



West
Northamptonshire
Council

Carer Strategy Implementation Plan

2024 - 2029



Priority	Actions	Year	Measures of success
Reduce the waiting time for a carer assessment	<ul style="list-style-type: none"> • Introduce a triage system for carer referrals where carer crisis will be prioritised. This can form part of a new carer pathway in Liquid Logic. The carer provider will be able to complete assessments straight into the council system. • Where required, council officers will carry out an assessment of both the cared for person and carer to prevent crisis or during a crisis • Launch a campaign for the right to an assessment • Provide information for carers at the time of the cared for person's diagnosis. This will require a more whole system approach with health services • Where possible, offer an opportunistic assessment at the One-Stop shops • The current contract requires acceptance of the referral within three days and an assessment within 28 days • Specify waiting time key performance indicators (KPIs) in the provider carer support service specification for the new West Northamptonshire Council (WNC) only model commencing April 2025: Routine 20 days, urgent 3 days 	2	Monitor waiting time reductions monthly through council and carer support provider key performance indicator reporting / dashboards
Supporting carers to recognise themselves as carers	<ul style="list-style-type: none"> • Initiate a raising awareness campaign using social media and target hidden carers (hard to reach groups) 	1	An increase in the number of carers being identified for support

	<ul style="list-style-type: none"> • Produce a carer information card to raise awareness and direct to support • Tell carer stories so people identify with their own life • Produce podcasts for carers • Target places where carers might be seen more often for marketing materials e.g. doctors' surgeries, hospitals, community pharmacists, shops, schools, churches, temples and mosques etc • Offer a local one-stop shop model that carers who don't yet see themselves as carers might attend 		
Identifying carers for support	<ul style="list-style-type: none"> • Provide the one-stop shop model for carers to attend for social support and to gain information on a variety of subjects but not limited to: benefits, power of attorney, blue badges, driving advice, advanced decisions to refuse treatment, advance care plans, planning for the future, support available in their area, carers' rights, NHS continuing health care, the care home system, eligibility for council support etc • Use plain, non-jargon language (and in other than English) • Use existing resources and learn from others • Offer age-appropriate carer information • Produce a carer information card to raise awareness and direct to support 	1	An increase in the number of carers being identified for support

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| | <ul style="list-style-type: none">• Inform carers of support offer at the time of the cared for person's diagnosis or when the cared for person is assessed• Advertise services and support for carers• Support the welcoming spaces model• Promote a whole system approach to carers including a move towards joint commissioning with the council and NHS• Put in place a carer passport and carer friendly community model. The passport should work towards a digital solution and offer five components that businesses and services could sign up to:
Education: for school/college age children where the school acknowledges that pupils/students may have to take time away from school, have more time for exams if tired from caring, an awareness that the child may be missing out on peer time. Employment: employers acknowledging that employees may need time off at short notice, the Carers' Leave Act 2023 in HR policy, time off to attend GP and hospital appointments and the office/working at home balance. Health: Support from GPs and knowledge that the carer is a carer of someone, support when visiting hospitals – John's Campaign. Community: Support in supermarkets when shopping, opening carer tills, sensory times, discounts in cafés, | |
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	reduced or no parking fees, reduced or free entrance charges. Finance: Support for carers with banking institutions		
Carers and cared for person more joined up assessment	<ul style="list-style-type: none"> • Review assessments (WNC and Northamptonshire Carers) • Scale assessments according to need, circumstances, choice and in a sensitive way • Carry out a joint assessment with consent • Consult the cared for person/carer about their assessment with consent • Introduce a new carer pathway in the new council Liquid Logic system that allows for assessment of the cared for person, carer or both. • Continue the unpaid carers group made up of operations staff and commissioners that was set up as a result of the self-assessment • Work underway now but will start when the system and new carer provider are introduced • Equality of support for self-funders 	2	<ul style="list-style-type: none"> • Better communication with council operational staff and the carer provider • More joined up working • Joint assessments when required • Reduction in carer crisis
A one stop shop for carers to go to for advice, support and signposting	<ul style="list-style-type: none"> • Provide a one-stop information shop for carers that will move around the Local Area Partnerships (LAPs). 9 geographical areas make up the LAPs. This will include a social element, benefits advice, blue badge information, power of attorney, DVLA guidance, NHS continuing healthcare, local offers of support for 	1	One-stop shop model in place and visiting every LAP at least monthly

