



**Nottinghamshire  
County Council**

**CARING TOGETHER  
2007 – 2009**

# **CARERS' STRATEGY 2007 - 2009**

**'We respect and value carers, they do an amazing job.  
They are the hidden heroes in many of our communities.'**  
Ivan Lewis, Care Services Minister (2007)

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## Foreword

### David Pearson Strategic Director - Adult Social Care & Health

We are very pleased to introduce our Carers Strategy for 2007-2009. It is the result of extensive consultations and discussions with our partner agencies, our staff and most importantly, carers themselves.

More than 10% of the adult population of Nottinghamshire are providing unpaid care to relatives, friends and/or neighbours. We recognise the valuable contribution that adult carers make in enabling people to remain at home.

All carers have a right to have their views taken into account. Some carers will be entitled to an assessment of their needs for support – support that will enable us to care together for those who are in greatest need. For these carers, we have developed and will continue to provide breaks (respite care) services and assistance. But there is much else that we can do to meet both their own individual needs and also their support needs.

This Strategy identifies the many ways in which support services for adult carers can develop for all of the 83,181 carers identified in the 2001 census living in Nottinghamshire. Nearly a third of these carers (26,277) are caring for more than 20 hours per week. We will continue to work together with our partner agencies and carers' own organisations, with the aim of identifying all the carers in the County and aspire to provide them with appropriate support and care so that they can maintain their own health and personal well-being.

Within the Council we will strive to ensure that services to Carers:

- **actively promote independence and choice;**
- **treat carers with dignity, respecting individual cultures and lifestyles;**
- **are fair and consistent;**
- **are accessible to all carers and address the issues of social exclusion;**
- **are sufficiently flexible to meet individual needs;**
- **are capable of adapting quickly to changing circumstances**
- **meet diversity needs**
- **meet the needs of young carers**

While this is a strategy for Nottinghamshire County Council in the first instance, we will strive to create a multi-agency Carers Strategy with all relevant partner agencies for the future. It is our aim to provide more effective and comprehensive support for all carers across the County.

# 1. INTRODUCTION

This carers strategy sits alongside our Adult Social Care and Health (ASCH) commissioning strategies. It builds upon the two previous strategies and sets out how ASCH will commission services to support adult carers over the next two years.

The strategy has been developed after consultation with carers, service users and partners.

Consultation will continue with partner agencies in order to work towards a multi-agency strategy in the future. This is therefore a dynamic plan, capable of further development in conjunction with other statutory and voluntary organisations during the period covered. Updates on the plan will be made available on the internet in the first instance.

At the time of writing we are awaiting a new National Strategy for Carers. Our strategy will be developed and revised together in order to implement any national requirements.

From this strategy, implementation plans will then be developed and regularly reviewed to ensure that the strategy meets carers needs.

For Young Carers, the Council recognises the impact caring can have on Young Carers. To reduce the demand on Young Carers, the ASCH Department will work together with the Children and Young People Department to build upon existing support services.

A Mental Health strategy for carers is also available on request.

## 2. WHO IS A CARER

This Carers Strategy refers to people caring for someone who lives in Nottinghamshire. Carers who care for someone who lives in another local authority area will need to refer to that local authority for carer support.

We define a carer as someone who, without payment, provides help and support to a friend, neighbour or relative who would not otherwise remain at home because of frailty, illness or disability.

The term 'carer' does **not** include care workers or care staff of any kind who are paid to provide care as part of employment. It also excludes volunteers and foster carers.

### Young carer

A young carer is someone under the age of 18 who looks after another member of the family or friend who is unwell or needs support because they have a disability.

### Parent carer

A parent carer is a parent or guardian who 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.

### What do carers do?

- Carers give practical, physical and emotional support to vulnerable people.
- They support the person they care for with problems caused by short or long term illness or disability.
- Carers may care for someone to keep them safe.
- Caring responsibilities may change and may be difficult to predict from day to day.

### Support for carers

Carers who provide, or intend to provide, substantial care regularly are entitled to an assessment, irrespective of whether the person they care for has had a community care assessment. Assessments will ascertain the need for support to carers and will register unmet need, in order to inform future development of services.

