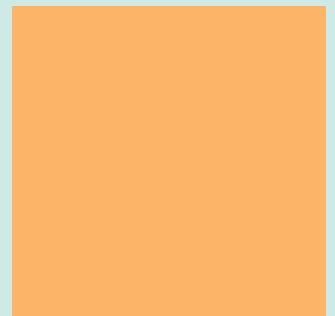




HM Government

# Carers at the heart of 21st-century families and communities

**"A caring system on your side.  
A life of your own."**



**Summary**



HM Government

# Carers at the heart of 21st-century families and communities

“A caring system on your side.  
A life of your own.”

## Summary



**DEPARTMENT FOR BUSINESS**  
**ENTERPRISE & REGULATORY REFORM**

department for  
**children, schools and families**



Government  
Equalities Office

Department for  
**Innovation, Universities & Skills**

# Preface



Caring for our relatives and friends when they are in need is a challenge that the vast majority of us will rise to at some point in our lives. At any one time 1 in 10 people in Britain is a carer – the majority of them, of course, still women. It is a testimony to the importance of families that so many of us are prepared to make the personal sacrifices that caring can involve in order to help our loved ones lead fulfilling lives even in the face of incapacity or disability. Our support and appreciation for carers is therefore not just fundamental to ensuring that those of us in need of care are able to receive it, but goes right to the heart of our values as a society and our ambition to create a fairer Britain.

Today, the demands both on our care system and on our carers themselves are greater than ever before – and they are set to continue to grow. So this strategy sets out the framework for developing support for carers not just as a one-off but as a progressive process of change over the next 10 years. It recognises the increasingly important role that carers play in our society alongside the wide variety of caring roles and the diversity of those within these roles, and it acknowledges that carers need more help and support than has been available in the past.

But above all this is a strategy based on the views and concerns of carers themselves. Through our Standing Commission on Carers and the many consultation events that we have held around the country, we are increasingly aware of the everyday challenges and obstacles that carers face.

Carers have told us they want a system that is on their side rather than one that frustrates them at every turn, including much more support to help them manage the twin demands of work and caring responsibilities. They want far more personalised support and greater scope to control and customise services, including in healthcare where identifying needs and ensuring prompt access to services can be so critical. And above all we recognise the need – repeated so many times throughout our

consultation – for better support for respite and short breaks. Too often carers are unable to access the kind of support which allows them to re-charge and renew themselves, and to address this we are taking immediate action to double our support for respite care over the next two years with an additional £150 million of new funding.

We have also heard and understood the request for us to do more to alleviate the financial hardships that all too many carers face, and as we look over the next year at the options for securing a better system of funding for all social care, we must also find the right approach to ensuring a fairer deal for our carers that provides financial support, particularly to those who face hardship.

These are the challenges we face, and this strategy is designed to help us meet them and to create a support system for carers that is fit for the 21st century. It is the start of a process rather than the end and I hope it will be welcomed by all carers as a platform from which we can build.

*Carole Rennie*



# Foreword by Secretaries of State

Every day 6,000 people take on new caring responsibilities, performing a crucial role in families and in their wider communities, by providing support, care and help with day-to-day tasks to those who otherwise would struggle to manage alone.

There is no fixed group that needs care. Support might be needed by relatives, friends, children, older people, people with disabilities or those who are ill. Caring has never been a sectional interest – everyone has the potential to become a carer, and it is likely that in the future more and more of us will. The number of people aged over 85 – the age group most likely to need care – is set to double over the next 20 years, affecting many more families. Traditionally caring has been seen as women’s work – and 70 per cent of it is still done by women but as our culture continues to change so too will this figure. Nine per cent of men now have caring responsibilities compared with 11 per cent of women. Caring is increasingly part of all our lives.

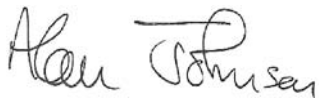
People who care do so because they want to help the people they care about, but often it means they end up juggling the support they give with other responsibilities, in a difficult balancing act. For many carers, looking after their own health, combining caring with work, getting access to training or simply having time to take a break and go away for a weekend can be a major challenge. People who provide a lot of care tend to have lower incomes, poorer health, and are less likely to be in work than their counterparts.

