

Kirklees Carers Strategy: in consultation

The Kirklees Carers Strategy is currently being co-produced and is in draft. This document is the latest version and will be updated further over the coming months.

Over the last year we have had a lot of discussions with a lot of carers and there are some key areas that carers say matter the most. These are below so you can see the direction this is taking. Please note this is a work in process so the below will be updated further and there are still parts to be added.

So far our discussions have involved consulting with groups of carers, individual carers, social care assessors, and carer service providers across social care and health, visiting 26 carer groups and speaking with over 200 carers.

The strategy proposes to introduce the concept of building a carer-friendly Kirklees focusing on cultural change throughout Kirklees as well as continuing to ensure that key health and social care duties are met. It's structured around a series of 'I Statements' created following discussions with carers.

We're very interested in whether you feel the information collected and the areas identified are correct. We'd like you to let us know what you think, if you agree or disagree with the statements, and if there's anything important missing. You can do so here: [Kirklees Carers Strategy Feedback Questionnaire](#)

**If you're looking for help and advice about being a carer,
please contact:**



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Introduction

We want to create a carer friendly Kirklees where health, care, work, and play all work for carers. Where we raise awareness of caring across Kirklees and we identify and reach out to carers. Where carers can live independently and in better health.

Carers are everywhere, in all walks of life, all types of people, in all places. We're all affected by caring at some point in our lives; either being a carer ourselves, having a close friend or family member who is a carer, or needing carers to help us. Or all of these.

The Kirklees Carers Strategy tries to make life for carers in Kirklees as good as it can. Caring is difficult and hard and stressful and exhausting, as well as brilliant, and loving, and kind and giving purpose to people. Because anyone, anywhere can be a carer this strategy has to be very wide ranging and include social care, health, voluntary sector partners, employers, the public, and everyone. Which is quite a big ask.

This strategy was co-written by many carers and the Kirklees Carers Strategy Manager who met with a lot of carers, attended carer peer groups, coffee mornings, and learning sessions and had a lot of open-ended conversations with a lot of carers. These conversations happened where carers were; not in official buildings or at sessions set up solely for this purpose.

The conversations had no pre-set agenda or direction. Instead of asking carers what they think about a specific issue, and therefore guiding the conversation and strategy towards a specific issue, carers had the space to speak about their situations and people naturally spoke about the things which are most important to them. Nine 'I Statements' were created from this and these form the focus for this strategy. It is these nine key statements that we all need to focus on in order to promote the health and well-being of carers across Kirklees, and to reduce the health and financial inequalities that carers experience due to caring.

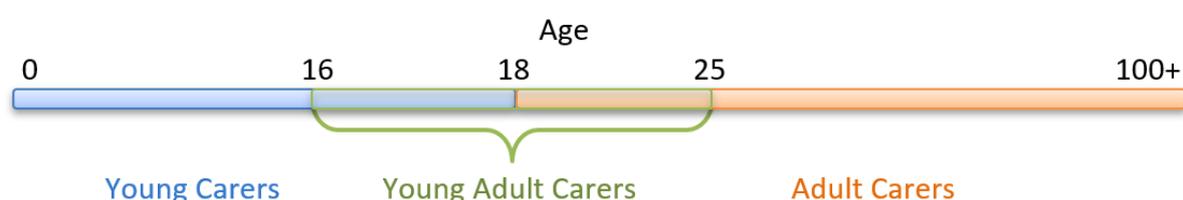
Carers in Kirklees

Who are carers?

A carer provides *unpaid support* to someone who *can't cope without them* due to *long term illness or disability*

This includes physical disability, mental ill health, autism spectrum condition, sensory impairment, substance misuse, long-term condition, learning disability, or illness / problems usually associated with getting older for example frailty or dementia.

Caring is indiscriminate and almost anyone from anywhere at any stage of life can be a carer. This includes:



Within the broad category of unpaid carers there are different types of carers:

Type of carer	Description of situation	Specific challenges
Parent Carers	Parents who care for their sick or disabled children	Often life-long carers with impacts on their employment opportunities, affecting their financial stability.
Working Carers	Carers who work as well as providing care	May experience higher levels of stress as they try to balance caring and working responsibilities
Mutual / Co-dependent Carers	Couples / families where two or more people have care needs and provide care support for each other	Can have complex situations

Distance Carers	Carers who care for someone that lives some distance away	Can be logistically difficult and spend a lot of time traveling
Hidden Carers	People who provide unpaid care but don't recognise them self as a carer and who social care and health professionals haven't recognised as a carer	Often struggle on without knowing that help is available

Equality and diversity

We also recognise that carers in Kirklees are diverse and come from a range of different cultures, backgrounds, and communities, such as but not limited to, the armed forces, black, Asian and ethnic minorities, lesbian, gay, bisexual and transgender (LGBT+).

