



Calderdale Carers' Strategy 2009-12

June 2009

Contents

	Page
1 Introduction	2
2 Our vision for carers in Calderdale	3
3 Achievements in Calderdale	4
4 National and local background	6
5 Our priorities in Calderdale	13
Identifying carers	
Information	
Making sure carers have a break	
Emergency Respite Care and Backup Plans	
Health and well-being	
A voice for carers	
Income and employment	
Young carers	
Appendix 1 Three Year Commissioning Plan	30
Appendix 2 Bibliography	40

1 Introduction

This strategy sets out an agenda for supporting carers in Calderdale over the next three years. The strategy reflects the needs of carers in Calderdale and follows the key themes of the *National Strategy for Carers; Carers at the heart of 21st century families and communities*. The strategy covers the needs of adult carers and young carers caring for people over the age of 18 but does not cover the needs of parents caring for children with disabilities. These needs are more appropriately covered within children and young people's services.

Caring for our relatives and friends when they are in need is a challenge that the vast majority of us will rise to at some point in our lives. At any one time 1 in 10 people in Britain is a carer.

National Strategy, (Page 2 Preface)

People who care do so because they want to help the people they care about, but often it means they end up juggling the support they give with other responsibilities. For many carers looking after their own health, combining caring with work, getting access to training or simply having time to take a break from caring can be a major challenge.

Carers need increased recognition and support to be able to have a life outside caring. That means improving health and social care support, ensuring that carers are able to access education and leisure opportunities, and making sure that people with caring responsibilities have the chance to work flexibly so as to combine work with their caring roles. For the many children and young people who support parents or other family members it means making sure that they are not providing unreasonable levels of care and that they have the support they need to learn, to develop and to thrive.

We want Calderdale to be a place where we value everyone being different and through our actions we demonstrate that everyone matters. This will be achieved by continuing to work with local people and partners in the following areas: Economy and Enterprise, Environment, Safer and stronger communities, Healthier communities, Older people, Children and young people, Narrowing the gap and Use of resources. The Carers' Strategy will contribute to achieving these priorities through

- promoting the physical and mental well-being of carers,
- supporting older carers and carers of older people to maintain an active role in their local communities
- ensuring children can flourish and are not over burdened through taking on a caring role
- supporting carers to continue in work and leisure and ensuring they are not economically or socially isolated
- using resources to support carers in their caring role and enabling the cared for to stay in their own homes for as long as possible.

This strategy and action plan has been approved by the Calderdale Health and Social Care Partnership Board.

2 Our vision for carers in Calderdale

Our vision is a community that offers carers choice and opportunities, timely help and support that involves:

- recognising and valuing carers in Calderdale as care partners and supporting them in their caring role
- partnership with carers in the planning and delivery of services
- integrated health and social care provision, with voluntary and independent service providers working in partnership for the benefit of carers
- provision of appropriate information, support and involvement opportunities to maintain carers' health and independence
- supporting carers to stay physically and mentally well
- protecting children and young people from inappropriate caring and ensuring that they have the support they need to learn, develop and thrive to achieve positive childhoods and to achieve against all Every Child Matters outcomes.

3 Achievements in Calderdale

In 1999 the Government made available a new grant; The Carers Special Grant. This grant, along with other funding streams, has been used to enhance support to carers in Calderdale. New initiatives have been developed for carers and existing support services have been expanded. Here are some examples of how we have supported carers in Calderdale.

The carer's small grants scheme

We operate a small grants scheme offering carers a one off grant of up to £200. Carers have used the grant for a range of things including short breaks, driving lessons, gym membership and buying practical items such as a dishwasher. The grants scheme has become increasingly popular and supports carers to purchase the things that they know will benefit them. In 2008 we have had over 100 applications to the grants scheme.

Supporting young carers

The Young Carers Service provides a valuable source of practical and emotional support to young carers in Calderdale.

M was 10 when he was first referred to the Young Carers Service. He has a sister with learning disabilities and his dad has severe mental health problems. The home situation was often stressful especially when his dad was unwell. Despite some initial reluctance M has been supported by the Young Carers Service to prepare for high school. They have offered individually tailored, one to one work and liaised with school to address concerns around bullying. Since receiving support from the Young Carers Service M is happier, he is more relaxed and he has gained confidence.

Direct Payments for carers

The Carer's Grant now funds Direct Payments to carers in their own right.

Mr and Mrs B provide care to their adult son with learning disabilities. Their son does not want residential respite or outreach services. Mr and Mrs B are older carers and are on a limited budget, the only real break they get is going to a coastal resort with their son and staying in a hotel. As a result of a Carer's Assessment the carers have been given the resources to pay for regular breaks and they do not have to look to traditional services that have been unable to meet their needs.

Saturday and Sunday Care

The Carer's Grant has supported the development of Saturday and Sunday Care in Calderdale. This service utilises the skill and time of local volunteers to support older

people whilst their carers have a valued break. The service provides weekend respite and social opportunities for the people who access it.

Looking After Me (POPPs Project)

Carer X was caring for two people both with mental health problems. The carer was suffering from physical and emotional ill health and had a very limited social network. Carer X was encouraged to attend a Looking After Me course (LAM). The carer enjoyed the LAM course and went on to volunteer as a tutor to deliver LAM to other carers. The carer has now moved on to combine a part time job with their caring role, after being out of work for the last ten years. The carer now has improved skills, improved prospects, improved finances and an improved outlook on life.

The Carers' Case Worker (POPPs Project)

The Carers' Case Worker worked with a carer in her 80s who was looking after her husband who has Alzheimer's and mobility problems. The carer felt that she could not go on caring for her husband on her own. She needed some time to herself but was reluctant to leave her husband with a stranger as this might distress him. The carer attended one of the Carers Project Support Groups and knew a little about Direct Payments. The caseworker provided more information and referred the carer for a Carer's Assessment. Direct Payments have now been set up and the carer has employed someone she knows to care for her husband. Both the carer and her husband are happy with the arrangements. This has given the carer some time to herself and peace of mind about her husband's care.

4 National and local background

The National Strategy for Carers

The Government published its new Carers Strategy; *Carers at the heart of 21st century families and communities* in June 2008 setting out the framework for developing support for carers over the next ten years.

The vision set out for the future of carers by 2018 is:

- Carers will be respected as expert care partners and will have access to the integrated and personalised services they need to support them in their caring role
- Carers will be able to have a life of their own alongside their caring role
- Carers will be supported so that they are not forced into financial hardship by their caring role
- Carers will be supported to stay mentally and physically well and treated with dignity
- Children and young people will be protected from inappropriate caring and have the support they need to learn, develop and thrive, to enjoy positive childhoods and to achieve against all the Every Child Matters outcomes.

The National Strategy for Carers included the most far reaching national consultation ever to be held on the future of carers. A number of Government departments and principal carers' organisations were involved in carrying out the review, which covers income, employment, health and social services and equalities. Carers were asked to contribute to an online consultation in the form of an 'ideas tree'.

The strategy includes £255 million to implement new services for carers:

- £150 million extra investment to PCTs to expand short breaks for carers over the next 2 years
- £38 million towards supporting carers to enter or re-enter the job market with more guidance for employers and more flexible and accessible skills training for carers
- £4.6 million per year to fund a new training programme for carers called Caring with Confidence
- Piloting annual health checks for carers to help them stay mentally and physically well
- Training for GPs to recognise the role that carers play and the pressures on the carers' own health
- £6 million towards improving the support for young carers and more protection from inappropriate caring for young people
- Giving carers greater choice and control over their lives by encouraging increased use of Direct Payments.