	<p>carers, information, signposting to other forms of support and opportunistic carer assessments.</p> <ul style="list-style-type: none"> • Use existing resources and learn from others • Visit a LAP at least monthly but change the venue so it's not the same town or village within the LAP each time (people might attend one-stop shops in other LAPs for support as well as their own) • The one-stop shops should be advertised widely in advance and free to access • Review the requests for information from carers and modify the model as required • Making time for carers/time of caring • Assistive technology and adaptive clothing advice • Advice on the disabled facilities grant and household adaptations 		
<p>A directory of support for carers that's easy to follow</p>	<ul style="list-style-type: none"> • Produce a WNC carer guide in both printed and digital format • List forms of support by LAP area, benefits, legal (PoA, mental capacity), DVLA guidance, advocacy, debt management, rights, Blue Badge, DVLA advice • Include a glossary of terms and frequently asked questions • Review annually 	<p>1</p>	<p>Printed and digital version of the carer guide produced</p>
<p>Increase the respite choice and availability</p>	<ul style="list-style-type: none"> • Understand what respite means to different people and support them to obtain respite 	<p>2</p>	<ul style="list-style-type: none"> • Reduced carer crisis from baseline • Increased choice of respite offer from baseline

	<ul style="list-style-type: none"> • Ask you what it means to have your own time as a carer • Commission respite services with carers using co-production • Carry out a review of respite offers and identify gaps in the market • Review the current respite offer in the carer support contract for the new model from April 2025 • Awareness and training of different forms of respite for staff • Agree a minimum entitlement to respite • Ensure respite options are considered in Liquid Logic 		<ul style="list-style-type: none"> • Gaps identified in the review have been closed
<p>Support when carers are at crisis point in a timely manner with agreed timescales</p>	<ul style="list-style-type: none"> • Support carers in a timely manner – specify response times in the April 2025 carer support service specification 3 days for a carer assessment, 3 days for are review • Triage and provide response times depending on need • Explore alternatives to attending hospital such as using paid crisis workers at short notice • Put in place support to reduce the potential for crisis • Support every carer to develop a carer crisis plan • Support carers to attend condition specific training 	<p>2</p>	<ul style="list-style-type: none"> • Reduced carer crisis reported • Reduced carer burden scores • Carer increased quality of life scores

<p>Carers voices and views heard and respected by professionals as an EBE</p>	<ul style="list-style-type: none"> • Use the experience of carers in training professionals • Use advocacy groups or develop a carer support worker to represent carers • Improve transparency, use language that is easy to understand and we will be more caring as a council • Invite carers to become experts by experience and join the EBE register for coproduction groups • Use of carer case studies to be presented at high level meetings so senior officers understand the issues carers face first hand • Develop carer case study films to be used in training operational staff 	<p>3</p>	<ul style="list-style-type: none"> • Carers report an improvement in the attitudes towards them by professionals from baseline • Reduced complaints • Number of carers taking part in coproduction groups
<p>Keeping carers healthy: physically and mentally</p>	<ul style="list-style-type: none"> • Ask and listen to what the carer wants • Improve the quality of our assessments and be more in-keeping with the Care Act • Review the carer support plan not longer than annually • Provide a range of support models for carers • Where there is no current offer of support to meet the carer's needs, support the person to find this using a direct payment • Nutritional support 	<p>3</p>	<ul style="list-style-type: none"> • Reviews of support plan shows that carer interventions are effective • Reduced carer crisis • Carers report feeling less tired, anxious and depressed
<p>Carer training, specifically in the condition that the cared for person has</p>	<ul style="list-style-type: none"> • Provide free carer training and inform carers that it is available • Work with health colleagues for specialist condition-specific training 	<p>2</p>	<p>Training is provided free of charge for carers including the following conditions:</p> <ul style="list-style-type: none"> • Dementia • Parkinson's disease • Mental health conditions

