

**NHS VALE OF YORK CLINICAL
COMMISSIONING GROUP**

SHADOW GOVERNING BODY MEETING



Vale of York
Clinical Commissioning Group

Meeting Date: 7 February 2013

Report Sponsor:

Dr Cath Snape
Management GP Governing Body Member

Report Author:

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Yorkshire and York

1. Title of Paper: North Yorkshire Carers Strategy

2. Strategic Objectives supported by this paper

Achieving meaningful engagement with patients, carers and their communities.

3. Executive Summary

The purpose of this paper is to:

- Inform the CCG of the development of the North Yorkshire Carers Strategy
- Seek approval for the sign off of the strategy
- Inform the CCG of the current spend (NHS) on Carers services
- Seek a view on the approach to be taken in developing and implementing the plans to implement the strategy

4. Evidence Base

- Operating Framework 2012/13 Department of Health, November 2011
- Equality Act 2010: Specific duties to support the Equality duty. A quick guide for public sector organisations, October 2011

5. Risks relating to proposals in this paper

None.

<p>6. Summary of any finance / resource implications</p> <p>No financial implications at this stage. Any recommendations within the Action Plans to implement the strategy that have financial implications will be brought back to the CCG for a decision.</p>
<p>7. Any statutory / regulatory / legal / NHS Constitution implications</p> <p>By publishing the strategy and the relevant information on funding and carers breaks by 30 September 2012, the PCT Cluster / CCGs and Local Authorities have met the requirement within the Operating Framework. However, there will be a requirement to update on progress, finalise the strategy and ensure implementation.</p>
<p>8. Equality Impact Assessment</p> <p>Not applicable.</p>
<p>9. Any related work with stakeholders or communications plan</p> <p>North Yorkshire County Council and NHS North Yorkshire and York Cluster produced a communications plan for the consultation process.</p>
<p>10. Recommendations / Action Required</p> <p>The Shadow Governing Body is asked to:</p> <ul style="list-style-type: none"> • Approve the process for sign off of the strategy. • Approve the named carers lead (Dr Cath Snape). • Discuss and agree the approach for implementation with other NY CCGs.
<p>11. Assurance</p> <p>The Shadow Governing Body will be provided with updates as necessary.</p>

NHS VALE OF YORK CLINICAL COMMISSIONING GROUP

Shadow Governing Body Meeting: 7 February 2013

North Yorkshire Carers Strategy

1. Introduction and Purpose

The purpose of this paper is to:

- Inform the CCG of the development of the North Yorkshire Carers Strategy
- Seek approval for the sign off of the strategy
- Inform the CCG of the current spend (NHS) on Carers services
- Seek a view on the approach to be taken in developing and implementing the plans to implement the strategy.

2. Background Information

- 2.1 As part of *The Operating Framework for the NHS in England 2012/13*, PCT clusters need to agree policies, plans and budgets with local authorities and voluntary groups to support carers, where possible using direct payments or personal budgets. For 2012/13 this means plans for carers across North Yorkshire and York should be in line with the 2010 document *Recognised, valued and supported: next steps for the Carers Strategy*
- 2.2 NHS North Yorkshire and York (NHS NYY) has been working with North Yorkshire County Council (NYCC) and Carers Services to develop a Carers Strategy for North Yorkshire residents, Appendix A, and available at <http://www.nyypct.nhs.uk/AdviceInformation/Carers/index.htm>. To inform the strategy, members of the public and staff were asked to give their views on carers issues via questionnaires and focus groups. Two hundred people responded.
- 2.3 The Strategy went out for formal consultation from 20 August 2012 to 16 September 2012. As approval is needed to sign off the strategy the Governing Board are asked to either sign off the strategy or delegate authorisation to a named member of the CCG to review any amendments and sign off on behalf of the CCG.
- 2.4 The data on the overall spend by NHS NYY and the Local Authorities has been collated. This is Appendix B and is available on the NHS NYY website at <http://www.nyypct.nhs.uk/AdviceInformation/Carers/index.htm>. The following Vale of York CCG spend should be noted:

The Carers Centre in York (support for both Adults and Young Carers)	£81,153
Carers Service in Selby	£18,524
Carers Service in Hambleton and Richmondshire (which provides service to Easingwold)	a proportion of £47,700
Sitting services including: Crossroads in York	£29,092
Voyage in Selby	£28,552

This does not include any funding from Continuing Health Care for the cared for person that gives the carer a break from their caring role.