If carers are to have the same opportunities as everyone else in society, and to be able to have a life outside caring, we need to improve support and recognition for what they do. That means improving health and social care support, ensuring that carers are able to access education and leisure opportunities, and making sure that people with caring responsibilities have the chance to work flexibly so as to combine work with their caring roles. For the many children and young people who


support parents or other family members it means making sure that they are not providing unreasonable levels of care, and that they have the support they need to learn, to develop and to thrive.

This strategy sets out the action we plan to take, working with partners and, building on the progress made by our first ever carers' strategy, *Caring for Carers*, published in 1999.

Responding to the needs of the growing numbers of people who care is one of the major challenges we face as a result of the demographic changes underway today. We must work together using the 10-year framework set out in this strategy to ensure that this challenge is met.



Alan Johnson  
Department of Health



Hazel Blears  
Communities and  
Local Government



James Purnell  
Department for Work  
and Pensions



John Hutton  
Department for  
Business Enterprise  
and Regulatory  
Reform



Ed Balls  
Department for  
Children, Schools  
and Families



Harriet Harman  
Government Equalities  
Office



John Denham  
Department for  
Innovation, Universities  
and Skills

# Executive summary

Carers are at the heart of 21st-century families and communities. In a changing society most people are living longer, many are developing long-term clinical conditions and the vast majority have rising aspirations in terms of maintaining maximum independence and control over their own lives. Consequently, an increasing number of us may find ourselves taking on a caring role at some point in our lives.

Many people, mainly women, are now balancing work, childcare and caring for an ageing parent. Increasing numbers of older people often care for their partner while providing childcare for grandchildren, and parents of children with complex health needs know that they will be 'lifetime' carers. Furthermore, the positive shift to independent living and care at home, away from institutionalisation, will continue to require a greater contribution from carers. At the same time families are now frequently scattered across the world, couples are struggling to retain a positive work-life balance and in an ageing society, some older people are left isolated with little or no support from family or friends.



These changes mean that the needs of carers must, over the next 10 years, be elevated to the centre of family policy and receive the recognition and status they deserve.

Twenty years ago there was little or no recognition of the contribution and distinct needs of carers. Since the 1999 Prime Minister's Carers' Strategy there has been significant progress, including an annual Carers Grant to every local authority in England, the right to request flexible working and enhanced pension entitlements. Most recently, the *Aiming high for disabled children* programme will result in greatly enhanced support for families with disabled children.

## FACTBOX

### Funding to date and in the future

By March 2011, we will have invested over £1.7 billion for councils to use to support carers in a range of ways through the annual Carers Grant. This includes £25 million a year announced as part of the New Deal for Carers for emergency break provision.

We have also committed a further £22 million to cover the costs of the establishment of information services via a helpline and a training programme for carers and information service, and £3.4 million to directly support young carers through extended Family Pathfinders and support for whole-family working.

We are now investing over £255 million on new commitments as part of this strategy.

However, the next decade must lead to major and substantial change in the everyday lives of carers and the family members and friends they support. This new deal alongside the *Independent Living Strategy*, the social care reform programme set out in *Putting People First*, the long-term reform of the care and support system, NHS reforms, reforms within children's services and welfare reform, must ensure carers experience a system which is on their side rather than enduring a constant struggle so that they are supported to have a life of their own alongside their caring responsibilities.



Our vision is that by 2018, 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 caring, whilst enabling the person they support to be a full and equal citizen.

**By 2018:**

- 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;
- carers will be able to have a life of their own alongside their caring role;
- carers will be supported so that they are not forced into financial hardship by their caring role;
- carers will be supported to stay mentally and physically well and treated with dignity; and
- children and young people will be protected from inappropriate caring and have the support they need to learn, develop and thrive, to enjoy positive childhoods and to achieve against all the *Every Child Matters* outcomes.

This is a shared vision and responsibility between central and local government, the NHS, the third sector, families and communities. It has been shaped by the thousands of carers, their advocates and front-line support staff, who have told us what matters most if we are truly to ensure that carers have the best possible quality of life and recognition that they deserve.

