



## Report to Policy Committee

**Author/Lead Officer of Report:** Mary Gardner,  
Strategic Commissioning Manager

**Report of:** *Director of Adult Health and Social Care*

**Report to:** *Adult Health and Social Care Policy Committee*

**Date of Decision:** *19 December 2022*

**Subject:** *Unpaid Carers Delivery Plan (2022-2025)*

|  |     |                                     |    |                                     |
|--|-----|-------------------------------------|----|-------------------------------------|
| Has an Equality Impact Assessment (EIA) been undertaken?   | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/>            |
| If YES, what EIA reference number has it been given? 903   |     |                                     |    |                                     |
| Has appropriate consultation taken place?  | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/>            |
| Has a Climate Impact Assessment (CIA) been undertaken?<br><small>(see Section 4.4 for summary of climate implications)</small> | Yes | <input type="checkbox"/>            | No | <input checked="" type="checkbox"/> |
| Does the report contain confidential or exempt information?  | Yes | <input type="checkbox"/>            | No | <input checked="" type="checkbox"/> |

### Purpose of Report:

This report seeks Health and Social Care Policy Committee approval of our multi-agency Carers Delivery Plan (2022-2025).

The delivery plan supports the 'Young Carer, Parent and Adult Carer Strategy' and 'Living the life you want to live,' the Adult Social Care Strategy 2022 to 2030.

This delivery plan will help turn these strategies into reality; driving actions that will help unpaid Carers live the life they want to live.

### Recommendations:

It is recommended that the Adult Health and Social Care Policy Committee:

1. Approve the Carers Delivery Plan (2022-2025) signalling our continued support for people who are unpaid carers across the City.

## Background Papers:

- 'Young Carer, Parent and Adult Carer Strategy'
- 'Living the life you want to live', the Adult Social Care Strategy 2022 to 2030
- 'Our Sheffield Delivery Plan 2022-23' Sheffield City Council
- 'Care and Support Statutory Guidance Issued Under the Care Act 2014'
- 'Sheffield City Council Youth Services Strategy 2022-2025'
- 'Sheffield Inclusion Strategy 2020-2025'
- 'Caring behind closed doors', Carers UK
- 'Under pressure: caring and the cost of living crisis', Carers UK
- 'The Care Act and Whole-Family Approaches', Local Government Association

## Appendices:

- Appendix 1 – the 'Carers Delivery Plan 2022-2025'

| Lead Officer to complete:-  |   |   |
|---|---|---|
| 1   | I have consulted the relevant departments in respect of any relevant implications indicated on the Statutory and Council Policy Checklist, and comments have been incorporated / additional forms completed / EIA completed, where required.  | Finance: Ann Hardy/Anna Beeby   |
|   |   | Legal: <i>Rike Ridings</i>  |
|   |   | Equalities & Consultation: Ed Sexton                                    |
|   |   | Climate: Jessica Rick   |
| <i>Legal, financial/commercial and equalities implications must be included within the report and the name of the officer consulted must be included above.</i> |   |   |
| 2   | <b>SLB member who approved submission:</b>  | <i>Alexis Chappell</i>  |
| 3   | <b>Committee Chair consulted:</b>   | <i>Councillor George Lindars-Hammond and Councillor Angela Argenzio</i> |
| 4   | I confirm that all necessary approval has been obtained in respect of the implications indicated on the Statutory and Council Policy Checklist and that the report has been approved for submission to the Committee by the SLB member indicated at 2. In addition, any additional forms have been completed and signed off as required at 1. |   |
|   | <b>Lead Officer Name:</b><br><i>Janet Kerr</i>  | <b>Job Title:</b><br><i>Chief Social Work Officer</i>                   |
|   | <b>Date:</b> <i>25 October 2022</i>   |   |

## 1. PROPOSAL

1.1 *Carers need all kinds of different support from lots of different agencies, including the health services. The health services and social services should know about and look after carers, as well as the person who has the care.* – quotation from a carer

1.2 The '[Young Carer, Parent and Adult Carer Strategy](#)' adopts a multiagency partnership approach to recognise, value and support our unpaid carers across the City.

1.3 A Delivery Plan was refreshed in 2022 to build on activities within the carers strategy (please see the [action plan](#) for more details), deliver upon '[living the life you want to live](#)' which is Sheffield's vision for adult social care 2022-2030, our [youth service strategy](#) and an [inclusion strategy](#) that are important for young carers and parent carers. It also enabled a response to the learning on the impact of the pandemic on unpaid carers

1.4 Our Delivery Plan is shaped by these strategies to drive positive change for carers. Carers want actions, not just words and the Delivery Plan provides a roadmap for that change over the next three years.