3. Key Issues

3.1 The Strategy includes:

- The Vision for Carers in North Yorkshire
- National and local context
- Feedback from the 'engagement exercise' to determine peoples views.
- How we are going to implement the strategy (in broad terms).
- Links to supporting documentation

3.2 What the strategy does not include:

- The detail of actions needed to implement the strategy
- Commitment to any funding implications to implement the strategy
- Commitment to ongoing or an increase in funding for carers services.
- Names of those within the CCGs who will be involved in the next stage.

3.3 CCG Sign Off

The following CCGs have agreed to sign off the strategy:

- Airedale Whafedale and Craven
- Harrogate and Ripon District
- Hambleton Richmondshire and Whitby
- Scarborough and Ryedale

All are keen to have greater involvement in the implementation and development of an Implementation Plan.

At the monthly CCG meeting attended by the Interim Chief Officers it was agreed that Carers issues will be managed by the CCGs and one CCG was to lead on behalf of all in the discussions with NYCC on the implementation of the strategy. It has not been agreed which CCG and which named officer will take this role.

4. Implications/Risks

4.1 To adopt the strategy – none

4.2 If the strategy is not adopted there is a high risk of damaging relationships with partner organisations, bad publicity and staff time in responding to communications in relation to the decision. This may result in poorer services for carers if there is a reduction in partnership working.

4.3 *Quality*

The strategy aims to improve the quality of services provided to carers.

4.4 *Financial*

No financial implications at this stage. Any recommendations within the Action Plans to implement the strategy that have financial implications will be brought back to the CCG for a decision.

4.5 *Constitutional and Legal*

By publishing the strategy and the relevant information on funding and carers breaks by the 30 September 2012, the PCT Cluster / CCGs and LAs have met the requirement within the Operating Framework. However, there will be a requirement to update on progress, finalise the strategy and ensure implementation.

4.6 *Equality and Diversity*

The strategy aims to ensure that all carers who are recognised as those with protected characteristics can access support including carers services.

5. **Conclusions**

National requirement to have plans in place. Sign off of the strategy will ensure this requirement is met. Ongoing commitment to develop an action plan to implement the strategy, and agreement between CCGs as to how this will be managed is required.

6. **Recommendation**

The Governing Board is asked to:

- 6.1 Approve the process for sign off of the strategy.
- 6.2 Approve the named carers lead (Dr Cath Snape).
- 6.3 Discuss and agree the approach for implementation with other North Yorkshire Clinical Commissioning Groups.

References

- Operating Framework 2012/13 DH Nov 2011
- Equality Act 2010: Specific duties to support the Equality duty. A quick guide for public sector organisations. Oct 2011.
- **A joint carers strategy** document has already been produced and previously approved in August 2011 by City of York Council and NHS North Yorkshire and York for 2011-15 and is available on-line at: <http://www.nyypct.nhs.uk/AdviceInformation/Carers/index.htm>

North Yorkshire carers strategy **supporting unpaid carers in North Yorkshire** **2012-2015**

Foreword

We estimate that there are 56,000 unpaid carers in North Yorkshire; this includes family members, friends and neighbours. These carers provide vital help to vulnerable people of all ages, enabling people to remain in their own homes for longer. We understand that carers do this out of a desire to support their loved one in living an independent life. But, they often do it to the detriment of their own health and wellbeing.

We recognise that carers play a vital role in our communities and this strategy identifies a number of ways in which we intend to support carers in the future. In writing this plan we have brought together the principles of national legislation, listened to the views of our local voluntary and statutory organisations and engaged with carers in our local communities to understand their needs.

The proposals in this strategy include reaching out to more carers and ensuring they receive the right support, our continued commitment to ensuring that carers receive breaks and protecting the mental and physical health of carers. We also intend to give carers more control over the services they receive through the introduction of Personal Budgets for carers.

This strategy will be implemented over a three year period through a detailed implementation plan. We will continue to work closely with our partners in the voluntary, independent and statutory sectors and carers themselves to ensure their full involvement in the long-term delivery and success of this strategy.

In times of significant change, in both health and social care, this strategy represents our joint commitment to the recognition and long-term support of carers in North Yorkshire.

Signatures

To include Richard Flinton, (Helen Taylor, Cynthia Welbourn) and the 5 CCG representatives

1. Who are Carers?

'A carer spends a significant proportion of their life providing unpaid support to family or potentially friends. This could be caring for a relative, partner or friend who is ill, frail, disabled or has mental health or substance misuse problems.' (*Carers at the heart of 21st century families and communities* -HM Government 2008).