Who are carers?

Definition of a carer

A carer spends a significant proportion of their life providing unpaid support to family or friends. This could be caring for a relative, partner or friend who is ill, frail, disabled or has mental health or substance misuse problems.

Definition of a young carer

Young carers are children or young people up to the age of 18 years old who are caring directly or indirectly for a family member who may be disabled, have an enduring illness, have a learning disability, or have a mental health or drug or alcohol problem. The effect on young carers of living alongside family members with these needs impacts on their academic, emotional, social and/or physical wellbeing at a level over and above the experiences of children of a similar age and stage of development.

Anyone can become a carer. Carers come from all walks of life, all cultures and can be of any age.

Many carers do not consider themselves to be a carer; they are just looking after their mother, son, sister or best friend, just getting on with it and doing what anyone else would in the same situation.

Princess Royal Trust for Carers.

Professionals within health and social care have an invaluable role in helping to identify these hidden carers and providing them with and/ or directing them to support services within the community. Such services in Calderdale are supported and developed by statutory organisations in partnership with the voluntary and independent sector.

Around 3 in 5 people will be a carer at some point in their lives. Social services and the NHS rely on carers' willingness and ability to provide care. This care is worth an estimated £57 billion per year- the equivalent of UK spending on the NHS.

Carers UK 2004

The vital role played by carers in the UK

Carers and the care they provide save significant sums for the exchequer each year. The most recent figures released by a joint report between Carers UK and The University of Leeds estimate the value of unpaid care at £87 billion a year (more than the annual total spend on the NHS, which stood at £82 billion in the year 2006-7).

These new figures are 52 per cent higher than previous estimates of how much carers save the UK - £57 billion in 2002.

According to the Carers UK report, the average carer saves the nation over £15,260 a year. The new figures are also more than four times the amount spent on social care services for adults and children by local authorities each year - £19.3 billion in the year 2005-6.

The value of such services is also growing and will continue to grow for the foreseeable future. It is estimated that by 2021 there will be 11 million people aged 65 and over (2 million more than in 1997) and by 2025 there will be twice the number of people aged over 90. It has been estimated that the number of people over 65 years of age with a long-term condition doubles each decade. The number of people over 85, the age group most likely to need residential or nursing home care, is expected to double by 2020 (*Our Health, Our Care, Our Say*: 2006; 16). This backdrop of a rising older people population highlights the importance of carers and the services they provide – given that the majority of carers care for older people.

Informal care is the most important source of care for older people living in this country today. It was estimated in 2004 that, for Great Britain as a whole, approximately 80 per cent of people aged 65 and over living in private households who have help with domestic tasks rely exclusively on unpaid informal help, ie help from spouses, other household members, relatives outside the household, neighbours and friends.

Carers in Calderdale

There are 5.2 million carers in England and Wales. An estimated 570,000 carers devote at least 20 hours per week to caring. Approximately 1.9 million care for 50 hours or more - Census 2001.

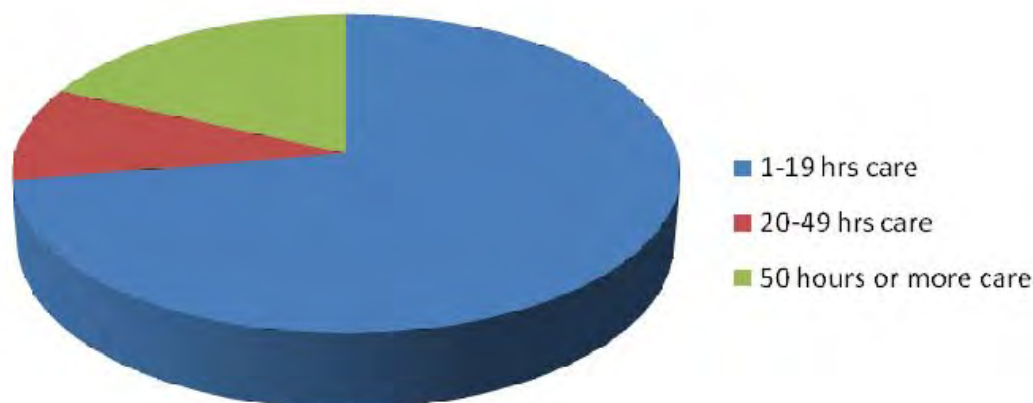
In Calderdale the figure is approximately 20,000 carers, around 10per cent of the population. Of these carers 41 per cent are male and 59 per cent are female.

Provision of unpaid care in Calderdale (Census 2001)

Table 1

Calderdale population		No care	1 to 19 hours care	20 to 49 hours care	50 or more hours care
Male	92,526	84,417	5,864	775	1,470
Female	98,350	86,739	8,010	1,193	2,408
Total	190,876	171,576	13,874	1,968	3,878

Breakdown of care by hours provided by carers in Calderdale (Census 2001) Chart 1



The importance of carers' work in Calderdale is significant and growing. Calderdale's older people population is projected to grow substantially in the coming decade. According to the Office of National Statistics, the population of people aged 65+ is projected to rise from 31,100 in 2008 to 38,300 in 2018 (a 23 per cent increase). This includes a 31 per cent increase in the number of 65-74 year olds (from 16,200 in 2008 to 21,300 in 2018) and a 13 per cent increase in the 75-84 year old population (from 10,600 in 2008 to 12,000 in 2018).

This increasing population of older people emphasises the likely increasing value of the care provided by carers (both now and in the future) and highlights the increasing importance of supplying high quality support services for carers. As the population ages, those drawn into caring roles is likely to increase.

Calderdale Carer's Project database

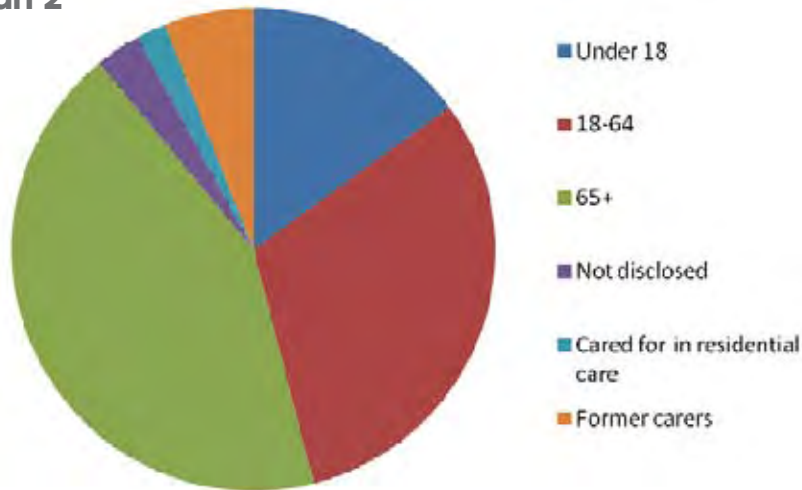
The Carer's Project holds a Calderdale Carers' database; this is the most comprehensive source of data held on carers in Calderdale.

The following provides a breakdown of the characteristics of carers supported by Calderdale Carers Project. The database shows that we are only capturing a small proportion of the people who identified themselves as carers in the 2001 census.

