



Sheffield Health and Social Care NHS Foundation Trust

Carers and Young Carers Strategy
2016-2022 (Revised 2019)

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Foreword from Carer Representatives

There are over 57,000 carers in Sheffield, with about 4,500 of these being young carers. This means that one in ten people are providing unpaid care at any one time, providing a huge saving to the City's health and social care budget. Yet recent evidence shows that we are not supporting carers very well. Recent surveys showed that Sheffield's performance was the worst in Yorkshire and Humber, and significantly lower than the national norm.

The good news is that the Trust is firmly committed to improving the experience of carers and their families. The Care Act 2014 imposed a specific obligation on care trusts to consider the impact of caring on the well-being of the carers and the outcomes they want to achieve in their own lives and Sheffield Health and Social Care Trust is taking this responsibility very seriously.

This strategy has been drawn up in collaboration with carers and young carers in the city, and so should address the weaknesses they will all have experienced in the past. It takes stock of the current position and sets out an action plan to deliver improvements, based on a set of six guiding principles which have been encapsulated into a headline Carers Charter. An early outcome of this work is the production of a new Carers and Young Carers Information Pack, which we believe is a significant improvement on the paucity and variability of clear information which has previously been available.

If you are a carer and have any queries relating to this strategy, please do get in touch with one of us, Carer Governors, via the Trust's offices.

Angela Barney, Billie Critchlow, Sue Roe and Chris Sterry

Carer Representatives

Foreword from Executive Medical Director

Welcome to the Trust's updated Carers' and Young Carers' Strategy. Almost one in ten people in Sheffield care for someone with a significant illness or disability, and around 4,500 of these carers are young carers. We know that compassionate carers and young carers make a huge difference to the lives of those they care for. We also know that being a carer or young carer can sometimes be a stressful and lonely experience. Many carers and young carers are coping with their own health problems as well as those of other people.

This is why we have revised and updated our Strategy. The Trust is committed to working with all of our experts by experience and experts in caring. We will be ambitious and hold ourselves to account on delivering the strategy, not only the requirements of the Care Act 2014 but also in the spirit of building genuine partnerships across families and communities in our city.

More than anything, we want to help make a positive difference in the lives of our carers and young carers, and make Sheffield a city where carers and young carers are valued – and cared for.

Dr. Mike Hunter

Executive Medical Director

Introduction

“A carer is anyone who cares, unpaid, for a friend or family member who due to illness, disability, a mental health problem or an addiction cannot cope without their support.

“Anyone could be a carer – a 15-year-old girl looking after a parent with an alcohol problem, a 40-year-old man caring for his partner who has terminal cancer, or an 80-year-old woman looking after her husband who has Alzheimer’s disease.”

(Carers Trust, 2019a)

A carer or young carer is someone who provides unpaid support to family or friends. The individual could not manage without this help and this enables them to cope and carry on with their day-to-day life. This support could be caring for a relative, partner or friend who is ill, frail, disabled or suffers with mental ill-health or substance misuse. This may include helping with personal care, medication, cooking, shopping, housework or providing emotional support.

We recognise that some people are not comfortable with the word ‘carer’, and prefer to see their role as part of what they do as a spouse, parent, child, friend, or supportive member of their religious or cultural community. We therefore use the term ‘carer’ or ‘young carer’ to include all of these roles.

At Sheffield Health and Social Care (SHSC), we understand the crucial role carers and young carers have in people’s lives. They provide invaluable support and guidance to those they care for. We are committed to supporting our carers and young carers to be recognised, involved, informed and supported. We recognise that carers and young carers are often experts in the person they care for and, hence, should be valued and heard. This strategy outlines SHSC’s commitment to carers and young carers.

“When carers are well-supported, they provide better care for the person they care for and reported better well-being outcomes themselves.”

(Ablitt, Jones & Muers, 2009)

Carers and young carers are experts in the person they support; their life history, their condition, their needs and more. They have extensive expert knowledge about our service users and it is our duty to recognise this and listen to their views. SHSC recognises the need to encourage carers and young carers to impart information about the individual they support as we need to obtain knowledge of all aspects of an individual and not merely the information we feel we need to know. Much of a service user's day to day support may be provided by a carer or young carer who is an expert by experience. Hence, it is vital that we work in partnership with carers and young carers and ensure they are part of consultations.