This strategy also talks about young carers and by this we mean:

'A young carer is a child or young person under the age of 18 carrying out significant caring tasks and assuming a level of responsibility for another person, which would normally be taken by an adult.' (*Princess Royal Trust for Carers*).

Parent carers are also highlighted in this strategy. A parent carer is a parent or guardian that is likely to provide more support because their child is unwell or has a disability. Parents will often see themselves only as a parent rather than a carer, but if their child has additional care needs, they may be entitled to additional services.

2. National Information

In 2008, the Department of Health published 'Carers at the heart of 21st century families and communities: A caring system on your side. A life of your own'. This was followed by 'Recognised, valued and supported: Next steps for the Carers Strategy' in 2010, produced by the coalition government. Both documents highlighted the government's commitment to supporting unpaid carers.

In November 2011, the Department of Health published the 'Operating Framework for England 2012/13'. Within this, carers are recognised as playing an important role 'in our system' and it is highlighted that 'they must receive help and support from local organisations.'

This framework requires Primary Care Trusts (PCTs), Local Authorities and voluntary sector groups to agree and sign off plans and approve budgets by September 2012.

The Carers Strategy outlines the plans that will be implemented over the next three years in North Yorkshire.

The government also produced the 'Caring for our future: reforming care and support' White Paper in July 2012. This proposes to extend the right to have an assessment to more carers and to give carers a clear entitlement to support for their own well-being. These proposals are currently under consultation and will return to parliament in 2013.

3. Carers across the UK

3.1 Facts:

- There are almost six million carers in the UK - that is 1 in 10 people.
- Over the next 30 years, the number of carers are expected to increase by 3.4 million (around 60%).
- Carers are estimated to save the Government between £67 billion and £87 billion a year. This figure has been revisited by Carers UK this year and now stands at £119 billion.
- Approximately 42% of the UK's carers are men and 58% are women.
- 1.25 million carers care for over 50 hours a week.
- Over-65s currently account for one third of all carers, providing more than 50 hours of care a week.
- At the time of the 2001 Census there were 56,065 carers in North Yorkshire. This included more than 800 carers under the age of 16, more than 10,000 carers providing 50 hours or more care per week over 4,000 of whom are over the age of 60.
- In North Yorkshire during 2009/10 there were over 6,000 carers assessed or reviewed in the year with just under 4,000 receiving services.
- The four Carers Centres supported in excess of 5,000 adult carers in 2011.

3.2 Young carers across the UK

The 2001 census identified 175,000 young carers in the UK but the figure is likely to be significantly higher. Statistics published by the BBC show that the UK has a 'hidden army' of hundreds of thousands of young people responsible for the care of other family members.

If the survey, which analysed data collected from 4,029 pupils at 10 secondary schools, is reflected in the UK as a whole, it is estimated that there could be approximately 700,000 young carers.

It has been highlighted that:

- 13,000 people care for over fifty hours a week.
- 50,000 children and young people look after someone with a mental health problem in the UK.
- 68% of young carers are bullied at school

(*Supporting Carers: The Case for Change 2011* – Princess Royal Trust and Crossroads Care).

4. How we wrote this strategy

4.1 This strategy has been informed by national and local guidelines, evidence and good practice. We were also keen to listen to the voice of local carers. Between April and July 2012 we asked members of the public to tell us what they thought about the way in which we support carers in North Yorkshire and how we could improve in the future. We created a

questionnaire and made it available to as many people as possible by printing the document and also publishing it online. People were also invited to attend focus groups which were held across the county. This gave people the opportunity to discuss issues in a supportive group of other carers and staff from voluntary organisations.

4.2 The questionnaire was written by North Yorkshire County Council (NYCC), NHS North Yorkshire and York (NHS NYY), the Carers Resource Centres and the North Yorkshire Carers Forum.

There was a good response, with approximately 200 people taking part by either completing a questionnaire or attending a focus group. 142 people identified themselves as either male or female and we found that 20% were male and 80% were female. 141 people identified their age range and from those who responded, 65% were under 65 and 35% were over 65. There was a significant difference here, with the majority of under 65's responding to the online survey. Out of the 153 people who completed the section 'About you' 65% were adult carers of adults, 10% were parent carers, 9% were GPs or healthcare professionals, 8% were voluntary sector workers, 3% were social care workers and 6% had answered 'other'.