The action we will take to transform this from a vision to a reality over the next 10 years covers issues including breaks, income, information and advice, the workplace, training for the workforce, access to employment, emotional support, the health of carers and the specific needs of young carers.

Short-term changes will begin this year and be implemented over the next three years. Longer-term priorities are identified that will ensure we achieve our 2018 vision. We will consult with carers, their advocates and stakeholders on a timescale for their implementation, taking account of new advice and available resources.

The success of this transformational New Deal for Carers will depend on the commitment and vision of statutory, third and private sector agencies. In all cases they will need to engage with individual carers, the people that they support and carers' networks in a new way – which recognises that it is carers who are best placed to articulate their own aspirations as well as the emotional and practical realities of their caring experiences.

Over the next 10 years, it is carers who will judge the effectiveness of this strategy. It is they who will know whether they feel valued, respected and supported to have the best possible quality of life, often in difficult circumstances.

## Vision

Our vision is that by 2018, carers will be recognised and valued as being fundamental to strong families and stable communities. Support will be tailored to meet the individuals' needs enabling carers to maintain a balance between their caring responsibilities and a life outside caring, whilst enabling the person they support to be a full and equal citizen.

This vision is shared by all central and local government, the voluntary sector and most importantly, carers themselves.

### **By 2018:**

- 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;
- carers will be able to have a life of their own alongside their caring role;
- carers will be supported so that they are not forced into financial hardship by their caring role;
- carers will be supported to stay mentally and physically well and treated with dignity;
- children and young people will be protected from inappropriate caring and have the support they need to learn, develop and thrive, to enjoy positive childhoods and to achieve against all the *Every Child Matters* outcomes: to be healthy, stay safe, enjoy and achieve, make a positive contribution and achieve economic well-being.

The strategy recognises that improving the support for the person being cared for is vital to improve the life of the carer.

To achieve the vision, we have made a number of commitments in the short term (up to 2011) and identified priorities which will be considered in the longer term.

## Introduction

Over the next 10 years, there will be significant changes in our society offering major challenges to services that support carers and those they care for. In a world where people survive with complex health conditions and live longer, the demand for care will continue to grow. Changes in traditional family life, for example, increased numbers of single households and geographical dispersion of families, will contribute to these challenges.

Since the release of the Prime Minister's Strategy on Carers in 1999 (*Caring about Carers*), carers have been a priority for governmental support. One of the main changes has been the introduction of the Carers Grant provided to councils in England so they can increase support for carers, particularly through the provision of planned breaks. The grant has provided over £1 billion of additional support to local councils since 1999.

We have supported legislation to give carers new rights, including the right to an assessment of their own needs, independent of the person they care for. When assessing carers, councils should bear in mind carers' need or wish to work, study or undertake leisure opportunities outside of their caring responsibilities.

The **Employment Act 2002** gave the right to request flexible working to parents of children under the age of 6 (or 18 if the child is disabled). The **Work and Families Act 2006** extended this right to employees who care for an adult.

In addition, legislation on equalities and the **Disability Discrimination Act(s)** recognises the right of people in society to equal citizenship, which will be of benefit to both carers and the people they care for and support.

### **The New Deal for Carers**

The 2006 White Paper *Our health, our care, our say* announced a New Deal for Carers made up of four parts, of which this strategy is the centrepiece.

- i. **A national information helpline and website, which will be launched in spring 2009.** Through one telephone number carers will access all the information they need directly, or be referred onto more appropriate support;
- ii. **A training programme for carers called Caring with Confidence, which will inform carers of their rights and the services available to them and help develop their advocacy and networking skills.** The training will be available on a face-to-face basis from August 2008, and on a distance learning basis, from December 2008;
- iii. **£25 million additional funding per year has been made available** to councils in England to provide emergency care cover;
- iv. **A major review of the 1999 Carers' Strategy.**

When developing the new strategy, we carried out a far-reaching consultation to identify those things that carers themselves said would make the most significant improvements to their lives. The total period for consultation lasted for six months and views were collected from over 4,000 people.

As well as the public consultation, we set up four Task Forces to examine the key problems carers face. The Task Forces focused on employment, equalities, health and social care and income.

