year contract.</p>	<p>End March 08</p>	<p>KM</p>	<p>As above</p>	<p>Tender agreed</p>	<p>Tender advertised</p>	<p>Commissioned Service</p>
<p>c) Carry out an awareness raising exercise across Wrexham County Borough Council to encourage employees who are carers to register with the Carers Information</p>	<p>End September 07</p>	<p>KM</p>	<ul style="list-style-type: none"> • Development of publicity material. • Programme of distribution/ sessions agreed 	<ul style="list-style-type: none"> • Awareness sessions carried out 	<p>Evaluation</p>	

Service and claim rights to assessment and support						
d) Identify options for the development of a town located Carers Centre	End March 08	KM/SR	Exploration of options	Options agreed	Consultation.	Final option agreed.
Priority Objective 2: To develop a flexible range of services to support carers						
2. a) Protocol for Primary Health Care staff developed by the Carer Facilitation Officer formally agreed and implemented	End March 08	CN	Draft Protocol developed.	Consultation on draft protocol	<ul style="list-style-type: none"> • Revised protocol. • Formal agreement • Monitoring & Evaluation mechanisms agreed 	Implementation

<p>b) Unified Assessment System developed to improve the identification of and offers of assessment and support to carers by all Health and Social Care professionals</p>	<p>End March 08</p>	<p>SF</p>	<ul style="list-style-type: none"> • Re-engage with SF • Re-visit Carers Domain 	<p>Assess effectiveness of data collection of no. of Carers Assessments offered & undertaken</p>		
<p>c) Build upon the NEWCIS Hospital Admission and Discharge Survey 2006 to improve the identification and support of carers by key hospital –based staff.</p>	<p>End March 08</p>		<p>Research Project to evaluate compliance with policy to agreed discharge</p>	<ul style="list-style-type: none"> • Data collection commenced • Data collected End Sept 		<ul style="list-style-type: none"> • Evaluation Report (End January) • Recommendations agreed (End February)

d) Monitor, evaluate and develop the SSD Protocol for the assessment of Carers, to include mechanisms for capturing unmet need & reviews of carers assessment.	End March		Monitoring & evaluation systems appraised (RAISE)	Protocol reviewed	Consultation on draft protocol	Robust data collection system in place to capture – <ul style="list-style-type: none"> • No. of Carers Assessments offered & undertaken. • Annual Reviews undertaken. • Outcomes identified. • Unmet need data captured.
g) The NE Wales Carers Information Service and the British Red Cross are monitored and evaluated on the creation of a single register of carers.	End December 07		<ul style="list-style-type: none"> • British Red Cross Carers Card reviewed • NEWCIS Carer Register reviewed 	Consultation Recommendations agreed	Service identified	
e) Agreed service to keep	End March 08					<ul style="list-style-type: none"> • One register established.

register of carers and develop emergency back up planning system						<ul style="list-style-type: none"> Option for Emergency care plan system explored.
f) Build upon the transitional (young adult carer) specification (PRTC bid) to develop a service for Wrexham						
Priority Objective 3: Development of short term break provision to include family based support						
3. a) Undertake the processes identified in the SSD Short Term Overnight Break Action Plan.		KM				
b) Undertake the processes		Ben Carter	submission of report			

<p>identified in the SSD Day Care Action Plan</p>		<p>SSD</p>				
<p>c) Formally receive, adopt and progress the report into the support for the emotional well-being and mental health of carers commissioned with the Mental Health Carers Grant 2006/07, including the need to reconfigure and re-commission service.</p>		<p>MH</p>	<p>Receive Report</p>			

<p>d) Progress remaining Actions from the Carers Purchasing Plan:</p> <p>a. comprehensive financial advice and support for carers, including benefits advice, debt management and the availability of a small grant scheme</p> <p>b. Advice and support regarding work and training opportunities for carers to</p>		<p>KM/SR Provider Group</p>		<p>Provider Group to agree two actions</p>		
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<p>remain in/return to/change employment.</p> <p>c. advice and support from therapists for carers (SALT, Physiotherapy & Occupational Therapy)</p> <p>d. provision of IT and Assistive technology in individual homes</p>						
<p>e) Service Establish a Provider Network</p>			<ul style="list-style-type: none"> • Inaugural meeting • TOR agreed 	<p>Workplan agreed against above action (3d)</p>		<p>Evaluate progress</p>

