Draft Hampshire Joint Carers Strategy
2018-2023

Identify and recognise carers

Support carer health and wellbeing

Enable carers to have a life alongside caring
Contents

1. Introduction ................................................................. 3
2. Our Vision........................................................................ 5
3. National Context ............................................................ 6
4. Local Context .................................................................. 8
5. Identifying and Recognising Carers ................................. 14
6. Health and Wellbeing ...................................................... 17
7. Having a Life Alongside Caring......................................... 19
8. Young Carers and Young Adult Carers ............................ 22
9. Seldom Heard Carers......................................................... 25
10. Appendices ..................................................................... 27

Jointly prepared by carers and the following organisations:
1. Introduction

The value informal carers bring to our society is widely acknowledged in many key UK strategic documents spanning social care, health services and the voluntary sector. It is evident that without their carers, many people would not be able to live their lives as they do at present. Our health and social care systems, in Hampshire and nationally, rely heavily on our unpaid carers. The value of the contribution made by carers in the UK is now estimated to be £132 billion each year\(^1\).

With the continued pressures on public spending and increased numbers of people requiring care and support, the need for public services to recognise the value carers contribute and to support them in their role is more important than ever. Our ageing population, particularly evident in Hampshire, indicates that the numbers of people requiring care and support will continue to rise.

This strategy sets out a new vision for supporting carers of adults in Hampshire, backed by a number of practical steps that social care and health organisations, working together with carers, will take over the next five years to ensure that carers in Hampshire are able to enjoy good levels of health and wellbeing and are effectively supported to maintain their caring relationships wherever possible.

Developing the Strategy

We acknowledge that carers in Hampshire want the same things as those identified in the Carers Strategy: Second National Action Plan 2014-2016\(^2\), however we also aim to focus our strategy on the local needs of carers in Hampshire. We have worked with carers to gain their opinions and we continue to do so, as we recognise their individual needs may change over time. In addition to formal consultation, we regularly draw upon the expert knowledge of our local carers support services.

This strategy has been written jointly with carers, health and social care professionals and the voluntary sector. The work on the strategy commenced after a consultation event with carers, which took place in July 2016. A Joint Carers Strategy Group was established. This has met regularly with the aim of ensuring everyone’s voice could be heard and that all partners could contribute to the strategy.

The value of the contribution made by carers in the UK is now estimated to be £132 billion each year.
Carers have expressed the importance of monitoring the progress of the strategy following publication. In order to ensure that objectives are met, a Strategy Implementation Group will be established. Action plans will be developed in partnership with the organisations that have signed up to the strategy, and these will be regularly reviewed by the Strategy Implementation Group.

The Hampshire Young Carers Strategy will sit alongside the Hampshire Joint Carers Strategy. This will also be launched in 2018.

**Carers Charter**

Carer representatives from the Joint Carers Strategy Group have developed a Carers Charter which focuses on a set of four key principles for supporting carers. It is anticipated that all health and care organisations that interface with carers will sign up to and follow the principles in the Carers Charter.

The charter has been developed so that it can be displayed in places carers may visit, such as GP surgeries and pharmacies. It will also be displayed by key partner organisations in workplaces to promote these principles amongst staff. The Carers Charter is included at the end of this document as Appendix A.

**Who is a Carer?**

A carer is someone who helps another adult, usually a relative or friend, in their day-to-day life. This is not the same as someone who is paid or provides care professionally, or through a voluntary organisation. Carers may frequently provide support including assistance with personal care, household tasks, finances, emotional support and leisure pursuits for the person they care for.

Caring responsibilities could include supporting a relative, partner or friend who is ill, frail, disabled or who has mental health or substance misuse problems. Any one of us, including children and young adults, at any time could become a carer either on a short term basis or for a longer period.

It is also important to recognise that some carers will experience more complex situations such as caring for more than one person, for example a parent and a child (“sandwich caring”) or an older couple caring for each other (“mutual caring”).
2. Our Vision

The success of implementing this strategy lies firmly in a collaborative approach which brings together carers, health and social care professionals, and the voluntary sector.

The Joint Carers Strategy Group provided the opportunity for representatives of different organisations to work alongside carers to develop the following vision:

To work in partnership with carers to establish and coordinate easily accessible support across Hampshire:

- Identifying those who help or support friends and family members
- Giving them timely access to information and help offered in their local community, by health and social care professionals, charities, and government organisations
- Assisting carers to incorporate their caring role into a healthy and fulfilling life.

Through extensive consultation with carers in Hampshire, we have examined a number of key areas that are important for carers and we have built upon this vision and established a number of strategic priorities. These are covered in the following chapters.
3. National Context

On a national level, there has been significant attention paid to the role of carers and to the importance of supporting them, which is reflected in legislation and government policies. The Hampshire Joint Carers Strategy is focused on the specific needs of local carers, but also draws upon the national context to inform and develop strategic priorities.

Key national documents relating to carers:

NHS England’s Commitment to Carers 2014

NHS England held a series of engagement events for carers and as a result developed 37 commitments based around the following 8 priorities:

- Raising the profile of carers
- Education, training and information
- Service development
- Person-centered, well-coordinated care
- Primary care
- Commissioning support
- Partnership links
- NHS England as an employer.

Individual Wellbeing Outcomes (Care Act)

- Personal dignity (including treatment of the individual with respect)
- Physical and mental health and emotional wellbeing
- Protection from abuse and neglect
- Control by the individual over their day-to-day life (including over care and support provided and the way they are provided)
- Participation in work, education, training or recreation
- Social and economic wellbeing
- Domestic, family and personal domains
- Suitability of the individual’s living accommodation
- The individual’s contribution to society.

All of these outcomes are equally important as each other and should be promoted through the Care Act assessment and support planning process.

Care Act 2014

- New rights have been introduced for carers and new duties are in place for local authorities
- Carers have the same rights to an assessment and support as those who they care for
- There is a national eligibility criteria for carers and those who they care for which identifies whether they are entitled to support from the Local Authority with meeting their care and support needs
- Following assessment a support plan should be generated with the carer that sets out how their eligible needs will be met. This may include services funded by the Local Authority and other ways of meeting their outcomes, including from their own resources and support from the local community.

Hampshire’s strategy reflects the key priorities set out in the Carers Strategy: Second National Action Plan 2014-2016. The national plan focuses specifically on progress in four priority areas:

Identification and recognition

- Supporting people with caring responsibilities to identify themselves as carers so they can access the information advice and support that is available
- Carers feeling their knowledge and experience are valued by health and social care professionals
- Involving carers in planning individual care packages and in developing local strategies.

A life alongside caring

- Personalised support both for carers and those they support, enabling them to have a family and community life
- Personalising support for carers and the people they support
- Availability of good quality information, advice and support.

Realising and releasing potential

- Enabling those with caring responsibilities to fulfil their education and employment potential
- Support for young carers and young adult carers
- Support for carers of working age.

Supporting carers to stay healthy

- Supporting carers to remain mentally and physically well
- Recognising the impact of caring on health and wellbeing
- Prevention and early intervention for carers within local communities
- Supporting carers to look after their own health and wellbeing.

NHS Five Year Forward View 2014

- To develop quality markers for carer friendly GP practices that promote carer identification, health checks, flu jabs and referral/signposting to advice and support, in order to reduce carer breakdown and improve carer health-related quality of life
- Help health and social care organisations to support carers, including young carers, to avoid reaching breaking point, so that they, and the cared-for person, will be less likely to end up in hospital
- To find new ways to support carers, building on the new rights created by the Care Act, and especially helping the most vulnerable amongst them
- Work with voluntary organisations and GP practices to identify carers and provide better support
- For NHS staff, to look to introduce flexible working arrangements for those with major unpaid caring responsibilities.
4. Local Context

Older people aged 65 and over make up 20.3% of the population in Hampshire compared to 17.6% nationally.