### 1.5 Who is a Carer?

1.5.1 An unpaid 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.

1.5.2 The Delivery Plan includes support for:

- Young carers – A person under 18 who provides or intends to provide care for another person
- Young adult carers - Young people aged 16–25 who care, unpaid, for a family member or friend with an illness or disability, mental health condition or an addiction.
- 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.

1.5.3 There were 57,373 carers in Sheffield according to the Census 2011. 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.

## 1.6 Why it's Vital to Support Our Unpaid Carers

1.6.1 *'Some people can shout and make others understand what they need . Others find that hard. None of us ever thought we would be carers. That's our job. Just make sure you are all doing yours right for people like me.'* – quotation from a carer

1.6.2 Unpaid Carers are an essential part of our health and social care systems and play a key role in our communities by providing care and support to some of the most vulnerable in our society. Unpaid Carers are the glue, which hold our health and social care systems together for the person they care for.

1.6.3 The fact that the care provided is unpaid, is of enormous benefit to our economy too. Carers UK's ['Facts & Figures'](#) suggests that each unpaid carer saves the economy £19,336 per year; in Sheffield, that would equate to £1.2 billion of savings for our economy.

1.6.4 The case for investing in carer services is clear and set out in '[Economic Case for Local Investment in Carer Support](#)'. In Summary, the document, written by ADASS and Carers Trust highlight the benefit of investing in carer support and suggest that 'for every £1.00 invested in carers, there is a potential equivalent reduction in local authority cost of £5.90 (£4.90 net reduction), therefore illustrating the importance of carers and their role in supporting social care

1.6.5 However, we also know that the pandemic has made things harder for carers. Sheffield City Council used Citizen Space to conduct a carer questionnaire to understand how carers were feeling after an incredibly difficult year following the onset of the Coronavirus pandemic. The questionnaire closed in April 2021 and had 326 respondents.

1.6.6 The key findings were:

- 58% of carers said the person/people they care for needed more help since the start of Coronavirus.
- Only 30% of carers said they felt they had enough breaks from caring before the start of the pandemic and lockdowns have made the situation worse.
- 28% of carers reported their health as either bad (18.4%) or very bad (9.2%).
- 51% of carers indicated that their physical health has got worse since the start of the pandemic.
- 33% of carers described their mental wellbeing as bad (25.7%) or very bad (7.6%).
- 68% of carers feel that their mental wellbeing has got worse since the start of the pandemic.
- 22% of carers reported that they found it difficult to find the information they need.
- 56% of carers would like more help to manage their caring role.

- 11% of carers said they didn't feel they could provide care safely.
- 67% of carers don't have an emergency plan in place.
- 11% of carers indicated they don't have enough money for essentials.

1.6.7 Equally significant is the fact that the carer population is increasing, with the main reason being the Coronavirus pandemic. [Carers UK research](#) estimated that COVID-19 increased the numbers of unpaid carers by 49.5%.

1.6.8 When applied to Sheffield, this meant that at the height of the pandemic there could have been up to 90,000 carers. Carers UK anticipated that the caring numbers would 'decrease slightly' from their peak during the pandemic, however, an aging population and improvements to healthcare mean our caring population will continue to grow. As our carer population is constantly changing and growing, identifying more carers is therefore a core aim of our Carers Delivery Plan.

1.6.9 The numbers of unpaid carers that we know about currently (via carers registers) versus the total unpaid carer population is listed in the table below:

|              | Estimated population in Sheffield | Number of carers on registers in Sheffield (as of August 2022) | Percentage of carers on registers |
|--------------|-----------------------------------|--|-----------------------------------|
| Adult carers | 60,000-90,000                     | 10,800   | 12%-18%                           |
| Young carers | 7,000-10,000                      | 602  | 6%-8.6%                           |

\*For more information on Sheffield's carer demographics please look at the Council's ['Community Knowledge Profile'](#).

1.6.10 Further pressure on unpaid carers will come due to the cost-of-living crisis. Carers UK have said that *'Carers have several additional costs such extra costs from equipment, care, travel, and food. At the same time, their capacity to work to earn money is reduced, with carers working below their potential or having to give up work entirely in order to care.'*

1.6.11 In a [report](#) released in March 2022, Carers UK said 55% of people are 'worried about how they will manage their bills' and 75% of people are feeling 'stressed and anxious about their finances'.

1.6.12 Evidence tells us that it has been harder for carers because of the events of the last few years, yet caring is still rewarding and a source of pride for many who choose to do it.

1.6.13 For people who wish to provide care, we know we need to deliver a clear vision and future plan. Carers need to be able to see and understand what is being done to help them, so they feel recognised, valued, and supported. The Carers Delivery Plan builds on previous work and provides fresh direction for the next 3 years.