### 3. CARERS IN NOTTINGHAMSHIRE

From information in the 2001 census there were over 83,000 carers in Nottinghamshire, over 10% of the adult population, and the number is set to rise rapidly.

<b>Nottinghamshire total</b>	<b>83,181</b>
Ashfield	12,647
Bassetlaw	12,357
Broxtowe	11,638
Gedling	12,460
Mansfield	11,682
Newark and Sherwood	11,707
Rushcliffe	10,690

#### **Number of people who provide unpaid Care 1 – 19 hours a week**

<b>Nottinghamshire total</b>	<b>56,904</b>
Ashfield	8,065
Bassetlaw	8,110
Broxtowe	8,325
Gedling	9,017
Mansfield	7,251
Newark & Sherwood	7,923
Rushcliffe	8,213

#### **Number of people who provide unpaid care 20-49 hours a week**

<b>Nottinghamshire total</b>	<b>9,062</b>
Ashfield	1,568
Bassetlaw	1,480
Broxtowe	1,145
Gedling	1,226
Mansfield	1,527
Newark & Sherwood	1,240
Rushcliffe	876

#### **Number of people who provide unpaid care 50 or more hours a week.**

<b>Nottinghamshire total</b>	<b>17,215</b>
Ashfield	3,014
Bassetlaw	2,767
Broxtowe	2,168
Gedling	2,217
Mansfield	2,904
Newark & Sherwood	2,544
Rushcliffe	1,601

## 4. KEY DRIVERS

There are a number of key drivers that the County Council will work to in providing and arranging services for carers.

### **The Disabled Persons (Services, Consultation and Representation) Act (1986)**

When assessing a disabled person's needs, consideration must be given to whether a carer is able to continue to care for that person.

### **The NHS and Community Care Act (1990).**

This Act requires Councils to involve families and carers when making plans to assist vulnerable people.

### **The Carers (Recognition and Services) Act (1995)**

Gives carers the right to have their needs assessed.

**The National Carers Strategy 'Caring for Carers' (1999)** outlines a number of ways in which Local Authorities can improve carers quality of life.

The main **themes** include:-

**Providing information** – improving carers knowledge of services and how to access them.

**Recognising** and assessing carers needs

**Listening** to the voice of carers in service planning

**Support for carers** – including opportunities for a break

**Support for young carers** – young people under 18 years old

**Financial security**- helping carers to remain in employment

National and local consultation with carers at the time identified a number of **priorities**:

**breaks** from caring

being better **informed** about services

better **quality** as well as quantity of breaks

being treated with greater **respect** and **thoughtfulness by all agencies**

(The Carers Plan for Nottinghamshire 1999)

## **Carers and Disabled Children Act 2000**

On 1<sup>st</sup> April, 2001 the Carers and Disabled Children Act 2000 came into force. This entitled carers, including parent carers of disabled children, to an assessment in their own right. The Act also empowered local authorities to introduce voucher schemes for carer breaks services, and extended powers of local authorities to provide more specific services for carers. These carer-specific services, which are not community care services, may be funded by direct payments to carers.

**The Carers (Equal Opportunities) Act 2004** placed the following duties upon authorities:

- To inform carers of their right to an assessment.
- To give consideration to the wishes of a carer to work, to undertake education or training, or to engage in leisure activities

The Act also gave local authorities the right to ask for assistance from other authorities in planning the provision of services for carers.

In addition, carers locally have expressed concerns about not being asked if they want an assessment and in rural areas there are concerns about access to information and access to services.

## **Work and Families Act 2006**

As of April 2007, carers have the right to request flexible working. At present carers looking after a neighbour who is not related to them will not be eligible for the new right.

We have used these national and local drivers in developing our strategy.

## 5. HOW ARE WE DOING?

### Carer Specific Services

We have developed carer specific services in addition to breaks services. These services are not community care services for the person cared for, but something which carers told assessors during assessment, would support them to continue caring. Carers are expressing considerable satisfaction with these services which help to support them to continue caring. Some carers are taking up opportunities to engage in training through these services.

**Direct Payments** are being offered so that carers may arrange carer specific services themselves. We will explore further the opportunities to develop direct payments in this area and will ask carers their views of the services.