We will also improve opportunities for carers, young carers and staff carers to access relevant research. This may enhance their lives, the lives of those they support or the lives of future experts by experience. This should also provide a platform which can empower carers, ensure their voice is heard and shape our services and future direction. An example of a recent research study offered to carers, young carers and staff carers is COPE Support. We will seek to adhere to best practice guidelines in research, including Good Clinical Practice (GCP) for Research.

According to the 2011 census, 1 in 10 people across Sheffield are carers or young carers. This equates to 57,373 people, of which 4,594 are young people (Office for National Statistics, 2011).

Carers UK (2015a) stated that "carers are not a static population". Approximately 2.1 million people in the UK start caring every year and almost as many people cease caring per year. Hence, due to this "turnover", 3 in 5 people will be carers or young carers at some point in their lives.

It is clear from these statistics that being a carer or young carer has a huge impact on people in our community. Hence, it is of utmost importance to effectively support our carers and young carers.

Background

This strategy was originally developed and co-produced with carers in 2016. The strategy was then revised in 2019 with support from carers, Sheffield Carers Centre, Sheffield Young Carers and Sheffield City Council. This revision took place to ensure relevant legislation was reflected and to provide new momentum for the actions to deliver the strategy. We recognise in this strategy that carers' and young carers' needs do not tend to alter but that we need to meet their needs and provide them with the support they deserve.

Legal, Policy and Good Practice Context

The Care Act (2014) introduced new responsibilities for councils to support adults with social care needs and their carers. As a result, all adult carers have the right to a Carers Assessment. This assessment considers the impact of caring on the carer, their needs and support that can be offered. SHSC are commissioned by Sheffield City Council to provide carers assessments for carers of service users accessing mental health services who are in receipt of a social care package. Sheffield Carers Centre is commissioned by the council to provide all other adult Carers Assessments within Sheffield.

The Children and Families Act (2014) also introduced new responsibilities for councils to provide Carers Assessments for young carers and parent carers. Across the Trust, we will ensure that we provide carers assessments to those eligible or alternatively, signpost individuals to the appropriate organisation.

The Care Act (2014) also states that “no child should undertake inappropriate and/or excessive care”. We must be mindful of this when discharging our service users. In addition, the Carers Trust (2019) found that 45% of young adult carers reported that they have mental health problems. This is significantly higher than the national average and demonstrates the need to be proactive and effectively support young carers while they are still young.

The Carers Trust's Triangle of Care (2013) is a good practice guide for mental health service providers in supporting carers, and is a therapeutic model of partnership working between service users, staff members and carers (see Figure 1). The emphasis of this report was the importance of collaboration and carers being viewed as active partners within the care team. SHSC will collaborate with carers and young carers and support them to actively participate in their loved ones' care.

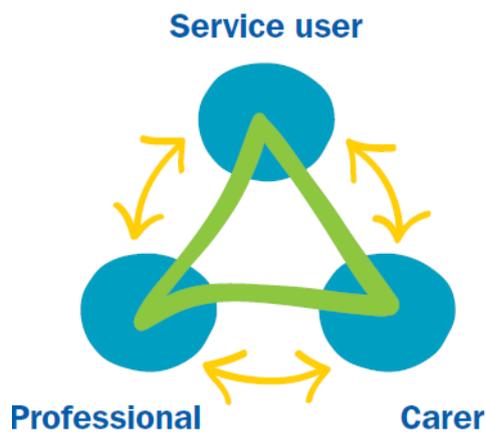


Figure 1 – The Triangle of Care (Carers Trust, 2013).

NHS England's Commitment to Carers (2014) consists of eight key priorities and 37 commitments to carers. These aim to provide carers with the recognition and support they require to care. A follow-up report (NHS England, 2016) addresses changes made by the Care Act (2014) and the Children and Families Act (2014). It purports the importance of an integrated approach between Social Care, NHS, commissioners and third sector organisations for supporting carers. SHSC will ensure that we adopt an integrated approach and work effectively with other organisations.

Nationally, Carers UK have written numerous research reports regarding the value to the economy of the support provided by unpaid carers. Carers UK (2015b) stated that "the economic value of the contribution made by carers in the UK is now £132 billion per year. This is close to the total annual cost of health spending in the UK, which was £134.1 billion in the year 2014-2015. The support provided by the UK's carers in 2015 saves the public purse £2.5 billion per week". In Sheffield, the value of the caring undertaken by carers has been estimated to be £1.186 million (Carers UK, 2015b). Not only are carers and young carers an asset to the individual they support

but they are also helping the UK and Sheffield economy. Carers and young carers also support SHSC as an organisation. We value carers and young carers in their own right and we need to look after them.