### **Standing Commission on Carers**

We also established the Standing Commission on Carers in September 2007 to advise us on the development of the strategy and on matters it feels are relevant to improving support for carers in the longer term.

## Challenges, roles and responsibilities

### Definition of Carer

**A carer spends a significant proportion of their life providing unpaid support to family or potentially friends. This could be caring for a relative, partner or friend who is ill, frail, disabled or has mental health or substance misuse problems.** We will carry out a full review and impact assessment of this definition to see whether it or another could be adopted across government. However, we recognise, of course, that there might still be certain trigger points before an entitlement to benefit or flexible working come into effect.

When discussing carers we also need to be aware that many carers do not identify themselves as such. For example, carers from many black and minority ethnic communities do not see themselves as carers, and are often unaware of the vital support they might be entitled to.

Caring can take a large number of forms and is undertaken by individuals from all walks of life. Importantly caring can, or is likely to, involve us all.

## Mutual caring

Elsie (88) lived at home with her daughter, Christine (60) who has a learning disability. They lived together all their lives and they did everything together. Christine was declared 'uneducable' at the age of 6 and Elsie was told to 'take Christine home and keep her happy'. Christine did not use any services until she was 40 when her dad had a stroke and Elsie found herself suddenly caring for two people. However, Christine really enjoyed the new activities and the contacts the services brought. As they both grew older, Christine did more and more things to help her mum as she found tasks like carrying the shopping increasingly difficult.

When Elsie was diagnosed with a terminal illness, both Elsie and Christine had full needs and carers' assessments as they were looking after each other. Services were offered to support Elsie when Christine was not at home, and to help Christine with things like cooking, cleaning and shopping for them both. Although Christine sometimes found it very difficult to care for her mum and watch her illness worsen, it was very important to both her and Elsie that they stayed together for as long as possible and she is proud of the care she provided while her mother was still alive. She says: *'Mum always looked after me and I'm glad I could look after her too because I know how she liked things done.'*

### CASE STUDY

## Caring for a sibling

Tim is 16 and has Asperger's Syndrome. His behaviour is often aggressive, unpredictable and destructive. Gemma, his sister who is 12, plays an important part in helping her mother manage his behaviour. She helps to "keep an eye on" Tim and occupies him when he comes home from the day centre. She helps when Tim has a dentist's or doctor's appointment by going with him and their mother and "doing it first", which makes it easier for Tim to carry out tasks or activities that are unfamiliar to him. Gemma gives up a lot of her free time to help with tasks such as cooking, shopping and cleaning, as her mother is often occupied with supporting Tim. However, Gemma is bullied at school. Gemma loves her brother but does not want to be involved in supporting him quite so much as she wants the bullying to stop and to "have a life".

### CASE STUDY

### The family role

The traditional source of care and support for those needing care is the family, and the best environment for the person being looked after is very often their own home. The strategy aims to support people and their carers in their own homes and communities wherever possible.

### Government's role

The Government has a key role in improving the health and well-being of carers and those they support. Its role is made up of four parts:

- providing leadership;
- monitoring implementation;
- setting the overall objectives; and
- helping to join up services.

## Wider society's role

Wider society must recognise the vital role of carers and the invaluable support they give both to individuals and to society as a whole.

Employers, in particular, have a key role to play in recognising the valuable contribution that carers can continue to make to the workplace and the economy in combination with their caring role.

## Integrated and personalised services

Carers told us that there is a lack of co-ordinated services for carers and that they would like services to be based on what they need and want. There should also be better joining up between services, managed by professionals who show a greater understanding of the role that carers play.

### **Our vision is that:**

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.

## Personalisation

Personalisation is the new approach we have taken to ensure services are designed to fit individual needs and preferences. Its overall aim is that the state should help people to get services that are tailored to their individual needs. It emphasises the importance of the individual in making all the relevant decisions.

This vision for transforming social care is summed up in *Putting People First* – a formal agreement between central government and local service providers which also sets out our intention to improve information and strengthen advocacy and support services to help people and their carers work with all local services.