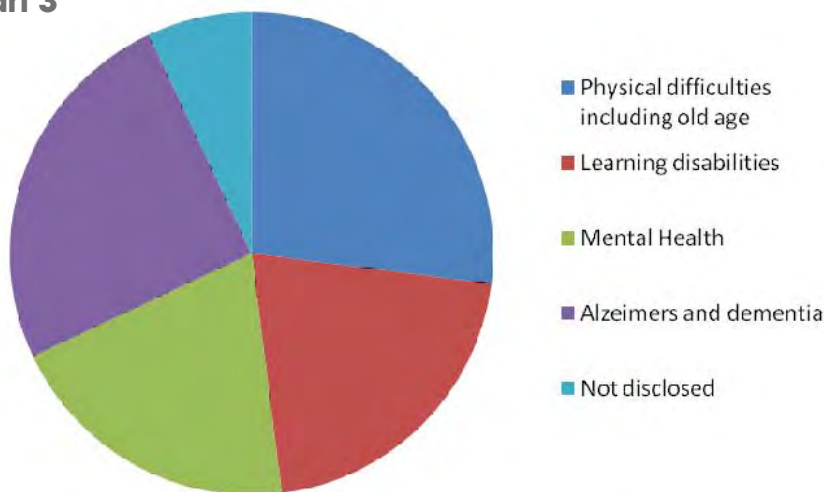
As of April 2008, there were a total of 958 current carers and 64 ex-carers on the database, totalling 1,022 carers on the database. 72 of the 1,022 carers on the database were from Black and Minority Ethnic communities (7 per cent).

The Carer's Project supported 196 new carers between April 2007 and April 2008, demonstrating that the project continues to work with new carers in Calderdale. Approximately 90 per cent of carers were caring for a spouse, parent, child or other close relative.

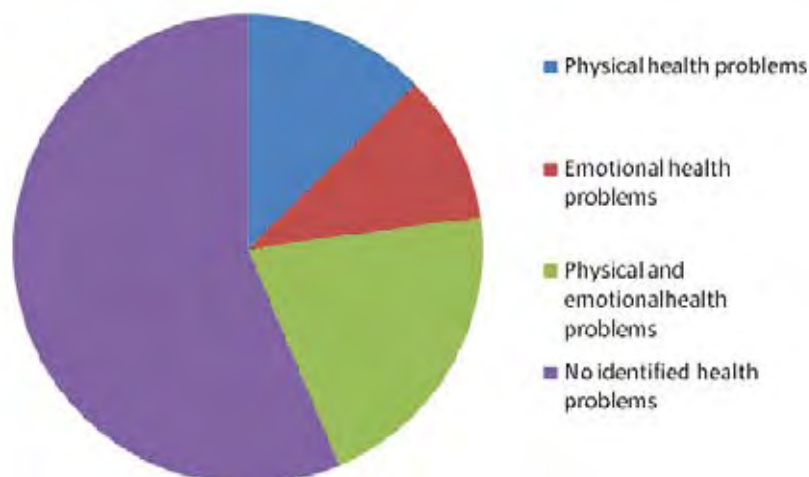
The age of people cared for (Carers Project Database 2008)
Chart 2



Condition of cared for (Carers Project database 2008)
Chart 3



Health status of carers (Carers Project Database 2008) Chart 4



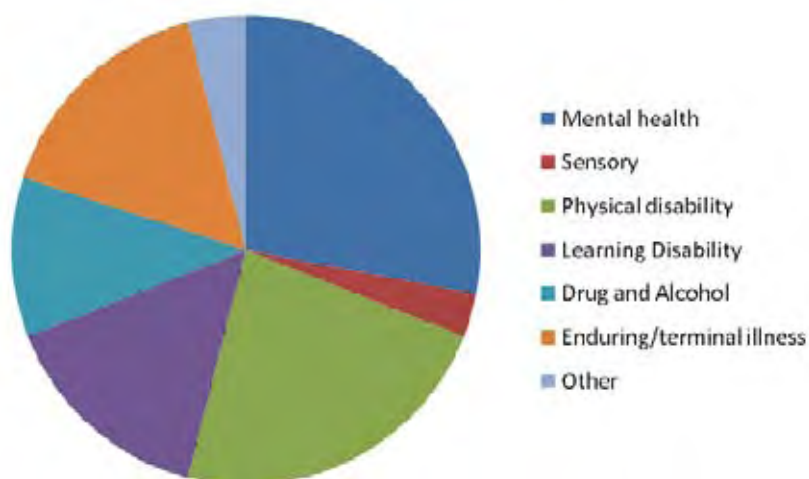
The Carers Project Database shows that carers of all age groups and conditions do access the service for support. In Calderdale 40 per cent of carers identify themselves as having one or more health problem, highlighting the need to focus on this area locally.

Young carers in Calderdale

The 2001 Census identified 1300 'young carers' in Calderdale under the age of 25. This figure relies on self-reporting and relates to young people providing 20 hours or more care per week.

The Calderdale Young Carers Service is currently in contact with 138 young carers.

Condition of person cared for by young carers in Calderdale Chart 5



Relationship to Young Carer

Mother	59%
Father	14%
Sibling	19%
Other	8%

In some cases the young carer is caring for more than one person. The condition of the cared for varies significantly from those on the Carers Project Database. Young carers are often supporting a family member with mental health needs or drug and alcohol problems. The Young Carers Project is able to tailor the support it offers to young carers depending upon the condition of the adult being cared for.

Calderdale's Partnerships for Older People's Projects contribution to carers

Calderdale is a POPPs pilot site and has produced a Healthy Ageing Programme. The POPPs programme includes six Projects one of which relates directly to carers.

Improving the Health and Well-being of Carers.

The aim of the Project is to reduce the number of situations where care breaks down by supporting carers to self-care and manage their situation more effectively, increasing the economic well-being of carers and meeting carers needs in a more effective way. The Project comprises three main elements:

- 1 Carers' Case Worker to offer time limited support focused on specific outcomes. The Carers' Case Worker supports carers who have reached a point of crisis and need one to one support to guide them through a difficult situation and to help them to source long term support. The Carers' Case Worker plans to work with at least 55 carers over the two year project.
- 2 Expert Carers Programme - volunteers have been recruited and trained to deliver the 'Looking After Me' course over seven weekly half day sessions. The course has been delivered to at least 50 carers over the two year project.
- 3 Research to identify carers' needs - this was completed in 2007 by Cordis Bright local evaluator for the POPP Programme. This focused on researching carers needs and considering how needs can be best met. The research was expanded to look at local demand for emergency respite and the need to develop carer's Backup Plans. The research has helped to inform this strategy and will be used to help inform future commissioning decisions.

The POPP pilot has increased support to older carers and the carers of older people in Calderdale. The Looking After Me (LAM) course has been successfully rolled out to offer support to all carers in Calderdale and evaluation of the course has shown that participants have experienced significant benefit from the course. The LAM will continue to run when the POPPs project ends.

5 Our priorities in Calderdale

- **Identifying Carers**
- **Information**
- **Making sure carers have a break**
- **Emergency Respite Care and Backup Plans**
- **The health and well-being of carers**
- **A voice for carers**
- **Income and employment**
- **Young carers**

5.1 Identifying Carers

In line with the National Carers Strategy we will ensure that Calderdale provides vital data about carers to aid commissioners and policy makers at a local and national level in providing better support for carers.