The National Institute for Health and Care (NICE) (2011) have written national guidance for improving experience in adult mental health. This evidence-based guidance includes information on involving families and carers. Please see the Appendix at the end of this document for further information.

At the beginning of 2019, the 'NHS Long Term Plan' was published (NHS, 2019). In regard to carers and young carers, this outlines the necessity for better identification and recognition of carers, better support for carers in emergencies and support for young carers. These ambitions are shared by this strategy and SHSC.

The literature outlined above and information from stakeholders has been used to inform this strategy. The Trust has an implementation plan which outlines how these initiatives will be acted upon.

City-Wide Strategy

Whilst carers and young carers can vary considerably, they often have common needs. These are reflected in the Sheffield 'Young Carer, Parent and Adult Carer Strategy'. This sets out the ambition for every carer to have:

- o A life of their own.
- o The choice to care and stop caring without recrimination.
- o Equality of opportunity to life chances including education, training, work and leisure activities.

These ambitions are underpinned by 6 principles for every carer and young carer. SHSC recognises that carers and young carers are experts in the person they care for and their needs. In order to value carers' and young carers' expertise and their care needs, we will follow the six principles in the city-wide strategy:

1. Access at the right time, the right type of information and advice for them, their family and the person they care for. (This responds to carers/families stating

they need access to up-to-date information about support and information on services available to them and the person they care for, including clear information about what to do and who to contact in a crisis and good information on where they can get help, support and advice).

2. Understand their rights and have access to an assessment
3. Have a voice for themselves and the person they care for. (Carers/families want to be listened to when they have concerns and they need healthcare professionals to be understanding and responsive. Carers and families are often the first to notice signs of illness or a relapse).
4. Have regular and sufficient breaks. (Carer/families need to have the opportunity to maintain their social and family networks to prevent social isolation).
5. Continue to learn and develop, train or work (if they wish to). (Carers/families have expressed they need a life of their own).
6. Look after their own health. (Carers/families want support to maintain their own physical and mental health).

A representative from SHSC attends the quarterly Sheffield Carer and Young Carer Board meeting. Representatives from the council, NHS, Sheffield Carers Centre and Sheffield Young Carers attend and input into the city-wide strategy. The ambition and principles from the Sheffield 'Young Carer, Parent and Adult Carer Strategy' have been incorporated into the current SHSC strategy.

Purpose of the Strategy

The current strategy addresses the need for a coordinated response across the Trust for carers, young carers and staff carers. It also addresses the invaluable feedback we have received from carers, young carers and local stakeholders. The strategy sets out the Trust's commitment to carers, young carers, staff carers and families and provides an operational framework for staff. It should ensure carer and young carer involvement in treatment and care, and support for them to continue in their caring role for as long as they wish. It should also ensure that carers, young carers and staff carers can access relevant research which may improve their lives,

the lives of those they support or the lives of future carers. We will seek to develop research and educational opportunities for carers, young carers and staff carers. The ambition of this strategy is to improve the experience of carers, young carers and families in contact with our services and to establish some core principles that carers, young carers and families should expect.

The strategy will promote the Trust vision and its values (respect, compassion, partnership, accountability, fairness and ambition). It will also spread the message that carers, young carers and families are valued by encouraging our staff to recognise the contribution that they make. We will ensure that we offer the relevant support to carers and young carers to enable them to make the right choices, so they have the best chance of staying well. We will also ensure that we recognise our own staff may be carers and that all carers have a right to have a life of their own. SHSC understands the specific needs of carers of older adults who may themselves be older adults. Please see the SHSC Carer and Young Carers Strategy Implementation plan for detail of how the Trust will act on this information and support our carers and young carers.

Carers and Young Carers Charter

Our Promise:

SHSC Trust is committed to working in partnership with carers and young carers, recognising and valuing them as experts in the important care they provide to people who use our services. We are committed to listening to carers and young carers and working alongside them to improve the effectiveness of our services.

Commitment 1: Carer/Young Carer/Family Recognition – Valuing Carers:

We will make sure that in your caring role your needs are recognised and you are valued and respected for the important contribution you make.