The population of Hampshire is ageing. The proportion of the population aged 85 years and over is expected to increase by almost 30%, to 54,600 people by 2023.

The 2011 Census identified the population of Hampshire to be 1,317,800. Of that number, 132,938 people identified themselves as being a carer (just over 10% of the population) providing unpaid care to family members or others because of long term physical or mental ill health or disability, or old age.

Provision of unpaid care (by hours) of care per week – figure 1

<table>
<thead>
<tr>
<th>Area name</th>
<th>Population</th>
<th>Provides 1 to 19 hours unpaid care a week</th>
<th>Provides 20 to 49 hours unpaid care a week</th>
<th>Provides 50 or more hours unpaid care a week</th>
<th>Total numbers of carers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hampshire</td>
<td>1,317,788</td>
<td>92,224 7%</td>
<td>14,286 1.1%</td>
<td>26,428 2%</td>
<td>132,938</td>
</tr>
<tr>
<td>Basingstoke and Deane</td>
<td>167,799</td>
<td>10,548 6.3%</td>
<td>1,697 1%</td>
<td>2,988 1.8%</td>
<td>15,223</td>
</tr>
<tr>
<td>East Hampshire</td>
<td>115,608</td>
<td>8,497 7.3%</td>
<td>1,106 1%</td>
<td>2,028 1.8%</td>
<td>11,631</td>
</tr>
<tr>
<td>Eastleigh</td>
<td>125,199</td>
<td>8,895 7.1%</td>
<td>1,417 1.1%</td>
<td>2,409 1.9%</td>
<td>12,721</td>
</tr>
<tr>
<td>Fareham</td>
<td>111,581</td>
<td>8,382 7.5%</td>
<td>1,198 1.1%</td>
<td>2,299 2.1%</td>
<td>11,879</td>
</tr>
<tr>
<td>Gosport</td>
<td>82,622</td>
<td>5,239 6.3%</td>
<td>988 1.2%</td>
<td>1,949 2.4%</td>
<td>8176</td>
</tr>
<tr>
<td>Hart</td>
<td>91,033</td>
<td>5,931 6.5%</td>
<td>779 0.9%</td>
<td>1,286 1.4%</td>
<td>7996</td>
</tr>
<tr>
<td>Havant</td>
<td>120,684</td>
<td>8,185 6.8%</td>
<td>1,620 1.3%</td>
<td>3,313 2.7%</td>
<td>13,118</td>
</tr>
<tr>
<td>New Forest</td>
<td>176,462</td>
<td>14,238 8.1%</td>
<td>2,195 1.2%</td>
<td>4,314 2.4%</td>
<td>20,747</td>
</tr>
<tr>
<td>Rushmoor</td>
<td>93,807</td>
<td>5,145 5.5%</td>
<td>989 1.1%</td>
<td>1,616 1.7%</td>
<td>7750</td>
</tr>
<tr>
<td>Test Valley</td>
<td>116,398</td>
<td>8,551 7.3%</td>
<td>1,272 1.1%</td>
<td>2,292 2%</td>
<td>12,115</td>
</tr>
<tr>
<td>Winchester</td>
<td>116,595</td>
<td>8,613 7.4%</td>
<td>1,025 0.9%</td>
<td>1,934 1.7%</td>
<td>11,572</td>
</tr>
</tbody>
</table>

Source: 2011 Census

A breakdown of the unpaid care hours provided in Hampshire per week, as per the 2011 Census, is as follows:

- Provides 1 to 19 hours unpaid care a week 69.4%
- Provides 20 to 49 hours unpaid care a week 10.7%
- Provides 50 or more hours unpaid care a week 19.9%

Between the 2001 Census and the 2011 Census, there was a 10% increase in the number of people providing unpaid care in Hampshire. This represents an increase of almost 20,000 carers. Gosport and Fareham had the largest percentage increase in the provision of unpaid care (15.5% and 14.0%, respectively). Both districts were...
in the top 10 districts/borough councils in England for the largest percentage increase in unpaid care. Hart and Winchester had the lowest percentage increase in the provision of unpaid care (4.5% and 5.4%, respectively). Overall in 2011, Rushmoor had the lowest percentage provision of unpaid care which is likely to reflect its younger population, whilst the New Forest had the highest percentage, reflecting the oldest population.

The size of the older population is projected to increase and therefore there will be a corresponding increase in the number of older carers. Given the tightening of resources in the public sector, the role of carers will become increasingly pivotal in ensuring that people maintain independence and are supported to live in their own homes.

Percentage of people who provide unpaid care by age group – figure 2

<table>
<thead>
<tr>
<th>Area</th>
<th>Percentage of people aged 0-15 who provide unpaid care</th>
<th>Percentage of people aged 16-24 who provide unpaid care</th>
<th>Percentage of people aged 25-34 who provide unpaid care</th>
<th>Percentage of people aged 35-49 who provide unpaid care</th>
<th>Percentage of people aged 50-64 who provide unpaid care</th>
<th>Percentage of people aged 65+ who provide unpaid care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hampshire</td>
<td>2%</td>
<td>8%</td>
<td>12%</td>
<td>22%</td>
<td>40%</td>
<td>26%</td>
</tr>
<tr>
<td>Basingstoke and Deane</td>
<td>2%</td>
<td>8%</td>
<td>10%</td>
<td>22%</td>
<td>37%</td>
<td>26%</td>
</tr>
<tr>
<td>East Hampshire</td>
<td>2%</td>
<td>7%</td>
<td>11%</td>
<td>22%</td>
<td>39%</td>
<td>26%</td>
</tr>
<tr>
<td>Eastleigh</td>
<td>2%</td>
<td>8%</td>
<td>12%</td>
<td>23%</td>
<td>40%</td>
<td>27%</td>
</tr>
<tr>
<td>Fareham</td>
<td>2%</td>
<td>8%</td>
<td>12%</td>
<td>23%</td>
<td>40%</td>
<td>27%</td>
</tr>
<tr>
<td>Gosport</td>
<td>3%</td>
<td>10%</td>
<td>14%</td>
<td>24%</td>
<td>37%</td>
<td>26%</td>
</tr>
<tr>
<td>Hart</td>
<td>1%</td>
<td>7%</td>
<td>9%</td>
<td>18%</td>
<td>37%</td>
<td>26%</td>
</tr>
<tr>
<td>Havant</td>
<td>2%</td>
<td>10%</td>
<td>15%</td>
<td>25%</td>
<td>40%</td>
<td>27%</td>
</tr>
<tr>
<td>New Forest</td>
<td>2%</td>
<td>9%</td>
<td>12%</td>
<td>25%</td>
<td>43%</td>
<td>29%</td>
</tr>
<tr>
<td>Rushmoor</td>
<td>2%</td>
<td>8%</td>
<td>12%</td>
<td>21%</td>
<td>35%</td>
<td>23%</td>
</tr>
<tr>
<td>Test Valley</td>
<td>2%</td>
<td>9%</td>
<td>12%</td>
<td>23%</td>
<td>40%</td>
<td>28%</td>
</tr>
<tr>
<td>Winchester</td>
<td>2%</td>
<td>6%</td>
<td>11%</td>
<td>22%</td>
<td>42%</td>
<td>26%</td>
</tr>
</tbody>
</table>

Source: 2011 Census

Although only a small percentage of young people in Hampshire aged under 18 are carers, the 2011 Census showed that there were a total of 4,019 young carers in Hampshire at that time. Being a young carer may have a negative impact on health and life chances and can affect social life and self-confidence, especially when the level of care giving and responsibility to the person in need of care becomes excessive or inappropriate for a young carer. Excessive levels of caring can also lead to lower educational attainment which can impact on young carers’ full potential. For young carers, caring for a parent with an illness or disability, there may be other factors which could also have a significant impact on the young carer’s wellbeing.
Caring may also lead to some carers having to take a career break, change career or reduce working hours, or in some cases even give up work entirely. This can lead to reduced incomes for carers causing additional pressures for them in both the short and long term. Carers in midlife represent a significant proportion of Hampshire carers and may well be caring for children as well as caring for one or both their parents, leading to additional pressure in their daily lives.

