Commissioning Plan for Carers 2021-2025

Introduction

Who is a carer?

A carer is someone, of any age, who looks after a person (a family member, partner, or friend) who needs help because of their illness, frailty, disability, a mental health problem or an addiction and cannot cope without their support. The care they give is unpaid.

This Commissioning Plan 2021-2025 (the Plan) will include support for:

- Young carers A person under 18 who provides or intends to provide care for another person
- Adult carers An adult who provides or intends to provide care for another adult (an adult needing care)
- Parent carers A person aged over 18 who provides or intends to provide care for a disabled child for whom the person has parental responsibility.

When the term 'carer' is used in this document, it means adult, parent and young carers unless specified.

Scope

This document refers to Strategy and Commissioning, which is a section of the People Services portfolio, part of Sheffield City Council.

This Plan concentrates on the strategic and operational drivers for Strategy and Commissioning in relation to supporting carers.

Strategic – this covers: the impact of Coronavirus, the Young Carer, Parent and Adult Carer Strategy 'Principles' refresh, priorities for the future, links with other relevant Council strategies, our approach to multi-agency working in order to influence partners, and external strategies and policies that may impact our approach to supporting carers.

Operational – there are two services that are in scope of this Plan and they are:

- City-Wides Service for Carers
- Young Carer & Hidden Harm Service

NB Strategy and Commissioning also contribute (from the Carer budget) to a grant agreement for People Keeping Well provision (PKW), so carers are supported in their communities. This is part of a broader community-based approach to supporting health and wellbeing. Although there is a contribution to PKW, the service has broader aims than just carers, so it is relevant to this Plan but not directly in scope.

This Plan is informed by and responds to the Young Carer, Parent and Adult Carer Strategy which takes a multiagency approach to supporting carers. Strategy and Commissioning sets out our

response to the Carer Strategy Refresh in section 3. The services we purchase (described in section 4) are aligned with what the Strategy is seeking to do.

This Plan continues the work done in 'Commissioning Plan for Adult and Parent carers 2016-2020'. An update on what has been achieved in the last five years can be found in Appendix 3. There are several other services provided by Sheffield City Council that support carers, typically by providing activities or support to the person with care and support needs. This includes things like day opportunities, home care, care homes, short-term care, peer support groups and other community provision. The above services are not in scope of this Plan.

NB the Commissioning Plan 2016-2020 did not include young carers. Young carers are included in this Plan as Sheffield City Council is moving towards a whole-family approach and is aligning commissioning intentions as a result.

What is the purpose of this Commissioning Plan?

This Plan will:

- 1. Highlight the impact that Coronavirus may be having on those caring for people who live in Sheffield
- 2. Set out Sheffield City Council's priorities in relation to carers
- 3. Show how the Commissioning Plan is supporting the refreshed Young Carer, Parent and Adult Carer Strategy Principles
- 4. Outline how Strategy and Commissioning will spend its carers budget (approximately £1,130,000 per year excluding PKW) to help carers achieve the outcomes that are important to them
- 5. Detail our next steps against our commissioning priorities.

Background

There were 57,373 carers in Sheffield according to the Census 2001. Research in 2015 by Carers UK and the University of York found that the caring population changes regularly; it is not static. Pre-Coronavirus in Sheffield, this meant around 20,000 people starting caring and 19,000 stopping caring per year. Without the pandemic, we would have anticipated a small growth in the carer population with approximately one in ten people in Sheffield being a carer; for more information on Sheffield's carer demographics please look at the Council's 'Community Knowledge Profile'. Carers UK research suggests that the numbers of carers has risen 49.5% since the beginning of COVID-19. If applied to Sheffield, this would mean we have approximately 90,000 carers (winter 2020). It is unclear what will happen to the numbers of carers over time.

Carers UK have speculated that 'the level of carers will fluctuate according to the level of restrictions placed on society and the level of health, social care and community support.' The Census 2021 should provide further clarity on the impact COVID-19 has had on the numbers of people providing unpaid care to someone living in Sheffield.

Carer levels in Sheffield will also change due to the development of potentially viable vaccines that will alleviate people of caring responsibilities/tasks. However, it is anticipated that there will still be additional demands placed on carers for some time. This will be due to factors such as:

- Deconditioning of older adults this is due to lockdown restrictions. Deconditioning can lead to more difficulty completing daily living tasks.
- Long covid for some people, COVID-19 can cause symptoms weeks and months after the infection has gone. The repercussions of long covid are still not fully understood. Symptoms

- (after the infection) may mean carers need to continue providing care and support over a longer period than anticipated.
- Mental health the impact of lockdown on mental health is not yet fully understood. What is certain, is that people are reporting feeling more isolated, anxious, low in mood and lonely since the start of the pandemic. It may take time, for both carers and the person for whom they care to recover.
- Fluctuating service levels due to the impact of the pandemic, services and organisations may be forced to reduce their offer or close. Many businesses have struggled with some (in Sheffield) already closing. This could mean carers have to continue filling gaps until health, social care and community service levels return to what they were pre-COVID-19. This could potentially take years and depend on the uptake/success of the vaccine(s).