## Personal budgets

We have indicated that everyone using social care will in future have a personal budget, a term used to describe an upfront clear allocation of social care resources to individuals, and may choose to take that



as cash instead of social services. For carers, this new approach helps to ensure that service users have the flexibility to buy or influence the provision of services to meet their own needs and those of the carer. They can be used, for example, to provide practical support for the carer through purchasing services such as window cleaning or gardening, which perhaps the carer is unable to manage because of their caring responsibilities, or to provide appropriate breaks for the carer.

## Personal Budgets

Ashok is a Hindu male service user who only speaks Gujarati. Prior to receiving direct payments, he had been receiving help with personal care from a home care agency. However, the service was unsatisfactory and erratic, making planning impossible.

Additionally, the language barrier meant that his family had to take up concerns on his behalf as nobody from the agency spoke Gujarati. The family found it hard to take a break, and even though they had raised concerns with the homecare agency, no action was taken.

Now, Ashok uses his direct payment to employ someone from his local community who speaks his language. He also employs another lady who came recommended: she has learnt a few words in Gujarati to help communicate with him.

### CASE STUDY

## Information

Meeting carers' information needs is an important part of ensuring that people can receive personalised services. The New Deal for Carers includes an information service, providing full and easy to access information through a single national telephone number and website. This will come online in spring 2009.

We are also providing additional funding to enhance the information provision for carers focusing on easy to access (i.e. translated) and local information.

## Training

In 2008, we are launching the Caring with Confidence training programme to support carers. It will provide training for caring roles and will help carers to work better with professionals. It will inform carers of their rights, the services available to them, and help them link with other carers' networks, and gain confidence and skills in dealing with professionals.

## The NHS

Carers have called for closer working between the NHS, social services and themselves. To encourage this, we are establishing pilot sites to examine how the NHS can better support carers. This will involve:

- the active involvement of carers in diagnosis, care and discharge planning;
- greater support for carers at GP practices and hospitals; and
- closer working with councils and voluntary organisations.

## Voluntary sector provision

Many carers prefer to deal with voluntary organisations than statutory services. Both central government and a number of councils already support the voluntary sector. However, some areas have more developed voluntary sector services than others. We are therefore investing to expand the capacity and reach of the voluntary sector.

## Workforce

The workforce is vital to ensuring that carers and the people they care for get the services and support they need. In addition to other initiatives, we are funding a training and awareness raising programme for key professionals, from health to housing, to support carers.

## Longer term

It is important that over the next 10 years we continue to improve and increase local service provision for carers, with personalised and specialised carers' services tailored to carers' specific needs.

What we will be doing in the short term:

- carers' information helpline and website;
- funding to provide easy to access and local information for carers;
- new training programme for carers 'Caring with Confidence';
- pilots to look at how the NHS can better support carers;
- improving voluntary sector provision; and
- training and awareness raising for key professionals.

What we will consider in the longer term:

- access to specialist services in every community;
- possible new flexibilities for personal budgets;
- offering carers a lead professional; and
- sharing best practice with primary care trusts based on the NHS pilots.

## A life of their own

Carers told us that the provision of breaks and replacement care were among their highest priorities during the consultation.

### **Our vision is that:**

Carers will be able to have a life of their own outside of their caring role.

## Breaks

In giving carers a life outside caring we believe there should be a greater emphasis on the provision of planned breaks.

Breaks are seen as absolutely vital by carers. We have already committed to providing £370 million for short breaks for families with disabled children.

In addition, we will be investing a further £150 million over the next two years to fund more planned breaks for carers. This money, which will be made available from the NHS, is in addition to the Carers Grant, which stands at £224 million in 2008/09, which is provided to councils to support carers.

We are also investing in pilots to examine the cost-effectiveness and quality of flexible break provision.

## Headway Oxford Breaks for Carers – for carers of adults with acquired brain injury

Headway in Oxford supports adults with acquired brain injury, their carers and their families. It is a specialist service offering short breaks for carers, often at comfortable hotels across the country. It also provides a break away for the person being cared for to allow the carer a break at home.

Some brain-injured people suffer high levels of anxiety if separated from their carers overnight. For these carers to have peace of mind it is essential that they accompany the people they support on the break. Headway makes sure that the carers have as much time off as possible over the weekend. Such breaks offer mutual support for carers. Brain injury is an often misunderstood condition and carers of people who are brain-injured rarely meet people who understand their particular problems. Friendships formed during these breaks can help during the rest of the year.

