

NOTICE OF MEETING

Meeting	Health and Wellbeing Board
Date and Time	Thursday, 7th June, 2018 at 10.00 am
Place	Ashburton Hall, Elizabeth II Court, The Castle, Winchester
Enquiries to	members.services@hants.gov.uk

John Coughlan CBE
Chief Executive
The Castle, Winchester SO23 8UJ

FILMING AND BROADCAST NOTIFICATION

This meeting may be recorded and broadcast live on the County Council's website. The meeting may also be recorded and broadcast by the press and members of the public – please see the Filming Protocol available on the County Council's website.

AGENDA**1. APOLOGIES FOR ABSENCE**

To receive any apologies for absence received.

2. DECLARATIONS OF INTEREST

All Members who believe they have a Disclosable Pecuniary Interest in any matter to be considered at the meeting must declare that interest and, having regard to the circumstances described in Part 3 Paragraph 1.5 of the County Council's Members' Code of Conduct, leave the meeting while the matter is discussed, save for exercising any right to speak in accordance with Paragraph 1.6 of the Code. Furthermore all Members with a Non-Pecuniary interest in a matter being considered at the meeting should consider whether such interest should be declared, and having regard to Part 5, Paragraph 2 of the Code, consider whether it is appropriate to leave the meeting while the matter is discussed, save for exercising any right to speak in accordance with the Code.

3. MINUTES OF PREVIOUS MEETING (Pages 5 - 10)

To confirm the minutes of the previous meeting

4. DEPUTATIONS

To receive any deputations notified under Standing Order 12.

Approx.
Timings

5. CHAIRMAN'S ANNOUNCEMENTS	
To receive any announcements the Chairman may wish to make.	
6. SEND REFORMS UPDATE (Pages 11 - 26)	10:10am (20 mins)
To receive a presentation providing an update on Special Educational Needs and Disabilities (SEND) Reforms.	
7. HAMPSHIRE JOINT CARERS STRATEGY (Pages 27 - 66)	10:30am (20 mins)
For the Board to endorse the new Joint Carers' Strategy.	
8. IBCF AND DELAYED TRANSFERS OF CARE UPDATE	10:50am (10 mins)
To receive a verbal update of work in progress.	
9. UPDATE FROM THE HAMPSHIRE DISTRICTS HEALTH AND WELLBEING FORUM (Pages 67 - 72)	11:00am (5 mins)
To consider a report from the District Forum providing an update on their work.	
10. ANY OTHER BUSINESS	
To consider any other business Board Members wish to raise.	
11. DATE OF NEXT MEETING	
To note the next meeting of the Board is scheduled for 11 October 2018.	

Close of Meeting

The formal business of the Board is due to conclude by 11:10am. The Board will then go in to a closed workshop, due to conclude by 1:00pm.

ABOUT THIS AGENDA:

On request, this agenda can be provided in alternative versions (such as large print, Braille or audio) and in alternative languages.

ABOUT THIS MEETING:

The press and public are welcome to attend the public sessions of the meeting. If you have any particular requirements, for example if you require wheelchair access, please contact members.services@hants.gov.uk for assistance.

County Councillors attending as appointed members of this Committee or by virtue of Standing Order 18.5; or with the concurrence of the Chairman in connection with their duties as members of the Council or as a local County Councillor qualify for travelling expenses.

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AT A MEETING of the Health and Wellbeing Board of HAMPSHIRE COUNTY COUNCIL held at the castle, Winchester on Thursday, 15th March, 2018

Chairman:

p Councillor Liz Fairhurst (Executive Member for Adult Social Care and Health, Hampshire County Council)

Vice-Chairman:

p Dr Barbara Rushton (Chair, South Eastern Hampshire Clinical Commissioning Group)

p Graham Allen (Director of Adults' Health and Care, Hampshire County Council)

p Councillor Roger Allen (Gosport Borough Council)

p Dr Sallie Bacon (Director of Public Health, Hampshire County Council)

p Nick Broughton (Chief Executive, Southern Health NHS Foundation Trust)

a Dr David Chilvers (Chair, Fareham & Gosport Clinical Commissioning Group)

p Steve Crocker (Director of Children's Services, Hampshire County Council)

a Councillor Anne Crampton (Hart District Council)

p Dr Nicola Decker (Chair, North Hampshire Clinical Commissioning Group) vacancy (NHS England Wessex)

p Shantha Dickinson (Hampshire Fire and Rescue Service)

p Christine Holloway (Chair, Healthwatch Hampshire)

a Michael Lane (Hampshire Police and Crime Commissioner)

p Councillor Keith Mans (Executive Lead Member for Childrens Services and Deputy Leader, Hampshire County Council)

a Dr Sarah Schofield (Chair, West Hampshire Clinical Commissioning Group)

p Councillor Patricia Stallard (Executive Member for Public Health, Hampshire County Council)

a Phil Taverner (Test Valley Community Services, Voluntary Sector Representative)

a Nick Tustian (Chief Executive, Eastleigh Borough Council)

p Alex Whitfield (Chief Executive, Hampshire Hospitals NHS Foundation Trust)

a Dr Andrew Whitfield (Chair, North East Hampshire and Farnham Clinical Commissioning Group)

40. APOLOGIES FOR ABSENCE

Apologies were noted from the following:

- Dr Sarah Schofield, Chairman West Hampshire Clinical Commissioning Group. Her Substitute Heather Hauschild, Chief Officer, also gave apologies
- Dr Andrew Whitfield, Chairman North East Hampshire and Farnham Clinical Commissioning Group. His Substitute Dr Peter Bibawy, Medical Director attended in his place
- Dr David Chilvers, Chairman Fareham & Gosport Clinical Commissioning Group. His Substitute Dr Paul Howden, Deputy Chair also gave apologies
- Nick Tustian, Chief Executive, Eastleigh Borough Council. His Substitute Patricia Hughes, Chief Executive, Hart District Council also gave apologies
- Cllr Dr Anne Crampton, Hart District Council. Her Substitute Cllr Philip Raffaelli also gave apologies

- Phil Taverner, Test Valley Community Services (resigned position). His Substitute Carol Harrowell, Head of Client Services at the Home Group attended in his place
- Michael Lane, Police and Crime Commissioner for Hampshire. The substitute position was currently a vacancy
- Dr Liz Mearns, Medical Director NHS England Wessex

41. **DECLARATIONS OF INTEREST**

Members were mindful that where they believed they had a Disclosable Pecuniary Interest in any matter considered at the meeting they must declare that interest at the time of the relevant debate and, having regard to the circumstances described in Part 3, Paragraph 1.5 of the County Council's Members' Code of Conduct, leave the meeting while the matter was discussed, save for exercising any right to speak in accordance with Paragraph 1.6 of the Code. Furthermore Members were mindful that where they believed they had a Non-Pecuniary interest in a matter being considered at the meeting they considered whether such interest should be declared, and having regard to Part 5, Paragraph 2 of the Code, considered whether it was appropriate to leave the meeting whilst the matter was discussed, save for exercising any right to speak in accordance with the Code.

42. **MINUTES OF PREVIOUS MEETING**

The minutes of the last meeting were reviewed and agreed. Regarding minute 33 (key issues and financial challenges for the NHS and County Council in Hampshire) the Healthwatch representative requested that this topic be scheduled for further discussion.