4.3 To enable young carers to give feedback, a short questionnaire (with seven questions) was circulated to the Carers Resource Centres in North Yorkshire for either individual or groups of young carers to complete. 25 forms were completed and returned, with a mix of individual and group responses.

4.4 We developed this strategy using the information that people gave to us. This was done in partnership between:

- NHS North Yorkshire and York.
- North Yorkshire County Council (Adults and Children's services).
- Hambleton and Richmondshire Carers' Centre.
- Harrogate and Craven Carers' Resource.
- Scarborough, Whitby, Ryedale Carers' Resource.
- Selby Carers' Centre.
- Action for Children.
- North Yorkshire Carers' Forum.

5. What is our Vision for Carers in North Yorkshire?

From listening to what people have told us we want to continue to make services and support better for carers in North Yorkshire.

Our vision is to have carers in North Yorkshire recognised and valued as being fundamental to strong families and communities. Support will be tailored to meet individual's needs, enabling carers to maintain a balance between their caring responsibilities and a life outside their caring role, while enabling the person they support to be a full and equal citizen.

(Taken from 'Recognised, valued and supported: next steps for the carers strategy' 2010)

6. What did people tell us and what do we intend to do in the next three years?

Throughout the consultation we asked questions relating to key themes. These themes were taken from the national strategies and were also topics that we thought were important locally. Below we have identified responses relating to each theme, followed by our plans to make improvements.

6.1 Identification, recognition and involvement of carers

What people told us:

42 people said that they often do not recognise themselves as carers because this is seen as being a family duty. 20 people said they see themselves as a family member first and 19 people said that the caring role was something that happened gradually over time. Many carers (25) told us that they did not like to ask for help because they were proud - they saw this as a loss of control or felt that they might be judged. Some people also felt that there would not be services that were appropriate for them.

People told us that they didn't access carers support services for a number of reasons. 36 people said that this was because they weren't aware that services existed or that they just did not have the time or were too tired to access services (27 people). 29 people did not want to be seen as not coping or they did not want outside agencies becoming involved. Some people, however, felt that they were coping fine without help.

It is important that carers recognise themselves and feel that they can approach services when they need help or advice. It is important that services are accessible and carers can see the benefit of contacting support services earlier rather than later.

How are we going to improve what we do?

- We will produce a simple guidance leaflet for people who look after family members and friends. This will be an accessible document that is available in GP surgeries, hospitals and libraries, via voluntary organisations and Adult and Children's Services.
- For young carers we will produce a specific information document which will be available in Children's Centres, Schools, GP surgeries and libraries.
- We will continue to raise the profile of carers in local media, especially during carers' week.
- We will work with local carers to highlight the positive experiences people have had as a result of asking for advice and support.
- We will raise awareness of carers' issues with staff working in Health so that they can recognise carers and offer appropriate support.

- We will ensure that all staff in Social Care receive training in how to effectively engage with carers. We will include the experience of carers in all relevant training.

6.2 Involvement in Planning

What people told us:

When we asked people how they would like to be involved in the planning of health and social care services in North Yorkshire they told us that for some people this would be very difficult due to their caring responsibilities. However, 14 people said they appreciated being invited to become involved and having their input valued. 19 people said that they liked the questionnaire format and said they would be willing to take part in a local meeting or forum.

Feedback from and involvement of carers enables us to make sure that the services that we are providing are appropriate. It is vital that we have an effective process for people to be involved.

How are we going to improve what we do?

- We will continue to try to improve the way in which we communicate with carers, using advertising opportunities and wider involvement. For example, we will use statutory services to highlight the message.
- We will continue to work with the North Yorkshire Carers' Forum and the Carers Centres to ensure that the voice of carers is heard by staff that plan health and social care services.
- We will promote carer involvement in the development of specific service areas within health and social care.

6.3 Carers to have a life of their own outside their caring role

What people told us:

Services that 98 people highlighted as allowing carers to have a break from their caring role included; respite, time to themselves, Sitting Services and Day centre provision. The provision of these services was not just highlighted, but also the quality and appropriateness of them to the needs of the cared-for person. These were emphasised when we asked people what the most important thing to them as a carer was. The most popular response, from 36 people, was that the cared-for person was well supported and happy.