People aged over 65 provided almost 25% of all unpaid care. They also provided 40% of the ‘50 or more hours of care’ a week. Where there is a higher proportion of individuals describing their day-to-day activities as ‘limited a lot’, there is also a high proportion of individuals reporting their health as ‘bad or very bad’.

Provision of 50 hours or more of unpaid care, by health rating and limitations of day to day activities. – figure 3

![Bar chart showing provision of 50 hours or more of unpaid care, by health rating and limitations of day to day activities.]

Source: 2011 Census

Carers often suffer adverse consequences due to their caring role, be it financial because they have given up employment to care, or ill health because they ignore their own needs. For more information refer to the ageing well chapter of the Hampshire Joint Strategic Needs Assessment 2017. The impact of poor health can be significant on health and social care systems. Analysis of social care data in 2015-2016 showed that carer breakdown often required reassessment by adult social care, resulting in additional care needs being identified. A study by The Children’s Society indicated that 70% of former young carers suffered long term psychological effects, and 40% had mental health problems. Carers may also need support when they stop becoming a carer, due to feelings of grief and loss.

The following paragraphs in this section describe some of the approaches that are currently available for carers.
A Strengths Based Approach

The Strengths Based Approach looks at how the County Council can assist people to use their own skills, and the resources that are available to them within their social networks and their local community, to meet their care and support needs. Once these avenues have been fully explored, if further support is required to meet eligible care and support needs, then the Council will work with people to commission suitable services for them.

The objective of the Strengths Based Approach in assessing carer needs and planning their support is to ensure their independence, resilience and wellbeing. Supporting carer strengths can help address their needs in a way that allows them to be more in control of their lives. It may also help delay the development of further needs.

Commissioning Services for Carers in Hampshire

Hampshire County Council, in partnership with local health Clinical Commissioning Groups (CCGs), jointly commissions services to support carers of adults with support needs.

In order to ensure that people continue to receive high quality care and support within the context of rising demand and reduced levels of public funding, support services will continue to use the Strengths Based Approach. The County Council is committed to support carers and connect them more effectively to local groups and activities so that they can fully utilise the support available within their communities. This community support could include advocacy, buddying and befriending, support to access employment, training and volunteering opportunities will also continue to be provided.

To be able to increase the capacity of the carer information and advice services and dementia advisor services which are currently provided by the County Council and the CCGs future carer services will be a ‘one stop shop’ providing services to carers of all client groups, including those with dementia and mental health needs. This new service will be procured to bring together the three existing elements of service to reduce resources in the tendering process, improve consistency of services and improve the links between the services.

Additional services for carers who meet eligibility criteria under the Care Act 2014, such as Direct Payments and Take a Break, may be available as appropriate to carers once a carers assessment has taken place. Carers may be entitled to this type of support from the County Council if they meet the national eligibility criteria which are set out in the Care Act 2014, although carers’ needs can often be met without paid support, through the use of the Strength Based Approach. The Council has a process for ensuring that carers receive the right level of support which is included in this document as Appendix B.
Hampshire County Council Adults’ Health and Care department works closely with its Children’s Services department to ensure that the needs of young carers transitioning into adulthood are met. They work specifically with young people aged 16 and over who are likely to continue in their caring role once they reach 18.

There are 132,938 people in Hampshire identified in the 2011 Census as providing unpaid care. Of these, there are approximately 23,000 carers known to statutory and voluntary organisations in Hampshire. One of the objectives of this strategy is to reach out to carers who are not yet known, and do not identify themselves as carers, often meaning they are unaware of the ways that they can be supported to stay healthy and well and enabled to maintain their caring role.

All the partners in this strategy intend to work closely together to ensure they provide good networks of information, advice and support for carers across Hampshire. Future commissioning plans for these services will be developed in close collaboration with carers, and specifically the Strategy Implementation Group.

Connect to Support

In July 2017, Hampshire County Council launched the Connect to Support Hampshire website, connecttosupporthampshire.org.uk. This is an online information and advice guide and directory of services for adults with care and support needs who live in Hampshire. The site is intended for all residents who want to find out about local groups, activities and services within the community, as well as formal care provision. It is also intended for people who may wish to arrange their own care provision. The Connect to Support site is continually being developed and updated. Information for children and young people is located on Hampshire County Council Children’s Services web pages.

The County Council also provides a call centre service (the Contact Resolution and Assessment team), which offers advice, signposting, and telephone assessments for those seeking information about care and support for adults in Hampshire.

Family Information and Services Hub

Information for children and young people is located on Hampshire County Council Children’s Services’ Family Information and Services Hub (FISH Hub): https://fish.hants.gov.uk

In May 2017 the new FISH Hub brought the following resources together in one place: Hampshire’s Local Offer, Hampshire Gateway, the Family Support Service Directory, Spark (for children in care and care leavers), Your Future youth support services, the Family Information Directory (FID) for early years and the Directory of Alternative Provision.
All families in Hampshire can use the Family Information and Services Hub online directory to find a whole range of information, including details of services for carers, which vary from local to national.

Hampshire County Council has a statutory duty to publish and maintain a Local Offer, which provides information, advice and support for children and young people aged 0 to 25 years with special educational needs and/or disabilities and for their families. Hampshire’s Local Offer forms part of the FISH Hub (https://fish.hants.gov.uk/localoffer) and includes information about education, social care, health, transport and transition, to name but a few.

**Telecare**

Hampshire County Council and the PA Consulting Group-led Argenti Telehealthcare Partnership have developed a telecare service for carers and those that they care for. Telecare services include environmental monitoring devices for the person’s home, (which will identify gas leaks or fires, for example), devices to detect whether the person has fallen or is experiencing an epileptic fit, and other communication aids to help carers keep in touch easily with the person they care for, either directly or via a monitoring centre. These devices can offer reassurance to families and reduce the pressure they are under in a wide variety of ways. Personalised equipment can be provided to suit individual needs, and it can offer peace of mind if an emergency were to arise.

It is important that carers are made more aware of the benefits of technology to support them. Carers UK undertook a survey in 2017 which identified that whilst 70% of carers use technology in their everyday lives, only 30% use it in a health or social care context. The survey showed that one in three carers would not think of using technology to support their caring role, however once the technological possibilities were explained to them, over 50% of those carers then said that they would find it very useful. Further information about care technology options can be found at www.carersuk.org/tech. As demands on health and social care services grow over the next few years, technology will play an increasing role in supporting both carers and those they care for to stay independent and well.

**Personal Assistants**

A Personal Assistant (PA) in care assists an individual to live more independently, which in turn supports their carer. PAs help in various ways, such as providing support at home, with leisure activities or at work, and carrying out a range of duties, not just personal care.

