



Southampton Strategy for Unpaid Carers and Young Carers 2016-2020

*'Highlighting what is needed to support Family, Friends,
Children and Young People who care'*

A Joint Strategy from Southampton Community partners

Southampton Strategy for Unpaid Carers and Young Carers 2016-2020

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Foreword

Southampton has had a variety of support services for both adult and young carers for many years, which have been provided by a range of voluntary and public sector organisations. In the last few years some important strides forward have been made and we sense that the voice of carers is being heard and acted upon. The Strategy gives some detail of the work currently happening which includes: increasing identification of carers through GPs; bringing together a range of services under one roof 'Carers in Southampton', and responding to requests from carers a Carers Assessment Service is being established through the voluntary sector. All of the organisations on the Strategy Steering Group provide important support to carers of all ages, as do many other voluntary and statutory groups in the city.

These are challenging times for the NHS, children and adult social services and in the current financial climate some difficult decisions are having to be taken. In this type of environment it is even more important that we take into account and value the views of all our carers.

We really welcome, therefore, the publication of the Carers Strategy for Southampton, formed by so many local carers and agencies, which provides the basis on which we can build appropriate Action Plans over the next year. We also look forward to the production of a refreshed National Strategy in 2016/17 which the work in Southampton can link into.

Lastly we would like to pay a huge vote of thanks to carers, 'The Silent Army' of 20-30,000 family members and friends living in Southampton, who provide millions of pounds worth of unpaid care. We'd also like to thank all of the agencies who contributed to this Strategy, particularly those who make Pledges and develop Action Plans. Lastly thanks go to Carers in Southampton for facilitating the development of the Strategy.

Cllr Dave Shields

Southampton City Councillor
Portfolio Holder for Health &
Adult Social Care

Dr. Sue Robinson

Chair of Southampton City
Clinical Commissioning
Group

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**For more
information,
please visit**

[http://www.
southampton.
gov.uk/
carersstrategy](http://www.southampton.gov.uk/carersstrategy)

Acknowledgements

The Southampton Carers Strategy Steering Group are grateful for the help and support it received in building the strategy. Thanks to all of the carers, professionals and community members who have been involved in this journey to create a more carer friendly Southampton. Your input has helped to develop and inform a strong Carers Strategy for the City of Southampton.

Thanks also to Cares in Southampton for all the work they have done to co-ordinate the development of the Strategy from facilitating meeting through to collating all of the information and preparing the Strategy for publication.

Finally thanks go to Milton Keynes for permission to share their succinct summary of legislation relating to carers.

This strategy has been built in collaboration with the following organisations:



There are several NHS organisations working in partnership for the Southampton Carers Strategy including:

Southampton City Clinical Commissioning Group

Solent NHS Trust

Southern Health NHS Foundation Trust

University Hospital Southampton NHS Foundation Trust

"My wife suffers from Bipolar Disorder. She has had times of unbridled energy and drive (Highs) and other times of exhaustion and misery (Lows). Trying to cope with this has often been stressful for me, which has been one of the contributing circumstances to the struggles I've sometimes had with my own mental health.

Despite being a natural loner, it has been the support I have received from people (such as those in the church I belong to and a carers worker with whom I am regularly in contact) that has been very important in making life work for me, not just in terms of surviving but also in making a contribution.

Life may not be like I once expected it would be, but in learning through the experience I find something unexpectedly good and encounter opportunities I would never otherwise have had."

- Andy (*Husband & Carer*)



Aim

The Southampton Carers Strategy 2016-2020 highlights the needs and issues of people who are giving support and providing care to either family and/or friends as a carer.

The aim of the strategy is to identify what is needed to improve the lives of carers now and in the future, and to change services to meet those needs.

By reviewing key national legislation, and with input from local carers & professionals working with carers, six priorities have been identified and developed to better understand what is needed to set us on the journey to improve the lives of carers.

Initially identifying their promises through pledges, key health and social care providers, including the City Council, will develop Action Plans. Other local organisations in the voluntary sector as well as the statutory sector will be able to develop their services to meet needs based on these priorities. All Action Plans submitted to the Southampton Carers Strategy Steering Group, will be monitored by them. Carers are always welcome to become a part of this group, and are encouraged to get in touch if interested, by contacting Carers in Southampton.



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Carers and Caring

The Care Act 2014 defines a carer as 'someone who helps another person, usually a relative or friend, in their day-to-day life. This is not the same as someone who provides care professionally, or through a voluntary organisation.' The person being cared for may need help because, for example, they are ill, frail, disabled or have a mental health or substance misuse problems.

This strategy sees the need for recognising both carer and cared for as Expert Partners of Care to work towards providing person-centred support.

As a carer:

You may be caring for or supporting your husband or wife, your mother or father, your son or daughter, your brother or sister, your neighbour or friend, or quite often, you may be caring for more than one person, like your mother and your son.

You may be caring for someone who lives with you, who lives down the road, or who lives in another part of the country or the world. The latter two are known as remote or distance caring.

You may be helping with food preparation, assistance with eating and drinking, shopping, laundry and cleaning or other domestic tasks, or you may take this person to appointments or provide other transport, help with medication, bathing or other personal care needs, or you may provide emotional support or ensure safety.

You may support someone who is frail or elderly, who has learning or physical disabilities or sensory impairments, has a mental health condition or substance misuse issues, or any number of other health situations where the person requires additional support. The person you care for may not fall into the eligibility threshold for benefits or additional support for themselves, but you may still provide a great deal of support.

