Summary

1. Main issues

- ‘Putting carers at the heart of everything we do’ is the new Leeds Carers Partnership Strategy. The strategy sets out a vision and 6 priorities that the Leeds Carers Partnership propose are the key areas that we need to focus on in order to promote the health and well-being of carers in Leeds, and to reduce the health and financial inequalities that carers experience due to caring.

- The strategy recognises that it is important that we have shared aims and values across all partners, and that we take a strong system-wide approach to ensure that carers in Leeds stay mentally and physically healthy for longer.

2. Best Council Plan Implications (click here for the latest version of the Best Council Plan)

- ‘The strategy supports the Best Council Plan ambition of Leeds being a Compassionate City by setting out the priorities and objectives that, when taken together, will promote the health and well-being of carers and young carers in Leeds, and reduce the health and financial inequalities that carers experience due to caring.'
3. Resource Implications

- The cost of replacing the care provided by unpaid carers in Leeds is estimated at £1.4 billion per year. It is therefore vital that carers are able to remain well and are appropriately supported so that they are able to continue caring.

- The strategy sets out actions that are and will take place through current funding streams. Annual investment from April 2020 in support for carers from Leeds City Council (Adults & Health & Children & Family directorates) and NHS Leeds Clinical Commissioning Group is £3.67m.

- It is hoped that agreeing shared priorities across a range of partners will enable new and innovative ways of working which will have both social and wider economic benefits.

- While the overall approach is consistent with the Leeds Plan shift towards early intervention and prevention, investment in quality care and support for older and disabled people is required to ensure that carers are helped and supported so that their own health and care needs are not overlooked.

- Where key decisions are required about resource allocation including future investment, these will be progressed through the Integrated Commissioning Executive (ICE) subject to ratification by the Council’s and CCG’s decision making policies.

Recommendations

The Executive Board is asked to:-

a) Note the work of the Leeds Carers Partnership in developing its strategy

b) Support the vision and priorities set out in the Leeds Carers Partnership Strategy

c) Note that the design of the ‘Plan On A Page’ will be reviewed to align with the Leeds Health and Wellbeing Strategy branding and format

d) Note the Head of Commissioning (Integration) and the Commissioning Programme Lead (Carers) will support and coordinate the implementation of the Leeds Carers Partnership Strategy along with the Head of Primary Care (Proactive Care), NHS Leeds Clinical Commissioning Group.
1. **Purpose of this report**

1.1 The purpose of this report is to present the new Leeds Carers Partnership Strategy, ‘Putting carers at the heart of everything we do’. The strategy sets out 6 priorities that the Leeds Carers Partnership propose are the key areas that we need to focus on in order to promote the health and well-being of carers in Leeds, and to reduce the health and financial inequalities that carers experience due to caring.

2. **Background information**

2.1 Carers are people who look after someone who otherwise couldn’t manage without their help. This may be because of illness, frailty, disability, a mental health need or an addiction. The care they provide is unpaid and as such this definition does not extend to care-workers who are paid professionals who work in a variety of settings, from home care agencies and residential care facilities to nursing homes.

2.2 Carers come from all walks of life, all cultures and can be of any age. Each caring situation is different and is influenced by a range of factors relating to both the carer and the person they care-for. Carers play a significant role in preventing, reducing or delaying the point at which the people they care for become dependent on formal care and support, which is why it is important to promote carer wellbeing and prevent carers from developing needs for care and support themselves.

2.3 Increasing numbers of carers are taking on responsibility for more intensive levels of care. However, carers often feel isolated, that they are not respected or valued, and that the huge contribution that they make to individuals and the national economy cannot be underestimated but is often taken for granted and overlooked. This combination is known to impact upon their physical, mental and economic health and wellbeing.

2.4 Carers provide the bulk of care in Leeds. It is estimated that over 1.5 million hours of unpaid care are provided across Leeds every week while research published by the University of Leeds and Carers UK estimates the financial contribution of carers in Leeds to be around £1.4billion per year.

2.5 The Leeds Carers Partnership is the lead group in Leeds focused on the development and improvement of services that support carers. Membership of the Leeds Carers Partnership is open and includes carers as well as staff from the public, private and voluntary sector. The Partnership is co-chaired by the Head of Commissioning (Integration), Leeds City Council, Adults and Health Directorate and the Head of Primary Care (Proactive Care), NHS Leeds Clinical Commissioning Group.

2.6 The Leeds Carers Partnership support the Carers UK call for the coronavirus crisis to be a turning point in how we as a society treat family carers. Carers UK say “It has never been more important that both national and local government, as well as employers and policy makers, take action to support carers and the people they care for”.