### Assessments

In the past carers told us that very few of them were aware of having had an assessment. (Ref. 1) A recent survey indicates that there has been considerable improvement in this area. (Ref. 2) We have appointed workers specifically to undertake assessments of carers of people with learning disabilities and we will appoint more staff to undertake assessments with older people and adults with a physical disability. We will monitor the effectiveness of this work.

### Information

We have produced a number of newsletters, information leaflets and packs. Nearly half the carers surveyed in summer 2006 had obtained information on rights and services from Adult Social Care and Health. (Ref. 2) We will continue to review the quality of our information and explore options for using a wider range of media.

### Planning for emergencies

A survey on dealing with emergencies told us that carers obtained considerable peace of mind from our emergency card scheme. (Ref. 3) We will develop this scheme further together with new services to support carers through short-term home-based support using the funding that becomes available from the Department of Health.

### Quality assessment

A process of quality audit of breaks services has been implemented and will provide further feedback on services commissioned. Early analysis indicates a general satisfaction with breaks services although carers wish to have more breaks and would like to see greater flexibility in the times they are available. We will aim to increase flexibility and give carers greater choice and control by promoting direct payments.

### Breaks for carers

We have offered short breaks for carers through day care, befriending services and short breaks provided in the persons or carers own home.

The number of short breaks we provided to existing carers increased considerably during 2005 and 2006 and we will strive to build on this.

## 6. CARING TOGETHER – A CARERS STRATEGY FOR NOTTINGHAMSHIRE

### The Way forward

The carers Strategy will be centred around three key themes:

- Information for Carers
- Support to Carers
- Breaks for Carers

### Principal aim

To enable Nottinghamshire Adult Social Care and Health to support carers in order to enable those who wish to, to continue providing care.

### Summary of Principal objectives

**Identification of Carers** - to identify carers during community care assessments and to disseminate information as widely as possible for carers to identify themselves.

**Recognition of Carers** - to offer assessments to all eligible carers, to develop care plans, to signpost to support services, to offer information and emergency response services.

**Assessment of Carers** – to provide carer-focussed assessments leading to outcomes identified by carers as supportive.

**Informing Carers** - to provide accessible and comprehensive information to carers.

**Services to Carers** - develop innovative and high quality carers services to meet local needs.

**Breaks for Carers** - provide breaks for carers who provide substantial and regular care.

**Supporting Carers in employment** - to aspire to enable carers to remain in or return to work.

**Young Carers** - the Children's and Young Peoples Department will focus on the needs of Young Carers).

**Black and Ethnic Minority Carers** – to continue to explore the particular needs of black and ethnic minority carers through existing commissioned services and Ethnic Minority Advisory Groups in the county and develop services accordingly.

**Carers Health and Wellbeing** - to ensure continued effective use of the Carers Grant so that carers maintain their own health, including mental health, and social wellbeing.

**Learning from Carers** - to learn from carers, through assessments and consultation, what services are appropriate and how services can be improved. To use this knowledge when commissioning services.

**Training staff** - to develop guidelines and training for staff in order to raise awareness of issues about carers and improve assessment and care planning.

**Direct Payments**- to provide direct payments for those carers who wish to arrange and manage their own services.

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## 7. INFORMATION FOR CARERS

Carers say that they need good quality information at the right time. They often don't know where to start, who to approach and what questions to ask when they first need help.

As part of our *Information Strategy for Carers* we will ensure that all information provided is:

- Accurate
- Widely available
- In plain language
- Available in different formats

Currently we provide the following information for carers:

- Services and support available
- How to access support
- What is an assessment and how to prepare for it
- Welfare rights advice provided by the Welfare Rights Department
- Self help groups
- Health issues for carers

In partnership with partners in health we will aim to provide information for carers on:

- The roles of different professionals and what they do
- The illness or disability of the person cared for
- What the particular care needs of the person they care for are likely to be and how they can best care for the person.