Hampshire County Council has implemented personal budgets and one form of receiving these is through a direct payment. People who choose to have a direct payment can use this money to purchase their own care and support known as ‘PAs in Care’. There is a known shortage of PAs across Hampshire which is holding up people being able to use their direct payment to its full potential but the County Council is looking into ways to develop the PA market and in particular developing an online ‘PA Finder’ service.
5. Identifying and Recognising Carers

Many people do not recognise themselves as a carer. They see themselves as a relative, friend or neighbour who is helping out. This means that many carers miss out on the support to which they may be entitled, including a carers assessment. Early identification of carers needs by health and social care organisations and the voluntary sector in Hampshire will help to prevent deterioration in carers’ health and wellbeing.


‘Supporting those with caring responsibilities to identify themselves as carers at an early stage, recognising the value of their contribution and involving them from the outset in designing local care provision and in planning individual care packages.’

National Key Issues

- Supporting people with caring responsibilities to identify themselves as carers so they can access the information, advice and support that is available
- Carers feeling their knowledge and experience are valued by health and social care professionals
- Involving carers in planning individual care packages and in developing local strategies.

Carers should be supported to identify themselves and understand their legal rights. They should be guided to information and advice as early as possible in order to make informed decisions.

Healthcare providers and primary care teams are often the first point of contact for carers seeking help and advice with their caring role. These organisations and teams are therefore in an ideal position to identify and signpost carers to support services. There is information available which demonstrates how many carers are registered as carers by their GP practice. The latest available data from CCGs reveals that the actual percentage of people registered as a carer with their GP practice in Hampshire is approximately 1%, whereas carers represent around 10% of the total Hampshire population. GPs in particular have very many calls on their time and more work is therefore required to develop quick and easy ways for them and their primary care colleagues to be able to signpost people to carer services.

Hampshire County Council is working with a number of GP practices to ensure that they signpost patients to the Connect to Support website to gain information and advice about what care and support is available throughout Hampshire. The previous section gives more details about this website. A range of ‘community connector’ roles is also being developed by both the CCGs and the County Council. These roles will interface between primary care teams and local voluntary organisations and health and care services to improve the way people are put in touch with local care and support services.
The Royal College of General Practitioners has developed some very helpful guides for GPs and their teams to support the 10% or so of their patients who are carers. These can be found in the online learning resources section of the Royal College of General Practitioners website: www.rcpg.org.uk.

Key Aims – Identifying and Recognising Carers

<table>
<thead>
<tr>
<th>Where we are (2018)</th>
<th>Where we want to be (2023)</th>
<th>How we will get there</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health and social care professionals should be able to recognise carers, understand carers’ issues and provide related information/support that may help carers in their caring role. This is not consistent across the county.</td>
<td>Supporting people consistently, with caring responsibilities, to identify themselves as carers so they can access the information, advice and support that is available.</td>
<td>By working with key health, social care professionals and voluntary organisations to identify and develop suitable ways to identify and support carers.</td>
</tr>
<tr>
<td>Carers should be able to obtain information about carers support services from their health providers as well as from other places.</td>
<td>All health providers should signpost carers to appropriate information, advice and support. Some GP surgeries may provide this through carers clinics, or other initiatives to support carers.</td>
<td>Hampshire County Council and health providers need to work closely together to ensure staff are appropriately trained and support is consistent across the county.</td>
</tr>
<tr>
<td>Carers are not always aware that they are entitled to information, advice and support or a carers assessment.</td>
<td>Every carer that comes into contact with professionals will be informed that they are entitled to a carers assessment of their own needs or offered signposting for further information and advice.</td>
<td>Ensure carers understand that support is available and the different options for assessment e.g. face to face, telephone, online ‘wellbeing checks’.</td>
</tr>
<tr>
<td>Young carers in the household are not always identified.</td>
<td>When a personal assessment takes place, young carers in the household should be identified and referred to Children’s Services. They should also be made aware of their entitlement to a young carer’s assessment.</td>
<td>Increased training, publicity and awareness of young carers. A clear process in place to ensure that young carers are identified and appropriate referrals are made.</td>
</tr>
<tr>
<td>Carer assessments are often happening when a carer presents themselves at crisis point.</td>
<td>Better systems in place to ensure carers are offered appropriate support on a proactive basis, focussing on early intervention and prevention.</td>
<td>Develop further training opportunities for all health and social care professionals and other key stakeholders to raise awareness of carers’ rights, responsibilities and the ability to recognise and support carers and provide them with relevant information and advice.</td>
</tr>
<tr>
<td>Carers with multiple caring roles (sandwich carers) are often under significant strain due to their competing caring roles.</td>
<td>Carers with more than one caring role are recognised and considered when planning support.</td>
<td>Carers involved in planning individual care packages including families and young carer involvement. Carers involved in strategic planning.</td>
</tr>
</tbody>
</table>
Case Study – GP Pilot Project

North East Hampshire and Farnham CCG and Princess Royal Trust for Carers in Hampshire

The GP Pilot Project was initiated in the North East Hampshire and Farnham CCG area following on from a consultation that was independently undertaken by Healthwatch Hampshire for carers and their needs.

Carers overwhelmingly felt that the surgeries, including nurses, GPs, and receptionists, were a main source of information for them. However, the view was that surgeries are somewhere everybody attends, rather than they provide information to carers.

Carers recognised that they didn’t all have interaction with the Local Authority, or with support groups, however they all used health services. It was recognised that there was a requirement for the surgery to not only recognise the carer, but then to signpost them to a service that could work with them, such as Princess Royal Trust for Carers in Hampshire (PRTCH), and be a single point of contact.

**The key outcomes from the project have been:**

- Increased identification of carers through GPs.
- A co-designed form for carers to complete at the surgery, resulting in them being registered as a carer on their file. The form also triggers an automatic referral to PRTCH, allowing the service to provide the necessary information or signpost them to another organisation.
- The surgeries have all agreed to have an identified carers lead. The surgeries are all displaying specific literature asking patients to identify themselves if they are a carer. Some surgeries have had day long carer stands with a carer support worker in attendance as well as talks being given to surgery staff.
- A carers pack is currently being worked on that the surgery will be able to give to a carer or will be left in waiting areas to allow carers to help themselves (both will be used). An aide memoire is also being looked at to assist GPs to record carers quickly and correctly onto medical records.
- In addition, the four community ambassadors and the GP practice representative on the CCG Carers Action Group also identified that the profile of carers needed to be raised within GP practices, they have formed a sub-group and are looking at what they can do. Some initial thoughts are to do a short film aimed at practice staff and a separate one aimed at carers.
6. Health and Wellbeing

(Physical and Emotional Health)

It is particularly important that carers are supported to maintain their own health and wellbeing, to enable them to continue in their caring role. Carers are more likely to have poor physical and mental health as a result of caring. They often put the person they care for first, which may mean they have little time left available to look after themselves.

The Carers Strategy: Second National Action Plan 2014-2016 identifies supporting carers to stay healthy as one of its key priorities:

‘Supporting carers to remain mentally and physically well’

National Key Issues

- Impact of caring on health and wellbeing
- Prevention and early intervention for carers within local communities
- Supporting carers to look after their own health and wellbeing.

In 2015, Carers UK’s annual State of Caring survey8 reported that caring had consequences for carers’ mental health, with 84% saying they felt more stressed, 78% saying they felt more anxious, and 55% reporting that they had suffered from depression as a result of their caring role. This shows an increase from the previous year, where 73% of carers surveyed reporting increased anxiety and 82% increased stress since taking on their caring role.

Research was conducted in 2014/15 by the NHS Personal Social Services Research Unit9 using six questions measuring quality of life among carers (based on occupation, control, personal care, safety, social participation and encouragement and support). In this study carers’ reported quality of life was significantly lower in Hampshire than the national average for England.