2.7 In September 2019, the Leeds Carers Partnership submitted a report to Leeds Health and Wellbeing Board that presented their draft strategy, along with a proposal to undertake a period of public engagement. The Leeds Health and Wellbeing Board noted the progress made by the Leeds Carers Partnership in developing the draft strategy, and members commented on the further development of the strategy, including the public engagement proposal.
In September 2020, the Leeds Carers Partnership submitted a second report to Leeds Health and Wellbeing Board. This second report presented the final version of the strategy as well as an overview of the engagement processes undertaken, governance arrangements and the next steps required to deliver this ambitious citywide partnership strategy.

3. **Main issues**

3.1 Putting carers at the heart of everything we do introduces a series of eleven ‘I-statements’ which together set out the vision of what Leeds could look like from a carer’s point of view. The eleven I-statements are based on what carers themselves have said is important to them through various local, regional and national surveys and engagement.

3.2 The strategy then identifies six priorities which the Leeds Carers Partnership propose are the areas that we need to focus on to achieve the aims and vision of the strategy. The six priorities are:

- Improving identification of carers
- Supporting carers to care
- The right support at the right time for young carers
- The carer voice and involvement
- Influencing change and innovation
- Making Leeds a carer-friendly city

3.3 Based on the feedback from the engagement described in section 4.1 of this report, The Leeds Carers Partnership has identified 5 objectives which will contribute towards each of the priorities. The objectives are set out in the appended printable version of the strategy.

3.4 The strategy recognises that in order to promote carer health and wellbeing and to reduce the health inequalities that carers experience due to their caring role, it is important that we have shared aims and values across all partners, and that we take a strong system-wide approach to ensure that carers in Leeds stay mentally and physically healthy for longer. This is fundamental in supporting our response to COVID19 which is impacting significantly on carers, and on carers from BAME communities who, as we know, are disproportionately impacted through COVID19.

3.5 Leeds Carers Partnership are producing a regular bulletin “COVID19: Support and Guidance for Carers” to provide carers and organisations who support them, with important health and wellbeing messages, guidance, and helpful information about support available from Leeds City Council, NHS organisations and the voluntary and community sector, for example:

- Carers Leeds online support groups are providing social engagement, a range of health and wellbeing activities and facilitating peer support. Carers Leeds are working with Leeds Libraries and 100% Digital Leeds to provide carers with access to technology and support to use it.
- Promoting digital and technology including the Digital Resource for Carers, the Carers UK Jointly App and e-learning to support caring safely and to boost confidence amongst carers, who regularly carry out complex tasks, manage finances and communicate in a range of situations, but often underestimate the value of these skills when job searching or looking at changing roles.
• Adults and Health working with Care Homes, with input from Carers’ Leeds, to support and enable carers maintaining contact with their loved ones through digital means or face to face visits

• Asset Based Community Development pathfinder project aimed at enhancing our understanding of how this way of working can have a positive impact, specifically for carers from BAME communities, by supporting them to be able to have a short break from caring

3.6 Each partner organisation will be responsible for identifying and implementing the actions they will take to support progress against the strategy priorities and objectives. This will be collated into an overarching delivery plan.

3.7 Each partner organisation will also be responsible for reporting progress to the Leeds Carers Partnership. This will provide opportunities for the partnership to provide constructive peer challenge and to hold each other to account in a supportive way.

3.8 Progress against some of the objectives will be achieved by action in a number of different organisations and as such successful implementation of the strategy will entail partnership working across a range of work across different organisations

3.9 Some work-streams are already underway while full implementation of the strategy will also see the development of new activities and areas of work. Given the scope and breadth of the strategy it is recognised that implementation of some of this work may sit outside of the health and social care system, such as access to, and support in, employment.

3.10 Wherever possible, carers will be actively involved in service reviews, while commissioning activities and service developments will be co-designed with carers. Where this is not realistically feasible, this will be undertaken with relevant third sector organisations.

3.11 The strategy will be made available online as well as in the printable format appended to this report.

4. Corporate considerations

4.1 Consultation and engagement

4.1.1 Engagement on the draft strategy was undertaken between November 2019 and March 2020. The engagement occurred at two levels: citizen engagement and stakeholder engagement.

4.1.2 Citizen engagement included talking to carer groups, an online survey and gathering views via social media. Carers Leeds were central to citizen engagement acting as both a channel of communication and a voice for the 12,500 carers they support each year.

4.1.3 Stakeholder engagement is critical to ensure that there is system-wide ownership of the strategy and of the role that organisations will play in contributing to the delivery of the priorities. A stakeholder event was held at St Chads on 4th March 2020 and was attended by 54 people representing 24 organisations.