In order to have a life outside of their caring role, people said that they would need:

- Financial assistance to have a break.
- To be involved in a supportive group.
- Practical support in the home.
- Support to remain or return to employment, or access to leisure or learning.

We wish to support carers to have a life of their own outside of their caring role and reduce, where possible, the impact of caring through personalised breaks.

How are we going to improve what we do?

- Health and social care will actively seek out opportunities to increase the range and number of carers sitting services and breaks.
- NYCC Health and Adult Services will invest more resources in carers sitting services throughout the county to allow more carers to access home based breaks.
- NYCC Health and Adult Services will continue to invest in Direct Carers Support Grants to allow carers to have a break from their caring role. This grant is also available to 16 and 17 year olds.
- Commissioners will continue to see respite as a key priority for supporting carers.
- We will continue to promote support systems such as the Emergency Carer Card, assistive technology and Telecare.
- Promote in schools the needs of young carers to make sure that young carers are able to make the most of the opportunities available to them at school.

6.4 Carers and personalisation

What people told us:

When people were asked what they would use a Personal Budget for (when one was available for carers) the majority of people (55) said they would use it to pay for a break or holiday. 18 people said they would use it to pay for a short course, whilst 14 people said they would use it for help around the home or garden.

It is important that carers who are providing a significant level of support to an individual are supported to maintain this caring role where that is desirable. We would aim to use Personal Budgets to allow those carers to do that.

How are we going to improve what we do?

- NYCC Health and Adult Services will continue to provide Direct Carers Support Grants. However, during the lifetime of this strategy and in line with government requirements, we will develop a system for giving carers a Personal Budget. This will in time replace Direct Carers Support Grants.

6.5 Carers as expert care partners

What people told us:

We asked people if they felt that they were listened to and that their input was valued by health and social care professionals in the planning and delivery of care and support for the cared for person. 50% of those people who responded said that they felt involved in health services, whilst 46% of people felt involved in social care. 66% of people said they would like to be more involved.

People said there were a number of key areas in which more involvement could take place, including:

- Assessment, Treatment planning and .Care planning.
- Being invited to meetings that were arranged at a suitable time.
- Being listened to and the importance of their role being recognised by professionals.

It is important that we recognise the role and knowledge of carers in both health and social care settings. Carers should be valued and - wherever possible - their views listened to and reflected in any plans made.

How are we going to improve what we do?

- We will ensure that all staff in Social Care receive training in how to effectively engage with carers. The experience of carers will be included in all of our relevant training.
- Clinical Commissioning Groups will promote carers involvement throughout the treatment of the cared-for person and within primary and secondary health care.
- We will use what carers have told us to specifically advise health and social care professionals in best practice in relation to involving carers.

6.6 Improving the mental and physical health of carers

What people told us:

We asked people to tell us what they thought would help carers remain physically and mentally well. The most popular response was time out from their caring role (suggested by 39 people). 24 people also said that respite was important and 6 people highlighted access to advice and support. 11 people felt that someone to talk to was important whilst for 10 further people exercise helped them to maintain their health.

Carers need to remain healthy both for their own well-being but also for the benefit of the cared for person. We believe it is important to support this whenever possible.

How are we going to improve what we do?

- We will continue to commission Carers Centres to provide support, advice and someone to talk to.
- We will encourage health care providers, including primary care staff, to recognise the potential negative effects that caring can have on a carer's physical and mental well-being.

- Health and Social Care commissioners will continue to see respite as a key priority for supporting carers.

6.7 Carers are not forced into financial hardship as a result of their caring role

What people told us:

When people were asked about the biggest impact on carers financially, 63 people identified the additional costs associated with the needs of the cared-for person as being a major factor. Not being able to work, working part time, lack of well paid part time employment and having to take unpaid leave was the most popular response, highlighted by 67 people. 21 people also mentioned the cost of paying for care. However, when asked if they were aware of the support that is available to carers who are experiencing financial hardship, 54% of people who responded said that they were not.

We acknowledge that there can be additional financial pressures associated with the needs of the cared for person and we would aim to support people to manage this pressure and maximise their income where possible.

How are we going to improve what we do?

- NYCC will continue to commission services from the Citizen's Advice Bureau to assist people and ensure that they are getting the correct benefit entitlement and rebates.
- NYCC will continue to commission Carers Centres to provide support, advice and signposting to specialist services as required.
- The NYCC Health and Adult Services Supported Employment team will continue to offer employment advice, guidance and information to carers.
- NYCC Health and Adult Services will continue to provide welfare benefits advice and guidance through their welfare benefits and charging staff.