There are many barriers to engaging with carers. One key issue that has been identified is carer's 'self-perception'. Many carers "at least initially do not realise that, in the help they are offering, especially during periods of crisis, they are becoming carers" (*National Service Framework 1999; 8*). As a result, these new carers fail to access support in a timely fashion. This is partly due to the fact that many carers do not draw an immediate distinction between their increasingly intensive care role (caused by the increasing dependence of the cared for person) and the role they have been playing in the past as a supportive family member or friend who may have engaged in more casual and sporadic care duties. However when we do identify carers it is important that we give them a level of support and information that is appropriate to their circumstances and do not overload them with information at an early stage. Support and information needs to be tailored to meet each individual's circumstances.

The transitional period involving an increasing ratcheting up of caring duties and the care recipient's dependence often goes unnoticed initially. Calderdale Carers Project reports that people often only identify themselves as a carer and seek support when they experience a personal crisis or a significant deterioration in the health of the person they are caring for.

Additionally, the role of 'carer' and the support services that are available to carers are not widely discussed or publicised in the media.

Specific groups that may be 'hard-to-reach'

Local research shows that several groups may face additional barriers to accessing information, support and services, for example:

- Carers from Black Minority and Ethnic (BME) groups
- Carers whose first language is not English
- Carers of people within same sex relationships or civil partnerships. There has often been a perception that services could be hostile or unhelpful to lesbian or gay people/couples
- Carers with disabilities, including a learning disability
- Carers who may have difficulties reading and writing

Equality Impact Assessments are completed on local policies, including those which affect carers to ensure that groups are not excluded from local services and information is provided in a format that can be accessed by all groups. An Equality Impact Assessment has been completed on The Calderdale Carers Strategy. The assessment identifies key measures to ensure that carers in the above 'hard to reach' groups are supported in their caring role.

Carers in Calderdale

In Calderdale there are approximately 20,000 carers, this is approximately 10 per cent of the population (Information from the 2001 Census). The national consensus is that many carers do not identify themselves as a carer and so do not know about the services and support which are available to them. These 'un-identified' carers see themselves as parents, spouses, brothers, sisters, sons, daughters, friends or neighbours. However, it is paramount to this strategy that we encourage carers to identify themselves through awareness raising, both with the general public and within the statutory services. Through early intervention and support we can reduce long-term problems and carers reaching a crisis point.

A report from Cordis Bright- *Research into Carers' Needs* January 2008, gives a clear directive around identifying carers.

- 1 Calderdale should improve the information it has on the demography and characteristics of carers. At present there is reliance on the Calderdale Carers' Project database or on social services information. Through achieving more knowledge on carers, more informed strategies could be put in place. This information gathering exercise could be part of a more systematic carer registration process across social services, health and the voluntary sector.
- 2 Calderdale should appoint somebody to take a lead in developing a database of carers that can be accessed and information shared across a range of organizations. This information can be used for intelligence, more effective consultation, strategy development and targeting interventions.

In summary:

Calderdale should have a more systematic way of keeping an up-to-date record of carers. Information should be collected and recorded by practitioners who identify carers and also those at risk of becoming a carer. A way of overcoming duplicative information should be considered in any such system.

We will:

- link carers' support to the locality teams developed through POPPs;
- maintain and update a database to obtain accurate information about carers integrating data held by local GP practices;
- review the mailing list of the Carers Project and send out an updated questionnaire asking key questions around health, mental well being and carers' Backup Plans;
- develop electronic Carers' Assessments to enhance our knowledge and understanding of carers. (See below)

Carers' Assessments - supporting the identification of carers

The Carers' (Recognition and Services) Act (1995)

The aim of this Act was to ensure that proper consideration was given to the views and role of carers and to ensure that law supported good practice in relation to carers. The act was the first step in enshrining the carer's right to an individual assessment.

When a local authority is carrying out certain assessments, the carer (defined here as an individual who provides or intends to provide a substantial amount of care on a regular basis) has the right to request an assessment from the local authority as to his/her ability to provide, and continue to provide, for the relevant person. The Local Authority must carry out that assessment and take into account the results of that assessment in making their decisions about services.

In practice only a small number of carers in Calderdale have an assessment in their own right. As Carer's Assessment records are not currently held electronically it is difficult to obtain accurate data on the number of carers who have had an assessment in their own right. Many carers feel that their needs are covered within the community care assessment of the person they care for. However it is important to ensure that Calderdale offers carers an assessment in their own right and uses the information to enhance data and inform the development of future provision. Work is ongoing to ensure Carer's Assessments can be held electronically.

For some carers a Carer's Assessment will result in enhanced services for the cared for person or a service in their own right.

We will:

- raise awareness in assessment teams to ensure all carers are offered an assessment in their own right;
- review completed Carer's Assessments on at least an annual basis;
- use the information collected to help to inform the future development of provision.

5.2 Information

- In line with the National Carers Strategy we will provide every carer with the opportunity to access comprehensive information when they need to. The information will be easily accessible for all groups of carers, and specific to their locality.

Information is a major assistance to carers in helping them with their role. This is not just the availability of information but also the quality and distribution channels for it. Our aim is to continue to provide updated information that is widely available through a variety of sources. We also aim to continue to utilise the voluntary sector organisations as a way for carers to access services. Signposting to numerous organisations and services from voluntary sector services is of paramount importance. It is also important that these services receive regular updated information. Word of mouth is still the most common route by which people reach Calderdale Carers Project.

Cordis Bright - *Research into Carers' Needs* January 2008, made the following recommendations:

- Calderdale needs an effective information dissemination system that carers trust and know about. This could be part of a wider advertising strategy.
- Calderdale should consider a comprehensive information pack that new carers receive when practitioners recognize that they are carers or at risk of becoming carers. This should be provided by practitioners in social services and health, and be available from voluntary sector agencies.

We will:

- promote access to information via the internet to ensure that people can access the information they require 24 hours a day. This will include local information and links to national web sites;
- re-launch the carers contact cards as a simple resource directing carers to the support they need;
- work with POPPs locality integration teams to promote single access points within local communities;
- ensure booklets/packs are available, including Calderdale Carers Project's comprehensive information pack, and send these to carers and front line staff where there is a need for this level of information;

- have information, which is culturally appropriate and can be translated into other formats if required.

5.3 Making sure carers have a break - A life of their own

Carers should have the opportunities they need to participate in activities outside their caring role. They should be free to have an identity that is separate from the person they care for.

The National Carers Strategy supports the provision of planned breaks, which will provide carers with the time to take up the same work, education, leisure and training opportunities as anyone else. The National Strategy makes a new commitment to breaks provision:

In response to the high value placed upon breaks by carers, we are investing £150 million over the next two years. This extra funding recognizes the value of carers in today's society and their ever-growing importance in the future. (3.11 page 73)

The money will be allocated to PCTs, who will be required to work with their local authority partners to publish joint plans for the provision of breaks. This will be done as a part of Joint Strategic Needs Assessment. The plans will take account of both the new money and the existing money provided to local authorities for planned breaks through the Carer's Grant.

The National Strategy indicates that breaks will need to be delivered in a personalized way. Pilots will be run in local authorities in the next three years. These will:

- Encourage and collate innovative approaches to break provision
- Examine the quality of break provision
- Look at the cost-effectiveness of breaks
- Look at how personal budgets can be used to provide breaks for carers
- Provide models of best practice to disseminate across local authorities and PCTs. (3.16 page 74)

The National Strategy makes a strong commitment to including carers in the development of Individual Budgets. Individual Budgets can offer practical support to carers with activities such as window cleaning or gardening that are important to the carer but are hard to manage. It means that services can be designed to reflect the particular needs of carers and the people they support.