Commitment 2: Carer/Young Carer/Family Involvement:

We will make sure that you have the opportunity to be involved in the planning, care and treatment of the person you care for with their consent. We will further ensure that we provide opportunities for you to get involved and support any service improvements.

Commitment 3: Informing Carers/Young Carers/Families:

We will make sure that, within the confines of confidentiality, you are given accurate, understandable information and guidance to support you in your caring role.

Commitment 4: Supporting Carers/Young Carers/Families:

We will make sure you are aware of your statutory right to a Carer's Assessment and we recognise we have a responsibility to consider the impact your caring role has on your own wellbeing and the outcomes you want to achieve in your own life.

Commitment 5: Developing Staff to Work with Carers/Young Carers/Families:

We will ensure that our workforce has the skills and confidence to be responsive to carers and young carers.

Commitment 6: Supporting Staff who are Carers:

We will make sure we develop a culture that is positive about caring, with staff undertaking caring roles having access to relevant employee guides and support.

Commitment 1: Carer/Young Carer/Family Recognition

We will seek to identify carers and young carers as soon as possible, valuing and respecting the important contribution carers and young carers make.

We will recognise carers/young carers/families and provide information as to where they may be able to receive support, advice and information in their own right.

This will be achieved by:

- Actively seeking to identify and record the details of adult and young carers at point of first contact with Trust services.
- Signposting/referring carers to appropriate carers' services

Commitment 2: Carer/Young Carer/Family Involvement

We will ensure early involvement of carers/families to enable the most accurate assessment possible takes place of our service users. We understand that carers and young carers are experts on their loved one and that we need to listen to and understand their perspective.

Carers/young carers/families often want to be actively involved in the care and treatment of the cared for person and have their view taken into account.

Carers/young carers/families often want to be kept informed about the treatment recommended.

We will ensure that we provide carers and young carers with the opportunity to become involved and work collaboratively with the Trust on service improvements which affect them.

To enable this we will ensure:

- Teams have protocols in place about engaging, including and working collaboratively with carers/young carers/families in care planning and treatment.

- We have regular carer/young carer surveys to capture views.
- We develop collaborative partnerships with carers and young carers to support service improvements in the Trust.
- There is formal carer/young carer involvement in projects and governance.
- We develop a checklist with regard to carer/young carer involvement.
- Carers and young carers involvement is supported by using the Trust appreciation scheme and ensuring enough notice is given to facilitate participation.

Commitment 3: Informing Carers/Young Carers/Families

We will make sure we give useful up to date information to carers/young carers/families about a range of issues to support them in their caring role.

Carers/young carers/families want clear, factual information about the condition, care plan and treatments available, and for their concerns to be listened to. Carers and young carers want staff to be sensitive to their concerns, and to be informed about what support is available from the Trust and other local organisations.

We will achieve this by:

- Having useful accurate information for staff and carers/young carers/families about confidentiality and sharing information.
- Ensuring protocols are in place so carers and young carers are informed and included in discussions about care and treatment. This will take place within the realms of confidentiality.
- Giving and/or developing good up to date information on our services and what to expect from us.
- Giving up to date and relevant information on other services that can support carers and young carers.
- Updating the section for carers/young carers/families on our website.
- Ensuring information is available at service bases.

- Exploring the potential to provide training/support for carers/young carers in self-management techniques for specific diagnosis.

Commitment 4: Supporting Carers/Young Carers/Families

We will make sure carers and young carers are aware of their statutory right to a Carer's Assessment and where commissioned to do so, complete carers assessments and, when required, carer assessment reviews.

We will ensure that planning for a carer's own emergency is considered as part of the carer's assessment.

We recognise we have a responsibility to consider the impact that having a caring role has on carers' or young carers' own wellbeing and the outcomes they want to achieve in their own life.

We will achieve this by:

- Accurate monitoring of carers' assessments and undertaking a carer's assessment review where required.
- Signposting carers and young carers to the relevant organisation for a carer's assessment if it is not part of our commissioned service.
- Providing carers/young carers support groups in different service areas where relevant.
- Ensuring carers' and young carers' needs are reflected in care and treatment plans of our service users.
- Supporting teams to have a carer/young carer/family lead role in relevant clinical services.

Commitment 5: Developing Staff to Work with Carers/Young Carers/Families

We will ensure that our workforce has the skills and confidence to be responsive to carers and young carers. The responsiveness of staff during the carer/young

carer/families first contact with services is vitally important.