The combination of additional people providing care plus carers increasing the amount of time they spend caring, will place increased pressure on organisations that support carers. If caring relationships break down due to COVID-19 eroding carer resilience, this will have a detrimental impact on the economy, health, and social care systems. From the beginning of the pandemic to November 2020, Carers UK (based on polling data) calculated that £135 billion of care had been provided by unpaid carers in the UK. This incredible contribution should be recognised; we need to value and support our carers throughout the pandemic and beyond.

Faced with the numerous challenges COVID-19 has posed, Strategy and Commissioning need to make our approach and intentions clear. In broad terms, we want to be transparent, working in a multiagency way so we can join up and coordinate the health, education, and social care systems to improve our offer to carers and most importantly, work in partnership with carers so their views continue to shape our analysis and planning. Listening to, and working with, carers is an essential part of designing new services. Carers views/opinions underpin our approach through each step of the 'commissioning cycle' (see Appendix 1 for more information).

The identification and support of carers is the responsibility of all partners in the health, education, and social care systems. Though the Care Act/Children and Families Act (2014) duties apply primarily to local authorities, the Care Act and other relevant guidance applies to other partners e.g., NICE's 'Supporting Adult Carers'; this clearly asserts that carers should be identified and supported whilst in the health system. Supporting carers is also promoted via NHS England's 'Commitment to Carers' and 'Supporting carers in general practice: a framework of quality markers'. No single organisation has the power to deliver everything that is needed for carers. It requires a true whole system and partnership approach to deliver systemic improvements.

1. How has Coronavirus impacted Sheffield and this Commissioning Plan?

Research from 'Caring behind closed doors: six months on' has been used to create the table below.

The table takes the analysis provided by Carers UK and applies it to Sheffield to guestimate the impact of COVID-19 on our caring population. Even though the numbers given for Sheffield are indicative rather than exact, it is useful analysis to help the Council understand how caring and carers needs have changed since the start of the pandemic.

Carers (all age i.e., questionnaire respondents were from various age groups)

Carers UK Research	Applied to Sheffield
Carer population – 9.1 million carers before the COVID-19 pandemic. 4.5 million new to caring since the start of COVID-19 which is a 49.5% increase.	A 49.5% increase in Sheffield is approximately 29,700 extra meaning our total is 89,700 carers.
Providing more care – 81% of carers reported that they are doing more caring since the start of lockdown.	This would mean 72,657 people are doing additional caring in Sheffield.
Cared-for person's needs – 78% of carers report the needs of the person they care for have increased.	This would equate to 69,966 carers in Sheffield.
Carer breaks – 68% of carers have not been able to take a break for the last six months.	This would mean 60,996 carers in Sheffield had not had a break in the last 6 months.
Physical health – 58% of carers feel like their physical health has been impacted by caring through the pandemic.	This would mean 52,026 carers physical health has been impacted in Sheffield.
Mental health – 64% of carers say their mental health has worsened.	That would equate to 57,408 carers in Sheffield.
Resilience – 50% of carers reported that they feel able to manage their caring role now.	This would mean 44,850 carers in Sheffield feel like they can't manage now.
Caring safely – 22% of carers feel they can't care safely due to lack of knowledge, information, or equipment.	This would equate to 19,734 people feeling unable to care safely in Sheffield.
Emergency planning – 57% of carers don't have an emergency plan in place.	This would mean 51,129 carers in Sheffield do not have an emergency plan.
Carer breakdown – 44% of carers report that they are reaching breaking point.	This would mean that 39,468 carers in Sheffield are reaching breaking point.
Financial situation – 28% of carers are struggling to make ends meet.	This would equate to 25,116 carers who are struggling financially in Sheffield.

The survey showed that carers are providing more care with fewer breaks. Physical and mental health has worsened and nearly half of carers asked said they were reaching breaking point. If the caring situation breaks down this has big implications for the health and social care systems in Sheffield.

Young carers (aged 12-18)

Results from a Carers Trust survey have been used to create the table below. The table takes the analysis provided by Carers Trust and applies it to Sheffield to guestimate the impact of COVID-19 on our caring population.

