Self Assessment Tool – How is this council (and partners) supporting carers?

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<tr>
<th>Strategy Theme</th>
<th>Drivers</th>
<th>Key Partners</th>
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<tbody>
<tr>
<td>1. <strong>Information and Recognition</strong></td>
<td><strong>Key principle:</strong></td>
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<td></td>
<td>• All partners need to be able to recognise and signpost a carer</td>
<td>PCTs, Acute Trusts, District Councils (for Shire Councils), Voluntary Organisations, Adult Education, Learning and Skills Councils, Job Centre Plus etc</td>
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<td></td>
<td>• All partners need to value and invest in their role as information providers</td>
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<td>• All levels of all staff in all agencies should have a basic understanding of carers’ issues and know how to signpost them</td>
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<td>• A multi-agency strategy should be in place to ensure that all other initiatives consider carers, and wherever possible have added value for carers</td>
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<td></td>
<td>Carers (Equal Opportunities) Act (and previous carers legislation)</td>
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<td>Race Relations (Amendment Act)/ Disability Discrimination Act – languages and formats</td>
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<td>Carers Data from Census – New CSCI Performance Indicator C62 services for carers - what proportion of carers being reached?</td>
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<td></td>
<td>Standard 6 Mental Health National Service Framework, NSF for Older People (throughout), Long term conditions NSF – (quality requirement 10 – carers)</td>
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<td>Local Strategic Partnerships</td>
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<td>Social Inclusion Agenda</td>
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**Things to look at:**

- [Is there a multi-agency Carers Strategy?](#)
- Is there a lead officer for Carers in the council?
- If so at what level is this post? How much real influence does it have over a) spending b) developments in front-line practice?
- Is there comprehensive guidance on carers for front line (ie in contact with the public) staff?
• Is information a key heading within the multi-agency strategy?
• Are materials shared and/or is there clear sign-posting between agencies?
• Are there carer-friendly materials about carers’ rights?
• Is there a single carers’ web-site or pages that link all the disparate information together?
• Is there a strategy for getting this information through professionals to non-IT literate carers?
• **What evidence do you have about how easy or difficult it is to find information?**
• Is there joint work around carers’ week each year?
• Are local voluntaries’ campaigns and awareness-raising events fully linked in to strategy work?
• Are there protocols between the NHS and Social Services around identifying, registering and referring carers to Social Services and voluntary organisations?
• Are employees of the Council who are carers aware of work-life flexibilities and rights around employment?
• Are local voluntaries’ campaigns and awareness-raising events fully linked into strategy work?

**Questions for local delivery:**
• How does a GP know when to refer a carer to Social Services?
• How do you know if Primary Care workers understand carers’ issues?
• What information is there in GP surgeries, Hospitals, Pharmacies etc so carers can self-identify and ask for information?
• What do partners know of s3 of Carers (Equal Opportunities) Act?
• How will front-line staff provide sign-posting information to help carers who wish to get back to work under s2?
• How does a carer who only sees a GP know if they are a carer?
• What information is there in GP surgeries helping carers to identify themselves and ask for information?
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<tr>
<td><strong>2. Time Off</strong></td>
<td>Carers Legislation</td>
<td>Voluntary organisations, service providers,</td>
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<td></td>
<td>Carers Grant and monitoring through the Delivery and Improvement Statement</td>
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**Key Principle:**
- All carers have a right to a life outside caring
- Good quality, reliable, flexible breaks services which are a positive experience for the user, must be available

**Things to look at:**
- Is there evidence that carers feel they have access to the right sorts of breaks in the right quantity? Where are the gaps?
- Over the years that the council has been receiving Carers Grant, can it demonstrate a shift toward higher quality and more flexible breaks services?
- Are there ways in which carers and users can manage their own breaks (voucher schemes, or other flexible bookings schemes etc) and flexible use of direct payments and carers’ direct payments?
- How do carers influence commissioning? How do carers get feedback on this area of work?
- Are there concessions for carers around leisure, adult education etc?
- Are there pampering, relaxation and other sessions that benefit carers who can access time off?

**Questions for local delivery:**
- Can you demonstrate that breaks are always discussed in a carers’ assessment?
- Are there services that carers can access directly (carers often say they value these)?
- How do you routinely get information about carers’ experiences of their assessment and its quality?
### Strategy Theme

**3. Emotional Support**

**Key principles:**

- Practical help that does not reflect the emotional needs of the carer will be of limited value in sustaining the caring role.
- There is a need for the range of forms of counselling and informal support available to citizens generally, to be aware of carers' needs, as well as specific resources.
- Being taken seriously, included in processes, valued as a partner in care have a positive emotional impact.