You may have been caring for a long time, or be a new carer, or your caring role may be ending or may have recently changed or come to an end.

You may be a hidden carer. A hidden carer is someone who may not be known to services as a carer and is hard to reach for support. You may not recognise that what you do for a loved one makes you a carer. You may also be experiencing other barriers to recognising and accessing information, advice and support.



**"Caring for my son is rewarding,
I like it very much"**

- Southampton Carer

Local Snapshot

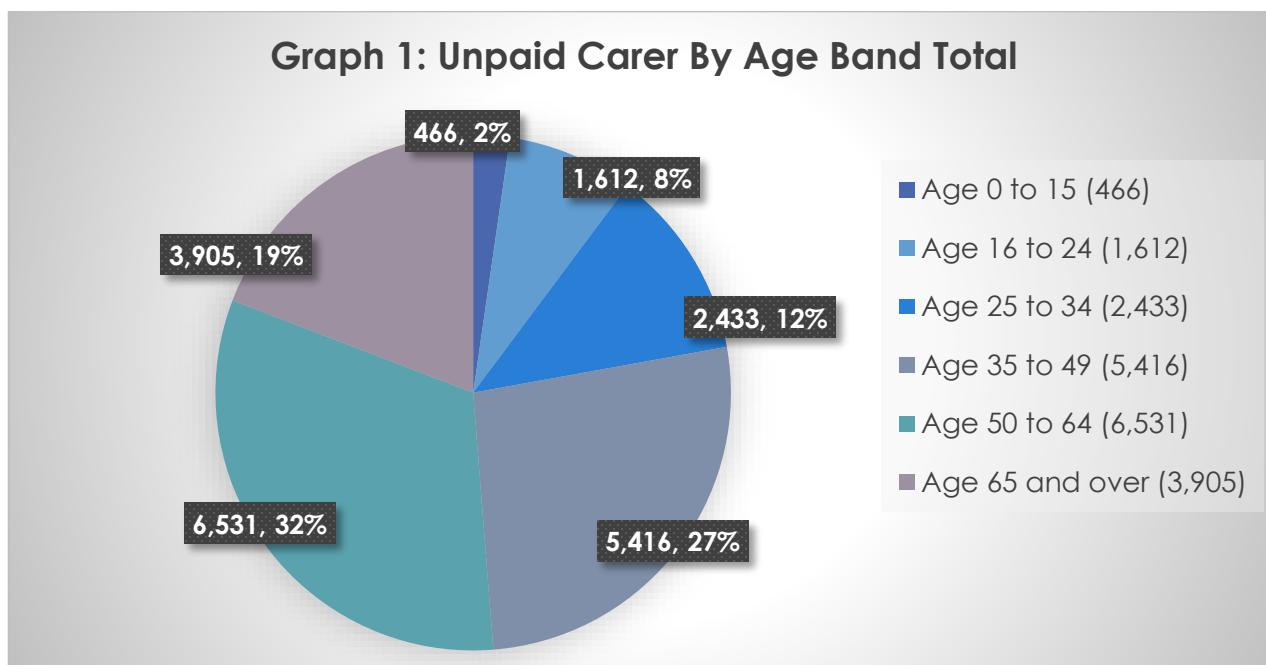
From the 2011 Census we can see that over 20,000 family members and friends living in Southampton provide unpaid care.

The Census gathers information that is self-reported, therefore we can expect there are a great deal more carers who have not self-declared as carers on the Census, and who may not see themselves as carers, despite having a caring role in some form.

Overall, CarersUK estimates that 1 in 8 people provide unpaid care, (12.5% of the population). In mid-2014, Southampton City Council estimated the population of the city to be just over 245,000 people. Including young carers, who are less likely to self-identify as carers, the actual number of carers living in Southampton is estimated to be just over 30,000 people (calculated as 12.5% of the population).

The 2011 Census provides some detailed information; however, it only gives us information on carers who have declared themselves and does not include those who do not identify themselves as carers, nor those who have taken on a care and support role since the Census.

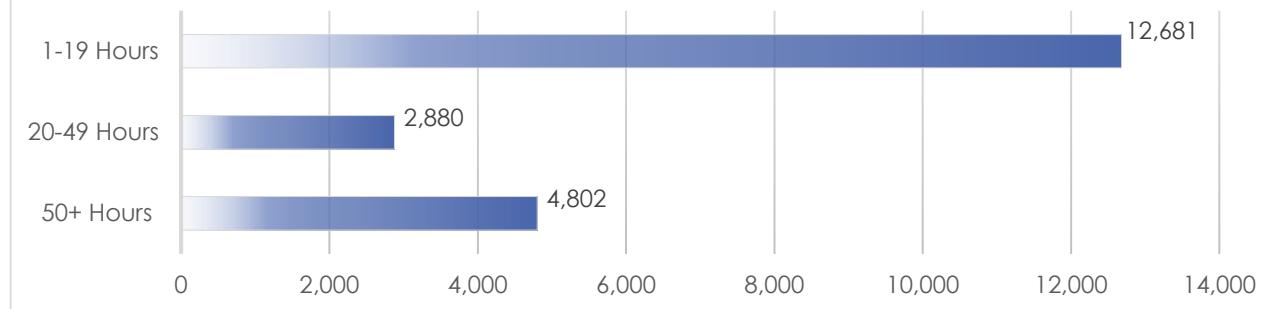
The most common age of a carer living in Southampton is between 35 and 65 years of age, however there are just over 2,000 young carers under 25 years of age.