6.8 End of life support for carers and bereavement support

What people told us:

When we asked people about the range of support they may need in a time of loss the most popular response from 33 people was a desire for some form of bereavement support or counselling. 31 people, however, wanted a more informal type of support either someone to talk to or emotional support from friends or family members. Practical support was also important to 16 people whilst for 14 people financial help and legal advice were important.

People can require very different types of support in times of loss - some formal, some informal. We would want to ensure that finding the right service is simplified.

How are we going to improve what we do?

- We will continue to commission Carers Centres to provide support, advice and signposting. This includes supporting carers providing end of life care and those experiencing bereavement.
- We will invest, via the Innovation fund, in the 'Side by Side' project in Ryedale and Whitby which can offer emotional support to carers in times of loss.
- To ensure links are made to the End of Life care groups to provide a joined up approach to supporting carers at this time.

6.9 Support for parent carers of disabled children

What Parent Carers of Disabled Children told us:

There were some common themes of feedback from parent carers. These included the availability of respite and short breaks for them to have a break from their caring responsibility. They wanted ready access to information and advice, not only about their child's disability but also regarding benefits and financial support. The opportunity to meet with other parents and carers was raised in the consultation as they felt it helped them to develop an understanding network and to seek the support of people who shared their experience. The availability of suitable child care and after school care was important to families as was a range of inclusive activities for their children. Parents wanted to be recognised as more than carers.

We recognise that parent carers of disabled children require support tailored to meet the assessed needs of their child and for themselves.

How are going to improve what we do?

- We will continue to commission short break services for parent carers of disabled children and young people to meet assessed needs.
- We will keep the Short Breaks Statement under regular review to ensure that it targets short breaks for those families who most need support.
- We have recently revised our Special Educational Needs and Disability (SEND) website and the Family Information Service to give families access to clear, concise information with links to other sources of advice.
- We will continue to support North Yorkshire Parent and Carers Forum (PACT), a parent led group which offers a supportive network for parent carers of disabled children and opportunities to get involved in the development of services and strategy.

6.10 Support for young carers

What did Young Carers tell us?

Young carers highlighted that they valued the opportunity to have breaks from their caring role and have fun, meet with other carers and have one to one support. They also highlighted barriers to having a break including transport, money and initially knowing where they can get support. However, the young carers that completed questionnaires were those who were known to the

services and were accessing help. We acknowledge that need to do more to capture the voice of those who are not currently recognised as young carers and not receiving support.

In addition to the feedback received directly from young carers, the local authority is aware that caring responsibilities can disrupt education and thus jeopardise achievement in school. Points of education transition, e.g. primary to secondary school, choosing post-14 subject options and 16+ transitions are particularly important times to offer targeted support. It is in general important to ask schools to support young carers and ensure that any possible gap in falling behind academically is closed.

What will we do?

- Commission carers services to provide specific services for young carers.
- Promote young carer issues within health, social care and education to recognise and provide appropriate support to young carers.
- Refresh schools and GP practices with new publicity materials.
- Work with current young carers to find other ways of publicising help and support.
- Explore ways of overcoming barriers, such as a lack of transport, to access activities outside of their caring role.
- Identify ways of engaging with young carers who are currently not known to services
- Children and Young People's Services will publish a young carers 'entitlement' document outlining the above points and highlight how good support in education will be promoted

6.11 How should GPs be supporting carers in North Yorkshire?

What people told us:

21 people said that they thought GPs could support carers by initially identifying carers and recognising their needs and 28 people said they could then use signposting and referrals to appropriate support services such as Carers Centres. 12 people mentioned health checks for carers and 9 highlighted access to flexible appointments. When people were asked if they were aware that GPs have a carers register, 74% of those who responded were not aware of this. GP Practices do not have to have a carers register however they are held by the majority of practices across North Yorkshire. .

For many carers their GP is their first point of contact and a key person in providing support and advice to both the carer and the cared for. We believe it is important to maximise this relationship to support carers in their caring role.

How are we going to improve what we do?

- For young carers we will produce a specific information document that will be available in Children's Centres, schools, GP surgeries and libraries.
- We will encourage GP Practices to identify a Carer Champion within surgeries who will support carer awareness and recognition.

- We will promote examples of good practice within primary care including the proactive use of up to date carers registers and provide clarity regarding confidentiality issues and information sharing.