4.1.4 The Leeds Carers Partnership approved its strategy in April 2020.
4.2 Equality and diversity / cohesion and integration

4.2.1 Caring is known to impact upon physical, mental and economic health and wellbeing, for example carers are more likely to have a long-term physical or mental health condition, illness or disability, be isolated and not have as much social contact as they would like, be worried about finances, not get enough sleep and time for themselves. Evidence also tells us that:

- Women are more likely than men to be caring (58% of carers in Leeds are female).
- Carers aged 65 and above are more than twice as likely to be caring for more than 50 hours per week
- Take-up of carers breaks and other carers support from BAME communities is low relative to our population
- Carers are less likely to be in full-time employment than non-carers
- Being a young carer can affect school attendance, educational achievement and future life chances

4.2.2 An EDCI Impact Screening Tool has been completed and is appended to this report.

4.3 Council policies and the Best Council Plan

4.3.1 The strategy supports the Best Council Plan ambition of Leeds being a Compassionate City by setting out the priorities and objectives that, when taken together, will promote the health and well-being of carers and young carers in Leeds, and reduce the health and financial inequalities that carers experience due to caring.

4.3.2 ‘The strategy will support the Leeds Health and Care Plan system-wide focus on prevention and early intervention through a ‘Leeds Left Shift’. This essentially means moving resources (e.g. time, money, activities) towards support that promotes carer health and wellbeing and prevents carers from experiencing ill-health and financial disadvantage.

4.3.3 The ‘Plan on a Page’ will be designed to align with the Leeds Health and Wellbeing Strategy branding and format.

4.3.4 In line with the Inclusive Growth Strategy, the strategy has a focus on ensuring that carers and young carers are supported to access and remain in education and employment in order to promote their economic health and wellbeing and to avoid financial disadvantage.

Climate Emergency

4.3.5 While there are no specific climate considerations in relation to the subject of the report, climate emergency will be considered as part of future service development, commissioning and new ways of working.

4.4 Resources, procurement and value for money

4.4.1 The cost of replacing the care provided by unpaid carers in Leeds is estimated at £1.4 billion per year. It is therefore vital that carers are able to remain well and are appropriately supported so that they are able to continue caring.
4.4.2 The strategy sets out actions that are and will take place through current funding streams. Annual investment from April 2020 in support for carers from Leeds City Council (Adults & Health & Children & Family directorates) and NHS Leeds Clinical Commissioning Group is £3.67m. This does not include support that is provided directly to people with health and care needs which may benefit carers (e.g. Respite in a Care Home, Shared Lives, Home Care, Day Care, Continuing Healthcare etc). Nor does it include support for carers and the people they care for provided by the NHS, for example through Primary Care, Community Healthcare and Acute Care.

4.4.3 It is hoped that agreeing shared priorities across a range of partners will enable new and innovative ways of working which will have both social and wider economic benefits.

4.4.4 While the overall approach is consistent with the Leeds Plan shift towards early intervention and prevention, investment in quality care and support for older and disabled people is required to ensure that carers are helped and supported so that their own health and care needs are not overlooked.

4.4.5 Where key decisions are required about resource allocation including future investment, these will be progressed through the Integrated Commissioning Executive (ICE) subject to ratification by the Council’s and CCG's decision making policies.

4.5 Legal implications, access to information, and call-in

4.5.1 There are no legal, or access to information implications arising from this report.

4.6 Risk management

4.6.1 The strategy sets out the ambition for Leeds to be the best city for carers, whilst being practical about opportunities and challenges. Financial and reputational risks will be managed by the governance of Leeds City Council and NHS Leeds Clinical Commissioning Group in the development of the strategy.

4.6.2 Progress on the strategy will ultimately be reported, on a regular basis, to the Health and Wellbeing Board.

5. Conclusions

5.1 The Covid19 crisis has emphasised the fundamental importance of both national and local government, as well as employers and policy makers, taking action to improve the way unpaid carers are identified, recognised and supported.

5.2 This report presents the Leeds Carers Strategy which will drive a strong system-wide approach to ensure that we recognise and value the role and contribution of unpaid carers and young carers in Leeds, that we promote the health and well-being of carers and young carers in Leeds, and that we reduce the health and financial inequalities that they experience due to their caring role.

6. Recommendations

The Executive Board is asked to:

- Note the work of the Leeds Carers Partnership in developing its strategy;
• Support the vision and priorities set out in the Leeds Carers Partnership Strategy.
• Note that the design of the ‘Plan On A Page’ will be reviewed to align with the Leeds Health and Wellbeing Strategy branding and format
• Note the Head of Commissioning (Integration) and the Commissioning Programme Lead (Carers) will support and coordinate the implementation of the Leeds Carers Partnership Strategy along with the Head of Primary Care (Proactive Care), NHS Leeds Clinical Commissioning Group.

7. **Background documents**

7.1 None.

8. **Appendices**

8.1 Equality, Diversity, Cohesion and Integration Screening

8.2 The Leeds Carers Partnership Strategy ‘Putting carers at the heart of everything we do’ (Printable Version)

8.3 The Leeds Carers Partnership Strategy ‘Putting carers at the heart of everything we do’ (Plan on a page)

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1 The background documents listed in this section are available to download from the council’s website, unless they contain confidential or exempt information. The list of background documents does not include published works.