What else we will do to ensure carers are fully informed:

- Ensure all necessary information is available at one-stop contact points
- Produce newsletters and leaflets about carers rights, breaks services
- Develop the Nottinghamshire County Council website for carers
- Promote the UK carers help line as soon as it is available
- Promote our leaflet on the right to an assessment.
- Introduce an information pack for carers
- Promote self management groups for carers
- We will obtain feedback on the quality of information provided

### **Signposting**

We will work with partners to ensure that identification and signposting of carers improves and that relevant information is available in health settings.

We will keep assessors up-to-date with the services available for carers

## 8. SUPPORT TO CARERS

We will ensure that:

*'Any service providing care also considers the impact of service planning and individual care planning decisions on the carer, and recognises the carer's role and individual needs of the carer'* (Social Services Inspectorate)

In order to do this we need to continue to identify carers and assess their needs.

In partnership with other agencies we will support 'Looking After Me' courses for carers.

### Identifying carers

Our staff have a responsibility to identify carers.

Some carers will be assessed jointly with the person they care for. Others, who care on a regular and substantial basis, will be offered an individual assessment.

*'Carers have a right to an assessment of their needs even where the person cared for has refused an assessment for, or the provision of, community care services, provided the person cared for would be eligible for community care services'*

(Carers and Disabled Children Act 2000)

### Assessing carers

A carer's assessment is made by a professional from Health or Adult Social Care and Health. The assessment will take into account all the things that a carer undertakes to do when looking after a relative, friend or neighbour. It also considers how this affects the carer's health and welfare and whether they can, or wish to, continue with caring. The assessment is an opportunity for a carer to ask any questions and discuss any worries they have and any help they or the person they care for may be eligible for.

As part of this process carers have certain rights:

- All carers including parent carers have the right to an assessment of their social care needs
- All carers have the right to have a record of the assessment
- Carers may choose to have their assessment on their own or with the person they care for or with a friend, relative or advocate (someone who can speak independently on their behalf)

- A carer's assessment will take into account the carer's ability and willingness to meet the needs of the person they care for
- No assumption will be made that a carer wishes to continue to care
- Carers' needs will be reviewed annually or sooner should circumstances change
- Carers have a right to an assessment even if the person they care for is unwilling to have their needs assessed
- An assessment should take into account a carer's life-long learning needs.

### **Recognising carers as partners**

*'Service providers must see carers as partners in the provision of help to the person needing care, and must involve them as partners' (Kings Fund 2002)*

We will work together with carers to ensure services are developed in partnership in order to develop services that meet the needs of carers.

### **Learning from Carers**

- We will collate information from carer assessments to get a better understanding of need.
- We will survey carers about assessments and services.
- We will review the quality of assessments
- In partnership with other statutory and voluntary sector agencies we will continue to engage with carers through consultation groups and forums and with specific carers groups.

### **Training and Advice**

- We will provide information and advice through newsletters, leaflets, welfare rights sessions and helplines at the County Carers Unit and Welfare Rights helpline.
- When available, we will advertise the National Helpline for carers.
- We will support carers wishing to undertake the City and Guilds Certificate in Personal Development for Carers, and other courses.
- We will produce guidelines on assessment.

- We will develop a training programme for assessors.
- We will encourage and support attendance at self management programmes such as 'Looking after Me' – Expert Patient Programme for Carers.
- Together with partners we will develop appropriate training to meet the specific expressed needs of carers such as sessions in moving and handling, and short courses for carers of people with dementia.
- Advice sessions/exhibitions will be organised, with partners to ensure greater awareness of rights and services available.
- An information booklet on welfare rights for carers will be produced.

### **Telecare**

As part of the Telecare Strategy, equipment such as emergency alarms will be provided to older people where this will also support carers.

### **Helping Carers to return to or remain in Employment**

Carers are already more likely to suffer ill-health than those without a caring responsibility and 1 in 5 carers have been forced to give up work. This reduces their ability to build up pension contributions, putting them at risk of poverty in later life.

We will work with our own Human Resource Section and with partners to develop flexible working practices which support carers in employment. We will tell carers about their rights under the new Work and Families Act 2006.

We are working with the Council's Human Resources Department and as part of our workforce plan to develop policies and practices which encourage carers who want to re-enter the job market. We will signpost carers who are themselves disabled to our Welfare to Work team if appropriate.

### **Financial security**

We will encourage carers to take up welfare benefits advice.