Source: Census 2011

The 2011 Census has also shown us that in Southampton, most carers provide between 1 and 19 hours of care per week; however, **almost one quarter of Southampton's carers provide over 50 hours per week of care and support.**

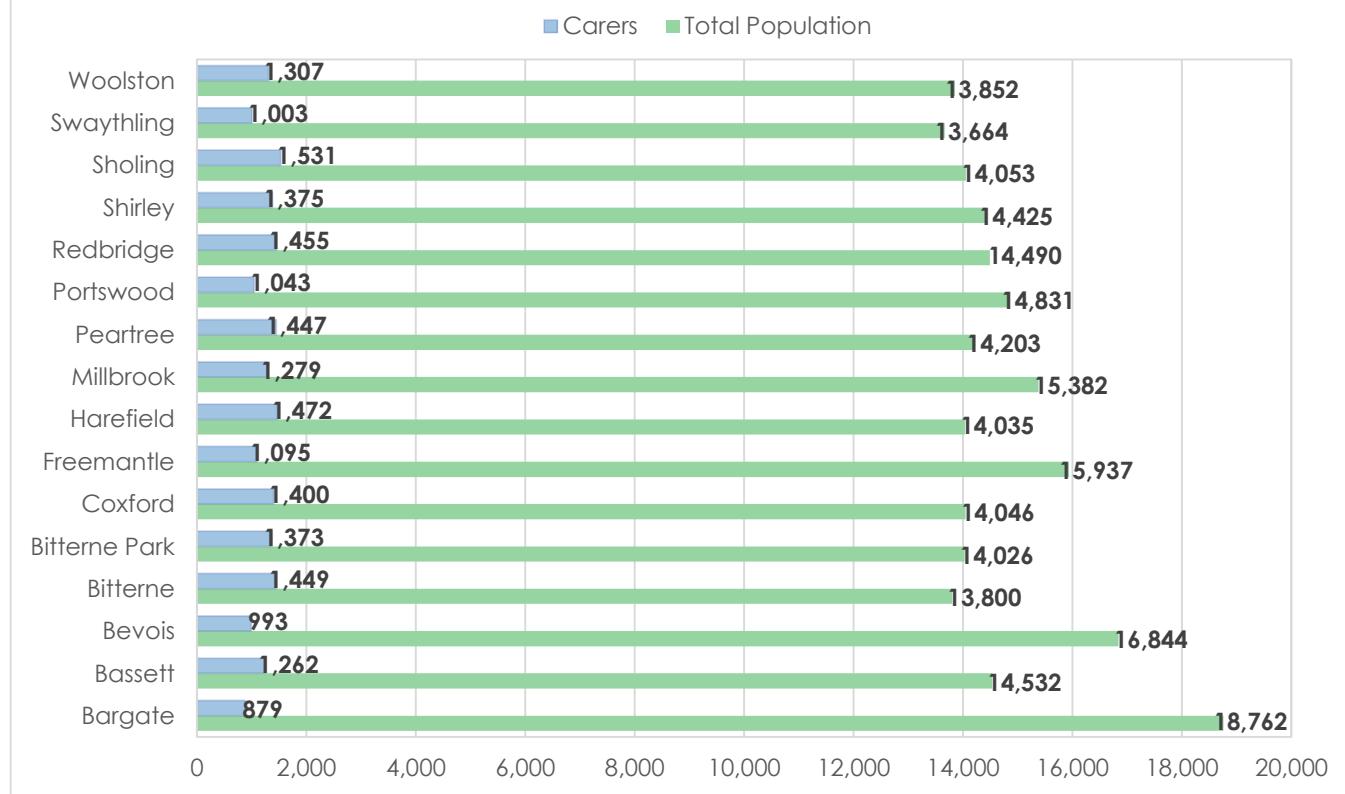
GRAPH 2: NUMBER OF CARERS BY HOURS CARING



Source: Census 2011

Carers live in all areas of Southampton, although in the 2011 Census, **more carers have been identified (over 1,400 each) in the wards of Bitterne, Coxford, Harefield, Peartree, Redbridge and Sholing.** For perspective, Graph 3 compares carer population with the total population per ward.