NB the young carer population has been assumed by using the Carers UK figure of 49.5% increase in the carer population to give an estimated young carer population of 10,465 in Sheffield.

Carers Trust Research	Applied to Sheffield
Mental health - 40% of young carers say their mental health is worsesince Coronavirus.	The mental health of 4,186 young carers in Sheffield has been made worse due to the impact of Coronavirus.
Future worries - 67% of young carers are more worried about the future since Coronavirus.	7,012 young carers are worried about their future in Sheffield.
Stress - 66% of young carers are feeling more stressed since Coronavirus.	6,907 young carers in Sheffield are feeling more stressed.
Connections - 69% of young carers are feeling less connected to others since Coronavirus.	In Sheffield 7,221 young carers are feeling less connected to others.
Caring hours - 11% of young carers report an increase of 30 hours or more in the amount of time they spend caring per week.	1,151 young carers in Sheffield have increased the amount of care they provide by 30 hours or more.
Caring hours - 7.74% of young carers who responded to the survey, said that they are now spending over 90 hours a week caring for a family member or friend.	806 young carers are caring for more than 90 hours per week in Sheffield.
Educational impact - 56% of young carers said their education was suffering due to the impact of Coronavirus.	The education of 5,860 young carers in Sheffield is suffering because of Coronavirus.
Mental health support - 30% of young carers want mental health support.	3,140 young carers in Sheffield want mental health support.
Educational support - 44% of young carers would like more support with their education.	In Sheffield 4,605 young carers would like more support with their education.

Young carers' mental health has been impacted since the start of the pandemic. It is also concerning that over half of young carers asked, reported that caring had had an impact on their education. Even before Coronavirus, research showed that 'Young carers have significantly lower educational attainment at GCSE level, the equivalent to nine grades lower overall than their peers e.g., the

difference between nine Bs and nine Cs.' Coronavirus could further exacerbate this educational inequality, which in turn will have an impact on life chances/employment opportunities.

Local evidence

To understand how carers (who support someone living in Sheffield) are being affected by Coronavirus, Strategy and Commissioning (via Zoom) has:

- Attended two carer support groups
- Hosted four consultation sessions for any interested carers
- Attended the Council's Staff Equality and Inclusion Network meeting for staff who are carers
- Hosted a consultation session with professionals who work with carers regularly to understand how their needs may have changed due to Coronavirus
- Hosted the Carer Voice Group and the Carers Action Plan Review session where the impact of Coronavirus was discussed as part of the agenda.

There were emerging themes from these discussions that Strategy and Commissioning/the Council must plan to address. They included:

- Information and advice it has been difficult for carers to follow all the guidance/rule changes and understand what is happening with national/local services (including health and social care). There were several comments about how difficult it has been to engage with health services e.g., GP reception not letting the carer talk to a GP even in an emergency
- Mental/physical health carers have reported feeling more stressed, anxious, guilty, tired, isolated, and lonely
- Breaks carers were finding it harder with fewer breaks from caring. Closure of services that supported the cared-for person, combined with families cancelling support services to reduce the risks of infection, has meant additional caring responsibilities for carers
- Digital inclusion this has been an issue for many carers. Whether it be connectivity problems e.g., not having the right equipment/internet connection or knowledge and skills e.g., the person has the equipment but doesn't know how to use it
- Social isolation this has been made worse by the pandemic which has had an impact on how
 resilient carers have felt. With reduced support networks and opportunities to interact with
 people e.g., talking to colleagues at work.

In the Carers Action Plan Review meeting, (a group consisting of carers, and relevant stakeholders e.g. Sheffield Teaching Hospitals, Sheffield City Council, Sheffield Health and Social Care Trust) the top three issues were:

- Identifying more carers
- Loneliness/isolation and impact on resilience/mental health
- Digital inclusion.

2. What are the priorities of the Commissioning Plan?

The priorities are either strategic or operational.

Strategic – these priorities will be in place until at least 2025; Strategy and Commissioning will need to work with internal and external stakeholders to make them happen e.g., Adult Social Care, Multi

Agency Support Team (MAST), Sheffield Teaching Hospitals, Sheffield Health and Social Care Trust, Learn Sheffield etc.

Operational – these are the upcoming priorities for Strategy and Commissioning in the next 12 months.