We will provide welfare rights information through our newsletter and leaflets.

### **Emotional Support**

Providing care for someone can be lonely and demanding. Sometimes carers can become isolated. Also a carer may find that when their caring role ends they may find it difficult to adjust to the change in their life. Different kinds of emotional support may be necessary.

Our staff together with partners and the support workers we fund in the voluntary sector will signpost carers and former carers to appropriate self-help groups and courses for personal development.

We will examine ways of providing support to carers who are no longer caring on a substantial basis.

We will explore providing counselling services.

We will look to developing an education programme for carers as part of the New Deal for carers within the revised National Strategy for Carers due to be published in 2008.

## **9. BREAKS FOR CARERS**

To ensure that carers have every opportunity to maintain their own health, including mental health and social well-being, we will provide, or commission, breaks services for carers as outlined in section 10 and 11.

## 10. FINANCE

Adult Social Care and Health is committed to the following expenditure for 2007/8

<b>LOCALITY SCHEMES</b>	<b>Allocation</b>
Ashfield District Schemes	£136,710
Bassetlaw District Schemes	£143,592
Broxtowe District Schemes	£132,223
Gedling District Schemes	£159,442
Mansfield District Schemes	£178,416
Newark District Schemes	£132,885
Rushcliffe District Schemes	£142,141
<b>TOTAL DISTRICT SCHEMES</b>	<b>£1,025,409</b>

<b>OLDER PEOPLES SCHEMES</b>	<b>Allocation</b>
Bassetlaw Alzheimer's – Memories Outreach	£14,710
Bassetlaw Alzheimer's – Memories Worksop	£14,710
Bassetlaw Alzheimer's – Memories Retford	£18,911
Bassetlaw Alzheimer's – Memories Transport	£12,300
Age Concern – Manton Day Care	£11,394
Age Concern – Mansfield Day Care	£21,013
Age Concern – Newark Day Care	£26,154
Early Onset Dementia	£10,250
Time Out Respite/Sitting	£16,810
Nottingham Alzheimer's Side by Side	£18,439
ASRA Day Care	£13,325
<b>TOTAL OLDER PEOPLE SCHEMES</b>	<b>£178,016</b>

<b>PHYSICAL AND SENSORY DISABILITY SCHEMES</b>	<b>Allocation</b>
Headway Nottingham	£21,643
Nottingham Society for the Deaf	£17,861
Crossroads 24 Hour Respite	£22,550
Physical Disabilities Short Breaks	£61,500
<b>TOTAL PHYSICAL &amp; SENSORY DISABILITY SCHEMES</b>	<b>£123,554</b>

<b>LEARNING DISABILITY SCHEMES</b>	<b>Allocation</b>
Older Carer Breaks Gedling	£13,625
Bassetlaw Mencap	£2,050
Adult Placement Development Ashfield/Mansfield	£20,961
Learning Disabilities Short Breaks	£44,631
Bassetlaw Sitting	£30,750
Adult Placement Scheme Short Breaks	£20,961
Leisure Breaks	£52,403
Special Projects	£2,050
Newark Mencap	£7,662
NoRSACA Short Breaks	£104,806
<b>TOTAL LEARNING DISABILITY</b>	<b>£299,899</b>

<b>MENTAL HEALTH SCHEMES</b>	<b>Allocation</b>
Bassetlaw MIND	£24,689
Newark MIND	£24,689
Framework (South of County)	£42,025
<b>TOTAL MENTAL HEALTH SCHEMES</b>	<b>£91,403</b>

<b>CARERS UNIT</b>	<b>Allocation</b>
Staff (To be funded permanently from CCSB)	£102,552
Carers Specific Services	£80,000
Consultation/Development	£50,000
<b>TOTAL CARERS UNIT</b>	<b>£232,552</b>

<b>GRANT AID</b>	<b>Allocation</b>
Carers Federation For Adult Services	
Counselling Services	£3, 555
Carers Support Services	£85,072
<b>TOTAL GRANT AID</b>	<b>£88,627</b>

<b>EMERGENCY SERVICES</b>	<b>Allocation</b>
Additional Carers Grant for Emergency Services (To be confirmed)	£237,000
<b>TOTAL GRANT FOR EMERGENCY SERVICES</b>	<b>£237,000 TBC</b>

<b>COMMUNITY CARE SUPPORT BUDGET</b>	<b>Allocation</b>
(To be determined following consultation)	
<b>TOTAL COMMUNITY CARE SUPPORT BUDGET</b>	<b>£612,764</b>

All schemes will be reviewed with some schemes decommissioned and new schemes commissioned to reflect our commissioning intentions.