Graph 3: Number of Carers & Total Population by Ward



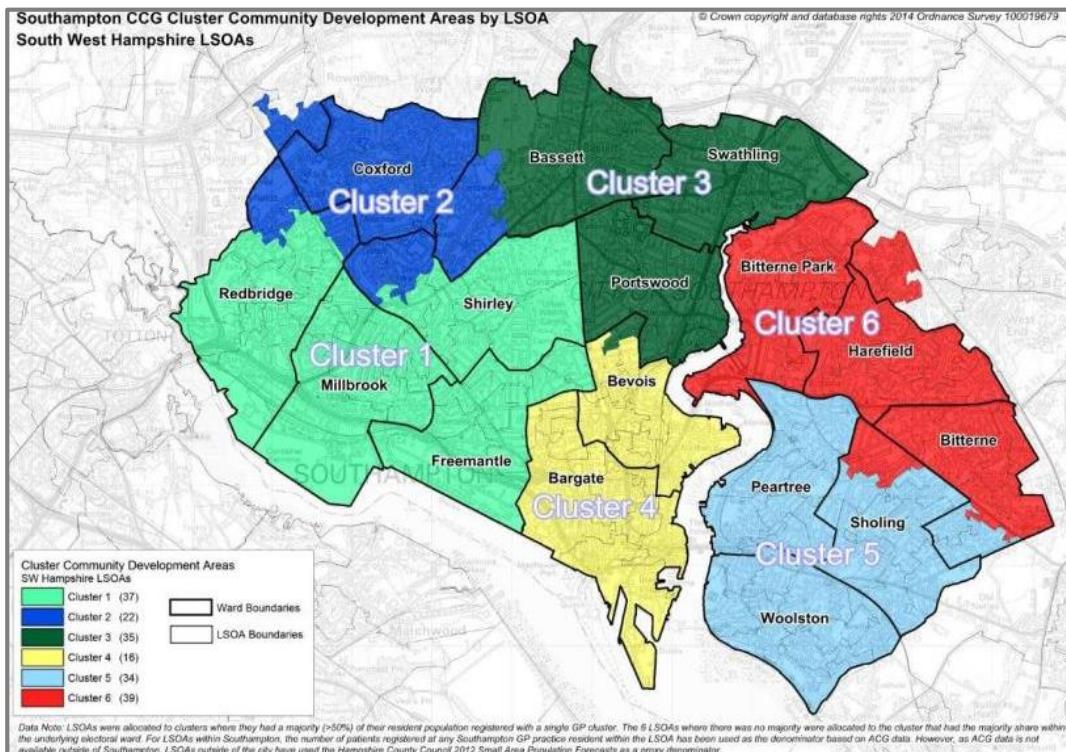
Source: Census 2011

In Graph 4, the city's population has been grouped into the six Better Care clusters.

Better Care in Southampton involves developing joined-up services that puts patients at the centre of their care, taking a more holistic approach to care. The idea is to join up elements of health, social care and voluntary sector services to provide the care needed using a co-ordinated approach. There is a focus on prevention and early intervention, building on the role of individuals to manage their own health and wellbeing, and putting them at the centre of planning their care. **Clusters 1, 5, and 6 have the highest number of carers** according to the Census data.

Source: Census 2011

GRAPH 4: NUMBER OF CARERS BY BETTER CARE CLUSTERS



National Government Support for Carers

Nationally there has been significant work on how best to support carers. This is a useful starting point, and Southampton's Carers' Strategy will build on national work by looking at the specific local needs of carers in Southampton whilst taking into account national priorities and commitments as appropriate. The key national legislation and publications relating to carers are as follows:

The Care Act 2014

The Care Act 2014 has introduced new rights for carer and new duties for local authorities to provide support for carers. In particular:

- The Care Act puts the promotion of wellbeing at the heart of all delivery of care and support for both the cared for person and the carer.
- Local authorities will have a duty to assess a carer's need for support based on apparent need as well as in response to requests for an assessment.
- A carer's assessment will include an assessment of whether a carer is willing and able to provide care (now and in the future), the outcomes the carer wishes to achieve in day to day life and to what extent the provision of support could contribute to the achievement of those outcomes.
- A local authority must have regard to whether a carer works or wishes to work, or participates in, or wishes to participate in education, training or recreation.
- A local authority will have to meet a carer's need for support where this meets the proposed national eligibility criteria.

For young carers, the Care Act and Children and Families Act 2014 gives:

- The right to an assessment.
- Assessments are a requirement based on the appearance of need.
- Appropriate links between children's and adult's legislation.
- A whole family approach to assessing and supporting adults.
- A clear legislative framework.

Children and Families Act 2014

One of the key changes that was introduced by the Children and Families Act 2014 is that parents of a disabled child have the same right to support as carers who look after an adult. There is a new duty on local authorities to offer a carer's assessment to any parent of a disabled child under the age of 18 years. Parents are no longer required to request an assessment and do not have to prove that they provide regular and substantial care for their disabled child.

For many years young carers have been slipping through the gap between children's and adult's support services which has prompted amendments to The Children and Families Act 2014. When a child is identified as a young carer, the needs of everyone in the family will be considered. This will trigger both children's and adults' support

services into action – assessing why a child is caring, what needs to change and what would help the family to prevent children from taking on this responsibility in the first place.

NHS Commitment to Carers 2014

The NHS published its *Commitment to Carers* document in May 2014

NHS England has developed 37 commitments around the following eight priorities:

1. Raising the profile of carers
2. Education, training and information
3. Service development
4. Person-centred, well-coordinated care
5. Primary care
6. Commissioning support
7. Partnership links
8. NHS England as an employer

The majority of the commitments are focused on actions to be taken nationally however local health providers will take account of them in their Action Plans as appropriate.

Hidden from view: the experiences of young carers in England

For young carers the publication in 2013 from the Children's Society '*Hidden from view*' examines young carers caring responsibilities, the socio-economic characteristics of their families, young carers' educational attainment and their chances of being in training or paid work.

The Children's Society's publication '*Hidden from View*' reveals that:

- Young carers are still no more likely than other children to be in contact with social services and educational welfare services.
- Young carers are lagging behind in school and missing out on their childhoods because of the demands placed on them. Young carers achieved GCSE grades equivalent to nine grades lower than their peers. Young carers are more likely to be not in education, employment or training between age 16 and 19 and young carers are more likely to be in lower skilled employment at age 20/21.