43. **DEPUTATIONS**

No deputations were received at this meeting.

44. **CHAIRMAN'S ANNOUNCEMENTS**

CQC Local System Review

The Chairman welcomed those in attendance on behalf of the Care Quality Commission, who were observing the meeting as part of their review of the Hampshire Health and Care System. The purpose of the review was to better understand the pressures and challenges across the Hampshire system and identify any areas for improvement needed in health and social care services. The focus was on services for people over 65 and whether people using local services were provided with safe, timely and high quality care. Following the review, CQC would consider their findings and formulate a report. The report would be presented to the Hampshire Health and Wellbeing Board and published by CQC via their website.

Joint Health and Wellbeing Strategy

The Chairman noted that the Health and Wellbeing Board was responsible for the Joint Health and Wellbeing Strategy for Hampshire. The current Strategy

period runs to 2018, and it would be a focus of the Board this year to review the Strategy. The business sub group would co-ordinate the strategy refresh, and Board Members would be involved in reviewing the priority areas under each theme through workshops. There would be a workshop following this meeting with a focus on the 'living well' and 'ageing well' areas of work. The revised Strategy would be brought back to a future meeting of the Board for approval.

45. IMPROVED AND INTEGRATED BETTER CARE FUND UPDATE

The Board considered a report and supporting presentation on behalf of the Director of Adults' Health and Care regarding the Integration and Better Care Fund and improved Better Care Fund.

Board Members commented that it would be good to have a report back in due course on what impact this funding has had, and how the benefits can be sustained beyond the short term funding. It was discussed that there were examples of both qualitative and quantitative benefits from the vanguard out of hospital care models.

RESOLVED:

The Health and Wellbeing Board:

- Note the current position with regard to the Better Care Fund and improved Better care Fund policy.
- Note the approach to the application of the IBCF.
- Note that a Deed of Variation to the current Section 75 agreement was executed so that Hampshire meets expected National Conditions for a jointly agreed plan.

46. PHARMACEUTICAL NEEDS ASSESSMENT

The Board considered a report from the Director of Public Health regarding the Hampshire Pharmaceutical Needs Assessment. The report also sought delegated authority to respond to consultations about pharmacy consolidation proposals, as a response was required within 45 days and there may not be a Board meeting in time. It was discussed that any proposals received could be reported to the Board annually.

RESOLVED:

The Health and Wellbeing Board:

- Approve the Pharmaceutical Needs Assessment 2018 for Hampshire for publication.
- Delegate authority to the Director of Public Health, to make representations to NHS England about pharmacy consolidation applications.
- The Director of Public Health report annually to the Board regarding any consolidation applications received.

47. SUICIDE PREVENTION STRATEGY

The Board received a report and supporting presentation on behalf of the Director of Public Health regarding the Suicide Prevention Strategy.

Board Members discussed the issues. The Chief Executive of Southern Health commented that the target to reduce suicide by 10% was not ambitious enough. It was noted that evidence suggests a third of suicides had been to see their GP two weeks before their death. The Chair of North Hampshire Clinical Commissioning Group commented that it would be helpful if any warning signs could be flagged to GPs on a patients record, to help pick up on those cases. It was also discussed that targeted approaches were beneficial e.g. to support high risk groups like farmers.

RESOLVED:

The Health and Wellbeing Board approve the suicide prevention plan for Hampshire.

48. UPDATE FROM THE HAMPSHIRE DISTRICTS HEALTH AND WELLBEING FORUM

The Board considered a report on behalf of the Chair of the District Forum, that had been deferred from the last meeting. The report highlighted the importance of open space for mental and physical health and wellbeing.

Board Members agreed this was an important factor in supporting a healthy lifestyle and addressing population health.

RESOLVED:

That the Hampshire Health and Wellbeing Board recognises the value of access to open spaces in local areas and that the Board's member organisations consider the measures in the report to encourage increased usage of open spaces for physical activity.

49. UPDATE FROM THE CO-DESIGN, CO-PRODUCTION AND COMMUNITY PARTICIPATION SUB GROUP

The Board considered a report from the Co-design, Co-production and Community Participation sub group, deferred from the last meeting. It was noted that at it's meeting in February 2018 the group had decided to amend it's name to simply 'co production' sub group.

The group had decided to focus on three priority areas initially, one of which was to provide information and guidance to the Board on good practice in engagement, co-design and co-production. The report made a number of recommendations to the Board on this topic.

The Chief Executive of Hampshire Hospitals NHS FT noted that provider organisations were not currently represented on the sub group, and offered to look into finding a representative, which was welcomed.

It was requested that co-production be discussed by the Health and Care Alliance and the Chairman agreed to follow this up.

RESOLVED:

- That the Hampshire Health and Wellbeing Board use its influence to ensure that there is a commitment from the highest level in both local government and the NHS to effective co-production and engagement in the development of commissioning plans and services, including in the Sustainability and Transformation Partnership and Accountable Care Systems, across:
 - all stakeholders: health and care commissioners; the County Council; providers whether statutory, commercial or voluntary sector; service users current and future, and the community groups who work with them to make their views heard
 - the entire area of the STP, not just within Hampshire County Council's borders
 - health *and* social care *and* well-being.
- That the Board model good practice by involving public and/or service users in the Board's own policy developments.
- That the Board monitor co-design, co-production and community participation (see para 3.4 for how this should be done).
- That the Board ensure that all have access to good practice guidance on co-design, co-production and community participation (see para 3.5).
- That the Board agree that NHS and local authority colleagues need the opportunity to learn by experience as well as being offered good practice guidance and explore ways to resource replication of the Empowering Engagement course successfully piloted in both North East Hants and the Isle of Wight (see para 3.6).
- That the Board invite the STP to facilitate access to findings of previous participation work (see para 3.7).

50. ANY OTHER BUSINESS

The Chairman invited Board Members to raise any other business. The Director of Public Health reported that a JSNA Steering Group had now been established.

The Healthwatch Chair highlighted that Hampshire Healthwatch were looking to recruit to Director and Associate roles (unpaid volunteer roles). Further details would be circulated to Board Members for distributing among their networks.

51. **DATE OF NEXT MEETING**

It was noted that the next meeting of the Health and Wellbeing Board was scheduled for 7 June 2018.

Chairman,

Hampshire Health and Wellbeing Board

7 June 2018

Special Educational Needs and Disabilities (SEND) Reforms

Update from November 2017

Tracey Sanders, County Education Manager
(Inclusion)

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Agenda Item 6

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- SEND Reforms context;
- SEN Service performance;
- Digital Education, Health and Care (EHC) hub;
- SEN Support: managing demand;
- SEN out-county placements;
- SEND Post 16 Preparation for Adulthood strategy;
- SEN Capital Place Planning Strategy – sufficiency of specialist provision;
- Hampshire Parent Carer Network (HPCN);
- Public Health: early identification and early intervention;
- National Health Service (NHS) Children's Collaborative;
- NHS SEND Designated Clinical Officer 0-25 update;
- First-Tier SENDIST Tribunal and the Single Route of Redress national trial.