<p>f) Monitor, evaluate and progress the development of the Carers Forum and associated mechanisms for consulting and involving carers by the Carers Information and Support Service.</p>		<p>KM/SR</p>	<p>Establish mechanism for Carer Information & Support Service to consult with Carers and other organisation supporting carers</p>			
<p>Financial costs / risks</p>	<p>1. Financial risk to entire Action Plan due to lack of resources and commitment to fund change</p>					
<p>Non-financial risks</p>	<p>1. a) Service non-compliance with agreed outcomes. Potential disabling of organisations unless robust review of BRX and the Forum undertaken b) Lack of agreement on tender, Tendered 'bids' not at an acceptable level/ c) Lack of recognition, employees remain 'hidden' d) Lack of agreement by organisations to re-locate if appropriate [risks here in relation to each action]</p> <p>2. a) Acceptance by all staff in all GP Practices required</p>					

Key: KM – Kate Meredith
SR – Sally Rees
CN – Chris Nordoff (Carers Facilitation Officer [CFO])
MH – Maureen Howell
SF – Sue Fitton

8. Purchasing Plan: Services are commissioned to provide positive health and well-being outcomes for carers and provide best value				
Services required	Services funded in 2005-6	Action 2006/7	Action 2007/8	Action 2008/9
<p><u>A: Provision of information:</u></p> <p>1. Provide, review and up-date the Carers Information Pack and distribute up-dates.</p> <p>2. Provide & replenish stocks of Information Packs, posters and leaflets held at key venues.</p> <p>3. Publishing and distributing quarterly Carers Newsletter.</p> <p>4. Providing a staffed base suitable for public access to facilitate Carers dropping in for low-level peer support and information sharing.</p> <p><u>B: Facilitate and support the involvement of Carers in service planning & delivery:</u></p> <p>1. Facilitate the Carers Forum within the HSC&WB Strategy Framework.</p> <p>2. Representing Carers' interests in</p>	<p><i>NEWCIS - £51,468 (incl. £5,062=LHB).</i></p> <p><i>* N.B. - Wrexham County Forum also represents Carers of people with a learning disability within the LD</i></p>	<p>Tender for one organisation to deliver services A,B,C, E, F1, J1</p>	<p>Commence new contract.</p>	<p>Centralise within the Carers resource centre.</p>

<p>key fora e.g. HSC&WB Programme Groups *</p> <p>3. Develop the Carers Network as a mechanism of involving carers in monitoring and planning services.</p> <p><u>C: Awareness raising of Carers issues amongst the public:</u></p> <p>1. Promote awareness raising by facilitating one public event per year during National Carer's Week.</p> <p>2. Maintaining a database/ register of carers via self referrals and referrals from GP practices, social services department and integrated teams etc.</p>	<p><i>Programme Group.</i></p> <p><i>- Alzheimer's Society represents Carers of people with dementia within the MH & EMH programme groups (£10k)</i></p> <p><i>- Age Concern represents Carers of older people within the OP programme group (£21,218)</i></p>			
<p><u>D: Reduce the economic impact of the Caring role:</u></p> <p>1. Dedicated Welfare Rights/ Benefits advisory service for Carers.</p> <p>2. <i>Financial and Debt management advice for carers.</i></p> <p>3. <i>Dedicated advisory service</i></p>	<p><i>£15k SSD Welfare rights team.</i></p> <p><i>NOT CURRENTLY AVAILABLE</i></p>	<p>D1 - review the capacity required for this service.</p> <p>Maintain current service</p>	<p>D2, 3 - review the capacity & access of other generic services</p>	<p>D 1, 2, 3 - centralise within the Carers resource centre.</p>