'*Hidden from View*' states there are 166,363 young carers in England, according to latest Census data released on 16 May 2013. The Children's Society believes this could be just the tip of the iceberg. Many young carers remain hidden from official sight for a host of reasons, including family loyalty, stigma, bullying and not knowing where to go for support. Some young carers are as young as five years old.

National Carers' Strategy 2008

The Government's vision for carers was outlined in the 2008 publication '*Carers at the heart of 21st-century families and communities*'

Carers will be universally recognised and valued as being fundamental to strong families and stable communities. Support will be tailored to meet individuals' needs, enabling carers to maintain a balance between their caring responsibilities and a life outside of caring, while enabling the person they support to be a full and equal citizen.

This publication highlighted the five most desirable outcomes as:

1. Carers will be respected as expert care partners and will have access to the integrated and personalised services they need to support them in their caring role.
2. Carers will be able to have a life of their own alongside their caring role.
3. Carers will be supported so that they are not forced into financial hardship by their caring role.
4. Carers will be supported to stay mentally and physically well and treated with dignity.
5. Children and young people will be protected from inappropriate caring and have the support they need to learn, develop and thrive and to enjoy positive childhoods.

Nationally over 4,000 carers were consulted on these outcomes to see what they thought was the most important. This led to the publication of a National Carers' Strategy in 2008.

In 2010 The Coalition Government set out a plan for its work with carers and carers' organisations – this is known as '*Recognised, valued and supported: next steps for the Carers' Strategy*'. National Government set out 4 priority areas, in which they will direct their efforts to achieve the five outcomes:

1. Identification and recognition of carers
2. Realising and releasing potential
3. A life outside caring
4. Supporting carers to stay healthy

The Government is set to launch an updated National Carers' Strategy in 2016, which will aim to better reflect the priorities outlined in The Care Act 2014.

Human Rights Act 1998 and Equality Act 2010

Legislation exists to protect the rights of individuals and promote equality of opportunity for all and so protects carers from discrimination or harassment. In particular the Equality Act protects carers from direct discrimination and harassment

at work that could occur because of a caring role; offers protection for carers when buying goods or using services, and protection against victimisation. This is because carers are associated with someone who is protected by law because of their age, disability or condition.

The Human Rights Act 1998 outlines that every individual has:

The right to life. This means that your life is as important as anyone else's

The right to respect for private and family life. This means the right to live as a family

The right to dignity and being part of the community. This means that you should get the care and support you need to have a good life. You should also be able to join in with things in your community along with everyone else.

Mental Health Act 1983 (2007)

The Mental Health Act is a law about detaining (holding) and treating people with a mental disorder in England and Wales.

Carers of people with mental health problems have a number of rights under this act, including to:

- be included on service user's Care Plan;
- be given general information about the condition of the person cared for, though not specific information if the service user does not consent;
- be given a copy of the service users care plan if (a) the service user consents or (b) issues of duty of care or risk override the service user objections; and
- (where the carer is the nearest relative):
 - request a Mental Health Act assessment of the person cared for;
 - be informed of the patient's detention, and the nearest relative's right to discharge the patient, before application under Section 2 – application for assessment;
 - seek to have the patient discharged from hospital (giving 72 hours' notice), though the doctor in charge of the patient's care can prevent this action;
 - express his/her point of view when the patient's detention is reviewed by tribunal or hospital managers;
 - be told when the patient is due to be discharged from hospital, unless the nearest relative or patient has instructed that this information should not be disclosed; and
 - request advocacy visits for the person cared for.

What we have achieved so far

Southampton has a long history of providing support to carers, however until 2014 adult services were funded on an annual basis and project by project. This gave uncertainty to the sustainability of services and an uncoordinated approach. This changed in 2014 when the City Council and Southampton City Clinical Commissioning Group (CCG) jointly contracted Carers in Southampton to deliver a 'One Stop Shop' service to adult carers. A Young Carers Project has been provided within the city since 1996 and has been commissioned by the City Council since 2000: it was last recommissioned in 2014. Both contracts run until 2017 at which point future services will again take into account the needs of all carers, the progress achieved through local providers and both local and national strategies.

Currently, Southampton has:

- ✓ *Carers in Southampton*; a service that focuses specifically on providing information, advice and support to adult carers through a variety of activities including groups, training, 1:1 support workers and drop-in sessions at venues across the city;
- ✓ *Young Carers Service*, recognising and supporting young carers living in Southampton;
- ✓ online training tools *Carer Aware* and *Young Carer Aware* to help raise awareness of and respect for carers, available to anyone on the Southampton Information Directory website at http://www.southampton.gov.uk/carer_aware/ and <http://www.southampton.gov.uk/young-carer-aware/>;
- ✓ explored how a *Carers Assessment Service* can be delivered by a group of voluntary sector organisations in association with the City Council;
- ✓ a rolling programme of publicity to promote awareness and encourage Carers to register with their GP;
- ✓ regularly scheduled *Caring with Confidence* sessions delivered at University Hospital Southampton NHS Foundation Trust (the General Hospital); and
- ✓ *Memory Cafes* run by Admiral Nursing service, available in different areas of the city for carers of people with dementia to learn and socialise.



"I worry about the future!"

- Southampton Carer

Participation in the strategy

Carer voices are a central vein running through and feeding life into Southampton's Carers Strategy. We are grateful for the wide participation from carers and professionals who have made this possible.