SEND Reforms Context

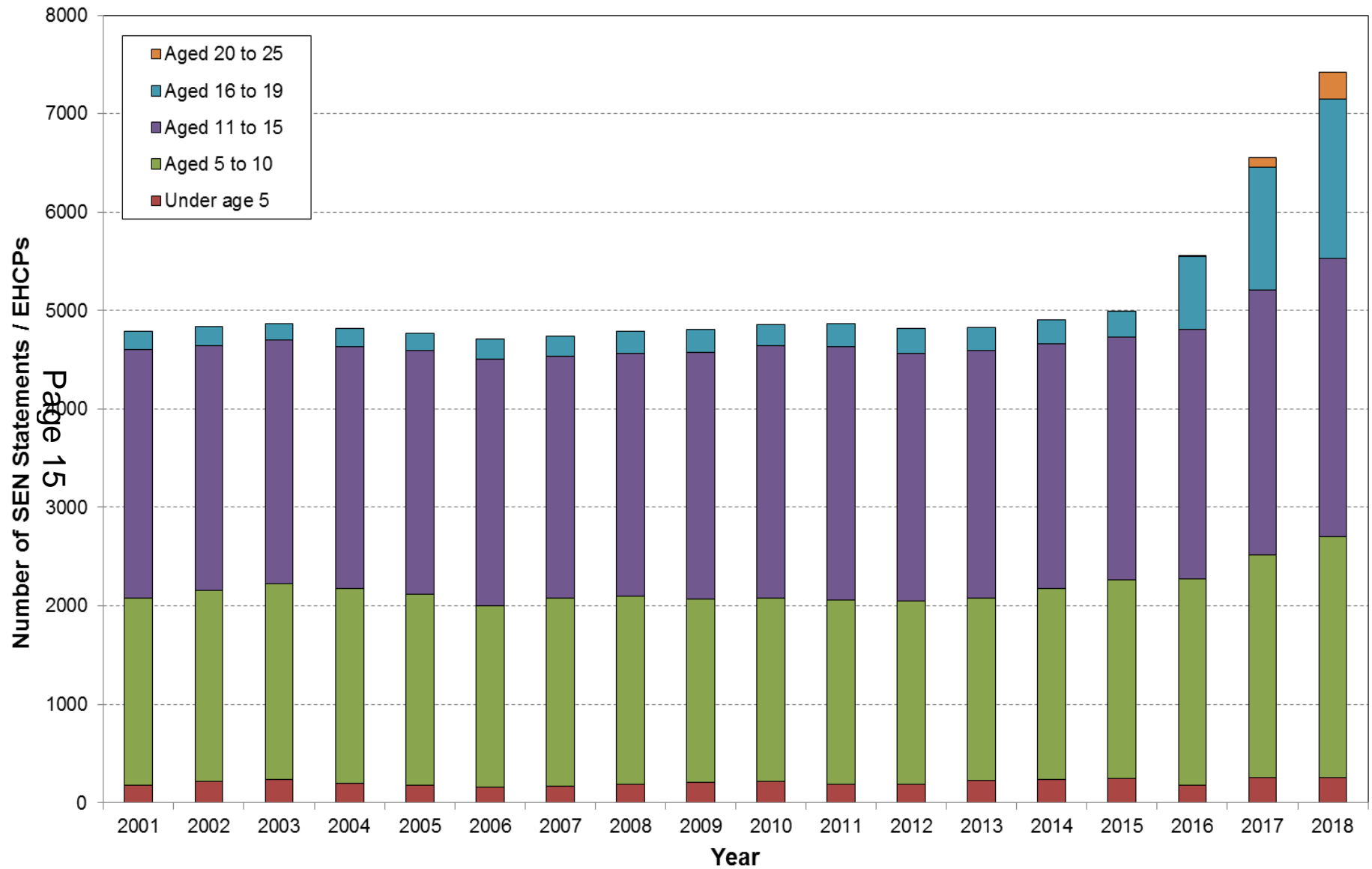
- Children and Families Act [Part 3] September 2014
- Strengthened focus on parent/carers, children and young people collaboration
- Introduced Education, Health and Care Plans (EHCPs) 0-25 for most complex
- Statutory 'Local Offer' <https://fish.hants.gov.uk/localoffer>
- Strengthened the focus on SEN Support and the graduated response
- The need for joint planning and commissioning of services across education, health and care 0-25
- A strong focus from year 9 on preparation for adulthood to build independence and expectation of employment.

Special Educational Needs (SEN) Service Performance

- 99.9% Statutory **transfer** of 5,277 Statements of SEN to Education, Health and Care Plans (EHCPs) **completed** by 31 March 2018
- The 0.1% represents 6 cases not transferred
- **EHCP 20 week statutory performance** 46% at March 2018 highest since introduction of SEND Reforms
- National 2017 SEN2 data published May 2018 will show 24% EHCPs produced in 20 weeks (4.5% in 2016).
- Reform Grant for 2018/19 focussed on aim of 95% EHCPs in 20 weeks

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HCC - SEN Statements / EHCPs by Age Group



Digital EHC Hub

- Final version of digital EHC Hub system received
- Covers the end to end statutory SEN processes: EHC request, assessment and plan plus annual review.
- Now in the testing and implementation stage with all the key stakeholders.
- Launch EHC Hub in a phased approach beginning September 2018.
- New way of working in a more person centred way to ensure more confidence of the family in support offer and earlier conversations about provision.

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SEN Support: managing demand

- New lead inclusion role of School Improvement Manager SEN. Key areas of focus:
- Working with mainstream schools and colleges to ensure support is made available to the 14% of children and young people deemed to be on SEN Support:
 - Ensure those with SEN are at the forefront of future developments
 - Ensure progress tracking is robust and rigorous so no child or young person regardless of ability is ‘unchallenged’ in their learning journey
- Working closely with SEN Co-ordinators (SENCOs) in education settings around obligations, the graduated response, “assess, plan, do, review” and to facilitate area peer support groups.

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• Refresh the
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SEN out-county placements

- 443 children and young people with special educational needs (SEN) placed in independent/non-maintained schools or independent specialist colleges
£20,483,212 (purely SEN costs excluding any health and social care costs)
- 107 annual reviews attended 43 cases identified as ready to move on with a saving of £605K banked

SEND Post 16 Preparation for Adulthood Strategy

Anticipate launch Summer 2018. Key areas of focus:

- The development of real living and work skills - supporting future independence, health and wellbeing;
- A focus on employability and employment - expectation that young people with SEND will progress to a good job.

Re-setting expectations of parents, carers and young people from an earlier age of progression to employment.

- A new County-wide Supported Internship offer with job coaches.
- Strategic commissioning of Post 16 high needs provision
- Clarity of Post 19 pathways
- Greater emphasis on technical skills and work based learning pathways.

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Capital Place Planning Strategy – sufficiency of specialist provision

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- Five year strategic plan agreed based on a comprehensive and complex analysis
- Hampshire SEND School Places Strategy published March 2018
- Funding secured for 293 new SEND places by Sept 2021
- Includes successful bid for 125 place ASD free school in Basingstoke. Catch 22 recently approved as Academy Sponsor by Department for Education. Due to open 2021.
- Additional 50 primary and 110 secondary places forecast to be required – funding and location to be identified
- Samuel Cody, Farnborough, additional 50 primary MLD places open Easter 2018, plus 72 places Sept 2018.