<p>regarding work and training opportunities for carers to remain in/return to/change employment</p>	<p>NOT CURRENTLY AVAILABLE</p>		<p>(e.g. CAB) to meet this need.</p>	
<p><u>E: Direct Support to Carers (informal support to individuals & groups):</u> Facilitation of regular support groups</p> <ul style="list-style-type: none"> - Generic - Specific 	<ul style="list-style-type: none"> • <i>NEWCIS (within above funding allocation for generic groups).</i> • <i>Wrexham County Forum for learning disability groups.</i> <i>Hafal (for mental health groups) - £33,913..</i> 	<p>Tender for one organisation to deliver services A,B,C, E, F1, J1</p>	<p>Commence new contract.</p>	<p>Centralise within the Carers resource centre.</p>

Services required	£ 2006-07	Action 2006/7	Action 2007/8	Action 2008/9
<p><u>F: Improving/ supporting the health & well-being of Carers:</u></p> <p>1. Negotiating, co-ordinating and publicising programme of one-off training sessions for Carers.</p> <p>2. Deliver an annual training programme for Carers.</p> <p>3. Involve Carers in planning & delivery of training to social care staff.</p> <p>4. <i>Services to alleviate stress and depression in individual carers</i></p> <p>5. <i>Dedicated Occupational therapy advice for individual carers</i></p> <p>6. <i>Dedicated Physiotherapy advice for individual carers</i></p>	<p><i>Hafal & NEWCIS within above funding allocations</i></p> <p><i>Social Services Department (within HR/training budget).</i></p> <p><i>NOT CURRENTLY AVAILABLE</i></p> <p><i>NOT CURRENTLY AVAILABLE</i></p> <p><i>NOT CURRENTLY AVAILABLE</i></p>	<p>Tender for one organisation to deliver services A,B,C, E, F1, J1</p> <p>F2, 3 - deliver through SSD training plan & Develop options appraisal with other training providers.</p>	<p>F4, 5, 6 - develop options appraisal.</p>	
<p><u>G: Awareness raising within primary care services:</u></p> <p>1. Designing and delivering awareness raising to staff at GP practices and pharmacies.</p> <p>2. Negotiating and developing mechanisms for identifying Carers within GP practice records.</p> <p>3. Promoting assessment of Carers needs within GP practices.</p>	<p><i>£35,000 within SSD Contact Assessment Team (CAT) for a Carers Facilitation Officer.</i></p>	<p>Fund post till end March 2008</p>	<p>Fund post till end March 2008.</p>	

<p><u>H: Awareness raising (corporate):</u></p> <p>1. Designing and delivering awareness raising to relevant staff across agencies.</p>	<p><i>£35,000 within SSD Contact Assessment Team (CAT) for a Carers Facilitation Officer.</i></p>	<p>Fund post till end March 2008</p>	<p>Review post & determine need for future awareness raising.</p> <p>Negotiate integration within corporate training plans.</p>	
<p><u>I: 1:1 support for Carers on individuals with mental health needs:</u></p> <p>1. Provision of 1:1 support to provide positive /therapeutic support to cared for whilst providing break for carer.</p>	<p><i>Proposed (1 year ring- fenced) £125,000 CG(MH) - WAG criteria to be finalised</i></p>	<p>Agree model of service delivery & commission service - priority to young carers of people with m. h. needs and carers of people with dementia/ older people with m.h. needs. Recommend</p>	<p>Review equitability of 1:1 support services across all carer groups + determine a plan to ensure fair access.</p>	<p>Commence new contract for 1:1 support service.</p>