Summaries of feedback gathered can be found on the Carers in Southampton website: <http://carersinsouthampton.co.uk/the-directory/carers-strategy/>

Carers & Cared-For

Carers were approached and encouraged to provide feedback at various events, groups, and through an online survey as well as alongside stakeholders at larger workshops and events. Wherever possible, the cared-for person was encouraged to provide additional feedback, as they often have a unique understanding of carer needs and issues. As well, cared-for concerns often have a direct impact on the family and friends who support them.

Consideration has also been given to issues and needs of carers who have not been able to provide feedback, giving a voice to the often voiceless hidden, vulnerable and hard to reach carers.

We will continue to gather feedback as the different Action Plans are developed and implemented by key health and social care providers within both the public and voluntary sectors. Friends and family providing care and support are welcomed and encouraged to get involved however and whenever is suitable for them.

Stakeholders

At broader stakeholder events and workshops, participants were asked for feedback on what works well, what doesn't work well, and what needs to change regarding support and services for carers who are caring for a Southampton resident or are a carer living in Southampton. A wealth of information was fed back from representatives and professionals working in adult social care, children's services, several different areas of healthcare and public health, as well as among the various voluntary organisations that work daily with carers and the people they look after.

Steering Group

A group of carers and paid staff were gathered to build the strategy and lead it to implementation. The Steering Group included a number of carers with a wide range of caring and life experiences and staff from Southampton City CCG, Southern Health NHS Foundation Trust, Solent NHS Trust, Southampton City Council, Children and Young Peoples Public Health Nursing Service, Admiral Nursing Service, Solent Mind, SVS Young Carers Service, and Carers in Southampton. A number of the paid staff who belong to the group have also identified themselves as carers, providing an enriched input while wearing many hats.

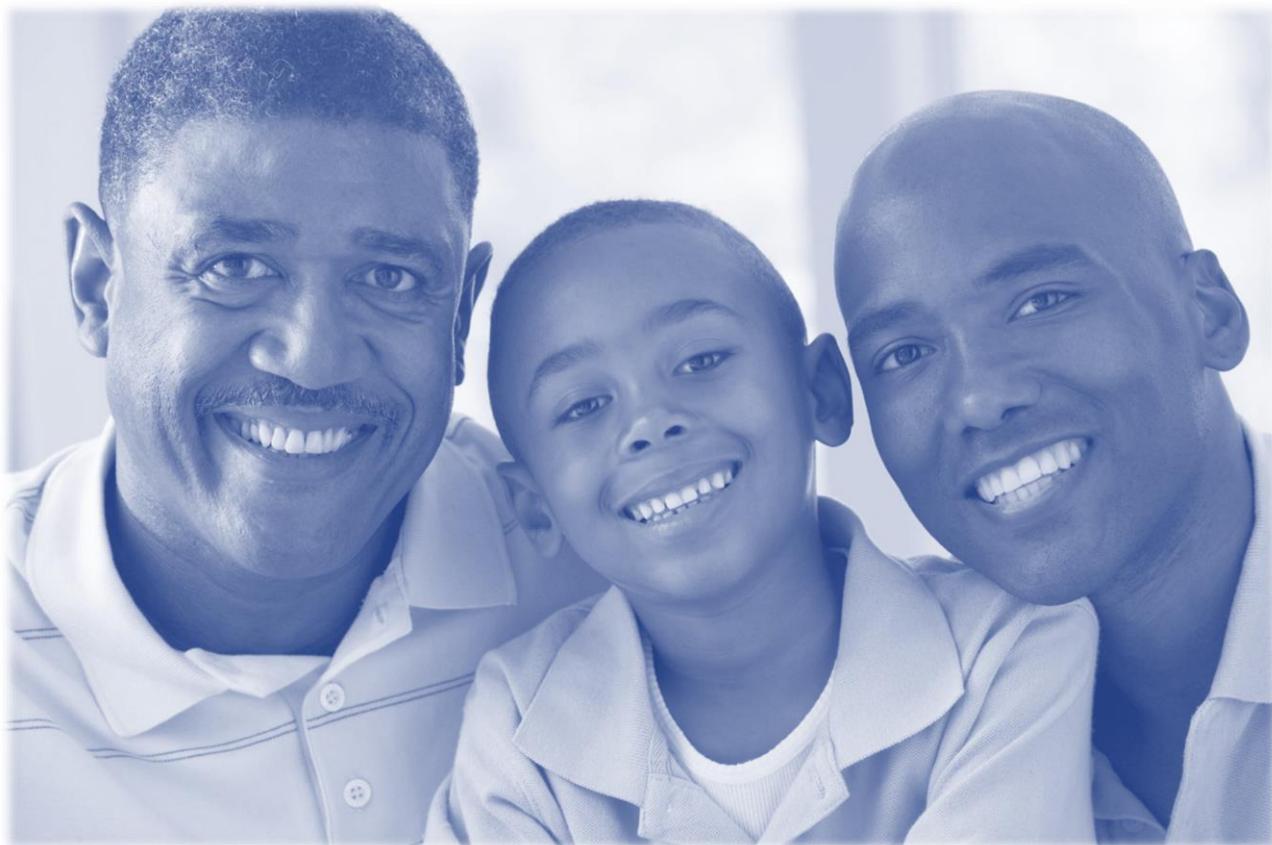


"Noah was sleeping on the floor. This was happening because he wanted to be near his daddy.

Tony, as you know, has ME. I've previously had depression and OCD. I think that has caused some of his anxiety. Obviously wanting to be near his dad. I don't think he will ever stop being anxious.