Strategic Priorities	Operational Priorities
 Prevent, reduce, or delay carers needs developing (as per section 2 of the Care Act (2014)). Make provision and support for carers easy to find and access. Continue to raise awareness of carers, so that professionals in health, education and other services recognise, value and support carers. Work with partners such as health services, schools, Sheffield Clinical Commissioning Group to join up systems and services, creating a 'no wrong doors' approach in Sheffield. Work to make Sheffield a carer friendly city. 	 Commission the right support for carers at all levels of need. Create services that provide support as early as possible. Create high quality local provision that meets local needs. Understand and respond to emerging needs caused by COVID-19.

What else could influence this Commissioning Plan over the next four years?

Strategy and Commissioning want the Plan to be a live document i.e., something that will be alterable, as opposed to fixed until 2024. This will help the Council be responsive and adaptable to upcoming changes that are likely to shape our planning and the actions we take to help carers achieve the outcomes they want.

Examples of this include:

- Coronavirus with the development of several seemingly viable vaccines, the threat that
 Coronavirus poses is potentially mitigated. However, there are still things we don't yet know
 that may have an impact on carers, including: the longer-term implications of lockdowns on
 mental health, the implications of 'long covid' (which 4.3% of people may suffer), future legal
 and policy updates from Government due to COVID-19 developments etc
- Adult Social Care Green Paper the publication of a social care Green Paper has been delayed several times: it was originally due to be published in summer 2017. The latest position, stated in September 2019, is that it will be published 'in due course'. Obviously, carers will be affected by any changes to the social care system and the Council will need to respond accordingly
- <u>Independent review of children's social care</u> In January 2021 it was announced that there would be an independent review of the children's social care system to make sure children and young people get the support they need. Government will likely want to make changes after the review is completed and this may impact Sheffield.

- Census 2021 this will provide the latest demographic data on carers living in Sheffield. The latest data will need to be factored in as part of any future planning and our Commissioning Plan should be altered to reflect this
- Any updates to national policy in relation to carers the 'Carers Action Plan 2018-2020' will
 be updated and/or a new carers strategy may emerge. Our Commissioning Plan will
 potentially need to change to account for national updates
- Local policies and strategies changing Council or other relevant local organisations could change their policies or strategies and this may have an impact on carers. Our Commissioning Plan would need to alter in response to any local changes.

Other Council strategies/plans

Below are some of the key strategies/plans with which the Carers Commissioning Plan will align.

Sheffield Joint Health and Wellbeing Strategy

This Plan fits with the aims of the Sheffield Joint Health and Wellbeing Strategy 2019-2024, in particular:

- Living Well
 - o Everyone has a fulfilling occupation and the resources to support their needs
- Ageing Well
 - Everyone has equitable access to care and support shaped around them
 - 'A... person-centred approach must be taken to understand what is most important to any given person and how they may be enabled to care for their own health...'
 - o Everyone has the level of meaningful social contact that they want

The drive to reducing, and one day eliminating, health inequalities in Sheffield is relevant as caring can have a negative impact on health and wellbeing.

Dementia Commissioning Plan

The work delivered by the Carers Commissioning Plan will feed into the work delivered by the Dementia Commissioning Plan as support for people with dementia will in turn provide support for their family carers.

Adult Social Care Strategy

In autumn 2020 the Council produced its Adult Social Care Strategy Commitments for 2020-25. The Carers Commissioning Plan will align with this but is mindful that these Commitments may alter. The commissioning principles are likely to be:

- Support to maintain independence, stability, and control in your life
- Support people living at home for as long as possible, but also to ensure care and support is available wherever you call home
- Listen to what matters to you
- Help to sustain the availability and accessibility of support

• Ensure services we buy and arrange are high quality and improve people's experience of care and support.

Short-Term Care in Sheffield

Strategy and Commissioning is finalising the Council's strategy on short term care for older people. This strategy explains that 'Short term care is usually associated with supporting carers and whilst this is a crucial aspect, short term care should be viewed in a wider context, and the impact it can have for everyone.' The Carers Commissioning Plan will align with this work and vice versa.

People Keeping Well

The People Keeping Well grant agreement was approved by Cabinet in February 2020 and runs until March 2023. People Keeping Well (PKW) is part of the Better Care Fund and is Sheffield's community-based approach to supporting health and wellbeing. By ensuring people are connected to and feel part of their local community we can help them stay independent and well for longer and increase their quality of life. By resolving social issues and connecting people to 'what matters to me', through PKW, we hope to empower people and develop skills. This community approach can help the Council identify and support more carers. It is an important strand of our provision and supports our commissioning priorities.

There are other strategies in development that this Plan will link to, including Early Help, Digital Inclusion and the latest Mental Health Strategy.

This Carers Commissioning Plan will be updated every 12 months on the Council's website, so that stakeholders are informed of our latest position and understand what is shaping our Plan.