## 1.7 The Vision and Our Delivery Plan

- 1.7.1 *'...Please make carers feel valued & respected, including hidden carers...'* – quotation from a carer
- 1.7.2 The Delivery Plan is shaped by the vision of the Young Carer, Parent and Adult Carer Strategy. This says that Sheffield is a *'City where Carers are valued and have the right support to continue to care for as long as they want to.'*
- 1.7.3 This vision is echoed in *'Living the life you want to live,'* which says, *'Unpaid carers are recognised for their expertise and supported to make the right choices for them and their family.'*
- 1.7.4 We want to be bold, ambitious and make Sheffield a carer friendly city, so that *'... carers are plugged into a network that enables them to get support for their own mental health, wellbeing, and needs.'*
- 1.7.5 The Delivery Plan aligns with the Carers Strategy through using the co-produced *'Carer Principles'* that were refreshed in 2020. This is when the Carers Strategy ended. However, the view from unpaid carers and stakeholders was that we didn't need a new Carers Strategy, we just needed to refresh the Carer Principles, which drive actions that create positive change. The refreshed *'Carer Principles'* and the Delivery Plan with actions are noted in Appendix 1 for approval by Committee.

## 2. HOW DOES THIS DECISION CONTRIBUTE?

- 2.1 The Carers Delivery Plan contributes to the obligation in our Council Delivery Plan milestone which sets an ambition to *"Deliver an Unpaid Carers Strategic Delivery Plan with implementation over the following year which sets out how we will improve experiences and supports to unpaid carers in the city."*
- 2.2 Carers are an essential partner in supporting those with health and social care needs; this is recognised in the *'long-term strategic direction and plan for Adult social Care'* (*'Living the life you want to live'*). The strategy has the following commitment *'Recognise and value unpaid carers and the social care workforce and the contribution they make to our City.'*
- 2.3 To *'give everyone the best start in life'* we need to support our young carers and the Delivery Plan intends to do this. National research tells us:
- One in 12 young carers is caring for more than 15 hours per week. Around 1 in 20 miss school because of their caring responsibilities.
  - Young carers are 1.5 times more likely than their peers to have a special educational need or a disability.
  - 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.
  - Young carers are more likely than the national average to be not in

education, employment or training (NEET) between the ages of 16 and 19’.

2.4 Our delivery plan ensures that all unpaid carers remain a priority and they get the support they deserve, so they can live their best life.

## 2.5 **What it means for people in the city**

2.5.1 We want to be bold and ambitious and make Sheffield a carer friendly city. We want to recognise, value, and support our carers and the vital role they have in our communities.

2.5.2 The Delivery Plan Can help to reduce inequalities. We know that unpaid carers can be impacted by their caring role. Caring can also negatively impact mental and physical health, employment status, potential earnings/pension accrual, life chances etc.

2.5.3 We also know that Coronavirus and the cost-of-living crisis has disproportionately affected unpaid carers and will continue to do so. For example, Coronavirus significantly increased the need for unpaid care, meaning that there are more carers and for many caring has become more intensive i.e., more demanding for the carer.

2.5.4 As most unpaid carers are female (57%) the pandemic is likely to have exacerbated gender inequality as women are more likely to provide care and change their circumstances to do so e.g., reduce hours in employment/leave work etc. however, caring is still satisfying and a source of pride for many who choose to do it. We need to help our carers continue to care, if they want to, and reduce the inequalities they can face due to providing unpaid care.

2.5.5 This delivery plan will have a positive impact on young carers who are learning in our schools. It will help ensure that young carers are identified and that they are not undertaking any inappropriate caring tasks and responsibilities that could impact their education or wellbeing.

## 3. **HAS THERE BEEN ANY CONSULTATION?**

3.1 This delivery plan is based on an existing co-produced carers strategy. Carers and other key stakeholders helped us create the strategy and the ‘Carer Principles’ that drive actions/outcomes for carers.

3.2 The consultation process was extensive, and the strategy was informed by carer support groups, carers cafes, carers organisations/stakeholders, over 700 carer questionnaire responses etc. A ‘stakeholder reference group’ met regularly to write/edit the strategy document.

3.3 The delivery plan has been shaped by the vision of the Carers Strategy. We know what carers want and how difficult it has been due to

Coronavirus and cost of living. As the strategy was multi-agency, it was vital to continue this approach with the delivery plan.

- 3.4 Partners including Sheffield Integrated Commissioning Board, Sheffield Carers Centre, Sheffield Young Carers, Sheffield Teaching Hospitals, Sheffield Health and Social Care Trust, Sheffield Parent Carer Forum, Sheffield City Council, and carers have helped develop the delivery plan. The delivery plan will be updated annually, with carers being a vital partner in this process.

## **4. RISK ANALYSIS AND IMPLICATIONS OF THE DECISION**

### **4.1 Equality Implications**

- 4.1.1 Unpaid carers are at risk of health and social inequalities. Government has acknowledged that caring should be considered a social determinant of health. This delivery plan will help identify more carers and link them into appropriate provision/support. This will help prevent, reduce and delay needs for support developing and reduce inequalities that can be caused by being a carer.