When Tony and I are both ill, it is very difficult to get help and support with the children."

- *Family with mutual caring roles & young carer*



Key Priorities

The Steering Group has examined feedback alongside current provision, needs and priorities of carers in the context of national legislation and local demographics. This has led to the identification of six key priorities to improve lives and support of Southampton's carers.

- ✓ Carer Identification and Recognition
- ✓ Information and Advice
- ✓ Collaborative and Innovative Support
- ✓ Support in Maintaining Health, Wellbeing and Safety
- ✓ Planned and Unplanned Breaks from Caring
- ✓ Young Carers Protected and Supported to Learn and Thrive

Statutory, voluntary, community and commercial organisations are encouraged to submit pledges and develop action plans, agreeing to work towards the six priorities identified in this strategy.

Common Themes from Priorities

While each priority has specific importance and value, a number of issues for carers present themselves across several priorities. These common overlapping themes are worth noting, as their recurrence isn't coincidental, and show how interlinked the priorities are.

Identification and Recognition

Identification of carers and recognition of their needs and skills as a carer by professionals; carers themselves, the cared-for person; and the general public, plays a major role in effectively promoting support for carers across all priorities. Identification enables access to services within the other priorities, as appropriate. As a result, other more complex issues and needs can begin to be addressed. Carers should be recognised as an expert of care when addressing issues across all key priorities.

Need for Education of Carers, Professionals, and Community

An enhanced understanding of who carers are, what their unique needs are, how to best meet those needs while providing care and support that also meets the needs of the cared-for person requires a great deal of continuous learning. This underlines the need for education not only for professionals, but also for carers to encourage continuing the support they give and their own wellbeing. So whilst a service might need training in identifying and supporting carers, carers themselves may benefit from increasing their computer skills to keep in touch with friends and family, or information on the condition the person they care for has.

Collaboration

Just as support needs will not be developed overnight, so too will they not be developed effectively by any one individual, group, or organisation. A joined up approach for addressing concerns and developing services has been a consistent theme in feedback from everyone, particularly carers. Without collaboration the priorities will not knit together to give a holistic approach: collaboration is necessary to implement a strong strategy.

Time for yourself

The importance of a carer being able, and recognising the need, to have time for themselves, is highlighted in the priority *Planned and Unplanned Breaks from Caring*. Without being identified as a carer, information on how and where to get 'time out' from may not be easily available, and the support might not be made available to take time out, demonstrating the overlap across the other priorities. The impact on carers' wellbeing, with or without time for themselves, makes this an important theme for all carers.

Young Carers

All key priorities relate directly and indirectly to young carers. The Steering Group wants to ensure that young carers are not overlooked. They are included in all priorities as well as being represented in a section focusing on their particular needs.



Priority 1 Carer Identification and Recognition

Aim: For services to develop effective means of carer identification; increase awareness of their issues and needs; as 'Expert Partners of Care' involve them in shaping services.

- ★ Increase awareness within the community of the variety of caring roles, carer's needs and issues and availability of services. This will help and encourage friends and family members providing support to recognise themselves as carers.
- ★ Services need awareness and understanding of who a carer is to identify them. Knowledge of their needs is required to appropriately deliver person-centred support.
- ★ Carers may have more than one primary caring role: all caring roles should be recognised and considered when planning support.
- ★ All carers, particularly those that are considered hard-to-reach should be recognised and respected by professionals, organisations, and the community as 'Experts in Care' as well as people with needs in their own right.

Hard-to-reach may refer to a carer experiencing stigma or unwelcome labelling of them or their cared-for person. They may be experiencing barriers to accessing support due to language, cultural differences, isolation or distance. They may also be new carers, young carers or working carers; or may be caring for individuals belonging to any of the following populations: black, Asian minority, ethnic and refugee (BAMER); lesbian, gay, bisexual, transgender (LGBT), older adults, those living with mental health or substance misuse conditions.

Priority 2 Information and Advice

Aim: Signpost to appropriate services and facilities, and provide access to important information and advice in a variety of formats to ensure ease of access.

- ★ Everyone working with carers, or clients with carers, have a responsibility to maintain an up-to-date knowledge of how best to support and direct carers e.g. know key organisations that provide information and advice. This should include consideration of any children or young carers.
- ★ Contact points for appropriate information and advice for carers should be diverse and easily accessible. Services should consider the rights and needs of carers to exercise how they choose to access and be involved in services, including receiving information and advice. Carers will have varying abilities of understanding / accessing information due to, for example language, mental capacity or sensory impairment. Provision of information in a variety of formats and languages should therefore be on offer, or a central point to direct carers to.

- ★ Services should recognise that carers are not always aware of what support is available and would benefit them.
- ★ Whenever written information and advice is developed, the needs of young carers should be considered and incorporated.

Priority 3 Collaborative and Innovative Support

Aim: For services to work in partnership and plan collaboratively ensuring easy access to the right support for both carers and the people they care for. Services will work with carers to develop and appropriately provide support mechanisms.