6.12 What services currently providing support to carers are most valued and what services should be provided that are not currently available?

What people told us:

We currently provide or commission a number of services for carers. We asked carers to identify from this list the services that they most value. The three most popular services were sitting services, Carers Emergency Card and Carers Centres. However, 11 people that responded were not aware of any of these services.

We recognise that that the services we currently commission are valued by carers. We believe that whilst we will need to develop in the future to meet the needs of carers and national requirements some services will continue to be necessary.

How are we going to improve what we do?

- Health and social care commissioners will continue to recognise the need for ongoing funding of services throughout the changes within the public sector.
- We will identify opportunities to obtain national funding to enhance service provision for carers.

7. Next steps

This strategy extends from October 2012 to April 2015. In order to implement this strategy, an Implementation Plan will be developed which will explain how we plan to improve what we do. This will include information regarding who is responsible for doing certain things and when they will be done by. This will be monitored by the North Yorkshire Carers' Strategy Group which meets quarterly. This is a multi-agency group that will oversee the implementation of the strategy. It will contribute to the Health and Wellbeing Board for North Yorkshire and will also report annually to the NYCC Care and Independence Overview and Scrutiny Group.

All public bodies are currently experiencing a time of major and unprecedented change linked to the challenges following the Comprehensive Spending Review of 2010 and the Social Care Bill of January 2011. This includes the abolition of Strategic Health Authorities and PCTs and the transfer of commissioning responsibilities to Clinical Commissioning Groups (CCGs). It has been important to engage CCGs in the development of this strategy as they take on these responsibilities from April 2013.

This strategy is supported by a commitment across North Yorkshire to work together to deliver the Implementation Plan. At a time of limited financial

resources, health and social care commissioners are committed to implementing this strategy and ensuring the best quality and cost effective services using available funds.

Glossary

Strategy	A plan designed to achieve a specific goal.
Coalition Government	The current UK Government including the Conservatives and the Liberal Democrats.
Focus Groups	Groups of people, including carers, who came together to look at questions in the consultation document and gave their opinions.
North Yorkshire Carers Forum	This is an open forum for carers in North Yorkshire to receive information and share their opinions on services and support provided by Health and Adult Services The group meets every three months.
Statutory Services	These are services set up by law, for example, a Local Authority or a Primary Care Trust.
Respite Care	Respite care is the provision of short term, temporary relief to those who are caring for family members who might otherwise require permanent placement in a facility outside the home.
Sitting Services	Short term 2-4 hours Respite Care provided within the home.
Commissioners	People in statutory organisations responsible for planning and buying services.
Health and Adult Services	This is the new title for what was Adult and Community Services (adult social care). This department of the local authority now also has responsibility for some parts of public health.
Emergency Carers Card	A service provided to carers in North Yorkshire to offer emergency support to the cared-for person if the carer were to be unavailable in an emergency e.g. involved in an accident.
Direct Carers Support Grants	A grant payment made to carers following a carer's assessment and an identified need. The grant is to give the carer a

	break. It is a one off payment that can be applied for annually. This grant is given as a direct payment.
Carers Resource Centres	Voluntary organisations to support carers in their communities. These organisations offer advice, information, practical and emotional support to carers.
Personalisation	The way in which care and support services are delivered to best meet the individual's needs and give personal choice and control.
Personal Budget	An amount of money that is identified to meet a person's assessed needs.
Clinical Commissioning Groups	Local health commissioning organisations due to replace Primary Care Trusts in April 2013.
Primary Health Care	Health services delivered in or near to a person's home to which the person has direct access. These services include those provided in GP surgeries, health centres and community hospitals, or in the person's own home by a team of professionals, including, for example, GPs, practice nurses and community nurses.
Secondary Health Care	If a person's needs are too complex to be managed in primary care, they are referred for more specialist services in Secondary care, including hospitals and treatment given away from a hospital setting such as Mental Health services, Learning Disabilities and help for older people.
Carers Register	A list of those who are identified as carers held by some GPs to enable the practice to provide more appropriate support.
Carer Champion	A person within an organisation who takes on the role of promoting the recognition and needs of carers within that organisation.
Health and Well-being Board	A Board with representation from the health and social care agencies responsible for the well being of the residents of North Yorkshire
Strategic Health Authority	The Strategic Health Authority (SHA) is part of the structure of the NHS in England. Each SHA is responsible to the Department of Health. The SHA is responsible for the supervision of local NHS Trusts within their area.
Primary Care Trust	Organisations responsible for improving health, primarily through using funds

	received directly from central government to commission effective local healthcare and be the local leader of the NHS.
SEND	Special educational needs and Disability department within the local authority.
Care and Independence Overview and Scrutiny Group	Body of North Yorkshire County Council made up of elected Council Members who oversee the work of Health and Adult Services.
Direct Payment	Money paid directly to the individual in lieu of services. This means you can organise your own support or services.