The Personal Social Services Survey of Adult Carers in England (SACE) 2016-1710 highlighted the following health and wellbeing concerns among Hampshire carers:

How the caring role impacts on the carer (2016/17 responses)

<table>
<thead>
<tr>
<th>Feeling</th>
<th>Proportion % responded per answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feeling tired</td>
<td>80</td>
</tr>
<tr>
<td>Disturbed sleep</td>
<td>60</td>
</tr>
<tr>
<td>General feeling of stress</td>
<td>50</td>
</tr>
<tr>
<td>Feeling depressed</td>
<td>40</td>
</tr>
<tr>
<td>Short tempered/irritable</td>
<td>30</td>
</tr>
<tr>
<td>Physical strain (e.g. back)</td>
<td>20</td>
</tr>
<tr>
<td>Had to see own GP</td>
<td>10</td>
</tr>
<tr>
<td>Developed my own health conditions</td>
<td>0</td>
</tr>
<tr>
<td>Made an existing condition worse</td>
<td>0</td>
</tr>
<tr>
<td>Loss of appetite</td>
<td>0</td>
</tr>
<tr>
<td>No, none of these</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
</tr>
</tbody>
</table>

Source: SACE, NHS Digital
In 2016, just over a third (35%) of carers (nationally) who had an assessment in the previous year felt that the support they needed to look after their own mental and physical health alongside caring was properly considered.

The results of these surveys make the development and implementation of the strategy even more important to ensure improvements are made for carers’ health and wellbeing.

**Key Aims – Health and Wellbeing (Physical and Emotional Health)**

<table>
<thead>
<tr>
<th>Where we are (2018)</th>
<th>Where we want to be (2023)</th>
<th>How we will get there</th>
</tr>
</thead>
<tbody>
<tr>
<td>NHS health providers and primary care teams do not always recognise and identify carers or offer them support when carers come into contact with them.</td>
<td>NHS health providers and primary care teams are consistently registering carers and able to refer them to appropriate support.</td>
<td>Offer NHS health providers and primary care teams training to use the appropriate systems to register and signpost them to carer specific information and advice.</td>
</tr>
<tr>
<td>Carers are not always offered appropriate training, advice or support, to meet their needs to enable them to continue in their caring role.</td>
<td>Carers are able to access the training that they need to support them in their caring role. For example, this may include: • Back care • Moving and handling • Dealing with medication • Dealing with stress • First aid • Benefits and financial planning • Specific conditions (e.g. dementia) • Behaviour awareness.</td>
<td>Carers service specifications will include offering appropriate support for carers.</td>
</tr>
<tr>
<td>Carers would like more flexibility from NHS health providers and primary care teams when they need to book an appointment.</td>
<td>NHS health providers and primary care teams will recognise the needs of carers when offering appointments.</td>
<td>When a patient is registered as a carer with their GP they will be: • Offered more flexible appointments, including longer appointments and choice of time/date. • Given priority as appropriate • Able to bring their cared for person if necessary.</td>
</tr>
<tr>
<td>Carers are not always aware that they are entitled to flu jabs and health checks to support them in their caring role.</td>
<td>Carers are identified and informed about: • Free flu jabs • Carers health checks • Carers information and advice services • Carers assessments • Carers emergency plans.</td>
<td>GPs, pharmacies and other health professionals to work more closely together to identify carers, promote ‘universal’ support available and signpost them to appropriate support.</td>
</tr>
<tr>
<td>Carers are not always aware of the Carers Emergency Planning Service or other contingency planning options, to support carers in the event of a crisis.</td>
<td>All carers should be informed of these services once they have been identified as a carer.</td>
<td>Professionals to promote the emergency plan and ensure carers are signposted to Hampshire County Council’s commissioned emergency carers service delivered by Princess Royal Trust for Carers in Hampshire where appropriate.</td>
</tr>
<tr>
<td>Isolation has been identified as an issue for carers in Hampshire. Drop-ins exist in some areas.</td>
<td>Access to carers support in the community, including providing services for carers who work during the day. Greater awareness of the technology that is available to keep carers in touch with others.</td>
<td>Review the current provision and plan services to ensure we have appropriate support across the county. Develop ways of ensuring carers can have greater contact with others using technology.</td>
</tr>
</tbody>
</table>
7. Having a Life Alongside Caring

(Employment, Education and Leisure)

It is widely acknowledged that in order for carers to live fulfilling lives alongside their caring role, they need to have the opportunity to have their own social time, and access employment and education as appropriate. Having these opportunities will also benefit their health and wellbeing.

The Joint Carers Strategy Group is aware of the impact of social isolation on unpaid carers and on their quality of life. Public Health England has identified that only 35.8% of adult carers in Hampshire have reported that they had as much social contact as they would like.

Carers nationally and in Hampshire have identified that good quality and flexible breaks are fundamental to their wellbeing. Replacement support allows carers to see their friends, maintain hobbies, stay in employment, go to school, college or university, attend appointments and to generally have their own lives alongside being a carer.

This support was traditionally provided through residential respite care. It now comes in many forms and could result from a carers assessment, or it could be provided as part of the support planning process for the person who is being cared for. Carers have highlighted that one size does not fit all when it comes to having a break; each situation is individual and requires a personalised approach.

Respite can come in many forms, including being able to pay a friend or family member through Direct Payments to look after the cared for person, the Shared Lives scheme, and residential respite care.

The importance of young carers in Hampshire being able to fulfil their education potential cannot be underestimated. It is widely recognised that young carers are disadvantaged in terms of their education due to a number of factors and therefore the specific action plan to target this issue can be found within the ‘Young Carers and Young Adult Carers’ section of this strategy.

The key considerations of having a life alongside caring and enabling people to access employment, education and leisure encompasses two of the priorities identified within the Carers Strategy: Second National Action Plan 2014-2016:

**National Key Issues**

- **Realising and releasing potential**
  - Enabling those with caring responsibilities to fulfil their education and employment potential
  - Support for young carers and young adult carers
  - Support for carers of working age.

- **A life alongside caring**
  - Personalised support both for carers and those they support, enabling them to have a family and community life
  - Personalising support for carers and the people they support.
# 7. Having a Life Alongside Caring