3. How will Strategy and Commissioning support the delivery of the Young Carer, Parent and Adult Carer Strategy Principals refresh?

The table below details Strategy and Commissioning's response to the refreshed strategy 'Principles'. The Council is a key partner in delivering the Young Carer, Parent and Adult Carer Strategy in conjunction with other organisations/agencies. The actions below will be combined with other organisations actions to form the Sheffield Carer Action Plan.

If the Young Carer, Parent and Adult Carer Strategy is working:

Ca	arers will say:	Organisations will:	Strategy and Commissioning will:
1.	I have good quality information and advice which is relevant to me and the person I care for.	 Identify carers and understand that not all people in a caring role will recognise the term carer. Link up carer registers across Sheffield to make carer identification more effective. Be proactive, giving carers good quality information and 	 Commission services that help to identify carers. This will include engaging/training key partners such as Sheffield Teaching Hospitals. Commission carer services that provide personalised information and advice to carers.

	 advice when it is wanted or needed. Give personalised information and advice that is specific to the carer and the person they care for. 	 Work collaboratively to organise and participate in awareness raising campaigns for carers. Especially during Carers Week, Young Carers Awareness Day, and Carers Rights Day. Work with Sheffield Clinical Commissioning Group and others to align carer registers. Promote that the Council identifies carers within the Council via our annual workforce survey. Work with the Council's HR to renew our subscription to Employers for Carers. This adds to our information offer via 'Digital Resources for Carers' provided by Carers UK.
 I know what my rights are and how to enforce them. There are laws that help and protect me as a carer, and they cover things like: Employment. Protection from discrimination. Right to education. Social security benefits. Assessment of my need(s). 	 Make effective interventions at the right time to prevent, reduce or delay carers' needs developing/escalating. Recognise carers' rights and support them to: Balance caring with education/employment. Avoid inappropriate caring. Be involved in health/social care planning for the person they care for. Arrange regular training for staff so they understand carers rights and know what support is available to carers. Take a whole family approach to assessment and support. This will result in a holistic view of the needs of the cared-for person and their family/network of support. 	 Promote carers'/young carers' assessments. Commission services that are focused on prevention, resilience, and wellbeing. Work with Adult Social Care to improve our carers Adult Social Care Outcome Framework results. Promote the Council's newly created Young Carers Register. Work with social care colleagues to improve our whole family approach to assessing and supporting carers. Promote carers rights via social care staff.
 3. The caring I do is valued and I am listened to. This includes: My own needs, wants, opinions 	 Listen to carers and support them to participate in decision making with the person they care for. Recognise and understand the importance of carers who are experts by experience. 	 Co-produce our commissioned services for carers, with carers. Identify funding opportunities and support funding applications (outside of the Council) to strengthen the carer voice in Sheffield

- and feelings as a carer.
- My needs wants opinions and feelings when talking about the person I care for.
- Treat carers with dignity and respect.
- Enable and empower carers to have a 'voice'.
- Work with carers like they are partners in the delivery of health/social care.
- Build relationships with carers, recognising that trust is earned. This is particularly important for organisations providing support to the cared-for person.
- Help carers to reduce or stop their caring role when that is what the carer wants.
- Consider different cultural and religious beliefs.
- Co-design/co-produce support for carers with carers.

- Ensure we commission services that are sensitive to cultural and religious beliefs.
- Monitor services to make sure they reflect our diverse population in Sheffield.

- I have breaks from caring, meaning I have a life of my own and time for friends and family.
- Signpost or provide carer break support.
- Take a personalised approach, asking carers 'what matters to you?'.
- Be flexible, allowing carers to make best use of their time to give more scope for breaks
- Encourage carers to get replacement care via an assessment of the person they care for.
- Support carers to be digitally included to help keep in touch with friends and family.

- Provide grant funding (approximately £100k) to our commissioned service that supports adult carers so they can take a break.
- Specify that we want to continue our Carer Card in our new carer support service(s). This scheme helps carers' wellbeing and provides opportunities to take a break.
- Promote digital inclusion in our service specifications.

- 5. My prospects in life are not affected due to me being a carer. I can access education, employment, and training.
- Work together with the carer to raise aspirations and achieve the outcomes that matter to them in their lives.
 Recognising that this is especially important for young carers transitioning to adulthood.
- Be carer aware with carer friendly policies/processes e.g., flexible working.
- Work with social care colleagues to ensure the Council delivers high quality transitions assessments.
- Continue to promote Carers UK's Employment for Carers so organisations (including the Council) have carer friendly policies and processes.
- Commission carer services that provide support to gain/maintain education, employment, or training.