DRAFT

Operating Framework: Joint Response between NHS North Yorkshire and York City of York Council and North Yorkshire County Council

As part of *The Operating Framework for the NHS in England 2012/13*, PCT clusters are required to agree and outline policies, plans and budgets with local authorities and voluntary groups to support carers, where possible using direct payments or personal budgets. The following information outlines our response to this request locally:

1. Plans for carers across North Yorkshire and York

A joint carers strategy document has already been produced by City of York Council (CYC) and NHS North Yorkshire and York (NHS NYY) for 2011-15 which is attached with this statement.

A joint carers strategy document has been produced by NHS North Yorkshire and York and North Yorkshire County Council (NYCC) for 2012-15 which is in the final stages of agreement and is attached with this statement.

2. Identification of the financial contribution made to support carers by both local authorities and PCT clusters and that any transfer of funds from the NHS to local authorities is through a section 256 agreement

- NHS NYY core budget to specific carers services is £555,479. This is made up of a contribution of £110,245 to City of York Council area and £445,234 to North Yorkshire County Council area.
- NYCC Health and Adults Service (HAS) budget is £2,190,151. This provides details of those costs which are directly attributable to carers. In addition NYCC HAS provides respite/day services which indirectly support carers, the costs of which are not included.
- NYCC Children and Young Peoples Services spend approximately £4 million on short breaks and Looked After services for severely disabled children.
- CYC's budget to support adults caring for adults and young carers is £1,731,136 including respite provision (£1,292,409 from this budget is dedicated to providing carers breaks specifically). CYC provides day services which include some support for carers, the costs of which are not included.
- CYC Children's Services spend £1,422,800 on short breaks for disabled children.

3. Identification of how much of the total financial contribution made to support carers by local authorities and PCT clusters is being spent on carers' breaks

Of the total financial contribution made by NHS NYY to support carers, £258,193 is being spent on carers' breaks. This is broken down as follows:

- £80,000 on Day services.

- £178,193 on sitting services.

Other carers' services are provided as packages of care and may be hidden within budgets for other services such as Community Mental Health Services, Continuing Health Care and Children's services. Therefore the exact amount NHS NYY will spend on carers in 2012/13 is difficult to identify.

The total financial contribution made by NYCC HAS on carers' breaks is £1,356,462. This is broken down as follows:

- Sitting services = £536,240
- Direct Carers Support Grants (direct payments) = £206,380
- Spot purchase respite nights = £333,060
- Caring with confidence sessions = £25,000
- Alzheimer's day provision = £117,469
- Small voluntary organisation contracts that provide breaks = £138,313.

This provides details of those costs which are directly attributable to carers. In addition NYCC HAS provide respite/day services which indirectly support carers, the costs of which are not included.

The total financial contribution made by CYC on short breaks for adult carers is £1,292,409. This is broken down as follows:

- Sitting services = £190,271
- Direct payments to carers = £125,000
- Respite nights = £969,150
- Training and support sessions = £7,988

The financial contribution made by CYC Children's Services on short breaks for disabled children is £1,422,800.

4. Identification of an indicative number of breaks that should be available within that funding.

We have locally defined a break as follows:

- Sitting services 3 hour session equals one break
- Overnight respite one night equals one break
- Day time respite one session equals one break
- Caring with confidence one session equals one break
- Direct Carers Support Grants one grant payment equals one break.

The total financial contribution made by NYCC HAS on carers' breaks is £1,356,462 which equates to 33,343 breaks.

The total financial contribution made by NHS NYY on carers' breaks is £245,393 which equates to 2,967 breaks. .

The financial contribution made by CYC to direct provision of carers' breaks for adult carers is £1,292,409 equating to 41,583 breaks. In addition 1,035 breaks are provided to young carers.

The financial contribution made by CYC Children's Services on short breaks for disabled children is £1,422,800 equating to 9,765 breaks.

Statement ends