### Drivers

- Evidence that breakdown of caring role is often because emotional issues have not been properly dealt with. In particular guilt which prevents carers from asking for adequate levels of support.
- Valuing People (particularly around Older Carers of Adults with Learning Disabilities)
- Health Promotion and Prevention Agendas

### Key Partners

Voluntary organisations, especially counselling services, Samaritans, social care and health staff, psychology services, Primary Care Counselling services

### Things to look at:

- If pressures on front-line staff are such that informal support is not often going to be provided through this route, what resources are there that they can refer on to?
- What measures are in place to show that such support is of a high quality and has positive outcomes?
- Is there evidence that carers feel they have access to the right sorts of support in the right quantity? Where are the gaps?
- Do carers who need counselling have access to relevant services? Are there fast-tracking arrangements with, eg Relate?
- How is counselling through Primary Care available to carers and how do carers know about it?
- Is there a range of carers’ groups that provide a range of types of support, from social at one end to therapeutic at the other?
- Are there ways in which carers can purchase their own relaxation and stress-busting services through use of Carers Services?
- What opportunities do carers/former carers have to support each other over the phone or internet?

### Questions for local delivery:

- Can you demonstrate that emotional needs are always discussed (when appropriate) in a carers’ assessment?
- Are there waiting lists for support? What do carers locally say they most need? What about BME carers?

### 4. Strategy Theme

<table>
<thead>
<tr>
<th>Training and skills to care and LifeLong Learning</th>
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<tr>
<td><strong>Key Principles:</strong></td>
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<tr>
<td>- Carers need information they need to care (benefits advice, understanding of conditions etc) so that they can make informed choices and sustain their caring role</td>
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<tr>
<td>- To avoid social exclusion carers need access to skills and training to allow them to benefit from leisure and return to work</td>
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<tr>
<td><strong>Drivers:</strong></td>
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<tr>
<td>Research indicates that carers who are given the information and advice they need to care (benefits advice, understanding of conditions etc) will cope better with the role.</td>
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<tr>
<td>In addition, physical damage to carers is a common result of lack of knowledge about moving and handling safely.</td>
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<td>Social exclusion leads to depression, lack of confidence and disadvantage in the field of work</td>
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<td><strong>Key Partners:</strong></td>
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<tr>
<td>Health colleagues, Money Advice Agencies, Adult Education, Voluntary organisations, registered moving and handling trainers, community pharmacy, Job Centre Plus, Learning and Skills Council, Business Link, District Councils (for Shire Counties) etc</td>
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### Things to look at:
- Are there any general courses that carers can attend about generic issues (benefits, social services etc)?
- Are there any specific courses that carers can attend about specific conditions, medicines management etc?
- What measures are in place to show that carers value such training and that it has positive outcomes?
- Is there a way that ‘expert carers’ can support other carers through such processes?
- Does the Learning and Skills Council locally have a priority around funding carers to access adult learning?

### Questions for local delivery:
- How many new cases of eg Alzheimers are diagnosed per PCT area per year? How might outcomes improve if all the relevant carers had access to training about the disease and the implications of the caring role?
- How involved in the Carers Strategy are employment and skills advice providers?
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<tr>
<td>Financial security (access to work or benefits)</td>
<td>S2 Carers (Equal Opportunities) Act, Social Inclusion Agenda</td>
<td>Money advice providers, CABx, Job Centre Plus, NextStep, LSC, etc, Action for Carers in Employment Projects, HR Departments of all Public Sector Bodies, Business Link (re helping small and medium enterprises to see the value of employing carers)</td>
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**Key principles:**
- Carers need to be in a position to maximise their income and life chances through access to work and/or benefits advice.

**Things to look at:**
- How do carers get money advice?
- How do carers get advice about back-to-work initiatives etc?
- Are there any specific courses aimed at skillling carers for return to work?
- **As two of the biggest employers locally how robust and well-publicised are the council and the NHS’ work-life balance policies and how well-targeted and promoted to carers?**
- Can you be sure you are not losing good staff because they do not feel they can ask for flexibility, or because they are not accessing enough service?
- How are the needs of working carers influencing e.g. hours of day services etc?

**Questions for local delivery:**
- Do carers’ assessments always address benefits and work issues?
- What sign-posting information is there for carers thinking of returning to work?
- How can you be sure that front-line workers (and carers) do not make the assumption that services are too scarce and inflexible for the carer to stay in work?
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| 6. A voice        | Government Policies across the Board (‘users and carers’)  
|                   | Need to prevent unhelpful duplication and ‘usual suspects’ approaches  
|                   | Payment Policy for Users and Carers (CSCI and other examples)  
|                   | OPSR Principles of Customer Feedback and Ideal Framework for research in Public Services | All, especially carers and their organisations |

**Key principles:**
- Carers must have a voice in relation to their own immediate situation
- Carers’ views should be routinely collected and should influence the way services are provided
- Carers who regularly offer their skills and expertise should be reimbursed for their time

**Things to look at:**
- How do carers get involved?
- Are there carers’ registers in Primary Care/Social Services/Voluntary Organisations and if so how are they used for consultation?
- How are carers involved in audit/quality monitoring/satisfaction surveys in relation to their own experience of services?
- What forums do carers have where they meet elected members or senior managers?
- How do elected members or senior managers account to carers for their actions?
- How is the voice of the ‘activist’ carer balanced with the voice of the ‘marginalised’ carer or the BME carer etc?

**Questions for local delivery:**
- How can carers influence practice and service provision locally?
- How consistent is carers’ ability to influence across the patch?
• Do you have a clear expenses (and where appropriate) payment policy for involved carers?