- I am supported to look after my mental/physical health and wellbeing.
- Understand that caring can negatively impact on a person's health and wellbeing.
- Promote self-care so carers are more actively interested in their own health.
- Support carers to access services/groups that will promote health and wellbeing e.g., exercise groups/move more initiatives.
- Proactively engage at risk groups including carers who are isolated or lonely.

- Commission services that promote self-care.
- Join up carers' services with other support services to keep carers safe and well e.g. People Keeping Well.
- Commission services with a focus on prevention, building resilience and wellbeing.
- Highlight at risk groups and risk factors to health and commission services that will help mitigate these.

4. How will Strategy and Commissioning spend its carer budget between 2021-2025?

Strategy and Commissioning has aligned the commissioning timescales for the two carer contracts described below. This is to support a joined-up approach. There are many similarities in what carers want, irrespective of age, for example being included and contributing to discussions about the cared-for person with health/social care professionals (where appropriate).

Strategically promoting the carer agenda, training relevant professionals, awareness raising campaigns e.g., Carers Week are just some examples of where it makes sense to work in a combined way and take an all-age approach. Strategy and Commissioning will use the service specification/grant agreement to encourage seamless working between the provision for carers.

Adult/parent carers

• Cost: Enter contract for approximately £950,000 per year

Duration: 5 yearsTotal Cost: £4,750,000

In 2016, Strategy and Commissioning wanted to transform our carers services (for adults), switching to a more outcome focused approach and outsourcing our Care Act (2014) section 10 carer's assessments as part of the City-Wide Service for Carers. This way of working has been beneficial for carers, with 98% stating they were satisfied or very satisfied following a carers assessment. The focus on outcomes has seen significant improvements in several areas of performance, detailed in the contract extension request approved in 2019. There has also been good joined up working internally across the Council and with the Sheffield Carers Centre because of this approach.

The next service for adult/parent carers will have an increased focus on prevention. This will include a stronger emphasis on working with health services to identify, assess and support carers as early as possible. The next service will continue to focus on outcomes such as:

- Carers are actively sought (particularly those at risk of breakdown) and identified
- Carers have positive experiences of support and services
- Carers have the right information to make appropriate choices for themselves and support the person they care for to make decisions

- Carers have an emergency plan and understand what will happen in the future
- Carers have a voice
- Carers can have a break
- Carers are supported to maintain or increase emotional wellbeing
- Carers consider and look after their own health
- Carers are supported to reduce financial hardship
- Carers gain or retain work (if appropriate or they wish to)
- Carers are supported through change points of their life, specifically:
 - o transition from young carers services to adult carers services
 - o life after caring.

The intention is that Care Act section 10 carer's assessments remain outsourced. Further detail on the outcomes we want the service to achieve can be found in the soft market test completed in December 2020 in Appendix 2. The final service specification will be co-produced with carers so details may change.

NB: this service will not include Parent Carer's needs assessment - section 97 Children and Families Act. The duty to undertake these assessments will remain with Sheffield City Council.

Young carers

• Cost: Enter into a grant agreement for approximately £150,000 per year

• Duration: 5 years

• Total cost: Approximately £750,000

Strategy and Commissioning wants to enter into a grant agreement with Sheffield Young Carers to deliver support to young carers. It is critical we continue to support our young carers. Caring can impact a young person's health, education, and social outcomes, leading to inequalities when compared with peers who are not carers. For example, young carers have significantly lower educational attainment at GCSE level, the equivalent to nine grades lower overall than their peers.

This range of inequalities can be redressed through targeted interventions which recognise and support the child/young person in their role as a young carer and advocates on their behalf across a range of services and systems alongside building individual resilience and social capital within the context of the family. Addressing stigma and promoting cultural change are also essential components of reducing the short term and long-term impact caring has on the lives of these children and young people.

The Council wants to continue to provide a personalised service of intervention which will improve a range of health, education, and social outcomes for the child/young person within the context of the family and community. The grant agreement will help contribute towards outcomes such as:

- Increased confidence, self-esteem, and resilience
- Raised life aspirations
- Improved health and wellbeing, social and education outcomes
- Actively identifying more young carers.

NB: this service will not include:

- Child's carer's assessment section 60 Care Act
- Young carer's assessment section 63 Care Act

• Young carer's needs assessment – section 96 Children and Families Act. The duty to undertake the assessments above will remain with Sheffield City Council.

5. Next steps

What will Strategy and Commissioning do in the next 12 months?