- 4.1.2 As a Public Authority, we have legal requirements under sections 149 and 158 of the Equality Act 2010. These are often collectively referred to as the 'general duties to promote equality.' Section 149(1) contains the Public Sector Equality Duty, under which public authorities must, in the exercise of their functions, have due regard to the need to:

- Eliminate discrimination, harassment, victimisation, and any other conduct that is connected to protected characteristics and prohibited by or under this Act.
- Advance equality of opportunity between those who share a relevant protected characteristic and those who do not.
- Foster good relations between those who share a relevant protected characteristic and those who do not.

- 4.1.3 The Council recognises unpaid carers as a group when carrying out equality analysis, going beyond the statutory scope of protected characteristics.

- 4.1.4 The report sponsor has considered the Council's obligations under both statutory duties and organisational policy in this report, noting that the Council is committed to ensuring that all citizens, particularly those who are most vulnerable or in need of support, have access to the information and support they need to access services and make decisions about their lives. The proposal submitted complies with the above aims, duties and policy.

### **4.2 Financial and Commercial Implications**

- 4.2.1 This delivery plan supports existing investment in carer services and is not asking for additional expenditure. It is more of a financial and



commercial risk, to not continue supporting our carers.

- 4.2.2 Sheffield City Council currently holds a budget of £1,014k cash limit and a further £234k of public health grant to support this initiative. We understand the vital contribution carers make to our communities and want carers to live the life they want to live. See 2.2.4 for more information on the economic impact of providing carer support.

### **4.3 Legal Implications**

- 4.3.1 In focusing on identifying more carers the delivery plan will support Sheffield City Council to discharge its section 2 Care Act 2014 duties regarding it 'preventing needs for care and support'. Section 2 states that:

(1) A local authority must provide or arrange for the provision of services, facilities, or resources, or take other steps, which it considers will - ...  
(b) contribute towards preventing or delaying the development by carers in its area of needs for support ...  
(d) reduce the needs for support of carers in its area'.

- 4.3.2 The delivery plan can also support the health system to deliver section 91 of the Health and Care Act 2022 which states:

(1) Where a relevant trust is responsible for an adult hospital patient and considers that the patient is likely to require care and support following discharge from hospital, the relevant trust must, as soon as is feasible after it begins making any plans relating to the discharge, take any steps that it considers appropriate to involve—  
(...B) any carer of the patient'.

### **4.4 Climate Implications**

- 4.4.1 The impacts of the delivery plan in terms of carbon emissions are not likely to be significant. There are no specific impacts in terms of buildings/infrastructure, energy, economy, land use or waste. However there are still things we can do to support the policy of Sheffield becoming a net zero city by 2030, in response to the climate emergency.

- 4.4.2 Reducing Transport - When partners meet to progress/scrutinise the delivery plan, we can use MS Teams for a proportion of the meetings, reducing the need to travel. When we meet in person, 'active travel' and public transport will be promoted in meeting invitations.

- 4.4.3 Partnerships - We are collaborating with partners who are engaged with the climate agenda, for example, Sheffield teaching Hospitals are 'committed to becoming a more sustainable Trust and with it reducing their climate footprint and its impact on climate change.' The Trust are running a project called 'Be Green' to help their hospitals and offices operate in a more environmentally friendly way.

- 4.4.4 Awareness - The partnership includes unpaid carers; we can use our

delivery plan to encourage climate impact awareness such as adapting to some of the impacts of climate change, including extreme weather/heat events, resource scarcity, price increases, energy/water/resource efficiency advice, travel options etc by signposting people to climate-friendly resources where appropriate to their situation.

#### **4.5 Other Implications**

4.5.1 There are no other implications

### **5. ALTERNATIVE OPTIONS CONSIDERED**

5.1 No Update to The Delivery Plan - Not updating the delivery plan was rejected as an option. Now is a good time to be reaffirming our commitment to Unpaid Carers due to the negative impact of the pandemic and cost of living crisis on Unpaid Carers. Not refreshing our Delivery Plan sends out the wrong message. If we want Unpaid Carers to feel recognised and supported, what we are doing to make that happen needs to be obvious. The Delivery Plan is a great tool to show what organisations are doing to improve carers lives and outcomes and enable carers to feel valued.

### **6. REASONS FOR RECOMMENDATIONS**

6.1 Carers are vital to our health and social care systems. They provide care to some of the most vulnerable in our communities and in doing so, save the economy billions of pounds per year, however, being a carer can lead to social, educational and health inequalities.

6.2 It is therefore essential, that we recognise, value and support those in a caring role and prevent inappropriate caring, especially with young carers; a delivery plan will help us do this and that is why it is the preferred option.