

## BARNSELEY METROPOLITAN BOROUGH COUNCIL

**This matter is not a Key Decision within the Council's definition and has not been included in the relevant Forward Plan**

**Report of the Executive Director -  
Communities**

### **CARERS' STRATEGY 2017-2020**

#### **1. Purpose of Report**

- 1.1 To present the refreshed Carer's Strategy 2017-2020 and seek Cabinet approval for its adoption.

#### **2. Recommendations**

- 2.1 **That Cabinet approve the refreshed Carer's Strategy and note the intention to develop a business case as the basis to pursue a new support provider within existing resources.**

#### **3. Introduction**

- 3.1 The current Carers Strategy ran from 2013-2016. Since then there have been a number of changes in Health and Social care policy and strategic thinking, most notably the implementation of the Care Act 2014 placing a duty on local authorities to provide Carers Assessments. Carers have been supported indirectly through commissioned services and more widely through the Carers Grant (Better Care Fund) which has generated a wide variety of initiatives required to meet the objectives identified in the last Carers Strategy.
- 3.2 A recent review of existing commissioned services, changes to policy and consultation with service providers and carers has identified the need to review and refresh the strategy.

#### **4. Proposal and Justification**

- 4.1 The strategy, developed using a co-produced model, identifies the gaps in support for carers and provides the outcomes we need to work towards to ensure that carers are supported as a major contributor to not only the health and wellbeing of the population but also to the Early Help and Prevention agenda.
- 4.2 The strategy acknowledges that there is a need to move towards a more comprehensive solution potentially to pool resource and consider a consolidated offer. The strategy provides the direction to support a review of current financial and other resources to enable a future offer.
- 4.3 A strategic review based on current commissioning and grant activity is the next stage in the process that has already commenced. This will inform the business case and future commissioning intention to support this.

4.4 A task and finish group (made up of partner representation from the Health and Wellbeing Board and Carers Strategy workshop) will be pulling together the strategy action plan for presentation to the Health and Wellbeing Board.

4.5 A strategy steering group comprising Carers, providers, partners (who have all contributed to the strategy development so far) will be established to identify and drive forward the actions we need to achieve the outcomes identified.

## **5. Consideration of Alternative Approaches**

5.1 An alternative approach would be to have no Carer's Strategy but this would run the risk of the commissioning activity being unmatched to an evidenced need.

## **6. Implications for Local People / Service Users**

6.1 The strategy will provide a clearer offer of support through a single contact point which will improve the customer service journey for all carer's and by implication, the people they care for.

6.2 The strategy provides the opportunity and framework for an evidence-based model of support. This will enable the carer's voice to be central to the development of the future delivery model which will be subject to a separate planning and decision making process

## **7. Financial Implications**

7.1 There are no direct financial implications associated with this report. There will be a separate business case for the commissioning intentions which will contain the financial implications.

## **8. Employee Implications**

8.1 Many of the Council's own employees, and that of our partners, will have carer's responsibilities. The strategy action plan will need to review considerations associated with this and develop a self-assessment tool so that agencies can review how they are supporting their employees with carer's responsibilities.

## **9. Communications Implications**

9.1 The strategy will be promoted to known carers and other stakeholders in the first instance as they are the primary audience. Existing established mechanisms for reaching these groups will be pursued.

## **10. Consultations**

10.1 The Strategy has been developed based upon extensive stakeholder engagement. It was important to co-design the strategy in order to ensure that it meets the needs of partners, carers and service users. Types of consultations undertaken and the associated timescales were as follows:

- Carers Survey. May-September 2016
- Consultation with public through Carers Rights day. November 2016
- Consultation with Carers and Friends group. Autumn 2016 to Spring 2017
- Awareness session with Service User and Carer Board. January 2017
- Carer support provider survey. December – January 2017
- Carers strategy planning workshop. February 2017
- Communities DMT April 2017
- SSDG April 2017
- Senior Management Team May 2017

## **11. The Corporate Plan and the Council’s Performance Management Framework**

- 11.1 The Carer’s Strategy contributes most directly with the ‘People Achieving Their Potential’ objective. By supporting carers we will also help more people stay independent and where possible remain economically active.

## **12. Promoting Equality, Diversity and Social Inclusion**

- 12.1 The Carers Strategy development has taken an inclusive approach and we have recognised that anyone can become a carer at any stage in their life regardless of personal circumstances or background.

- 12.2 A full equality impact assessment will be undertaken associated with the findings of the business case and the future commissioning intentions.

## **13. Tackling the Impact of Poverty**

- 13.1 The strategy acknowledges that carers should not be financially disadvantaged as a result of their caring role.

## **14. Tackling Health Inequalities**

- 14.1 The strategy acknowledges that carers own health needs should be recognised and the health and wellbeing of carers should be supported.

## **15. Risk Management Issues**

- 15.1 If the Carer’s Strategy is not taken forward there is the risk of challenge from existing commissioned services, VCSE providers, Carers, health and social care providers, which could result in reputational damage.

- 15.2 If the Carer’s Strategy is not taken forward there is a risk that people that provide care in the borough will not be supported leading to added vulnerability for those who require support.

## **16. List of Appendices**

- 16.1 Appendix 1: Carers Strategy

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**Financial Implications /**

**Consultation** .....

*(To be signed by senior Financial Services officer where no financial implications)*