- ★ All professionals and agencies have a responsibility to encourage an understanding of how best to meet the needs of carers in their own right and as Expert Partners of Care.
- ★ Organisations need to create and agree a plan of how to work together, in a way that works with and for carers and recognises them as partners.
- ★ New technologies and other methods should be used for interactions between organisations and with carers, to provide support and share knowledge.
- ★ Ingenuity and flexibility is needed when working to support and address the needs of carers, particularly those experiencing isolation, who have limited or no access to the internet, or may be restricted from leaving their homes due to their caring roles or their own health and social care needs.
- ★ It is important that carers have continued contact and appropriate support. Carers have said they feel 'dropped' after a crisis is resolved or initial contact.
- ★ Carers should be engaged with as part of care planning, where the cared-for person gives permission. This should include the identification and recognition of carer needs.
- ★ All carers, adult and young carers, should be offered a Carers Assessment and signposted accordingly.
- ★ There is a recognised need for services to collaborate in order to support young carers effectively. They should be considered and engaged with as a part of the family and in so doing provide support through a 'Whole Family Approach'.

Priority 4 Support in Maintaining Health, Wellbeing and Safety

Aim: Encourage carers to take care of their own health and wellbeing with support from services where needed.

- ★ Acknowledge a carer's right to have, and support them to achieve, a life of their own outside of caring, and a right to feel safe and well.
- ★ Continuous and appropriate contact available to carers, with information and encouragement to look at the ways they can maintain their own health.

wellbeing, and safety through a range of activities, services and development of support networks. This may include a focus on housing, nutrition, physical and mental health, employment and training, leisure and social activities, and personal pride and self-recognition. This is especially important where a carer is isolated.

- ★ Support carers to recognise their rights to health, wellbeing and safety, including an understanding of how they can work and access support to meet their personalised needs as an individual, both during their caring role and after it finishes.
- ★ Work to change attitudes in the community to value carers, and their role, more highly.
- ★ Young carers will need additional help and support to maintaining health, wellbeing and safety.

Priority 5 Planned and Unplanned Breaks from Caring

Aim: Provide high quality and appropriate replacement care.

Breaks can be found in a range of formats (with or without cared-for, in or away from home, alone or with others), timescales (a few hours, overnight, multiple days or weeks, regularly, or ad-hoc), and accompanied by a range of provision for cared-for person (no provision, paid carer visits, residential respite provision, voluntary provision, help from family members, friends or neighbours).

- ★ Develop easy processes for accessing breaks which give consideration to suitable timing, availability, and choice for carer and cared for. This should include building capacity and planning for cared-for people, especially those who may not meet the eligibility criteria for formal replacement care packages, such as looking to community and family networks.
- ★ Raise awareness in the community to encourage support of carers, which can in turn help carers to recognise for themselves the benefits of having a break.
- ★ Work with families and young carers to enable them to identify and access services that offer a break for Young Carers.
- ★ Carers should be encouraged to write a 'Contingency Plan' for periods where they are unexpectedly unable to care, taking into account it could be a short or long period of time. The plan could also consider planned breaks.

Priority 6 Young Carers Protected and Supported to Learn and Thrive

Aim: To identify young carers, provide support and enable them to understand their rights and entitlements.

- ★ Increases awareness of the existence of young carers to all schools and colleges in Southampton and encourage them to proactively identify young carers and promote their wellbeing.
- ★ Any assessment of, or initial provision of a service to, somebody needing care and/or support should include questions that identify young carers.
- ★ All services should promote the wellbeing of children when somebody the child cares about has, or develops, care and support needs.
- ★ All children have a right to learn and thrive.
- ★ Young carers families should be signposted to appropriate support services. Up-to-date information can be found here:
<http://www.southampton.gov.uk/health-social-care/carers/young-carers.aspx>
- ★ Young carers are recognised as having a right to be considered and included in each of the above priorities.

“Caring is difficult when it's for your husband... you are not appreciated. A lack of money and no breaks are always at the back of my mind. I try to keep smiling!”

- Southampton Carer



Pledges and Action Plans

The Strategy's Steering Group have often been asked: *How will this strategy make a difference? And how will you know it is making a difference?*

The Southampton Carers Strategy 2016-2020 has been created with these questions in mind. The strategy has pulled together national legislation, local data, carer and professional feedback to generate a summary of need in Southampton.

To demonstrate support for carers and the strategy, pledges have been encouraged from any and all individuals, groups and organisations. These pledges are a promise to work towards and support carers, and are personalised to the individual or organisation submitting them.

You can find an up-to-date Pledge Page on the Carers in Southampton Website:

www.carersinsouthampton.co.uk/carers-strategy

Following the development of pledges, the Steering Group will support key organisations to develop a corporate and/or service specific Action Plan that reflects relevant priorities. These organisations, and any others which wish to write an Action Plan, will be invited to register them with the Steering Group who will monitor their implementation. Some organisations will cover areas larger than Southampton, and may need to have a plan that reflects more than one local carers' strategy.

It is the responsibility of each local organisation or network of organisations, to develop their own action plans based on the six priority areas highlighted in the strategy.

At the time of this Strategy's publication the following organisations have given pledges and agreed to develop an Action Plan and implement it during 2016 and beyond:

- **Health Care: Southampton City CCG, Solent NHS Trust, Southern Health NHS Foundation Trust, University Hospital Southampton NHS Foundation Trust**
- **Southampton City Council**
- **Voluntary Organisations: Solent Mind, Southampton Voluntary Services Young Carers Project, Carers in Southampton**

The Strategy Steering Group will also work with the following sectors to gain pledges and develop and implement Action Plans as appropriate:

- **Statutory, voluntary and community organisations**
- **Schools and Colleges**
- **Businesses**
- **Individuals, Families and Friends: pledges are welcome but Action Plans are not expected to be developed**