**CASE STUDY**

### Technology

Technology can play a major part in giving carers peace of mind and in doing so provide space that they can call their own. One example of new technology that promotes independent living and so reduces the stress placed on carers is Telecare – various sensors placed around the home which trigger alarms at the sign of unusual activity such as leaving the gas on or leaving the front door open for prolonged periods at night.

### Housing, leisure and transport

Decent housing makes a critical contribution to the value and effectiveness of the health and care systems. The Housing Strategy aims to relieve some of the burden from carers by taking housing problems out of the equation.

Financial constraints placed upon carers because of their caring roles often prevent them from accessing local services. We are encouraging local authorities to share good practice on discounts for leisure and transport facilities for carers.

## London Borough of Hackney – Carer's card

The London Borough of Hackney offers resident carers an 18-month card that provides discounts at over 50 local businesses in Hackney. In addition, carers can enjoy concessionary rates for use of swimming, gymnasium and a number of other leisure centre facilities. There are plans to expand the scheme further with libraries such as offering extended borrowing times and waiving fees.

CASE  
STUDY

What we will be doing in the short term:

- increased funding for breaks from caring for carers;
- pilots to assess the quality and cost-effectiveness of breaks; and
- sharing best practice in terms of supporting carers across councils.

What we will consider in the longer term:

- possible further increases to break provision;
- share best practice about quality and innovative approaches to breaks; and
- look at how councils work with voluntary organisations.

## Income and employment

Improving the financial position of carers was raised as an important consideration for carers during the consultation. In addition, carers told us that they wanted the opportunities to combine paid employment with their caring role.

### **Our vision is that:**

Carers will be financially supported so that they are not forced into financial hardship by their caring role.

## Income

Since 2001, we have introduced a number of measures to help improve financial support for carers. Depending on their circumstances, carers also have access to the full range of social security benefits. A carer entitled to Carer's Allowance may also qualify for other benefits, such as Income Support or Pension Credit with additions to the standard rate to recognise their caring responsibilities. Parent carers may also be eligible for tax credits.

For lower income carers, we raised the carer premium in the income-related benefits in 2001 by £10 over and above the normal annual increase in line with prices. We also removed the 65 age limit for new claims to Carer's Allowance from 2002.

From 2010, we are also introducing a National Insurance carer's credit for carers providing at least 20 hours of weekly care to recognise their need to protect their rights to State Pension. Carers entitled to Carer's Allowance accrue a National Insurance credit for each week that they meet the Carer's Allowance entitlement conditions.

### *Reviewing carers' benefits*

We acknowledge that in the long term the current structure of benefits for carers needs to be reviewed. However, we need to do this within the context of wider welfare reform and the review of the care and support system rather than in isolation so that we can create a flexible system that reflects the diversity of carers and their needs that is simple and aligned across the benefit system.

## Employment

Carers' income can be greatly improved if they can combine working with caring – a common wish for many carers. We want to enable all carers who wish to return to work to be able to do so. To help achieve this ambition the **Work and Families Act 2006** extended the right to request flexible working to employees who care for an adult. An awareness raising campaign about this right for employers and carers will shortly be launched. This right includes only those who are caring for a spouse, partner, civil partner, relative, or who live in the same home as the person they are caring for. We are reviewing how to include more carers within the scope of this law.

## Working carer who is supported in paid employment

Clive is a police sergeant. He is 46 years old and has cared for his wife Lucy, who is 52, for the past five years. They live together and he showers and dresses her, deals with her arrangements and plans and organises her activities for her. Clive works a four-day week and has compressed hours, meaning he works a full working week in those four days. This makes it easier to plan hospital appointments for Lucy and to do other tasks that make up his activities as a carer. He is grateful to his employer for the flexible working package they have offered him and they benefit from the skills and experience he is still able to bring to the force.