(Employment, Education and Leisure) – continued

## Key Aims - Having a Life Alongside Caring

<table>
<thead>
<tr>
<th>Where we are (2018)</th>
<th>Where we want to be (2023)</th>
<th>How we will get there</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carers do not always know where to go for advocacy and support to balance their work or education with their caring responsibilities. Carers are not always supported when they need to take career breaks as a result of their caring role.</td>
<td>Carers who are in work or education will be able to easily access advocacy support and will know where to look for information relating to flexible working and career breaks.</td>
<td>By ensuring that when social care professionals are undertaking carers assessments that they link eligible carers to the Care Act advocacy services provided through the County Council. By ensuring that more carers have access to independent (peer) advocacy support. For carers who are not eligible for Care Act advocacy services, they will receive appropriate support from local voluntary sector services.</td>
</tr>
<tr>
<td>Carers are not always asked about their educational or employment goals and how they can be supported to maintain or achieve these.</td>
<td>A discussion around education and employment needs will be a key part of carer's assessments and support planning. It will be acknowledged that carers must be supported to achieve their potential in terms of work and education.</td>
<td>Acknowledging carers who work or are in education and employment when undertaking Carers Assessments.</td>
</tr>
<tr>
<td>Carers do not always feel that they have enough time to themselves to participate in social or leisure activities.</td>
<td>Carer’s individual needs will be listened to and the need for personalised respite time will be a key feature of support planning (following a carer’s assessment or an assessment for the person they care for).</td>
<td>Ensure that carers assessments recognise the need for carers to take breaks from their caring role and that carers are aware of the services available to support them to have a break from their caring role. Utilise services such as Wellbeing Centres.</td>
</tr>
<tr>
<td>Carers would like to be clearer about the options available for them to have a break.</td>
<td>New more creative offers for having a break, as well as residential options, will be developed. These will be clearly publicised.</td>
<td>Hampshire County Council is currently reviewing the options for providing carers breaks and wants to involve carers in developing these options.</td>
</tr>
<tr>
<td>Carers cannot always participate in leisure or social activities with the person they care for as they so not always cater for carers. There may also be other constraints such as financial reasons, lack of transport, or no respite.</td>
<td>For facilities to be promoted and available for both carer and cared-for person to take part in activities together if they wish to.</td>
<td>Investigate ways of developing transport, respite and facilities for both the carer and cared-for person, to ensure carers are able to take part in activities alongside the person they care for.</td>
</tr>
<tr>
<td>Carers have identified that available carers services are often during working hours of 9am-5pm, so they miss out on valuable support.</td>
<td>Carers services and employers to take working carers needs into account. Carers services to provide options for support in the evenings and on weekends.</td>
<td>Raise awareness of working carers issues with local carer groups and employers. To ensure carers are aware of their rights as a working carer, and that they can request flexible working from their employer.</td>
</tr>
<tr>
<td>Following an assessment by Hampshire County Council, some carers are able to access the telecare service.</td>
<td>Carers understand and use telecare/assistive technology to support them in managing their caring role.</td>
<td>Raise awareness of telecare opportunities amongst carers. Include ‘benefits to carers’ in any telecare training events for health and social care staff.</td>
</tr>
</tbody>
</table>
Key Aims - Having a Life Alongside Caring

<table>
<thead>
<tr>
<th>Where we are (2018)</th>
<th>Where we want to be (2023)</th>
<th>How we will get there</th>
</tr>
</thead>
<tbody>
<tr>
<td>Some older carers do not feel supported as they get older and may experience both a financial strain, and impact on their physical and/or mental health.</td>
<td>Increase in take up of support and respite as people get older.</td>
<td>Ensuring that older carers are consulted and involved in planning carers support.</td>
</tr>
<tr>
<td>Lack of transport, especially in rural areas, can be a barrier for carers to fulfil their caring responsibilities.</td>
<td>Ensure commissioners and health and care professionals fully understand and maximise the use of the transport resources that are available to support carers.</td>
<td>Raise awareness of the gaps in transport services and for all departments in Hampshire County Council to work better together when planning transport services.</td>
</tr>
</tbody>
</table>

Case Study – Telecare Equipment
(Hampshire County Council and the Argenti Telehealthcare Partnership)

Mrs H lives with her husband (Mr H), both are retired and have enjoyed full, active lives. Following Mr H’s diagnosis of dementia, Mrs H has become his main carer. Mr H had to stop driving, which has left him feeling frustrated and trapped, however he does still want to maintain his independence in the community.

Mrs H became very anxious as she was fearful Mr H would become lost when he was out, so she found herself accompanying him everywhere he went and locking doors so he wouldn’t go out without her. As things developed Mrs H felt increasing pressure in her caring role and struggled to support her husband. A carer assessment determined that Mrs H needed support to avoid the breakdown of her caring role and the need for formal care to be introduced.

Mr H was assessed by the Argenti telehealthcare team who then designed, configured and installed a personalised care technology solution that included an Oysta, which is a small mobile device that incorporates GPS tracking. This enabled Mr H to be located instantly should he become disorientated or perhaps have a fall when out in the community. Alongside this, door monitors were installed to alert Mrs H if Mr H was to leave the house at inappropriate times.

As a result of this intervention Mrs H’s anxiety has been significantly reduced and she is confident that her husband has regained his independence. She is able to go out alone and no longer feels a need to lock doors. Mr H has returned to attending his regular social gatherings, no longer feeling smothered and instead feeling liberated.

Mrs H has been empowered to carry on in her caring role in the way she wants. There is no need to introduce further care or restrictions on her husband. Crucially, the risk of Mrs H not being able to support her husband has been greatly reduced.
A young carer is defined as a person under 18 who provides, or intends to provide, care (which may include emotional and practical support) to either an adult or a sibling under the age of 18. Hampshire County Council Children’s Services have a responsibility to all young carers until they reach the age of 18. The Hampshire Young Carers Strategy will be published in 2018 and specifically covers the responsibilities that Children’s Services has to young carers until they reach age 18 and will sit alongside the Hampshire Joint Carers Strategy.

Hampshire County Council’s Adults’ Health and Care has a responsibility to support young carers from the age of 16 upwards (carers aged 16-25) who are also known as ‘young adult carers’. This section of the Joint Carers Strategy covers young adult carers.

The below table illustrates where support is available from the County Council, depending on the young carer’s age and whether they are caring for an adult or a child.

### Hampshire County Council Departmental Responsibilities*

<table>
<thead>
<tr>
<th>Young carer age</th>
<th>Defined in this strategy as</th>
<th>Who they are caring for</th>
<th>Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>16 or 17 year old</td>
<td>Young adult carer</td>
<td>Adult – person aged 18 years or over</td>
<td>Adults’ Health and Care</td>
</tr>
<tr>
<td>Under the age of 16 years (child)</td>
<td>Young carer</td>
<td>Adult – person aged 18 years or over</td>
<td>Children’s Services</td>
</tr>
<tr>
<td>Under the age of 16 years (child)</td>
<td>Young carer</td>
<td>Child – under the age of 18 years</td>
<td>Children’s Services</td>
</tr>
<tr>
<td>16 or 17 year old</td>
<td>Young adult carer</td>
<td>Child – under the age of 18 years</td>
<td>Children’s Services</td>
</tr>
</tbody>
</table>

*Please note the actual duties are not divided between Adult’s Health and Care and Children’s Services in legislation.

The support that a young carer provides to the cared for person can sometimes be inappropriate for the young person’s age. The impact of their caring role can affect their education, physical health and emotional wellbeing, as well as their social interactions. Many young people will not see themselves as carers. They may see their caring role as purely supporting another family member and doing what anyone else would do in their situation. It is essential for young carers to be supported to develop a life outside of caring. This may take the form of education or training, employment, volunteering, or in creating opportunities for socialising and leisure opportunities.

Young carers in particular are known to have significantly lower educational attainment at GCSE level than their peers and therefore need support to bridge this gap and ensure that they fulfil their potential for achievement.
There are also additional issues faced by young adult carers aged 16-25 and those going through a transitional phase in their lives. These issues include financial hardship, struggles with educational commitments due to the pressures of caring, and not being able to access employment. A joined up process between Hampshire County Council’s Children’s Services and Adults’ Health and Care is essential to ensure those going through transition are assessed and supported adequately. Refer to the ‘Working together to safeguard children’ document available on the gov.uk website for further details about this work.

Hampshire County Council want to be proactive in identifying young carers as soon as possible and ensure young carers and young adult carers are not undertaking inappropriate and harmful caring roles. We want to ensure that every young carer achieves their full potential and has positive emotional and physical wellbeing.

As at the publication date of this strategy, there are 10 young carers projects running in Hampshire led by Hampshire Young Carers Alliance (HYCA). HYCA supports young carers in their educational attainment and wellbeing, and works with schools to help them identify and further support young carers.

HYCA offer early interventions to young carers to prevent the need for specialist service interventions such as Child and Adolescent Mental Health Services (CAMHS). Young carers are supported to overcome barriers to attainment which would in turn improve their motivation, self-confidence, attendance and engagement with education.