Hampshire Parent Carer Network (HPCN)

- Represents collective views of parents and carers of children and young people with additional needs
- Key SEND partner since 2012 developing and supporting the implementation of the SEND Reforms
- HPCN “Parents meet the SEN Team” sessions positive in breaking down barriers and enhancing understanding
- HPCN Get Together (regional) and HPCN Talk Together (schools) groups build supportive relationships between parents and professionals
- “Futures in Mind” groups promote emotional resilience of families while they are on the wait list for Tier 3 CAMHS support. Praised by Care Quality Commission.

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Public Health: Early identification and early intervention

- Multi-agency SEND joint strategic needs analysis produced to inform commissioning. Includes opportunities around prevention and earlier identification
- Health Visiting key role delivering Healthy Child Programme including early identification, assessment and support
- 2/2 ½ year check identifies developmental delay
- School Nursing role across all maintained schools key in early intervention for children with additional needs
- Multi-agency work underway to extend 2 to 5 year pathway to improve identification of vulnerable children earlier and improve outcomes before Year R (Reception)

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NHS Maternity and Children's Collaborative

- Now based at Ell Court with County Council
- Effective in reducing admission to children's mental health Tier 4 beds through a more joined up response for young people in mental health crisis (New Care Models). Young people with Learning Disabilities (LD) next stage.
- A Learning Disabilities commissioning assessor appointed
- Integration programme: Health and Local Authority are working together to jointly procure a range of services to improve pathways for children with complex needs, currently out to stakeholder consultation.

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NHS SEND Designated Clinical Officer 0-25

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- In post since January 2017
- Instrumental in raising profile of SEND in NHS Clinical Commissioning Groups (CCGs) and understanding statutory obligations
- Developed a quality assurance process for the health element of the EHCP which has led to an improvement in quality and timeliness of health advice
- Reports to clinical governance and clinical cabinets.

First-Tier SENDIST Tribunal

Single Route of Redress National Trial

- Two year national trial for Health and Social Care from 3 April 2018
- Continues existing binding decisions for Education
- 'Non binding recommendations' for Health and Social Care but assumption compliance will be the norm.
- Five weeks to report to Department for Education case by case if accept recommendations or reasons non compliance
- Briefings for parents and partner agencies held and planned (Regional and local).

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Reminder:



Hampshire Local Offer

<https://fish.hants.gov.uk/localoffer>

Questions?

Hampshire Joint Carers Strategy 2018-2023



**Briefing for
Health and Wellbeing Board
7th June 2018**

Agenda Item 7

Key Strategy Messages

- 10% of the Hampshire population are carers of an adult
- The numbers of carers are growing due to the ageing population; 20% (26,400) of Hampshire carers are caring for over 50 hours a week each

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Health and Social Care partners acknowledge the key role that carers play in supporting people's health and wellbeing and will work together to support them continue in their role

- Importance of all aspects of our communities collaborating to support the growing number of carers (health and care colleagues and providers, voluntary sector – use of local resources and the Strengths based approach)

Developing the Strategy

- Stakeholder engagement and co-production began in July 2016, at a consultation event with carers, health and social care professionals , CCGs, Carers Providers and the voluntary sector. A Carers Joint Strategy Group was formed to co-produce the draft strategy document
- We consulted on the draft Strategy Responses with local carers groups and voluntary organisations and via an online questionnaire. The key messages received back were that the Strategy was well intentioned, however it was too long and not aimed sufficiently at Carers
- The draft Strategy was also presented to CCG Clinical Executives across Hampshire, the Hampshire Partnership group and to Members at their briefing in February
- We have worked with the Editorial Board of the Joint Strategy Group which includes carers to respond to the consultation feedback and simplify the document
- A launch event will be planned in the summer to engage carers and stakeholders in the implementation plans

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Joint Vision and Carers Charter

New Vision:

To work in partnership with carers to establish and coordinate easily accessible support across Hampshire:

- ***Identifying those who help or support friends and family members***
- ***Giving carers timely access to information and help offered in their local community, by health and social care professionals, charities, and government organisations***
- ***Assisting carers to incorporate their caring role into a healthy and fulfilling life***

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Carers Charter:

A new Charter has been drafted for organisations sign up to showing carers what they can expect from local services

Key strategy themes

Identifying and recognising carers

- *Only 1 in 10 Hampshire carers are registered as carers with their GP practices*
- *Joint carer information services need to be better integrated (will be re-tendered next year)*
- *Carers often only come to our attention at crisis point*

Carer Health and wellbeing

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- *Carers have poorer health outcomes*
- *There is an issue with above average carer social isolation in Hampshire*
- *Carers would like more flexibility in booking GP appointments*
- *Carers need training in back care, moving and handling, dealing with stress*

Having a life alongside caring

- *There is a greater role for telecare*
- *Respite care needs to be provided more flexibly*

Key strategy themes

- continued

Young carers and young adult carers (age 16-25)

- *Young carers are not being recorded as such and do not always receive an assessment in their own right*
- *Young carers are not always considered as key care partners*
- *Young adult carers find that services do not always meet their needs*

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Seldom Heard Carers

- *Some carers are particularly isolated, eg working carers who cannot access traditional '9-5' carers support, rural carers, LGBT carers, military carers*
- *Some communities do not traditionally recognise the caring role and cannot access information and advice*

Next Steps

The approved strategy will inform the development of implementation plans to respond to the key issues raised. This will be overseen by a new joint steering group including carers and representatives from health and social care and the voluntary sector.

We would like the Health and Wellbeing Board to:

- Endorse and promote the Strategy
- Use the Strategy as a reference document when planning services for the people of Hampshire
- Think Carer! Promote carers' issues and support them to continue in their caring roles

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Hampshire Joint Carers Strategy



Identify and recognise carers

Support carer health and wellbeing

Enable carers to have
a life alongside caring

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Jointly prepared by carers and the following organisations:



1. Strategy Summary

Outlined below is a summary of the kinds of information you can expect to find in each chapter of this strategy.

- **Introduction and Vision**

This strategy explains how adult social care, health organisations and the voluntary sector will work together with carers over the next five years to coordinate easily accessible support for carers across Hampshire. This first chapter explains how we define who is a carer and what our vision is for carers in Hampshire, together with how this strategy has been developed and next steps.

- **Carers Charter**

We developed a Carers Charter based on four key principles for supporting carers. Our aim is for all organisations that work with carers to adopt this charter and promote its principles. If you work with carers, we encourage you to display this charter in your workplace.

- **About Carers in Hampshire**

This chapter gives an overview of who Hampshire's carers are, what they value most and what challenges they face.

- **How Carers Access Support**

There are various types of support and services that are currently available to carers in Hampshire, such as voluntary services, a carer's assessment from Adults' Health and Care, carer breaks and respite. This chapter provides an overview of these and explains how carers can access them.

- **Key Aims: Identifying and Recognising Carers**

Many people who help and support a family member or friend do not recognise themselves as carers. This means that they miss out on the support that is available to them. This chapter looks at how we plan to improve the ways we identify and recognise carers over the next five years, to ensure that more carers know where and how to access support.

- **Key Aims: Carers' Physical Health and Emotional Wellbeing**

Carers are at an increased risk of poor physical and mental health because they often put the needs of the person they care for before their own. This chapter outlines how we plan to improve the ways in which carers can access health services, training and carer support.