### CASE STUDY

A carer-specific programme will be introduced at Jobcentre Plus that will improve the help and advice available to carers who wish to re-enter the job market by:

- improving information about flexible job vacancies in Jobcentre Plus job banks;
- introducing Care Partnership Managers in every Jobcentre Plus district;
- introducing specialist training for Jobcentre Plus advisers who work with carers;
- funding replacement care for those who are participating in approved training;
- ensuring carers have access to appropriate employment programmes; and
- investigating the feasibility of providing return to work support through voluntary organisations.

### **Employers**

Engaging with employers is absolutely vital to ensuring carers can combine paid employment with caring. We are working with business to produce a good practice guide that will emphasise the business case for employing carers.

## Flexible working at BT

75 per cent of BT's 100,000-strong workforce work flexibly. The company has identified the following benefits:

- productivity gains averaging 21 per cent for employees working flexibly;
- cost savings, including £1 billion in office costs and equipment for home workers;
- greater customer satisfaction – BT's customers rate the quality of service has risen by 5 per cent since flexible working was introduced;
- more creativity and energy because flexible working produces twice as many new ideas;
- reduced sick leave – less than three days a year for home workers
- staff turnover is less than 4 per cent;
- a trust-based relationship with employees that is "worth its weight in gold";
- reduced CO<sub>2</sub> emissions and traffic nuisance – flexible working saves 12 million litres of fuel a year.

Lisa Crowley, a PA to a BT senior director, lives with and cares for her elderly mother who has severe arthritis. She juggles successfully the demands of work and caring thanks to an understanding line manager and the chance to work occasionally from home. "It's sometimes a struggle but the rewards are worth it," says Lisa. "What is reassuring is that I don't feel I have to justify any absence. My manager and colleagues are aware of my situation, and they don't mind if I have to use the phone in office time for personal calls. This makes such a difference to me and my mum."

CASE STUDY



## Training and skills

We are committed to ensuring that training is provided in a flexible manner so that it can be fitted around caring responsibilities.

We are developing an adult advancement and careers service that will offer advice and guidance as well as a Skills Health Check. This will form the basis of an action plan to help an individual progress back into learning and work.

What we will be doing in the short term:

- review flexible working practices for carers;
- an awareness raising campaign for employers and carers about flexible working;
- a good practice guide for employers around supporting carers;
- improving the support offered to carers by Jobcentre Plus; and
- ensuring skills training is provided in a flexible manner.

What we will consider in the longer term:

- reviewing structure of benefits in the context of wider benefit reform.

## Health and well-being

Carers told us that they should not have to neglect their personal health needs because of their caring role. Furthermore, as partners in care, they should be treated with dignity and respect, both as carers and individuals in their own right.

### **Our vision is that:**

Carers will be supported to stay mentally and physically well and treated with dignity.

### *Annual health checks for carers*

We are piloting annual health checks for carers that will detect emerging health problems from an early stage. If successful, these pilots may be extended more widely.

### ***Emotional support***

Carers are more likely to experience high levels of psychological distress, including anxiety, depression and loss of confidence and self-esteem than non-carers.

In addition to the psychological therapies currently being rolled out across the country, we are considering giving priority to funding national projects providing emotional support to carers.

### ***Training for GPs***

The Princess Royal Trust for Carers, in partnership with the Royal College of General Practitioners (RCGP), has already published a good practice guide highlighting the needs of carers and carers' health.

We will work with the RCGP to build on this to develop, pilot and evaluate a training programme for GPs to help them better understand carers' needs. The pilots could lead to a national training programme.

### ***Expert partners in care***

Key to treating carers as partners in care is ensuring they are equipped with the relevant information to the care and needs of the person they support in the form of 'information prescriptions'. These should go some way to ensuring that carers have the information they need to act as partners in care. The forthcoming Next Stage Review of the NHS will echo the importance of carers being treated as expert partners in the NHS.

What we will be doing in the short term:

- piloting annual health checks for carers;
- GP training pilots; and
- improving emotional support for carers.

What we will consider in the longer term:

- developing a full training package for GPs;
- rolling out annual health checks for carers nationally;
- replacement care to cover hospital appointments;
- discussing with GPs and other health professionals how they can give greater support to carers; and
- providing more information sharing between carers and professionals, especially where mental capacity is an issue.