Hampshire County Council Adults’ Health and Care department has a duty to identify young carers and to refer to Children’s Services when appropriate. All young carers are entitled to a young carer’s assessment – the ‘Departmental Responsibilities’ table on the pervious page outlines which Hampshire County Council department would be responsible for the young carer’s assessment.

Children’s Services also has a responsibility to make Adults’ Health and Care aware of any young person over the age of 16 that is carrying out a caring role.

The Young Carers Strategy will include further details of the responsibilities of Children’s Services and how support is provided.

**Key Aims – Young Adult Carers (age 16-25)**

<table>
<thead>
<tr>
<th>Where we are (2018)</th>
<th>Where we want to be (2023)</th>
<th>How we will get there</th>
</tr>
</thead>
<tbody>
<tr>
<td>Young adult carers may not always be recognised as a carer and that the caring role they provide is not appropriate.</td>
<td>Young adult carers are identified at, or before, the point of assessment for the cared for person and are made aware of all services available for carers.</td>
<td>Awareness training for professionals. Better data recording systems/processes to be implemented.</td>
</tr>
<tr>
<td>Young adult carers do not always receive a carer’s assessment in their own right.</td>
<td>All identified young adult carers are offered a carer’s assessment.</td>
<td>Ensure young adult carers are aware of the right to a separate carer’s assessment. This will be achieved by increased training for frontline staff.</td>
</tr>
</tbody>
</table>
8. Young Carers and Young Adult Carers – continued

### Key Aims – Young Adult Carers (age 16-25)

<table>
<thead>
<tr>
<th>Where we are (2018)</th>
<th>Where we want to be (2023)</th>
<th>How we will get there</th>
</tr>
</thead>
<tbody>
<tr>
<td>Young adult carers may not always be signposted to the most appropriate support, such as a young carers project.</td>
<td>A clear pathway is in place to ensure young adult carers are signposted to appropriate support.</td>
<td>Develop a Memorandum of Understanding between Adults’ Health and Care and Children’s Services and ensure a revised joint working protocol is put in place.</td>
</tr>
<tr>
<td>Young carers are not always considered as a key care partner and are excluded from key conversations. There is feedback from young carers that they sometimes feel patronised or ignored in the decision making process.</td>
<td>Young adult carers will be considered in the context of their whole family, not in isolation. Young adult carers and their families are the experts in their own lives and as such must be fully involved in the development and delivery of support services.</td>
<td>Training for Social Workers, case workers and others will be available. Ensure that adult social care staff are aware of young carer’s needs and ask appropriate questions in the cared-for person’s needs assessment.</td>
</tr>
<tr>
<td>Specific support for young adult carers has been established in certain areas of the county. This is not consistent county wide.</td>
<td>Transition to adulthood for all young carers is supported. The challenges faced by young adult carers (16-25) around education, training, employment and independence are responded to.</td>
<td>By raising professional awareness of the risks and challenges faced by young adult carers around low aspirations and the impacts of caring responsibilities on take up of further education, training and employment. Develop a clear pathway to ensure young carers are signposted or referred to appropriate support.</td>
</tr>
</tbody>
</table>

---

**Case Study – Young Adult Carers (Aged 16-25)**

Winchester University is developing outreach to young adult carers in partnership with Healthwatch Hampshire, Hampshire Young Carers Alliance (HYCA), Princess Royal Trust for Carers in Hampshire (PRTCH) and the Carers Trust. The university is also working to enhance support for students who care for family members with long-term illness or disability.

Alongside this, PRTCH is working with Winchester and District Young Carers and Eastleigh Young Carers projects to pilot a support group for ages 16-25, which could help bridge the gap of young carers transitioning into adult carers. Currently the young carers project only support carers up to 18 years old, therefore this new initiative will allow for those carers to continue receiving support from both the projects and PRTCH.

The support group is lead by one of the PRTCH carer support workers and a project worker from the young carers project. For those young carers aged 18 and over there will be support for topics such as CV writing, sexual health, and how to attend university (if they are a primary carer).
9. Seldom Heard Carers

A significant number of people with caring responsibilities do not consciously recognise themselves as carers or use the term ‘carer’. These groups are often referred to as ‘hidden’ or ‘seldom heard’. They are not usually identified by professionals and statutory bodies because they may only come into contact with services infrequently or not at all. These groups are often not aware of the services and sources of help available to them.

The ethnic diversity in Hampshire is much lower than England as a whole (8.2% compared to 20.2% respectively) but it is gradually increasing across the county. While the population remains predominantly white British, the proportion of the population that is of a different ethnic origin has increased from 4.6% in 2001 to 8.2% in 2011. Asian ethnic groups make up the largest non-white categories in Hampshire. Rushmoor has the largest non-white population at 15.3% (up from 4.4% in 2001), mostly due to a growing Nepalese population.

Within Hampshire there are a number of seldom heard communities, such as the Asian and Nepalese communities mentioned above. Other groups of carers that are often ‘seldom heard’ include:

- Military carers, including military young carers and military young adult carers
- Carers from travelling communities
- Lesbian, gay, bisexual and transgender (LGBT) carers
- Carers caring for people with mental health problems or substance abuse problems
- Young carers and young adult carers
- Rural carers
- Working carers (who may not be able to access traditional ‘9-5’ support).

Some work has already been undertaken in North East Hampshire and Farnham to identify the specific issues that impact some of these groups. Carers have said how the lack of respite impacts on their emotional and physical health, and how important it is to maintain this in order to continue to provide care.

The isolation of being a carer is not only addressed by peer support but by having access to regular breaks that enable carers to have time out from their caring duties, to recharge their batteries. Carers would also like support from local district councils to provide discounts or funding for leisure activities that can adapt to the individual carer’s circumstances.

Carers also need to access up to date and relevant information and advice easily. Carers feel they already have enough pressure on them and having to contact lots of different organisations or departments to find things out adds to their levels of stress. Different carers require this information in different formats and would like to know where to access information, and to feel supported.
9. Seldom Heard Carers – continued

It is important to work with groups who do not traditionally identify members of their communities as carers. This would ensure that information, support and services are provided in an appropriate way and are accessible to all.

Carers in underrepresented groups, as well as many people who provide support or care for a friend or family member who is approaching the end of their life, do not necessarily identify themselves as a carer. This strategy recognises all carers, including end of life carers and not yet self-identified carers.

Key Aims – Seldom Heard Carers

<table>
<thead>
<tr>
<th>Where we are (2018)</th>
<th>Where we want to be (2023)</th>
<th>How we will get there</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hampshire County Council Adult’s Health and Care department is currently working</td>
<td>Community groups will have support to identify carers within their communities and signpost them to appropriate information, advice and support.</td>
<td>Make connections and work together with local communities to identify hidden and hard to reach carers and offer support in a way that is appropriate and accessible within the community.</td>
</tr>
<tr>
<td>with a number of community groups across Hampshire to co-ordinate services better.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accessible information is available to carers but not always offered or provided.</td>
<td>Information is available, offered and publicised in local communities, in appropriate formats.</td>
<td>Work with local communities to ensure that information is helpful and accessible to all groups. Use a variety of resources to raise awareness, e.g. internet, local meetings, community and outreach work, accessible posters and leaflets. Examine ways of providing interpreters.</td>
</tr>
<tr>
<td>or provided. Information could be improved by working together with local</td>
<td></td>
<td></td>
</tr>
<tr>
<td>communities.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The offer of a carer’s assessment is not always taken up in some communities.</td>
<td>Increased uptake of carer’s assessments from seldom heard carers.</td>
<td>Work with local communities to ensure the carer’s assessment offer is accessible and a useful tool for all individuals within local communities.</td>
</tr>
<tr>
<td>Carers do not always feel they are asked how they would like to be contacted or</td>
<td>More carers are able to express their views and contribute to the development of services.</td>
<td>For example, Hampshire County Council’s learning disability services have piloted a survey of carers, to find out what they need. Having found telephoning carers to be a successful way for some carers to hear their views, this will be rolled out to all areas.</td>
</tr>
<tr>
<td>how they would like to express their views.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carers do not always feel they are given appropriate information and support</td>
<td>Carers who are looking after someone who is terminally ill are given the appropriate</td>
<td>Continued training for practitioners for end of life care.</td>
</tr>
<tr>
<td>when caring for someone who is terminally ill.</td>
<td>support and information to know what to expect at the end of their caring role and to</td>
<td></td>
</tr>
<tr>
<td></td>
<td>continue to be supported after end of life.</td>
<td></td>
</tr>
</tbody>
</table>
Carers Charter
Hampshire County Council and NHS Hampshire

Who is a carer?
A carer is an unpaid person providing practical or emotional support to someone else, who may be a parent, partner, other relative, friend or neighbour.