There are a number of types and formats that a 'short break' or 'respite' can take. The following is a list of the most common types of respite available in Calderdale:

- Adult Day Care
- Residential Respite Care

- Adult Placement Scheme
- In-home Respite and Sitting Services
- Direct Payments
- Outreach Support
- Family Carers
- Small Grants Scheme

Calderdale currently provides a combination of these services for carers of people with learning disabilities and mental health needs, and older people. A large proportion of the Calderdale Carer's Grant is dedicated to providing breaks. The aim is to continue with these but to make them more flexible and innovative and to widen the choice for carers to have more control of how they use these breaks. Direct Payments and Individual Budgets will be explored to offer carers greater control over the support they choose. Respite/breaks for parents of children with a disability are part of the overall package of support and will be reviewed and developed by Children and Young People's Services.

Short break services are highly valued services in Calderdale. Cordis Bright held a number of focus groups with carers in Calderdale in December 2007. They found that those carers who used respite services were very happy with the opportunity it gave them to have a break from their daily responsibilities. This was also seen to be very valuable for the person who was being cared for as it provided some time away from their daily routine.

We will:

- offer more flexible/innovative breaks where carers wish to explore these including the promotion of Direct Payments for carers and the development of Individual Budgets;
- use the Carer's Grant to support a wide range of initiatives to give carers a break, including the continued funding of short breaks, therapy days, activity sessions and information events;
- ensure that the new breaks funding outlined in the National Carers Strategy is tailored to the needs of local carers;
- plan the development of Emergency Respite Care. (see below)

5.4 Emergency Respite Care and Back-up Plans

Additional funding for Emergency Respite Care was a new component of the Carer's Grant payable from 1 October 2007. This money has been provided to underpin the development of services to provide emergency cover for unpaid carers who, for reasons of an emergency or personal crisis, are unable for a short period to continue to provide care. The policy was first signalled in *Our Health, Our Care, Our Say* (2006) and formally announced as part of the *New Deal for Carers* on 21 February 2007.

There is considerable evidence that one of the factors that limit carers' freedom to have any life of their own was the worry about what would happen if they became ill or if they were involved in an accident. Many carers have told Carers UK that they did not take unnecessary journeys and frequently missed out on attending family events because of the worry of not being able to get home on time, or of being caught up in an accident. They were worried that there would be no one to look after the person they cared for.

The policy intention, therefore, was that short term, home based emergency cover was established in each local authority to provide support in crisis or emergency situations to provide reassurance and confidence for the carer.

As a result, Calderdale was awarded £95,000 extra grant for Emergency Respite Care and £76,000 of this has been allocated to services for adult carers. The funding was provided as an addition to the Carer's Grant for 2007/08. The funding will continue in future years as part of the Local Area Based Grant.

Calderdale Council commissioned Cordis Bright to research carers' views around developing Backup Plans for carers and around delivering home based respite in an emergency, in line with the Emergency Respite Care Guidance. Cordis Bright posted 1,221 questionnaires to carers on the Carers Project Database. There were 147 responses to this questionnaire. Cordis Bright also held focus groups with carers. 19 participants attended five groups.

Back-up/Emergency Plans

The survey of carers on the Calderdale Carers Project database indicated that 46 per cent of respondents had no back up or emergency plan. These carers belong to a group that has already been identified. The overall figure for carers who do not have a back up plan is likely to be far greater, as those on the Database may be the more pro-active carers. This is a concern. If something happens to the carer there is no plan of how the person they care for will be supported.

Of those who had a back up plan the overwhelming majority had let other family members know. To this end Calderdale Council should be trying to inform carers of the importance of Backup Plans and letting other agencies know about them in addition to the family. For their own peace of mind carers should be able to have confidence that the plan will work.

Wider use of Backup Plans will help prevent carer anxiety, reduce carer crises and improve care for those being cared for. It may also be necessary to formally ensure that not only family members know the back up plan, but that at least one other chosen agency also has a record of it. These plans should be reviewed formally and on a regular basis.

Respite provision

It is clear that carers in Calderdale would appreciate more knowledge about the availability of services; more choice in terms of respite services; and more respite provision to be available.

Evidence from the focus groups, the survey of carers and the online survey of stakeholders, suggests that Emergency Respite Care in Calderdale should be a priority for development. Stakeholders felt that Emergency Respite Care was of good quality, but generally there is not enough of it. Indeed stakeholders suggested that emergency respite in Calderdale should provide a wider range of flexible care and should ensure an immediate, responsive emergency service that is seamless. The survey of stakeholders indicated that they were more positive about the planned respite care situation in Calderdale, suggesting the need to prioritise Emergency Respite Care.

We will:

- develop carer's Backup Plans. A new post should be created to set up the Backup Plans and work with volunteers from the Carers Project to roll out a programme of Backup Plans;
- link carer's Backup Plans to electronic social care records;
- review Backup Plans every three to six months using trained volunteers as a key resource;
- develop emergency respite in Calderdale;
- carry out further consultation with carers on Backup Plans;
- provide volunteer counselling to carers who have been distressed by coming to terms with the need to develop an emergency plan.

5.5 The health and well-being of carers

The National Carers Strategy commits to "*Improving the emotional support offered by central, local government and the third sector to carers*". Calderdale supports this commitment. Calderdale also supports joined up service provision between the NHS, local authorities and the third sector to support carers in their caring role.

The health of many carers is affected as a result of their carrying out caring tasks and also, in general, from them getting older and suffering their own health problems. As part of the Carers (Equal Opportunities) Act 2004, we are committed to supporting carers to pursue leisure activities, which in turn allow them to lead a more active social life and also help maintain their health and fitness.

Approximately 1.25 million people provide care for over 50 hours each week in the UK and for these carers - *these long hours of care make them twice as likely to be in poor health themselves*, *Our Health, Our Care, Our Say*. (2006; 16). Locally this is backed up by Calderdale census data.

The health needs of carers are often overlooked or are not prioritised by local and national policy makers.

Marilyn Howard's *Paying the Price: Carers, Poverty and Social Exclusion* Carers UK Report (2001:3) details some of the impacts caring can have on carers' physical health:

- One in five carers cut back on food, and food poverty is directly linked to life expectancy. Those with a poor diet are likely to have a lower life expectancy.
- More than two in three believe this worry has affected their own health.

Psychological health of carers in the UK

Nationally, 50 per cent of carers report suffering from physical and mental health problems related to their caring role (Carers UK). This risk is exacerbated if the carer is caring for someone with a mental health problem.

A rapid transition into a care role from a non-care role can often have a deep psychological impact. Often the need for care is brought on suddenly, eg by a broken hip or road accident. This sudden transformation can cause stress, depression or anxiety, which can affect both the carer as well as the person being cared for (National Carer's Strategy 1999; 9).

Caring can also have a detrimental effect on the psychological well-being of carers due to the isolating effect that some caring can have. Feelings of isolation and loneliness may stem from curtailment of the carer's normal lifestyle, and in particular their social life, due to the demands of their caring responsibilities. This is where respite and good advice to carers can have a positive effect. Good support can allow carers to balance their caring role with other activities, such as part-time or full-employment, and their own free time.