- **Key Aims: Having a Life Alongside Caring**

Access to employment, education and leisure are a key part of having a life alongside caring. These opportunities enable carers to enjoy good physical health and emotional wellbeing and prevent social isolation. In this chapter we describe how we want to improve and increase these opportunities for carers by 2023.

- **Key Aims: Young Carers and Young Adult Carers**

For carers aged under 25, caring responsibilities are more likely to impact their physical health, emotional wellbeing and opportunities for social interactions. The type of care that they provide can also sometimes be inappropriate for their age. For young adult carers aged 16-25, there is also a risk that caring could negatively affect their opportunities for education and employment. This chapter summarises the steps we will take to better support young adult carers aged 16-25 to develop a life outside of caring and to fulfil their potential.

- **Key Aims: Seldom Heard Carers**

We are committed to identifying and recognising people with caring responsibilities who do not think of themselves as carers, to ensure that all carers are aware of the information and support that is available to them. This chapter looks at how we plan to reach those carers who come into contact very infrequently with health professionals and voluntary organisations, if at all.

- **Carers Directory**

This is a short directory containing just some of the resources and organisations that are available to carers, such as online information guides, care technology, Personal Assistants in Care, voluntary organisations that support and work with carers, carer's assessments and support from Hampshire County Council.

- **Appendix: National Policies and Guidelines for Supporting Carers**

The appendix is a brief look at the key national documents that relate to carers, their importance within our communities and the need to better support them.

2. Introduction and Vision

Carers add a significant amount of value to our society. Our health and social care systems in Hampshire and in the UK rely heavily on unpaid carers. Without their carers, many people would not be able to live their lives as they do at present. The value of the contribution made by carers in the UK is now estimated to be £132 billion each year¹.

Our population, both within Hampshire and across the UK, is on average living much longer. This means that the numbers of people requiring care and support will continue to rise. We are also experiencing continued pressures on public spending. This is why it is more important than ever that we support carers in their caring roles.

We want carers of adults in Hampshire to enjoy good physical and mental health, and to feel supported as carers. This strategy explains how social care, health organisations and the voluntary sector will work together with carers over the next five years to achieve this. The information in this strategy is intended for anyone with caring responsibilities and those in health, social care and voluntary organisations who work with and support carers.

This strategy is a living document that will be reviewed on a regular basis and updated as needed.

Who is a Carer?

Anyone can become a carer at any time, regardless of their age, for either a short time or for a longer period. This can include children and young adults aged up to 25 years.

Some carers might care for more than one person, such as a child as well as their own parent. This is called 'sandwich caring'. An older couple may also care for one another, which is called 'mutual caring'.

In this strategy, a carer is someone who helps another person, usually a relative or friend, in their day-to-day life. This is not the same as someone who is paid to be a care worker, or someone who volunteers as a carer through a voluntary organisation. A carer may help the adult they care for by:

- Assisting them with their personal care
- Completing household tasks
- Helping them to manage their finances
- Providing emotional support
- Planning and taking them out for leisure activities, such as an outing to a park.

¹ Carers UK: Valuing Carers 2015

How has this Strategy been Developed?

To develop this strategy, we worked with carers, health and social care professionals, and voluntary organisations that support and work with carers, and asked for their opinions to draw upon their expert knowledge.

This work first began after a consultation event with carers in July 2016.

We established a Joint Carers Strategy Group to make sure that everyone's voice was heard and included in this strategy. The Joint Carers Strategy Group has met regularly since this work first began and it will continue to do so, because we understand that carers' needs may change over time.

Next Steps

To ensure that the key aims of this strategy are met, a Strategy Implementation Group will be established and will review these key aims on an ongoing basis. It will develop action plans and will work together with Hampshire County Council, health services and voluntary organisations that have signed up to this strategy. These action plans will include more detail about how we will achieve the key aims listed in this strategy, and progress will be monitored by the Strategy Implementation Group.

The Hampshire Joint Carers Strategy is supported by Hampshire County Council's Children's Services Young Carers Strategy and the County Council's Adults' Health and Care Strategy.

These documents can be found on the County Council's website at www.hants.gov.uk

Vision

The success of implementing this strategy lies firmly in a collaborative approach which brings together carers, health and social care professionals, and the voluntary sector.

The Joint Carers Strategy Group provided the opportunity for representatives of different organisations to work alongside carers to develop the following vision:

To work in partnership with carers to establish and coordinate easily accessible support across Hampshire:

- Identifying those who help or support friends and family members
- Giving them timely access to information and help offered in their local community, by health and social care professionals, charities, and government organisations
- Assisting carers to incorporate their caring role into a healthy and fulfilling life.

Through extensive consultation with carers in Hampshire, we have examined a number of key areas that are important for carers and we have built upon this vision and established a number of strategic priorities. These are covered in the following chapters.

3. Carers Charter

We developed a Carers Charter based on four key principles for supporting carers. Our aim is for all organisations that work with carers to adopt this charter and promote its principles. If you work with carers, then we encourage you to display this charter in your workplace.

Hampshire Carers Charter

Who is a carer?

A carer is an unpaid person providing practical or emotional support to someone else, who may be a parent, partner, other relative, friend or neighbour.

Hampshire County Council and NHS Hampshire are committed to four key principles that form the basis of their support to carers.

Principle 1

We will recognise and respond to your needs as a carer, and:

- Provide appropriate services to support you as a carer
- Take into account your personal needs and preferences
- Not assume that you are willing, or able, to continue to provide the same level of care ongoing
- Encourage you to consider your own needs, interests, relationships and your wider family including any other commitments you have.

Principle 2

We will recognise your expertise, knowledge and the important role that you play, and:

- Listen to you without bias or prejudice
- Take your worries and concerns seriously
- Recognise that you have relevant and important information about the person you care for
- Value and respect your opinion and, where necessary, keep it confidential
- Take your views into account when decisions are made about the person you care for
- Share information with you about the person you care for whenever this is helpful and possible.

Principle 3

We will welcome your involvement in care, and:

- Involve you in planning the care for the person you support
- Give you a copy of any care plan for the person for whom you care, with their agreement. This will state the responsibilities of all the people who are involved in providing care
- Give you information about what to do to help the person you care for and who to contact if you need help or advice
- Give you relevant information about the way our service works
- Discuss with you if you wish to continue with particular caring roles.

Principle 4

We will value your involvement in the development of our services, and:

- Give you the opportunity to state your views on the quality of our services
- Give you the opportunity to be actively involved in the planning, development and evaluation of services
- Inform you of service developments and give you adequate notice of meetings, consultation periods and other relevant events.

4. About Carers in Hampshire

In the 2011 Census just over 10% of the Hampshire population identified themselves as being a carer, providing unpaid care to family members or others because of long term poor physical health or mental health, or disability or old age. The 2011 Census also showed that 20,000 more people identified as carers when compared to the 2001 Census.

Of the nearly 133,000 people who identified as carers in Hampshire in the 2011 Census, approximately:

- 70% of carers provided 1-19 hours of unpaid care per week
- 10% of carers provided 20- 49 hours unpaid care per week
- 20% of carers provided 50 hours or more of unpaid care per week.

When looking at the different ages of carers in Hampshire, the 2011 Census showed that:

- 4,000 people under the age of 18 identified as carers
- People aged over 65 provided almost 25% of all unpaid care in Hampshire
- 40% of carers aged over 65 provided more than 50 hours of unpaid care per week.