## 11. COMMISSIONING INTENTIONS FOR 2007-2009

To develop our commissioning intentions we have following budget available:

Carers Grant for all users groups.....	£80,000 permanent
Additional Carers Grant for Emergency Services.....	£237,000 (To be confirmed)
Carers for Older People/Physical Disability .....	£554,709 permanent
Carers for people with Mental ill Health.....	£40,000 temporary
Carers for people with a Learning Disability.....	£40,000 temporary
Carers for people who have Asperger's Syndrome.....	£32,000 temporary
Carers for people with a Physical Disability.....	£27,690 temporary
Carers for older people.....	£26,036 temporary
Carers for Older People/Physical Disability .....	£90,098 temporary

Our commissioning intentions are set out below are classified into the following priorities:

- A developments we will do and can fund
- B developments we must do but where funding is not identified
- C development we would wish to do in the longer term

<b>PRIORITY</b>	<b>Commitments &amp; intentions</b>	<b>Resource Implications</b>	<b>Link to CSCI Outcome</b>
A	Enhance support to older carers particularly focusing on carers supporting older people with dementia and mental ill health. Increase the uptake of carers breaks and direct payments.	Within resources available to carers of older people.	Improved health and emotional well-being
A	Extending the range of carers services to include further expansion of carer Assessment workers or additional funding of carers breaks and a better access to mainstream community services	Within available resources to carers of older people and physical disability.	Choice and control/personal dignity and respect
A	Increase the number of short breaks for carers of older people	Within available resources to carers of older people.	Improved health and emotional wellbeing

A	Increase the number of short breaks for carers of people with physical and sensory impairments	Within available resources to carers of people with a physical and sensory disability.	Improved health and emotional wellbeing
A	Develop carer support services for people with a learning disability in Mansfield and Ashfield	Within resources available to carers of people with a learning disability.	Improved quality of life
A	Widen short breaks options for carers of people with a learning disability	Recruit an additional four Adult Placement short-break carers. Within resources available to carers of people with a learning disability.	Improved quality of life
C	Learning disability – develop short break service in Newark	To be determined	Improved health and emotional wellbeing
A	Mental health – to increase the number of full carers assessments undertaken by 25% in years 1 and 2	To increase and secure long-term funding to support promotion activities. Within resources available to carers of people with mental ill health.	Choice and control
A	Increase the number of short breaks for carers of people with learning disabilities	Within available resources to carers of people with a learning disability.	Improved health and wellbeing
A	Increase the number of short breaks for carers of people with mental ill health	Within available resources to carers of people with mental ill health	Improved health and wellbeing
A	Expand the support provided from carer specific services	Within the available £80,000 funding for carer specific services.	Improved health and wellbeing

A	Expand and improve the provision of information, advice, training and number of carers who benefit from the emergency card scheme	Within the available funding within the Carers Unit	Improved quality of life
B	Provide an emergency service for carers according to guidelines to be produced by the Adult Social Care and Health of Health	Anticipated funding from the Department of Health £237,000	Improved health and wellbeing
A	The Welfare Rights Team will work with the Carers Unit to increase the take of benefits and support to carers	Within the available funding within the Carers Unit	Improved health and wellbeing
A	Exploration of a dedicated Welfare Rights post for carers	Within available resources to carers of older people and physical disability.	Improved health and wellbeing
B	Increase the number of short breaks for carers of people with a head injury	Within available resources to carers of people with a physical disability.	Improved health and emotional wellbeing
A	Increase the number of short breaks for carers of people with autism	Within available resources to carers of people with a learning disability.	Improved health and emotional wellbeing
A	Audit existing carer support services to ensure they are meeting the needs of carers of people with Asperger's syndrome.	Within available resources to carers of people who have aspergers syndrome.	Improved health and emotional wellbeing
B	Develop Carers information and support service for carers of people with Aspergers Syndrome	Within available resources to carers of people who have aspergers syndrome.	Improved health and emotional wellbeing