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<td>7. Quality Services</td>
<td>Carers’ Legislation and Practice Guidance</td>
<td>Carers and all partners</td>
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<td>DH Quality standards for local carers support services</td>
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**Key principles:**
- A poor (unreliable/inflexible) service can sometimes be less helpful to a carer than no service at all
- There must be robust mechanisms for feedback from carers and partners on the quality of services provided

**Things to look at:**
- [How do carers’ views help set standards in the council and partners’ services?](#)
- How are these integrated with user views (carers rarely value services users do not value)?
- How are carers involved in audit/quality monitoring/satisfaction surveys in relation to their own experience of services?
- [How are carer-centred flexible services under the Carers and Disabled Children Act helping move away from one-size-fits-all services?](#)
- How much choice and control do carers (and users) actually have about the ways services are provided?

**Questions for local delivery:**
- How can carers influence practice and service provision locally?
- What evidence do you have of the effectiveness of carers’ assessments?
- How are carers involved in rolling out best practice across the patch?
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| 8. Equity of access and culturally and age appropriate support | Race Relations (Amendment) Act  
Disability Discrimination Act  
Children Act and Carers Legislation | BME Groups and Organisations  
Young Carers  
Disabled parents’ groups  
Carers with disabilities  
Gay and Lesbian Carers |

**Key principles:**
- All carers have specific needs relating to their age, individual lifestyles and responsibilities
- Some groups of carers (black carers, young carers, disabled carers) may require specific attention if they are to get the support they need

**Things to look at:**
- How are young carers, gay and lesbian carers, disabled carers and black and minority ethnic carers engaged in developments for carers locally?
- Do they need separate strategies, or is it best to ensure the overarching strategy addresses their needs? Either way can you guarantee their influence?
- How are carer-centred flexible services under the Carers and Disabled Children Act helping move away from one-size-fits-all services to support eg BME Carers better?
- How much choice do carers from these groups (and users) actually have about the ways services are provided?

**Questions for local delivery:**
- How are such carers involved in guaranteeing the ‘cultural competence’ and ‘individual outcome focus’ for specific groups?
• How are carers involved in rolling out best practice across the patch?
• How are you promoting support to carers in a way that truly makes all carers feel welcome?

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<tr>
<td>9. Preparing for Emergencies</td>
<td>Children Act and Carers Legislation and Practice Guidance Carers UK – Back Me Up campaign nationally</td>
<td>All operational staff especially staff assessing carers, Carers Organisations (especially any running emergency schemes), Emergency Duty Teams, Call Centres etc</td>
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Key principles:
• All carers worry about what will happen if an emergency arises and their sense of well-being will be enhanced and their stress reduced by careful preparation for emergencies
• All good carers’ assessments should address this aspect of supporting carers

Things to look at:
• Do you have any specific schemes for carers when there is an out of hours emergency?
• How do carers access Emergency Social Services? How is this promoted?
• What work around prevention of admission is in place which allows for carers to be ill, or have another family emergency, without the cared for person ending up in hospital or residential care?
• Are carers routinely helped to discuss an emergency plan as part of their assessment and carers care plan?
• Are you working with local carers’ organisations to see how carers who are not currently using local authority support can prepare for what might happen in an emergency (carers’ emergency plan)?
• Have you a methodology for showing this sort of support will save the council/NHS money in the long run?

Questions for local delivery:
• Are staff satisfactorily trained in developing a carers’ care plan to include emergencies?
Is training on the new Act the ideal opportunity to include this crucial element of care planning?
How might this theme link with the whole theme of emotional support?

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<tr>
<td>10. Good quality management information about carers</td>
<td>National Carers’ Performance Indicator C62</td>
<td>Other statutory bodies</td>
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<td></td>
<td>Need for better local performance indicators around carers</td>
<td>Local voluntary organisations</td>
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<td></td>
<td>Need to measure impact of SAP, implementation of new legislation etc</td>
<td>Carers</td>
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<tr>
<td>Things to look at:</td>
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<tr>
<td>• How good is recording practice in your council?</td>
<td>Have you audited to compare electronic and hard copy files to confirm</td>
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<td>accuracy of Performance Indicator around carers’ assessments?</td>
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<td>• How good is the data primary care hold through</td>
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<td>registration of carers?</td>
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<td>• Are smooth and effective referrals being made</td>
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<td>between agencies?</td>
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<td>• Do you know how many carers benefit (and from</td>
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<td>what services) funded in the voluntary sector,</td>
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<td>including Direct Access services?</td>
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<td>• Have you any measures that can indicate where</td>
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<td>early intervention to support carers appropriately</td>
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<td>may have supported effective discharge from (or</td>
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<td>prevented admission to) hospital or residential</td>
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<td>care, or prolonged independence in the community?</td>
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Questions for local delivery:

- Do local professionals understand the importance of the data rather than regarding collecting it as a bureaucratic chore?
- Is there a role for carers locally engaging with this data as part of monitoring and increasing its profile?
- Is there regular audit of carers’ assessment and recording practice locally?