	<ul style="list-style-type: none"> • Link to training that is already out there and provided by others • Ask carers what conditions they would like training in 		<ul style="list-style-type: none"> • Epilepsy • Autistic spectrum disorder (ASD) • Common physical health issues such as diabetes, high blood pressure, arthritis, chronic obstructive pulmonary disease (COPD) • Autoimmune disorders such as multiple sclerosis (MS) and lupus • Attention deficit hyperactivity disorder (ADHD) • Nutrition, hydration and speech and language therapy (SALT)
Future planning, particularly for degenerative and terminal conditions	<ul style="list-style-type: none"> • Incorporate this into the guide - knowledge of advance care plans etc • Support carers to plan early • Provide information on Advanced Decisions to Refuse Treatment, wills, who pays for what, NHS Continuing Healthcare etc • Provide free training on long term conditions, so carers are aware of the progression of the disease and when the cared for person is nearing the end of their life • Use of 'difficult conversations' type documentation • Gain the support of faith groups • Emotional support of carer/families 	2	<ul style="list-style-type: none"> • Carers have attended training on long term conditions • The cared for person has an advance care plan in place
Carers help shape the market with commissioners	<ul style="list-style-type: none"> • Ask carers what the gaps are for them and involve carers in provider forums so they can influence others 	2	Carers involved as experts by experience in the design, procurement and review of services

	<ul style="list-style-type: none"> • Use co-production to develop services that are fit for purpose • Use EBEs when writing service specifications • Use carers for scoring tenders • Set up a council coproduction model and a coproduction board • Commission the voluntary sector to hold a register of experts by experience and arrange the coproduction boards • Agree a remuneration policy for experts by experience 		
End of life support for carers	<ul style="list-style-type: none"> • Support carers with dying well for the cared for person • Teach carers the signs of end of life in carer training, so they are prepared • Work with NHS colleagues to improve support for carers when the cared for person is in hospital • Support carers with an advance care plan for the cared for person and a clear understanding of the Recommended Summary Plan for Emergency Care and Treatment (ReSPECT) • Support with a ‘difficult conversations’ type document • Support carers to access palliative care services for the cared for person as it becomes required • Specialist respite care for the carer at the end of life 	2	Carers reporting that the cared for person ‘died well’ and that they felt supported at the cared for person’s end of life

<p>Address the postcode lottery for services and support, particularly in rural areas</p>	<ul style="list-style-type: none"> • Ensure there is consistency in services provided across WNC • Assess for gaps in services based on location • Identify additional sources of funding (or redirect) where there are gaps in services resulting in a post-code lottery • This priority has been left to year for as early implementation priorities will naturally have a positive effect on this priority. 	<p>4</p>	<p>Review carer support offer to demonstrate that support is offered equally in all 9 LAP areas.</p>
<p>Address the transport limitations</p>	<ul style="list-style-type: none"> • Include what transport is available in a carer guide for WNC • Assess the level of need and whether this may be improved by more services being offered locally, such as the one-stop shop • Explore a volunteer driver scheme • Deliver more services locally, so that carers do not have to travel • Support carers with digital solutions for online shopping and online support groups and training 	<p>4</p>	<p>Carers reporting that transport problems are less of an issue</p>
<p>Work towards health and social care being more joined up to avoid multiple conversations. This includes commissioning carer services</p>	<ul style="list-style-type: none"> • Work more closely with the NHS to reduce multiple conversations • Explore further knowledge sharing between WNC and the NHS across hospitals, primary care and other community areas • Work towards commissioning carer services jointly 	<p>3</p>	<ul style="list-style-type: none"> • Whole system approach to carers delivered • Joint commissioning of carer support services in place

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| | <ul style="list-style-type: none">• Work on a whole system approach to carers | | |
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