		funding is ring-fenced for carers in future years	Tender for 1:1 support svcs	
<p><u>J: Emergency support for Carers:</u></p> <p>1. Maintenance of a register of Carers and key contacts/ care instructions in case of emergency (linked to Care-Call).</p> <p>2. Short term and emergency domiciliary at-home night care service for cared-for people.</p>	<p><i>British Red Cross £7,000</i></p> <p><i>SSD night sitting service = £126,400</i></p>	Tender for one organisation to deliver services A,B,C, E, F1, J1	Commence new contract.	
<p><u>K: Intermediate care & support (post hospital discharge):</u></p> <p>1. Home from Hospital scheme.</p> <p>2. Wheelchair loan scheme</p>	<p><i>British Red Cross £25,821 (incl. £15,372 =LHB)</i></p> <p><i>NOT CURRENTLY FUNDED</i></p>	<p>1. Tender service and increase volume.</p> <p>2. Review access to & funding for wheelchair loans service.</p>	1. Commence new contract.	
<p><u>L: Short term care services:</u></p> <p>1. Day-time Home based Sitting/befriending service for cared-for people.</p> <p>2. Adult Placement Scheme</p> <p>3. Over-night (residential) planned short term care service for cared-for people.</p>	<p><i>Crossroads - £129,709 (incl. ££41,543 = LHB) £50,000 SSD.</i></p> <p>PhDis £274,456</p> <p>LDis 292,879</p> <p>Ind res 187,036</p> <p>Ind Nurse 39,660</p>	<p>L1 - tender service following review of level of service required.</p> <p>L2 - commence SSD pilot project.</p> <p>L3 - Block contract</p>	<p>L1 - Commence new contract.</p> <p>L2 -evaluate pilot &</p>	

	Ind res EMI 44,693 Ind NseEMI 15,974.	for EMH residential & nursing short term care within a care home.	identify future need for residential short term care provision	
M: Establishment of a Carers Resource Centre in the town		Options Appraisal to be completed	Start-up grant to be sought	Secure accommodation & tender for service provider to deliver A,B,C, E, F1, J above.

CONSULTATION PROCESS

In order to gain a consensus of thinking in relation to our assessment of need and our priorities for development, we undertook a period of consultation with key stakeholders, spanning October 2005 to January 2006.

We invited consultation responses on the content of the document and specifically in relation to the following:

1. Analysis of local need. [Further evidence of local need received from individuals and organisations supporting carers].
2. Proposed outcomes for commissioned services. [Evidence of additional outcomes required by carers within Wrexham].
3. Gaps in services. [Evidence of other gaps in services and unmet need].
4. The draft implementation plan. We specifically asked respondents to identify the top 5 priorities for action within this plan and identify any other development areas not identified within the draft implementation plan for 2006/7

In addition, we requested that individuals and organisations provide detailed and evidence based evaluation of services to Carers in Wrexham – how have services in Wrexham improved quality of life, or the quality of life for the person cared for?

The Draft plan was distributed widely on a multi-agency basis. Actual consultations took place with:-

1. All Adult Services Teams within the Social Services Department (21, including joint community teams such as mental health)
2. The Carers Programme Group of the Health, Social Care and Well-Being Strategy
3. The Carers Forum of the Health, Social Care and Well-Being Strategy
4. The Carers Network supported by NEWCIS
5. The Children and Young People's Voluntary Sector Forum
6. The Health and Social Care Voluntary Sector Forum
7. The Children with Complex Needs Sub-Group of the Wrexham Framework for Partnership
8. The Older People's Programme Group of the Health, Social Care and Well-Being Strategy

MONITORING PROCESS

The progress of the annual implementation plans will be overseen by:

- i) Quarterly meetings of the Social Services Management Team.
- ii) The Council's Social Affairs, Health & Housing Scrutiny Committee and
- iii) Regular reporting to the Health, Social Care and Well-being planning partners through the Carers Programme Group.

It is anticipated that a multi-agency steering group will meet at least bi-annually to develop the implementation plans for 2007/8 and 2008/9 and to revise the commissioning strategy for 2009/10.

The Welsh Assembly Government are developing national performance indicators for social services in Wales, proposed to take effect from April 2006 and is anticipated that Carers Assessment and services to Carers will be key performance requirements. The Department reports quarterly on its performance overall against locally and nationally determined targets and produces an annual performance report.

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- In Poor Health: the impact of caring on health (2004)
- Hearts and Minds: the health effects of caring (2004)
- Without us: calculating the value of carers support (2002)
- Missed Opportunities: the impact of new rights for carers (2003)
- Young Carers in the UK (2004)
- Redressing the Balance: inclusion, competitiveness and choice (2001)
- Adding Value: carers as drivers of social change (2002)
- You Can Take him Home Now: experiences of hospital discharge (2001)
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