Hampshire County Council and NHS Hampshire are committed to four key principles that form the basis of their support to carers.

Principle 1
We will recognise and respond to your needs as a carer, and:
• Provide services to support you as a carer
• Take into account your personal needs and preferences
• Not assume that you are willing, or able, to continue to provide the same level of care ongoing
• Encourage you to consider your own needs, interests, relationships and your wider family including any other commitments you have.

Principle 2
We will recognise your expertise, knowledge and the important role that you play, and:
• Listen to you without bias or prejudice
• Take your worries and concerns seriously
• Recognise that you have relevant and important information about the person you care for
• Value and respect your opinion and, where necessary, keep it confidential
• Take your views into account when decisions are made about the person you care for
• Share information with you about the person you care for whenever this is helpful and possible.

Principle 3
We will welcome your involvement in care, and:
• Involve you in planning the care for the person you support
• Give you a copy of any care plan for the person for whom you care, with their agreement. This will state the responsibilities of all the people who are involved in providing care
• Give you information about what to do to help the person you care for and who to contact if you need help or advice
• Give you relevant information about the way our service works
• Discuss with you if you wish to continue with particular caring roles.

Principle 4
We will value your involvement in the development of our services, and:
• Give you the opportunity to state your views on the quality of our services
• Give you the opportunity to be actively involved in the planning, development and evaluation of services
• Inform you of service developments and give you adequate notice of meetings, consultation periods and other relevant events.
10. Appendix B

Carer pathway via Connect to Support website or Hampshire County Council’s Adults’ Health and Care call centre

Carer uses the Connect to Support website to access support.
https://www.connecttosupporthampshire.org.uk

Carer is able to access information and advice from a range of topics relating to their caring role.

Carer is able to access a directory of services to gain support, for example from voluntary and community groups.

Carer completes self service questionnaire. Depending on the outcome, they may need to make contact with the call centre for further support.

Carer makes contact with Adults’ Health and Care via the call centre
0300 555 1386 or out of hours 0300 555 1373

Carer receives a well-being check to determine what support they require.
The outcome may be as follows:

- Carer signposted to Connect to Support, Hampshire’s one stop portal for information and advice.
- Carer requires information and advice. The Carer is signposted to voluntary organisations.
- Carer requires a Carers Assessment. If this is a single assessment they may wish to have a telephone assessment or face to face assessment arranged.
- Carer requires a joint assessment with the person they care for. A social worker will arrange to visit the carer to complete the assessment.
10. Appendix C

Carer pathway via hospital

1. Cared-for person is admitted to hospital

2. Carer is identified by the hospital team

3. Hospital team makes a referral to Adults' Health and Care or carer is supported by their allocated worker

4. Carer is offered support by the hospital team, pre or post discharge. This may include information and a Carer’s Assessment.
Carers services currently provided in Hampshire*

The services below provide support for carers in maintaining their own sense of wellbeing and the support they require to carry out their caring role. Although not included in the list, there are also a number of other services that are also provided directly to meet the needs of the person being cared for, through their individual care packages, thus indirectly providing a service to the carer in many circumstances.

There is also the online information and advice guide and directory of services for adults with care and support needs who live in Hampshire (Connect to Support).

connecttosupporthampshire.org.uk

This site is intended for all residents who want to find out up to date information about local groups, activities and services within the community as well as about formal care provision. The site is also intended for people who may wish to arrange their own care provision.

The Council also provides a call centre service offering advice and information, signposting, and telephone assessments.

**Adults’ Health and Care**
Phone 0300 555 1386
Out of hours 0300 555 1373

**Children’s Services**
Phone 0300 555 1384
Out of hours 0300 555 1373

* Please note the providers listed below are delivering these services at the time of writing the strategy and may change in the future. For up to date information please visit the Connect to Support website.

**Princess Royal Trust for Carers in Hampshire (PRTCH)**
Offering services to carers on information and advice, advocacy, access to training and education, carers hubs, carer clinics, regular support groups, counselling, emergency planning.

Address: Andover War Memorial Hospital, Charlton Road, Andover, SP10 3LB
Phone 01264 835246/835205
carercentre.com

**Carers Together**
Offering information and advice, help filling in forms and making appeals, training for carers and professionals, support and advocacy, local support and social groups, support planning and help with direct payments, Take A Break service in some areas (there is a small charge for this), and planning for emergencies.

Carers Together also runs Community Information Cafes around the county which provide information and signposting support.

Address: Hampshire Carers Centre, 9 Love Lane, Romsey, Hampshire, SO51 8DE
Phone 01794 519495
carerstogether.org.uk
One Community
Information and signposting, social opportunities, IT and form filling support, emotional support, counselling.

Phone 02380 902404
1community.org.uk/support-at-home/carers-centre

Hampshire Young Carers Alliance
HYCA’s role supports young carers to reach their full potential in school and to support them with their educational attainment and wellbeing as well as supporting the school to identify and support their identified young carers.

Phone 02380 902465
hyca.org.uk

Dementia Advisor Services
Bordon, Fareham, Gosport, Havant, New Forest, Petersfield

Phone 02392 892034
(services provided by the Alzheimer’s Society)
hampshireDAservice@alzheimers.org.uk

Alton, Basingstoke and Deane, Eastleigh, Hart, Romsey, Rushmoor, Test Valley, Winchester

Phone 01264 353363
(services provided by Andover Mind)dementiaadvice@andovermind.org.uk

Argenti Telehealthcare
Telehealthcare service for carers and those that they care for. Telecare services can offer reassurance to families and reduce the pressure they are under in a wide variety of ways. Personalised equipment can be provided to suit individual needs, and offer peace of mind in an emergency.

Phone 0345 265 8003
argenti.co.uk

Adults Health and Care
Phone 0300 555 1386
Out of hours 0300 555 1373
connecttosupporthampshire.org.uk
10. Appendix E

Reference list

1. Carers UK: Valuing Carers 2015


3. Care Act 2014

4. NHS Five Year Forward View

5. Census 2001
https://www.ons.gov.uk/census/2001censusandearlier

6. Census 2011
https://www.ons.gov.uk/census/2011census

7. Hampshire Joint Strategic Needs Assessment
https://www.hants.gov.uk/socialcareandhealth/publichealth/jsna


https://digital.nhs.uk/catalogue/PUB18423

10. Personal Social Services Survey of Adult Carers in England (SACE) 2016-17
https://digital.nhs.uk/catalogue/PUB30045


12. Public Health Profiles: Adult Social Care
https://fingertips.phe.org.uk/

13. Working Together to Safeguard Children 2015 Statutory Guidance