The size of the older population in Hampshire is projected to increase. This will mean a corresponding increase in the number of older carers². Older people aged 65 and over make up approximately 20% of Hampshire's population and 17% of the national population. The proportion of the population aged 85 years and over is expected to increase by almost 30% by 2023, to over 54,000 people³.

Given reduced funding in the public sector, the role of carers will become even more important to ensure that people maintain independence and are supported to live in their own homes⁴.

² Hampshire Joint Strategic Needs Assessment

³ Census 2011

⁴ Hampshire Joint Strategic Needs Assessment

Percentage of people per age group who provide unpaid care

	Percentage of people aged 0-15 who provide unpaid care	Percentage of people aged 16-24 who provide unpaid care	Percentage of people aged 25-34 who provide unpaid care	Percentage of people aged 35-49 who provide unpaid care	Percentage of people aged 50-64 who provide unpaid care	Percentage of people aged 65+ who provide unpaid care
Hampshire	2%	8%	12%	22%	40%	26%
Basingstoke and Deane	2%	8%	10%	22%	37%	26%
East Hampshire	2%	7%	11%	22%	39%	26%
Eastleigh	2%	8%	12%	23%	40%	27%
Fareham	2%	8%	12%	23%	40%	27%
Gosport	3%	10%	14%	24%	37%	26%
Hart	1%	7%	9%	18%	37%	26%
Havant	2%	10%	15%	25%	40%	27%
New Forest	2%	9%	12%	25%	43%	29%
Rushmoor	2%	8%	12%	21%	35%	23%
Test Valley	2%	9%	12%	23%	40%	28%
Winchester	2%	6%	11%	22%	42%	26%

Source: 2011 Census

The responsibility of being an unpaid carer can sometimes affect an individual's career by causing a carer to:

- Reduce their working hours
- Change their career
- Take a break from their career
- Give up work completely.

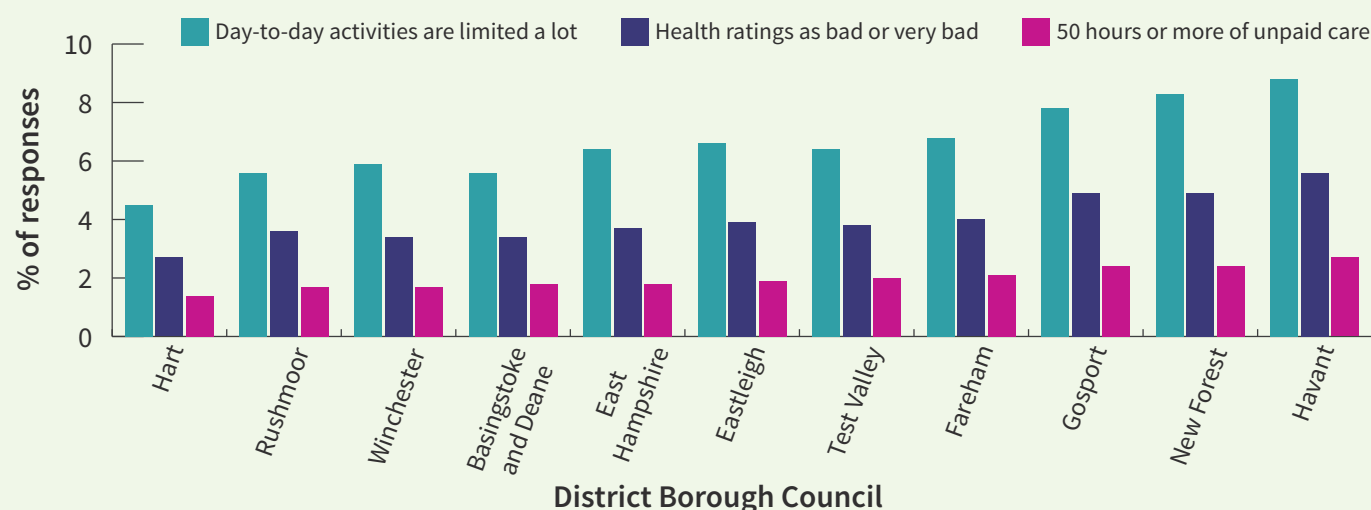
In addition, a reduced income may cause further pressure and stress.

The chart below, taken from the 2011 Census, shows the percentage of carers in each Hampshire district borough who:

- provided 50 hours or more of unpaid care per week
- felt that their caring responsibilities limited their day-to-day activities a lot
- had health ratings as bad or very bad

4. About Carers in Hampshire – continued

Provision of 50 hours or more of unpaid care, by health rating and limitations of day to day activities



Source: 2011 Census

Carer breakdown often results in carers needing to be assessed by adult social care. This in turn can further impact health and social care systems. A study from The Children's Society about former young carers showed that 70% of carers suffered from long term psychological effects. The study further showed that 40% had mental health problems. Carers may also need support when they stop being a carer, due to feelings of grief and loss.

More information about Hampshire's population and residents' health needs can be found in the 'Ageing Well' chapter of the Hampshire Joint Strategic Needs Assessment 2017. The online link for this document can be found in the reference list at the end of this strategy.

5. How Carers Access Support

The County Council, health services and the voluntary sector in Hampshire are committed to supporting carers. This includes connecting carers to local groups and activities within their communities that support carers with:

- advocacy
- buddying and befriending
- access to employment and training
- volunteering opportunities
- having breaks from caring.

To determine a person's eligibility for social care, the County Council's Adults' Health and Care Department works in a strengths based way. This approach is supported by the Care Act 2014 and focuses on helping people to live as independently as possible within their communities. This includes making the most of the support that a person may already have access to from family, friends and their community. Supporting a carer in a strengths based way allows them to be more in control of their own physical health and mental wellbeing, and helps them to develop their strengths and be more socially connected. This in turn can also help delay the development of further needs.

By working in a strengths based way, we can also ensure that our services are increasingly focused on those with the greatest needs and least ability to pay.

A directory of some of the services that provide information and support for carers in Hampshire can be found in the Carers Directory on page 25 of this strategy. These services include voluntary organisations that support carers, Personal Assistants in Care, care technology services, carer respite services, and information services provided by a range of organisations.

Any carer who cares for a Hampshire resident can receive a carer's assessment from Hampshire County Council's Adults' Health and Care Department. Additional support may be available to carers who meet the eligibility criteria outlined in the Care Act 2014, depending on the individual's strengths and needs.

Information about how to access a carer's assessment and eligibility under the Care Act is also available on the Hampshire County Council website at www.hants.gov.uk.

All of these services and more can be found on the Connect to Support Hampshire website at www.connecttosupporthampshire.org.uk, including services that can directly meet the needs of the person being cared for.

Carers have identified that good quality and flexible breaks from caring are fundamental to their wellbeing. This allows carers to see friends, maintain their hobbies, go to school, college or university, stay in employment, and attend appointments.

This support was traditionally provided through residential respite (temporary) care. It now comes in many forms and could result from a carer's assessment, or could be provided as part of the support planning process for the person who is being cared for. These include:

- being able to pay a friend or family member through Direct Payments to look after the cared for person
- using the Shared Lives or Take A Break schemes.

More information about all of these options can be found in the Carers Directory on page 25 or at www.hants.gov.uk.