Calderdale Carers Project reports an increase in the number of people contacting them who are experiencing mental health problems or who have reached a psychological crisis and feel that they cannot continue to care without significant support. The new Carers' Case Worker role established through the POPPs initiative has offered practical and emotional support to carers who have reached a point of crisis and helped a number of carers to continue in their caring role.

Health checks for carers have been piloted by some PCTs. The aim of these health checks is to give both carers and health professionals an opportunity to detect health problems at an early stage. The National Carers Strategy gives a commitment to extend these pilots subject to a positive evaluation of the health checks. The Strategy also makes a commitment to establishing GP training pilots to help them better understand the needs of carers and to improving the emotional support offered by third sector organisations to carers.

Emotional support for carers is becoming an area which we recognise as being important to help carers continue caring. It provides guidance and general support mechanisms that some carers may require.

Carer support groups are one of the forms of support that are directly provided for carers. Groups can be organised in a number of ways. Some are offshoots of a facility, like a day hospital or adult training centre, others are free standing. Some are generic, open to all carers; others focus on a particular client group, even a particular medical condition. Some are very much for the carers; others have a shared emphasis on the carer and the cared-for person. Some are linked into national charities; others are strictly local. Support groups are valuable as an opportunity for carers to share experiences with people in a similar situation and to exchange information and emotional support.

Calderdale Carers Project facilitates five support groups, including a successful Asian women's carers group. These groups are informal and give carers a chance to meet others, and have a break from their caring responsibilities. The groups are generic and offer support to all carers. Information is available at these support groups and guest speakers are invited to discuss issues of specific interest. Sitters are offered to those carers who cannot leave the person they care for. The support groups provide a valuable break and an opportunity to network with other carers.

There are a range of voluntary sector, NHS and condition specific support groups in Calderdale and Calderdale Carers Project, or professionals working with carers, can direct carers to these groups.

Ex-carers often require a significant amount of emotional support to enable them to move on from their former caring role and to develop new social networks. After spending many years caring, carers can become isolated and lose their social networks. Calderdale Carers Project has spent time in the last few years encouraging ex-carers to take on roles as volunteers, both within the Project and with other local initiatives. This gives ex-carers a sense of purpose and a chance to pass on their expertise. It also provides social opportunities for ex-carers.

We will:

- review the Carers Project support groups to ensure they continue to meet need. In particular the Sowerby Bridge group which has become very large;
- provide social outings and therapy sessions through the Carers Project;
- support the development of the Carer's Luncheon Club and Holiday Group;
- support ex-carers to access support within their own communities;
- provide training for carers on issues such as carrying out moving and handling tasks and managing violence and aggression in their caring role;
- look closely at carers' health needs in a questionnaire to be sent out to all carers registered with the Carers Project;
- continue the role of the Carers' Case Worker (POPPs) and extend this role to offer support to all carers in crisis;
- continue to roll out Looking After Me courses that emphasise the importance of carers addressing their own physical and mental health needs;
- support carers to access Caring with Confidence, once details of this national course are available;
- work with the PCT to ensure carers are considered in all local health initiatives and promotions;
- work with GPs to look at data held around carers and extend the carer's health checks subject to national evaluation of current pilot schemes.

5.6 A voice for carers

Consulting with carers in Calderdale has had a degree of success over the years and this needs to continue in order to ensure carers have an active voice within the Council and partner organisations. Our aim will be to give carers a voice at all levels in the Council and the PCT and demonstrate the impact of that voice, including where carers' views have influenced strategic direction. Carers will be key to the new Local Involvement Network (LINKs) and we will need to support them to access this network.

We will:

- ensure that there is carer representation on all partnership boards;
- ensure that there is carer representation on the Carer's Strategy Group;
- consult with carers when decisions are made to restructure current services;
- ensure that carers are represented on the Local Involvement Network.

5.7 Income and employment

The Government is committed to supporting carers to remain in employment as detailed in the National Carers Strategy extract below.

There will be up to £38 million to enable carers to be better able to combine paid employment with their caring role and to re-enter the job market after their caring role has ended through encouraging flexible working opportunities and increased training provision.

Society benefits greatly from the care that family and friends provide. It is therefore reasonable for the Government to provide support to ensure a minimum level of income for carers who are unable to work. Although the new National Strategy does not directly address benefits to carers, it does state that the structure of benefits available to carers will be reviewed in the context of wider benefit reform and the fundamental review of the care and support system. The Government is considering how much and what kind of support carers themselves need to enable them to maintain a balance between the provision of care and a healthy life outside caring.
Care, Support, Independence - Meeting the needs of a changing society
(2008; 44)

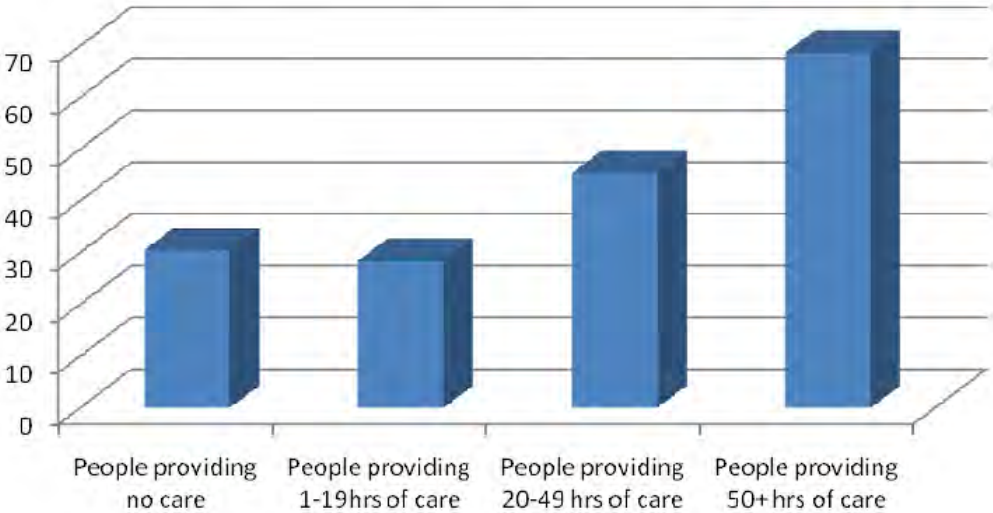
While benefits can provide a safety net the most reliable way for carers to enjoy a reasonable level of income is to combine paid employment with their caring role. However carers providing more care are less likely to be in paid work and so have a higher risk of poverty.

Family Resources Survey (Department of Work and Pensions, 2006)

Calderdale census data shows that carers in Calderdale who provide over 20 hours care per week are significantly more likely to be economically inactive than those who provide no care. The long term commitment to review the system of benefits for carers must acknowledge that carers providing 20 hours or more care are likely to find sustaining paid employment increasingly difficult. The benefits system should give these carers a reasonable income and allow them to continue in their valued role as carers.

Percentage of people in Calderdale who are economically inactive and the amount of care they provide (Calderdale census 2001)

Chart 6



Enabling carers to combine their caring role with paid employment is a key ambition of the National Carers Strategy. The government will launch an awareness raising campaign in 2009 to ensure that carers and employers are aware of the benefits of flexible working. The Work and Families Act 2006 extended the right to request flexible working to employees who care for an adult as well as those who care for a child under the age of 16 (or 18 if the child is disabled).

The current economic recession may have an impact on the availability of suitable employment for carers. We will need to monitor the impact and offer support to carers looking for employment.