A	Provide emergency community alarm equipment to provide some peace of mind for carers	£45,045 from Carers Specific budget	Improved quality of life
A	Establish 4 Carer Assessment Worker posts to increase the number of assessments and developments of services. One post will have countywide responsibilities to improve take up and the development of services for the BME communities	£180,000 from the Community Care Support Budget	Choice and control/personal dignity and respect

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## **11. HOW WILL WE KNOW IF WE ARE GETTING IT RIGHT?**

### **You will tell us.**

We have collated a database of carers who are willing to be consulted about services. These consultations will not only involve meetings but may also take the form of questionnaires and telephone interviews.

We will listen to carers at forums established by ASCH and partner agencies.

We will review the appropriateness of existing services with carers and make suitable adjustments.

We will monitor quality standards of commissioned breaks schemes.

Annual performance targets will be set and measured and we are regularly monitored on our performance.

### **The role of the County Carers Unit**

The feedback you give us is collated by the County Carers Unit.

This unit also provides telephone information, advice and signposting to carers and staff within Adult Social Care and Health as well as other enquirers. In addition the unit produces newsletters and leaflets providing information. The number of outlets for this information is being increased in order to ensure easier access for all carers.

Carers may register on the Carers Connect list which ensures information can be disseminated as services or policies change.

Carers may also register for an emergency card at the unit. This gives carers peace of mind, knowing that plans are in place to provide ongoing care should they be unable to return to the person cared for because of an emergency.

The Unit works together with Carers Coordinators within the PCTs, the carer support workers funded in the voluntary sector and we will be developing this further.

Regular conferences and exhibitions are organised by the unit. The Partnership Officer (Carers) attends carers groups on request to talk on services and the rights of carers. We also participate in carer awareness and consultation events organised by partner agencies.

The unit undertakes monitoring and development of the services commissioned from the carers grant. We will work closely with County Contact to examine the issues which carers bring to them and will ascertain what those issues are, so that we can seek better to address them.

The County Carers Unit may be contacted at: 3, Church Street, Arnold, Nottingham NG5 8FD, telephone: 0115 9671063 or email [carersunit.ss@nottsc.gov.uk](mailto:carersunit.ss@nottsc.gov.uk)

## 12. ACKNOWLEDGEMENTS

Nottinghamshire County Council Social Services Adult Social Care and Health would like to thank carers and partner agencies who have given their time in the consultation and development of this strategy:

African Caribbean and Asian Forum	Age Concern Nottingham and Nottinghamshire
Alzheimer's Society	APTCOO
Ashfield Links Forum	Ashfield PCT
Bassetlaw CVS	Bassetlaw MIND
Bassetlaw MENCAP	Bassetlaw PCT
Bassetlaw Working with Carers Black & Ethnic Advisory Groups Carers Council	Carers Federation
Central Nottingham MIND	County Contact
Crossroads	Dyspraxia Connection
Gedling PCT	Headway House
Mansfield CVS	Memories Social Club
Motor Neurone Disease Association	Multiple Sclerosis Society
NAVO	Newark MENCAP
Newark & Sherwood CVS	Newark MIND
NoRSACA	Nottingham City Council
Nottingham City Hospital	Nottingham and Nottinghamshire Deaf Society
The Play Centre	Rethink
Rushcliffe CVS	Rushcliffe MENCAP
Self Help Nottingham	Time Out
Rushcliffe PCT	Broxtowe & Hucknall PCT
Nottingham Teaching PCT	Mansfield PCT
Nottinghamshire Healthcare Trust	Queens Medical Centre

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1. Carers' experiences of being assessed by Social Services. S. Berry, J.Johal, D.Oxley, August 2002
2. Carers' problems in receiving support services. Report on a survey of carers in Nottinghamshire. North Notts Carers Advisory Group and County Carers Unit December 2006
3. How carers deal with emergencies and unplanned events. Report on a survey of carers in Nottinghamshire. S. Berry October 2005