Strategy and Commissioning will:

- Work on our priorities outlined in the table below
- Work on the actions in the Young Carer, Adult and Parent Carer Strategy outlined in section 3

Commissioning Priorities	Actions
Commission the right support for carers at all levels of need.	 Plan a new service for both adult/parent carers and young carers. Carers will help determine what these services do and what the final outcomes for the services will be. Work with Finance and Commercial Services/Legal Services to get the provision in place for January 2022. Specify that our services should be outcome focused but able to respond to all levels of need.
Create services that provide support as early as possible.	 Ensure our Care Act (2014) section 2 duties around preventing, reducing, and delaying needs developing are woven into outcomes. Highlight the ongoing need to work closely with health/education partners to identify carers as soon as possible. This is underlined by NHS England's Commitment to Carers (2014) which states that '70% of carers come into contact with health professionals, yet health professionals only identify one in ten carers with GPs, more specifically, only identifying 7%.' The link with education is also crucial to identifying young carers.
Create high quality local provision that meets local needs.	 Carers will co-design our support services and will co-produce the procurement process with the Council. This means significantly contributing to specification writing, tender scoring and interviewing potential providers. Young carers will help us write and finalise the grant agreement. This will support Strategy and Commissioning to create quality services that meet the needs of those caring for people who live in Sheffield. Equality Impact Assessments for the new carers provision will be completed. EIAs ensure that equality is central to decision making and ensure our provision will meet the needs of everyone in the city.
Understand and respond to emerging needs caused by COVID-19.	 Consultation, including a carer questionnaire, will inform our service specification/grant agreement. It is important we are agile and responsive to changing carer needs due to Coronavirus.

• Strategy and Commissioning will continue chairing/attending meetings involving carers and relevant organisations to understand how Coronavirus is impacting carers • Digital inclusion and loneliness will be key considerations for our service specification. • We will work to influence the development of the digital inclusion strategy that is currently in development in Strategy and Commissioning. Prevent, reduce, or delay Strategy and Commissioning will work with Sheffield Teaching carers needs developing (as Hospitals, the Clinical Commissioning Group, and other per section 2 of the Care Act stakeholders including the Sheffield Carers Centre to increase (2014).the numbers of carers referred from health settings. • Strategy and Commissioning will work with Adult Social Care as part of our Adult Social Care Improvement Plan to increase numbers of carers referred to Adult Social Care. • Strategy and Commissioning will roll out the young carers register to all schools by 2022, helping to identify more young carers and support them. • Work in partnership so GPs and pharmacies identify 20 families that are known to them (with a carer) and refer to the Carers • Devise and implement a process to identify and refer carers from GPs/pharmacies/other health services (not signpost). • Work in partnership so GPs notify the Carers Centre when people are discharged from hospital. • Partnership working to provide carer information at outpatients and embed carers into discharge planning/processes. • Explore co-location of carers services with health services. • Increase referrals to the Carers Centre/carer support service from Adult social care (including First Contact). Referring wherever possible rather than signposting. • Work in partnership to ensure home care providers are using the 7hour rule to support carers when they need it. This rule means that home care can be flexed up to give more support. • Continue to publicise how carers can get support from the Council in an emergency at evenings or weekends. • Promote replacement care via an assessment of the cared-for person so the carer can have a life of their own outside of caring. Make provision and support • Work strategically with partners to raise carer awareness in for carers easy to find and Sheffield, for example, joint campaigns for Carers Week, Carers access. Rights Day, and Young Carer Awareness Day. • Strategy and Commissioning will promote carer awareness within the Council, so we take a 'whole council' approach to identifying carers and linking them into relevant services seamlessly. Strategy and Commissioning will work with People Keeping Well providers to increase their signposting/referrals to carer provision.

Continue to raise awareness of carers, so that professionals in health, education and other services recognise, value and support carers.	 Specify that training is provided (from the provision outlined in section 5) to health, education and social care staff so they are carer aware and refer carers to support. Use Strategy and Commissioning budget of approximately £30,000 to campaign about carers and raise awareness amongst professionals who are likely to come into contact with carers.
Work with partners such as health services, schools, Sheffield Clinical Commissioning Group to join up systems and services, creating a 'no wrong doors' approach in Sheffield.	 Continue the work on the 'young carers register' including a pilot that includes joined up working across the Council and with schools. Increase numbers of young carers identified by Adult Social Care. Continue to host multiagency strategic meetings to take a 'whole system' approach.
Work to make Sheffield a carer friendly city.	 Strategy and Commissioning will continue to promote the carer agenda at a strategic level at boards/meetings, so carers are recognised and valued by other agencies. Strategy and Commissioning will explore expanding the Carer Card (Coronavirus dependent) to further champion the carer agenda with businesses across the city. Raising the profile of carers whilst providing support via discounts/special offers on their goods/services.