Much of the responsibility to support carers into employment will be given to Jobcentre Plus including the provision of care partnership managers and specialist training for Jobcentre Plus advisers who work with carers. Jobcentre Plus managers will also ensure that carers have access to appropriate training and employment programmes.

The introduction of Individual Budgets and flexible breaks services should enhance the support and choice available to carers who are in work and training. They should also open up opportunities for those carers who wish to return to work and training.

We will:

- support carers in Calderdale to stay in work, training or education, by offering flexible care packages and responsive advice and support;
- promote flexible services for carers to support them to continue to work if they wish to do so;
- look at the demand for carers' advice and support services outside working hours, such as evenings and weekends;
- promote the introduction of the National Carers Helpline offering advice about the range of benefits and support available;
- seek representation from Jobcentre Plus on Calderdale Carers Strategy Group;
- support local carers to contribute to the wider review of welfare benefits and input to national consultation.

5.8 Young carers

The National Carers Strategy outlines the following commitment to Young Carers:

Over £6 million to ensure young carers are protected from inappropriate caring and receive the broader support they need. Through:

- *strengthening support from universal and targeted services;*
- *strengthening the quality and join-up of support around families so children are better protected from inappropriate caring.*

Calderdale supports this commitment.

Many young carers value the contribution that they make within their families. However extensive or inappropriate caring can be damaging and constraining. Research indicates that school attendance, educational achievement, and emotional and physical well being can all be affected.

Young Carers in the UK: the 2004 Report (Dearden and Becker, 2004).

Consultation for the National Carers Strategy indicates that too many young carers experience difficulties and are not accessing the support they and their families need.

The Government's aim, set out in *Every Child Matters* is that children, whatever their circumstances, will have the support they need to:

- Be healthy;
- Stay safe;
- Enjoy and achieve;
- Make a positive contribution;
- Achieve economic well-being.

The National Carers Strategy set much of the work with young carers to be done within universal services particularly schools including embedding support and guidance for young carers into the Healthy Schools Programme. There is also a commitment to develop training for GPs and hospital discharge teams to build awareness and skills in dealing with young carers. The Strategy acknowledges the need for further research into the effects of caring on young people and makes a commitment of £4 million to allow further areas to participate in Extended Family Pathfinders for Young Carers Programme. This programme supports local areas to shift their support for families with young carers towards active prevention.

In Calderdale there is a well established Young Carers Service. The service offers ongoing support to young carers outside of the support universal services are able to offer.

The aim of the Young Carers Service is:

To promote the needs and safeguard the rights of all young carers in Calderdale and support those as far as possible by providing services that enable them to take part in everyday childhood activities and have the same life chances as other children.

The work of the service adheres closely to the priorities of the Calderdale Children and Young People’s Plan 2008-11 and promotes the five outcomes of the Every Child Matters Agenda.

The Young Carers Service works to full capacity and has seen a recent increase in referrals putting increased pressure on the service to support more children within existing resources.

Referrals Table 2

2004	2005	2006	2007	2008 to June
47	42	44	68	29

Towards the end of 2007/start of 2008 the work of the Young Carers Service was reviewed by Commissioning and Partnership (Children and Young People’s Services Directorate) in an attempt to assist in identifying the most appropriate organisational location and service structure so as to ensure sustainable, effective and efficient services are delivered to Young Carers in Calderdale.

Three options were recommended for future service location and structure:

- Option 1: Maintain current provision at £101,060 (children and young people’s element of the Carer’s Grant/Children’s Fund).
- Option 2: Multi-agency Model at £101,060 (children and young people’s

element of the Carer's Grant/Children's Fund plus contribution of a worker from the PCT and a worker from Family Services/Learning Services on a secondment basis).

Option 3: Service provision offered through an open tendering process.

Option 2 is the preferred model and negotiations are already underway with some of the key partners.

In Calderdale we need to develop support for young carers who move on from the Young Carers Service and ensure that we have age appropriate services to meet their needs. Calderdale Carers Project does not tend to engage with many carers under the age of 25 and the targeted support they offer through groups and social opportunities might not be appropriate for this group of carers.

We will:

- pursue the Young Carers Service review through the Children and Young Peoples Strategic Partnership and through the support of the Partners seek:
 - long term sustainable funding for the work with young carers;
 - to develop a Transition group (18-25) - next-step group for those who have accessed young carers' services;
 - to develop outreach initiatives in areas to meet needs more locally to provide more awareness raising in schools on young carers' issues to ensure that universal services meet their needs;
- work with children and young people referred to the service, and their families, to assist them in finding the support they need to learn, develop and thrive, to enjoy positive childhoods and to achieve against all the Every Child Matters outcomes.

6. Commissioning support for carers and implementing the strategy

Support for carers is currently commissioned and monitored through the Council and PCT with input and guidance from the multi-agency Carers Strategy Group. There is no dedicated commissioning officer for carers, although responsibility does sit with the Commissioning and Strategy Manager for Learning Disability Services. The profile of carers has grown both nationally and locally and in order to ensure that we can deliver high quality support to carers in 2009 we will appoint a new post to lead on developments for carers in Calderdale.

We need to ensure that the priorities outlined in the Calderdale Carers Strategy are developed to improve the lives and experiences of local carers and to support them to continue in their caring role as long as they are willing and able to do so. The Carers Strategy Group will oversee the implementation of the strategy and ensure that progress is made through regular monitoring and appropriate allocation of resources to the areas of work in the action plan.

We will:

- appoint a new worker to lead on developments for carers in Calderdale;
- ensure that the Joint Strategic Needs Assessment reflects the needs of carers in Calderdale and use the JSNA to inform the commissioning and provision of breaks in Calderdale;
- appoint a Carers Link Worker to ensure that Backup Plans are rolled out to carers;
- make permanent the role of Carers' Case Worker to support carers through crises and difficult times;
- review Calderdale Carers Project to ensure that it can meet the needs of carers in Calderdale;
- continue to support the delivery of the Looking After Me course.

Appendix 1

Three Year Commissioning Plan

Identifying Carers

Action	Responsible officer and organisation	Time	Progress
Link carers support to the locality integration teams developed through POPPs	Lynn Ward Carers Project	April 2010	
Maintain and update a database to obtain accurate information about carers	Lynn Ward Carers Project	December 2009	
Review the mailing list of the Carer's Project and send out an updated questionnaire asking key questions around health, mental well being and carers' back-up plans	Lynn Ward Carers Project	October 2009	
Develop electronic carers' assessments to enhance our knowledge and understanding of carers and ensure that assessments are reviewed at least annually	Mary Lane CMBC IT Karen Midgley / Lynn Ward	June 2009	
Raise awareness in assessment teams to ensure all carers are offered an assessment in their own right	CMBC IT Training	June 2009	
Use the information collected to help to inform the future development of provision	Carers' Development Worker CMBC	April 2010	
Carers' Development Worker to engage with BME third sector organisations to ensure that BME carers are able to access current services and are fully included in future developments	Carers' Development Worker CMBC	April 2010	

Information

Action	Responsible officer and organisation	Time	Progress
Promote access to information via the internet to ensure that people can access the information they require 24 hours a day. This will include local information and links to national web sites	Carers' Development Worker CMBC Calderdale Carers Project	August 2009	
Re-launch the carers' contact cards as a simple resource directing carers to the support they need	Calderdale Carers Project	September 2009	
Work with locality integration teams to promote single access points within local communities	Carers' Development Worker CMBC Calderdale Carers Project	April 2010	
Have information, which is culturally appropriate and can be translated into other formats if required	Carers' Development Worker CMBC	April 2010	