We acknowledge that some carers will need to be reached and engaged in various ways and may require different types of support. Our services monitor the diversity of carers who use them to make sure that all carers receive information and advice relevant to them, have equal opportunities to access services, and that barriers are identified and addressed so no one is excluded or disadvantaged.

Facts and figures about carers in Kirklees

There are around 40,000 carers in Kirklees, that's 9.3% of the population.
1.4% of 5- to 17-year-olds are carers.

Carers live throughout Kirklees, in all areas, and are from all cultures, communities, and all walks of life.

More females are carers than males (3 females for every 2 males) and people aged 55 to 64 are the most likely age group to be carers, but anyone of any age can be a carer.

However, generally the older people are the bigger their caring role gets, with people aged 75+ most likely to provide the highest amounts of caring (there are still a lot of younger people with big caring roles, just fewer of them).

A higher percentage of people providing unpaid care live in the most deprived areas.

The percentage of carers providing 50 or more hours of care per week has increased. This shift is also noticeable amongst carers juggling employment and caring:

2011 census	less than 20 hours per week	76%	20-49 hours per week	12%	50 hours per week and over	12%
2021 census	less than 20 hours per week	62%	20-49 hours per week	21%	50 hours per week and over	17%

Data from the 2021 census shows that people are more likely to be a carer if they are from an area of economic disadvantage.

The Covid-19 pandemic and the cost-of-living crisis in following the years has also affected carers in multiple ways, and has been different for different people. Some carers don't have as much time to care or time for themselves due to needing to work more hours. Alternatively, due to cost of care, some carers are having to do more care tasks on top of their employment, or reduce the hours they can work. These different situations carers face show the added stress the pandemic and cost-of-living crisis have on carers, and in particular the most economically disadvantaged.

Carers are more likely to have poorer health; especially pain and depression (Current Living in Kirklees (CLIK) Survey; 2012) with more than half of those who provide substantial care suffering physical ill health as a result of caring (NHS Commitment to Carers)

Being a young carer can affect school attendance, educational achievement, and future life chances. Young carers are more than twice as likely to be bullied as non-carers. Having a caring responsibility is recognised nationally as one of the main characteristics of young people aged between 14 and 16 being bullied. (Kirklees 2014 School Survey)

More than 70 per cent of those caring round the clock have suffered mental ill health at some time (NHS Commitment to Carers). In Kirklees 7,200 carers provide more than 50 hours of care each week (Current Living in Kirklees (CLIK) Survey; 2012).

Your Rights

The Care Act 2014 sets out a number of duties which all local authorities have to do in relation to assessing people's care needs and their eligibility for publicly funded care. This includes people with disabilities and their carers.

Where it appears to a local authority that an adult (a person with a disability or their carer) may have needs for care and support, the authority must assess:

- (a) whether the adult does have needs for care and support, and
- (b) if the adult does, what those needs are.

Which carers are eligible for an assessment?

All carers who care for someone who lives in Kirklees are eligible for a Carers Assessment from Kirklees Council and for support in their own right. If the person you care for doesn't live in Kirklees then it is the local authority where they live which must do the Carers Assessment.

What is a carers assessment?

A carers assessment is not an assessment of the carer, it's an assessment of the situation and of what help and support people need.

This assessment can be done as part of the needs assessment of the person they care for, i.e. a needs assessment for the whole family, or on its own without doing an assessment of the needs of the cared-for person, i.e. focusing on the carer.

A lot of carer support, for example information, advice, wellness courses, peer groups, and community-based support are available to all carers and you don't need an assessment. Any carer can go to Carers Count and get this help, no assessment required.

Some carers support, for example carers personal budgets and carers breaks, are only available to eligible carers as defined by the Care Act. Eligibility is set nationally and for more information on carer eligibility see [Quick guide to eligibility outcomes under the Care Act 2014 | SCIE](#). Where a carer is eligible, Kirklees Council will put services in to place to meet those eligible needs.

The Care Act also sets out that Local Authorities have duties to:

- Promote carer's wellbeing
- Prevent, reduce or delay carer needs
- Establish and maintain an information and advice service.
- Undertake market shaping and commissioning

For more information the Local Government Association have produced: [The Care Act 2014 and unpaid carers: A handy summary](#)

Our Vision: Delivering the best outcomes for carers in Kirklees

Carer-friendly Kirklees

The conversations and I statements which form this strategy show that fundamental to carers' wellbeing is a culture throughout health, care, and wider society which positively helps carers. In other words, a carer-friendly Kirklees.