6. Key Aims:

Identifying and Recognising Carers

Many people do not identify as a carer. They see themselves as a relative, friend or neighbour who is helping out. This means that many carers are not aware of the support that is available to them, such as a carer's assessment from adult social care. Carers should be supported to understand their legal rights and have access to information and advice as early as possible to make informed decisions.

This key aim is also outlined in the national Carers Strategy: Second National Action Plan 2014-2016 (refer to the Appendix on page 30).

GP practices, community nurses and social workers are often the first point of contact for carers seeking help and advice. However, data shows that of the total number of carers in Hampshire, approximately only 1% are registered as a carer with their GP practice.

The County Council is working with a number of GP practices to ensure that GPs and surgery staff signpost patients to the Connect to Support website to gain information and advice about what care and support is available throughout Hampshire. A range of 'community connector' roles are also being developed and will work together with health services, adult social care and local voluntary organisations to improve how people are put in touch with support in their communities.

The Royal College of General Practitioners has developed guidance for GPs on how best to support carers. These guides are available in the online learning resources section of the Royal College of General Practitioners website at www.rcpg.org.uk. GPs can also contact Princess Royal Trust for Carers in Hampshire or Carers Together, which are listed in the Carer Directory on page 25, for information on how surgeries can improve their support for carers.

Key Aims – Identifying and Recognising Carers

Where we are (2018)	Where we want to be (2023)	How we will get there
Health and social care professionals should be able to recognise carers, understand carers' issues and provide related information/support that may help carers in their caring role. This is not consistent across the county.	Consistently supporting people, with caring responsibilities, to identify themselves as carers so they can access the information, advice and support that is available.	By working with key health, social care professionals and voluntary organisations to identify and develop suitable ways to identify and support carers.
Carers should be able to obtain information about carers support services from their health providers as well as from other places.	All health providers should signpost carers to appropriate information, advice and support. Some GP surgeries may provide this through carers' clinics, or other initiatives to support carers.	Hampshire County Council and health providers need to work closely together to ensure staff are appropriately trained and support is consistent across the county.
Carers are not always aware that they are entitled to information, advice and support or a carer's assessment.	Every carer that comes into contact with professionals will be informed that they are entitled to a carer's assessment of their own needs or offered signposting for further information and advice.	Ensure carers understand that support is available and the different options for assessment e.g. face to face, telephone, online 'wellbeing checks'.
Young carers in the household are not always identified.	When a personal assessment takes place, young carers in the household should be identified and referred to Children's Services. They should also be made aware of their entitlement to a young carer's assessment.	Increased training, publicity and awareness of young carers. A clear process in place to ensure that young carers are identified and appropriate referrals are made.
Carer's assessments are often happening when a carer presents themselves at crisis point.	Better systems in place to ensure carers are offered appropriate support on a proactive basis, focusing on early intervention and prevention.	Develop further training opportunities for all health and social care professionals and other key stakeholders to raise awareness of carers' rights, responsibilities and the ability to recognise and support carers and provide them with relevant information and advice.
Carers with multiple caring roles (sandwich carers) are often under significant strain due to their competing caring roles.	Carers with more than one caring role are recognised and considered when planning support.	Carers involved in planning individual care packages including families and young carer involvement. Carers involved in strategic planning.

6. Key Aims:

Identifying and Recognising Carers – continued

Case Study – GP Initiatives

North East Hampshire and Farnham CCG and Princess Royal Trust for Carers in Hampshire

According to an independent consultation with carers undertaken by Healthwatch Hampshire, carers feel that surgeries, including nurses, GPs, and receptionists, are a main source of information for them.

It was recognised that surgeries needed to do more than identify people who were caring for others. They also needed to share information with carers about the support groups and local government services that were available to help them.

This led to the start of the GP Pilot Project in North East Hampshire and Farnham.

The key outcomes from the project have been:

- Increased identification of carers through GPs.
- A form for carers to complete at surgeries, which allows them to be registered as a carer on their medical file. The form is used to automatically refer the carer to Princess Royal Trust for Carers in Hampshire (PRTCH), a voluntary organisation for carer support and information.
- The surgeries all began raising more awareness about carers. This was done by sharing leaflets that asked carers to identify themselves as a carer to their GP. Some surgeries hosted day-long events with a carer support worker who also gave talks to surgery staff.
- An information pack for carers has been created and is available at the surgeries.
- The recognition that the profile of carers needed to be raised within GP practices. A sub-group has been created to explore how to do this for surgery staff and carers.

Carers TogetherGP Carers Initiative

Carers Together also runs an annual GP Carers Initiative to encourage carers to register with their GP practices and to support carers that have been identified.

7. Key Aims:

Carers' Physical Health and Emotional Wellbeing

Carers often put the needs of the person they care for before their own. This is why carers are more likely to have poor physical and mental health. It is crucial that carers are supported to maintain their own physical health and emotional wellbeing, to enable them to continue in their caring role.

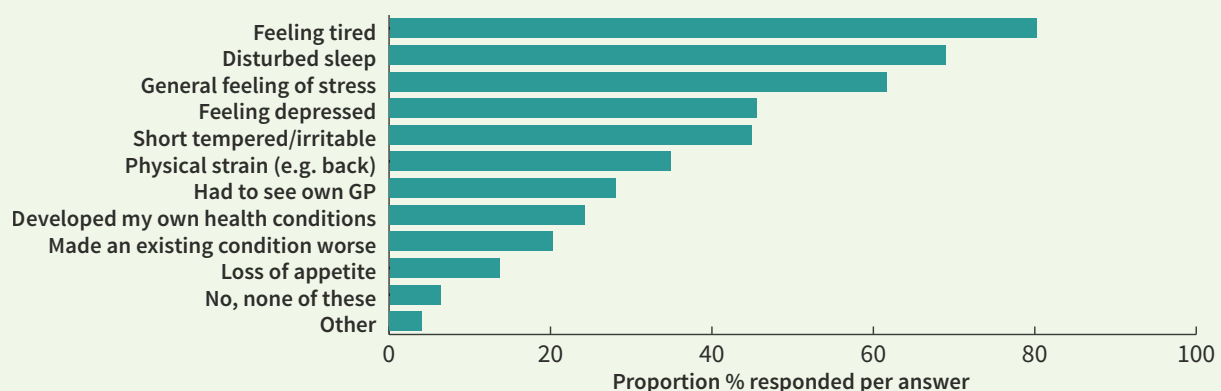
Supporting carers to stay healthy is also a key aim of the national Carers Strategy: Second National Action Plan 2014-2016 (refer to Appendix on page 30).

Research shows that caring has consequences for carers' mental health. In a 2015 report by Carers UK, 84% of carers said they felt more stressed, 78% said they felt more anxious, and 55% reported that they had suffered from depression as a result of their caring role. This showed an increase from the previous year, where 73% of carers surveyed reported increased anxiety and 82% reported increased stress since taking on their caring role⁵.

In 2014 the NHS used six questions to measure carers' quality of life. These were based on occupation, control, personal care, safety, social participation and encouragement and support. In this study the quality of life reported for carers in Hampshire was significantly lower than the national average for England⁶.

A national carers survey in 2016⁷ asked carers what physical health and emotional wellbeing concerns they had as a result of their caring responsibilities. The results are shown in the graph below

Carers' perspectives of the personal impact of their caring roles



Source: SACE, NHS Digital

In 2016, only a third of the carers in England who had a carer's assessment from adult social services in the previous year felt that the support they needed to look after their own physical and mental health alongside caring was properly considered⁸. These surveys show just how important it is to improve how we support carers' physical health and emotional wellbeing.