Making sure carers have a break - A life of their own

Action	Responsible officer and organisation	Time	Progress
Offer more flexible innovative breaks where carers wish to explore these including the promotion of direct payments for carers and the development of Individual Budgets	Carers' Development Worker CMBC	April 2009	
Use the Carer's Grant to support a wide range of initiatives to give carers a break. Including the continued funding of short breaks, therapy days, activity sessions and information events	Assessment and care management teams	October 2009	
Plan the development of Emergency Respite Care	Carers' Development Worker CMBC Carer's Link Worker	April 2010	

Emergency Respite Care and Backup Plans

Action	Responsible officer and organisation	Time	Progress
Develop carer's back-up plans. A new post should be created to set up the Backup Plans and work with volunteers from the Carers Project to role out a programme of Backup Plans	Carers' Link Worker - once appointed	June 2009	
Link carers Backup Plans to electronic social care records	Carers' Link Worker	July 2009	
Review Backup Plans every 3-6 months using trained volunteers as a key resource	Carers' Link Worker	October 2009	
Develop emergency respite in Calderdale	Carers' Development Worker Carers' Link Worker CMBC	April 2010	

Health and well-being

Action	Responsible officer and organisation	Time	Progress
Review the Carer's Project support groups to ensure they continue to meet need. In particular the Sowerby Bridge group which has become very large	Calderdale Carers Project	March 2009	
Provide social outings and therapy sessions through the Carer's Project	Calderdale Carers Project	April 2010	
Support the development of the carer's luncheon club and holiday group	Calderdale Carers Project	March 2009	
Support ex carers to access support within their own communities	Calderdale Carers Project	March 2009	
Provide training for carers on issues such as carrying out moving and handling tasks and managing violence and aggression in their caring role	Calderdale Carers Project	March 2009	
Look closely at carer's health needs in a questionnaire to be sent out in to all carers registered with the carers' project	Calderdale Carers Project	March 2010	

continues...

Health and well-being . . . continued

Action	Responsible officer and organisation	Time	Progress
Continue to roll out Looking After Me courses which emphasise the importance of carers addressing their own physical and mental health needs. Targeting the course to different groups of carers where possible, eg working carers, BME carers	Calderdale Carers Project	October 2009	
Support carers to access Caring with Confidence (national course), once details are available	Calderdale Carers Project	2009 - when available	
Work with the PCT to ensure carers are considered in all local health initiatives and promotions	Carers' Development Worker CMBC	April 2010	
Work with GPs to look at data held around carers and extend the carers health checks subject to national evaluation of current pilot schemes	Carers' Development Worker CMBC	April 2010	

A voice for carers

Action	Responsible officer and organisation	Time	Progress
Ensure that there is a carer representative on all partnership boards	Carers' Development Worker CMBC	August 2009	
Ensure that there is a carer representative on the Calderdale Carers Strategy Group	Carers' Development Worker CMBC Calderdale Carers Project	June 2009	
Engage with carers when decisions are made on service developments and changes	Carers' Development Worker CMBC/PCT	April 2010	
Ensure that carers are represented on the Local Involvement Network	Carers' Development Worker CMBC/PCT	June 2009	

Income and employment

Action	Responsible officer and organisation	Time	Progress
Support carers in Calderdale to stay in work, training or education	Carers' Development Worker CMBC	April 2010	
Promote flexible services for carers to support them to continue to work if they wish to do so	Carers' Development Worker CMBC	April 2010	
To look at the demand for carers' advice and support services outside working, hours such as evenings and weekends	Carers' Development Worker CMBC Calderdale Carers Project	October 2010	
Promote the introduction of the National Carers' Helpline offering advice about the range of benefits and support available	Carers' Development Worker CMBC Calderdale Carers Project	April 2010	
Seek representation from Jobcentre plus on Calderdale Carers Strategy Group	Carers' Development Worker CMBC	October 2009	
Support local carers to contribute to the wider review of welfare benefits	Calderdale Carers Project	October 2009	

Young Carers

Action	Responsible officer and organisation	Time	Progress
Seek long term sustainable funding for the work with young carers	Young Carers Service	April 2010	
Work with partners to develop a Transition Group (18-25) – next step group for those who have accessed young carers’ services.	Young Carers Service	April 2010	
Work with partners to develop outreach initiatives in areas to meet needs more locally	Young Carers Service	December 2009	
Work with partners to provide more awareness raising in schools on young carers issues to ensure that universal services meet their needs	Young Carers Service	April 2010	
Work with children and young people referred to the service, and their families, to assist them in finding the support they need to learn, develop and thrive, to enjoy positive childhoods and to achieve against all the ECM outcomes	Young Carers Service	April 2010	

Commissioning support for carers and implementing the strategy

Action	Responsible officer and organisation	Time	Progress
Appoint a Carers' Development Worker to lead on carers developments for the Council and PCT	CMBC/PCT	October 2009	
Work jointly with the PCT to ensure that the Joint Strategic Needs Assessment reflects the needs of carers in Calderdale and use the JSNA to inform the commissioning and provision of breaks in Calderdale	Carers' Development Worker	December 2009	
Appointment of Carers' Link Worker	Calderdale Carers Project	June 2009	
Appointment of Carer Case Worker	Calderdale Carers Project	June 2009	
Review Calderdale Carers Project to ensure that it can meet the needs of carers in Calderdale	Commissioning and Strategy Managers OP and LD	June 2009	

Appendix 2

Bibliography

- Appleby, L. (2004)
National Service Framework - 5 years on - Progress Report.
Department of Health
- Howard, M. (2001)
Paying the Price: Carers, Poverty and Social Exclusion: Carers UK report.
Carers UK
- Calderdale Carers Strategy 2000
- Calderdale census data 2001
- Cordis Bright (2008)
Calderdale Council Research into Carers' Needs.
- Dearden and Becker,
Young Carers in the UK: 2004 report
- The Department of Health (1999).
Caring about Carers: A National Carer's Strategy: Caring for Carers.
- The Department of Health (2008)
Carers at the heart of 21st century families and communities.
- The Department of Health (2007).
Emergency Respite Guidance.
Department of Health
- The Department of Health (2007).
Information on Carer's Grant for Emergency Respite.
Department of Health
- The Department of Health Long-term Conditions NSF Team (2005).
National Service Framework Long Term Conditions.
Department of Health
- The Department of Health (2006)
Our Health, Our Care, Our Say.
TSO (The Stationery Office)
- The Department of Health (2007).
The New Deal for Carers.
Department of Health
- The Department of Health (2008)
Care Support Independence - Meeting the needs of a changing society.
- The Department of Work and Pensions, family resources Survey 2006
- The Home Office (1995).
Carers (Recognition and Services) Act 1995.
HM Government
- The Home Office (2004).
Carer's (Equal Opportunities) Act 2004.
HM Government

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Calderdale Carers' Strategy 2009-12

This strategy has been produced by the Carers Strategy Group. This group has representatives from organisations involved with carers, including Calderdale Council and NHS Calderdale. This group will be responsible for overseeing the delivery of the strategy.

The strategy has been approved by the Calderdale Health and Social Care Partnership Board.

**This strategy can be seen on
Calderdale Council's web site
www.calderdale.gov.uk**