Individual health and care services have a huge impact on people's lives and need to be the right services for the right people. We need to make sure that carers are equipped with the information and skills they need, good quality health and care services to support them and the people they care for, and carers don't face barriers to getting these or to things in their non-caring life such as work and friendships.

A carer-friendly Kirklees includes good quality health and care services that include carers in everything they do, but is also much more than this. It's the relationship which we all have with carers. The relationship which businesses have with their customers who are carers, and their staff who have caring duties. The relationship families and neighbours have with people close to them who are caring for someone else. The relationship that public services have with carers when managing and planning our cities, towns, neighbourhoods, and countryside. It's a positive culture that understands caring, thinks about and cares about carers.

In a carer-friendly Kirklees carers can say:



Further detail on each I Statement can be found below in *What a carer-friendly Kirklees looks like; I statements*

Identification and independence

Public Services strive to help people towards self-sufficiency and to maximise people's independence and this strategy operates within this agenda. This is due in part to the fact that social care and health resources are stretched and becoming scarcer, and in part because this goes a long way to helping people to be as healthy as possible, which ultimately is what we're striving for.

1	Enable as much self-sufficiency for carers as possible, where carers and communities support themselves	Most people	Help as many people as possible to achieve this
2	Provide information, advice, and training to help all carers cope with and manage their caring role as best they can		Move carers upwards towards self-sufficiency as much as possible
3	Where necessary, provide practical support to carers with complex caring roles to reduce the burden of caring	Fewest people	Available for those that need it the most

A very important part of this is getting carers to identify themselves and seek help as early as possible. Generally speaking, the earlier a carer recognises them self as a carer and seeks help, the more independent they can be. Carer-friendly Kirklees aims to achieve this and to encourage everyone to do this as much as possible we need to make sure the process for identifying and supporting carers is as simple as possible.

When looking for help for a carer, people are not expected to know all services and which are most appropriate for which carers, but instead asked to contact Carers Count in the first instance. This is to make referrals as simple as possible in order to encourage as many people as possible to identify carers and make early referrals for lower-level support.

Everyone can refer. When unsure what to do refer to Carers Count. They will link the carer to the right services.



Everyone can refer:

- Carers
- Health professionals
- Work colleagues
- Community Groups
- etc.

People only need to know one place to refer carers: Carers Count

Information and Advice workers know what is available to support carers, offer appropriate support, and make referrals to other services

Carers Services such as:

- Peer support
- Building resilience
- Community groups
- Health services
- Specialist information and advice services
- etc.

What a carer-friendly Kirklees looks like; I statements

In a carer-friendly Kirklees carers can say...

I can easily access help, support, assessments, and appointments

What helps?

Identification of carers
Contingency planning
Continuity of provision
Assessment of needs
Being able to speak to a person when you
'don't fit the bracket'

What gets in the way?

Complex policies, pathways, and
procedures
Different services not talking to one
another
Cost (i.e. transport or equipment)
Long waits and being passed around the
system

What we will do to make a difference:

1. Distribute simplified messages to health, care, and employers about how to identify and support carers
2. Ensure carers are identified through social care needs assessments
3. Have info for carers provided by front line health and care services
4. Have easy to access carers information online and in person available to all carers, including info about various health and care pathways
5. Encourage and support more carers to develop contingency plans
6. Highlight the importance of simplicity and continuity within health and care services

I have a flexible, understanding workplace

What helps?

Flexible work patterns
A manager who understands carers'
pressures
Carer-friendly company policies

What gets in the way?

Being afraid of being stigmatised if carers
speak up or don't put work first
Companies not taking steps to recognise
carers within their workforce

What we will do to make a difference:

1. Increase the number of organisations proactively identifying carers within their workforce
2. Increase the number of working carers who are receiving support from their employer, e.g. working carers passport
3. Provide support for organisations and businesses to develop more carer-friendly workplaces

I have breaks from my caring role and some time to spend as I choose

What helps?

Being able to plan my life
Having someone take over my caring role and give me a break
Going to work, education, or training
Sharing the caring tasks with others (paid or unpaid)

What gets in the way?

Not being able to book services in advance
Not prioritising 'me time'
Not letting go
Other people not accepting support from anyone else

What we will do to make a difference:

1. Provide replacement care services, respite, and day opportunities
2. Highlight to carers the importance of getting a meaningful break
3. Encourage carers to look at ways that they can share their caring role and take time out for themselves

I have good quality information and advice about my situation and my options

What helps?

Knowing my options and alternatives
Finding information at the point of service provision
Speaking to others who have experienced this before
Knowing what is likely to come next

What gets in the way?