## Young carers

Young carers were particularly concerned about gaps in support around the family and the person they care for. They also worry about their own problems – missing out on the opportunities other young people have.

Children should not have to take on inappropriate types and levels of caring, which can affect school attendance, emotional and physical well-being and longer-term life opportunities.

### **Our vision is that:**

Children and young people will be protected from inappropriate caring and have the support they need to learn, develop and thrive, to enjoy positive childhoods and to achieve against all the Every Child Matters outcomes.

### ***Targeted support for young carers***

Across the UK dedicated young carers' projects have increased from 110 in 1999 to some 350 current projects. They are now in contact with around 25,000 young carers.

We will commission further research to assess the types of project-based support available to identify best practice over the next year.

We will invest in a new programme to make sure that what we learn from our current young carers' projects helps to influence emerging programmes, including Extended Schools and targeted youth support, so that local areas can strengthen the range and quality of support they give.

## Young Carers Forum

The Children's Society, in partnership with The Princess Royal Trust for Carers, has facilitated the establishment of the first National Young Carers Forum for England. Members of the Forum have made a DVD called "Listening to Young Carers", in which young people talk about the issues they face and share solutions that will help improve their lives.

**CASE  
STUDY**

### Universal services

Although some schools and colleges offer high quality support there is still much to be done.

We will invest in a new programme of action as part of the Healthy Schools Programme to embed greater awareness of and support for young carers.

We are also funding new training materials tailored for GPs and hospital discharge teams, complementing other training and awareness raising initiatives planned for GPs under this strategy.

We will also provide funding to increase awareness of caring and the issues it raises across children's settings more generally.

### Whole family support

Young carers responding to the consultation made clear that better support for their family and the person cared for was the priority.

We have already invested £3 million in our Extended Family Pathfinder programme for young carers, which looks specifically at how to build better, more preventative forms of support around families who might be at risk of relying on the care of a child.

We have provided £600,000 to The Children’s Society and The Princess Royal Trust for Carers to develop guidance on working with the family as a whole, and establishing good practices in relation to young carers.

We will invest £4 million over two years to expand our Extended Family Pathfinder programme, enabling a further 12 to 13 areas to participate.

We will also invest £1 million through voluntary projects to enable them to contribute to our prevention agenda.

We will invest in an expanded programme of local and regional training for staff in local services on ‘whole family working’. The training will be particularly targeted at teams working in mental health and substance misuse.

What we will be doing in the short term:

- more support for schools to help them in their support for young carers;
- awareness raising on carering and the issues it raises across children’s settings more generally;
- training materials for health professionals;
- preventing children from falling into inappropriate caring–action to help build better, more preventative support;
- action to ensure better joined-up support around the family; and
- training for staff in local services on whole family working.

What we will consider in the longer term:

- what more can be done, on the basis of ongoing pilots and research, to improve protection for young carers.

## Implementation

We will put robust arrangements in place to oversee progress in implementing the strategy over the next 10 years.

We are establishing a cross-departmental programme board that will work with national, regional and local partners to ensure the strategy is delivered at every level. It will also ensure all the necessary preparatory

work is undertaken to support delivery of the commitments made for the next two years, as well as taking forward the longer-term proposals.

The Standing Commission on Carers will also play a key advisory role in advising on progress in implementing this strategy and will advise Government on ways that carers can continue to be supported as society evolves and changes. It will publish an annual report.

### ***Maintaining a regional and local overview***

Regionally and locally, progress will be monitored within agreed performance frameworks, and we will actively encourage a stronger multi-agency approach in delivering the strategy.

### ***Surveying carers' experiences***

We are developing a survey for councils to assess carers' experiences, and therefore help them to improve the quality of services. At a national level, we will include a section on carers in an "omnibus survey" this year.

The 2001 Census question helped us collect reliable data about carers. Hence we have ensured that a question on carers is also included in recommendations to Parliament for the 2011 Census.

What we will be doing in the short term:

- establishing a cross-government programme board;
- including carers in the larger omnibus survey;
- recommending the inclusion of a carer's question in the next Census;
- undertaking a national carer's experience survey.

What we will consider in the longer term:

- reviewing performance measures to focus on carers' experiences.



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