In order to achieve this we will:

- Provide staff training on carers' assessments.
- Provide staff training on carer and young carer awareness.
- Ensure the training is co-delivered and/or produced with carers and young carers.

Commitment 6: Supporting Staff who are Carers

We are aware from a staff survey conducted in 2012 that many of our staff are combining work and a caring role. This can prove to be very challenging and lead to many of our staff leaving work. The knock-on effect can be an unwanted loss of talent and experience in the workforce.

There may also be the risk of lost potential in the workforce where experienced staff do not apply for promotion for fear that they will not get the flexibility that enables them to care.

We want to ensure that staff feel supported and feel that SHSC is positive about caring for staff as well as service users.

To achieve this we will ensure that we:

- Provide information for new staff at their Trust induction about working carers' rights and the types of support available.
- Incorporate staff as carers within the supervision and appraisal process.
- Make accessible 'Employees as Carers' guides for managers and staff.
- Incorporate working carers' rights within the carer and young carer awareness training.

Implementation

There is an expectation that each service area will produce their own implementation plan ensuring that work streams with milestones, deliverables, key performance indicators and leads are assigned with short, medium and long term priorities and actions identified.

These implementation plans will detail the resources required. Where additional resources are required, a business case will be prepared in line with the Trust governance structures.

Implementation of the strategy and progress against the anticipated outcomes will be monitored through the Carers Strategic Implementation Group and reported into the Quality Assurance Committee.

Success of the strategy will be reflected in:

- Raised awareness and the recognition of the importance of carers by all staff.
- Improved carer experience.
- Improved staff experience by those staff who are carers.

Version Control

Version	Date	Author	Role	Comment
1	2016	Pam Allen	Carer Lead	New strategy
2	08.11.2019	Victoria Harper	Engagement Manager	Strategy revision
3				

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With thanks to Jana Sandford (Volunteer and Carer) for the front cover illustration.

Associated Documents

SHSC Carers and Young Carers Strategy Implementation Plan 2019-2020.

Young Carer, Parent and Adult Carer Strategy –

<https://www.sheffield.gov.uk/home/social-care/social-care-carers-strategy.html>.

Appendix

National Institute for Health and Care Excellence (NICE) Guidance

Service user experience in adult mental health: improving the experience of care for people using adult NHS mental health services

Clinical guideline [CG136]

Involving families and carers

1.1.14 Discuss with the person using mental health services if and how they want their family or carers to be involved in their care. Such discussions should take place at intervals to take account of any changes in circumstances, and should not happen only once. As the involvement of families and carers can be quite complex, staff should receive training in the skills needed to negotiate and work with families and carers, and also in managing issues relating to information sharing and confidentiality.

1.1.15 If the person using mental health services wants their family or carers to be involved, encourage this involvement and:

- negotiate between the service user and their family or carers about confidentiality and sharing of information on an ongoing basis
- explain how families or carers can help support the service user and help with treatment plans
- ensure that no services are withdrawn because of the family's or carers' involvement, unless this has been clearly agreed with the service user and their family or carers.

1.1.16 If the person using mental health services wants their family or carers to be involved, give the family or carers verbal and written information about:

- the mental health problem(s) experienced by the service user and its treatment, including relevant text from NICE's [information for the public](#)

- statutory and third sector, including voluntary, local support groups and services specifically for families and carers, and how to access these
- their right to a formal carer's assessment of their own physical and mental health needs, and how to access this.

1.1.17 If the service user does not want their family or carers to be involved in their care:

- seek consent from the service user, and if they agree give the family or carers verbal and written information on the mental health problem(s) experienced by the service user and its treatments, including relevant text from NICE's [information for the public](#)
- give the family or carers information about statutory and third sector, including voluntary, local support groups and services specifically for families or carers, and how to access these
- tell the family or carers about their right to a formal carer's assessment of their own physical and mental health needs, and how to access this
- bear in mind that service users may be ambivalent or negative towards their family for many different reasons, including as a result of the mental health problem or as a result of prior experience of violence or abuse.

1.1.18 Ensure that service users who are parents with caring responsibilities receive support to access the full range of mental health and social care services, including:

- information about childcare to enable them to attend appointments, groups and therapy sessions
- hospital care in local mother and baby units for women in the late stages of pregnancy and within a year of childbirth
- a family room or space in inpatient units where their children can visit them.