Not being fully satisfied with a service, but not knowing about alternative provision
Not knowing where to start looking for the right help
My needs not be identified by professionals

What we will do to make a difference:

1. Provide info on a range of care support options
2. Link up carers with others who use the same and alternative support options

I am involved in discussions about me, about the person(s) I care for, and about designing help and support for us

What helps?

Advocacy
Co-production
Services coming to me, not the other way around
Being heard as a carer by front line services
Different options for engaging with different people
Cultural understanding

What gets in the way?

Conversations happening at times and places I can't access
Conversations focussing on the cared-for person only
Not being seen or asked for my input

What we will do to make a difference:

1. Ensure that carers are acknowledged as partners in care, and their skills and knowledge are valued and used when planning care for the person they care for
2. Have carers sit on strategic groups to provide a 'carer voice'
3. Provide a range of opportunities for carers to be involved in strategic planning and commissioning decisions at different levels of involvement as suits the carer
4. Provide advocacy services for carers
5. Champion co-production values across health and care

I am understood and have my individual and cultural needs met

What helps?

Health and care provision understands differences in support for excluded, marginalised, and ethnic minority people
Active outreach to communities that experience inequalities

What gets in the way?

No provision local to me for people like me

What we will do to make a difference:

1. Carry out research to better understand the needs of carers from our diverse communities
2. Provide local culturally appropriate and accessible health and care support so everyone can access support that suits them
3. Actively reach out to communities that experience inequalities to help identify carers

I can prioritise and take care of my own health

What helps?

Carers given permission and encouraged to recognise their own health and wellbeing needs
Support with finances, especially benefits
Emotional support

What gets in the way?

Feeling overwhelmed, carers having to sort out everything them self
When a carer is competent to arrange things they are expected to do so
Health and care services in place but not asking about the carer
Not feeling valued

What we will do to make a difference:

1. Increase the number of carers who are identified in primary care and the number of patients who are registered with their GP practice as a carer
2. Reach out to carers to encourage and give permission to carers to prioritise their mental and physical health
3. Provide a range of learning sessions about emotional support and coping strategies, accessible across Kirklees
4. Encourage all partners ask carers what they can contribute, and to not expect that carers will provide support simply because the seem able
5. All partners to recognise the hard work carers do, and to let carers know they are seen and appreciated

I am happy with the health and care services that the person I care for and I use

What helps?

Open, honest, transparent relationships with care providers
Knowing what other carers think about different care services
Care services must relate to the cared-for person
User or carer audits of service

What gets in the way?

Carers not being fully included in discussions about care provision
Carers not feeling able to ask difficult questions due to fearing they will be left out of future discussions or there may be negative impacts on the cared-for person

What we will do to make a difference:

1. Work with health and care providers to see carers as valuable partners and to have open and honest conversations about the care and support for their loved one
2. Link up carers with others who use the same and alternative support options
3. Have service users and their carers audit the service they use

I have someone to talk to

What helps?

Someone gets in touch with the carer and cares about whether they are OK
Walks, exercise classes, groups, medication, etc. which are fun
Family support
Speaking to others who have experienced this before

What gets in the way?

No time, or too busy, or not able to leave the cared-for person
Reduction in social infrastructure over recent years
Nobody reaching out to the carer to explain the negative impacts of being isolated

What we will do to make a difference:

1. Run peer groups and fun activities for carers
2. Stay in contact with carers who are at risk of becoming isolated
3. Health and care services encourage wider family and friend networks to support carers
4. Encourage carers to accept more help from their family and friends
5. Invest in local community activities, and make sure these are accessible for carers

The above I Statements have been written locally with carers in Kirklees and guide this strategy. Our approach to supporting carers also places a focus on:

- The NICE (National Institute for Health and Care Excellence) Supporting Adult Carers Quality Standards (NICE Supporting Adult Carers Quality Standards 2021).
- The 'I Statements' from TLAP's 'Making It Real framework'.
- The statements in the Government's 'People at the Heart of Care: adult social care reform' policy paper.

These statements pay particular attention to the carer journey and enable all our carers services to understand carers, understand carer needs, to face challenges, and to change where change is needed.

Thank you!

To everyone who has been involved in creating this strategy, from simple conversations up to detailed strategic discussions, it's all appreciated.

And thank you to all Kirklees' hard-working carers. We know you do a great job, and we think you're great too. Health and care simply couldn't cope without you.

Have your say on the development of this strategy

We're very interested in whether you feel the information collected and the areas identified are correct. We'd like you to let us know what you think, if you agree or disagree with the statements, and if there's anything important missing. You can do so here: [Kirklees Carers Strategy Feedback Questionnaire](#)

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