Appendix 1 – Commissioning Cycle

In Sheffield we follow a commissioning cycle consisting of:

- Analyse: activity and resource assessment
- Plan: gap analysis, commissioning strategies and service design
- Do: service delivery and provider working
- Review: outcome and performance analysis

This cycle is summarised in the diagram below.



Figure 1 Commissioning Cycle



Carers Service Soft Market Test

Appendix 3: Update on previous Commissioning Plan

The table below gives an update in each of the areas of the Commissioning Plan for Adult and Parent Carers 2016-2020, to show progress on what the Council said it would do.

What we said we'd do	What has happened
Changes to Council tendered carer support services	
A menu of different options for breaks	The Council commissioned the Sheffield Carers Centre to deliver our City-Wide Carer Support contract from January 2017. This contract has helped carers to take a break including:

Time for a Break – The Council gives Sheffield Carers Centre £100,000 per year so they can support carers to take a break from caring. Up to September 2020, this scheme has provided 1534 breaks since the beginning of the contract. The breaks are varied and dependant on what the carer feels would be a break for them. Examples include gym membership, laptops, cinema passes, garden furniture, craft materials etc. Information and advice – Sheffield Carers Centre provide information and advice on how carers can take breaks via their phoneline, website, social media, press releases and the newsletter they produce. Carer Card – The Carer Card gives carers the opportunity to get offers and discounts from businesses across Sheffield. This includes things like free hotel stays, discounts at cafes/cinemas/health and beauty organisations. Since the scheme began 4,095 Carer Cards have been sent out, supporting carers to take a break. Carer's assessments – When a carer has a carer's assessment their needs, including the need for a break, are considered. Up to September 2020, 4,716 carers have been assessed. Strategy and Commissioning allocated £200,000 per year to People Community based outreach to help find Keeping Well (PKW) to support carers. hidden carers Local support groups organised by PKW providers have helped a number of carers. Core city wide contract The Council successfully outsourced Care Act (2014) section 10 carer's including the statutory assessments which Sheffield Carers Centre started delivering (as duty carers assessments planned) in April 2017. Strategy and Commissioning is now able to baseline performance and analyse costs more effectively due to having clear data. Data on carer assessments and support plans was difficult to interrogate when the council delivered carer's assessments. The delivery of the 'City-Wide Carer Service' has gone well. The highlights below are from a service review in 2019. o 98% of carers are either satisfied or very satisfied following the Carers Centre's triage/assessment process. o The reach of the Service continues to increase i.e., numbers of carers registering with the Service. In 2019 the mean average number of carers registering per quarter i.e. (every three months) increased to 610. This is an increase of 154% from the last year of the previous carers' service contract (2016) where the mean average was 240 registrations per quarter. The number of carers the Council is helping via the Service has significantly increased. o Emotional wellbeing was maintained or increased for 94% of o 81% of carers reported that they felt supported to continue o Physical health was maintained or improved for 93% of carers. 71% of carers reported that the Carers Centre had supported them with their emotional wellbeing.

	 62% of carers reported they were supported to find useful information/organisations.
	wider society and services to carers e.g., employers, doctors, family, and states that support cared for people to recognise and support carers
General awareness raising campaign	 There are a minimum of two awareness raising campaigns per year. Carers Week and Carers Rights Day are used to promote the carer agenda and raise awareness of the profound contribution's carers make. There is regular training provided by Sheffield Young Carers and Sheffield Carers Centre to professionals in health and social care to raise awareness of carers and why identifying and supporting carers is important.
Sheffield Standard – for organisations who will interact with carers e.g., social care providers, housing, GPs, hospitals, employers	This idea was replaced by the Carer Card and by purchasing access to Carers UK's Employers for Carers scheme which did most of what we wanted from a 'Sheffield Standard'.
Sheffield Carer Card	Strategy and Commissioning have been delighted with the progress of the Carer Card. It has also been adapted to double up as an emergency card. Since the scheme began 4,095 Carer Cards have been sent out (as of September 2020), supporting carers to get discounts and take breaks. At its peak over 100 different businesses signed up, although COVID-19 has had an impact on the Carer Card's development.
Advocate changes in Adult Social Care	 Adult Social Care has undergone several changes in the last few years including switching to locality working and adopting 'Conversations Count' a model for personalised assessment and support. Commissioning& Strategy have arranged a piloted way of working to help identify young carers. Strategy and Commissioning are working in partnership with Adult Social Care to improve our Adult Social Care Outcome Framework results.