5 Carers UK: State of Caring 2015 Report | 6 Personal Social Services Survey of Adult Carers in England, 2014-15

7 Personal Social Services Survey of Adult Carers in England (SACE) 2016-17 | 8 Carers UK: State of Caring 2016 Report

7. Key Aims:

Carers' Physical Health and Emotional Wellbeing – continued

Key Aims – Physical Health and Emotional Wellbeing

Where we are (2018)	Where we want to be (2023)	How we will get there
NHS health providers and primary care teams do not always recognise and identify carers or offer them support when carers come into contact with them.	NHS health providers and primary care teams are consistently registering carers and able to refer them to appropriate support.	Offer NHS health providers and primary care teams training to use the appropriate systems to register and signpost them to carer specific information and advice.
Carers are not always offered appropriate training, advice or support, to meet their needs to enable them to continue in their caring role.	Carers are able to access the training that they need to support them in their caring role. For example, this may include: <ul style="list-style-type: none"> • Back care • Moving and handling • Dealing with medication • Dealing with stress • First aid • Benefits and financial planning • Specific conditions (e.g. dementia) • Behaviour awareness. 	Carers service specifications will include offering appropriate support for carers.
Carers would like more flexibility from NHS health providers and primary care teams when they need to book an appointment.	NHS health providers and primary care teams will recognise the needs of carers when offering appointments.	When a patient is registered as a carer with their GP they will be: <ul style="list-style-type: none"> • Offered more flexible appointments, including longer appointments and choice of time/date. • Given priority as appropriate • Able to bring their cared for person if necessary.
Carers are not always aware that they are entitled to flu jabs and health checks to support them in their caring role.	Carers are identified and informed about: <ul style="list-style-type: none"> • Free flu jabs • Carers' health checks • Carers' information and advice services • Carer's assessments • Carer's emergency plans. 	GPs, pharmacies and other health professionals to work more closely together to identify carers, promote 'universal' support available and signpost them to appropriate support.
Carers are not always aware of the Carers Emergency Planning Service or other contingency planning options, to support carers in the event of a crisis.	All carers should be informed of these services once they have been identified as a carer.	Professionals to promote the emergency plan and ensure carers are signposted to Hampshire County Council's commissioned emergency carers service delivered by Princess Royal Trust for Carers in Hampshire where appropriate.
Isolation has been identified as an issue for carers in Hampshire. Drop-ins exist in some areas and counselling is available through italk, a free service for patients with depression, anxiety or stress delivered in partnership between Solent Mind and Southern Health NHS Foundation Trust.	Access to carer support and mental health support in the community, including providing services for carers who work during the day. Greater awareness of the counselling services that are available in Hampshire. Improved carer knowledge of how technology can help to keep in touch with others.	Review the current provision and plan services to ensure we have appropriate support across the county. Develop ways of ensuring carers can have greater contact with others using technology.

8. Key Aims:

Having a Life Alongside Caring

Access to employment, education and leisure are a key part of having a life alongside caring. These opportunities enable carers to enjoy good physical health and emotional wellbeing and prevent social isolation.

These key aims are also identified by the national Carers Strategy: Second National Action Plan 2014-2016, (refer to the Appendix on page 30).

The importance of breaks from caring (respite) is discussed in more detail in the 'How Carers Access Support' chapter on page 11. This chapter, together with the Carers Directory on page 25, also provides information about the different types of breaks that are available to carers.

It is also important that carers are made more aware of the benefits of care technology to support them. In 2017 a survey by Carers UK showed that while 70% of carers use technology in their everyday lives, only 30% use it in a health or social care context. Once the possibilities of care technology were explained to the carers who participated in the survey, over 50% said that they believed care technology would be very useful to them. Care technology is also playing an increasing role in how social care and health services support carers and those they care for to stay independent and well. For more information about care technology, refer to the Carers Directory on page 25.

8. Key Aims:

Having a Life Alongside Caring – continued

Key Aims - Having a Life Alongside Caring

Where we are (2018)	Where we want to be (2023)	How we will get there
Carers do not always know where to go for advocacy and support to balance their work or education with their caring responsibilities. Carers are not always supported when they need to take career breaks as a result of their caring role.	Carers who are in work or education will be able to easily access advocacy support and will know where to look for information relating to flexible working and career breaks.	By ensuring that when social care professionals are undertaking carer's assessments that they link eligible carers to the Care Act advocacy services provided through the County Council. By ensuring that more carers have access to independent (peer) advocacy support. For carers who are not eligible for Care Act advocacy services, they will receive appropriate support from local voluntary sector services.
Carers are not always asked about their educational or employment goals and how they can be supported to maintain or achieve these.	A discussion around education and employment needs will be a key part of carer's assessments and support planning. It will be acknowledged that carers must be supported to achieve their potential in terms of work and education.	Acknowledging carers who work or are in education and employment when undertaking carer's assessments.
Carers do not always feel that they have enough time to themselves to participate in social or leisure activities.	Carers' individual needs will be listened to and the need for personalised respite time will be a key feature of support planning (following a carer's assessment or an assessment for the person they care for).	Ensure that carer's assessments recognise the need for carers to take breaks from their caring role and that carers are aware of the services available to support them to have a break from their caring role including how they could use care technology. Utilise services such as Wellbeing Centres or local information points.
Carers would like to be clearer about the options available for them to have a break.	New more creative offers for having a break, as well as residential options, will be developed. These will be clearly publicised.	Hampshire County Council is currently reviewing the options for providing carers breaks and wants to involve carers in developing these options.
Carers cannot always participate in leisure or social activities with the person they care for as they so not always cater for carers. There may also be other constraints such as financial reasons, lack of transport, or no respite.	For facilities to be promoted and available for both carer and cared-for person to take part in activities together if they wish to.	Investigate ways of developing transport, respite and facilities for both the carer and cared-for person, to ensure carers are able to take part in activities alongside the person they care for.
Carers have identified that available carers services are often during working hours of 9am-5pm, so they miss out on valuable support.	Carers services and employers to take working carers needs into account. Carers services to provide options for support in the evenings and on weekends.	Raise awareness of working carers issues with local carer groups and employers. To ensure carers are aware of their rights as a working carer, and that they can request flexible working from their employer.
Following an assessment by Hampshire County Council, some carers are able to access the care technology service.	Carers understand and use care technology/assistive technology more extensively to support them in managing their caring role.	Raise awareness of care technology opportunities amongst carers. Include 'benefits to carers' in any care technology training events for health and social care staff.

Key Aims - Having a Life Alongside Caring

Where we are (2018)	Where we want to be (2023)	How we will get there
Some older carers do not feel supported as they get older and may experience both a financial strain, and impact on their physical and/or mental health.	Increase in take up of support and respite as people get older.	Ensuring that older carers are consulted and involved in planning carers support.
Lack of transport, especially in rural areas, can be a barrier for carers to fulfil their caring responsibilities.	Ensure commissioners and health and care professionals fully understand and maximise the use of the transport resources that are available to support carers.	Raise awareness of the gaps in transport services and for all departments in Hampshire County Council to work better together when planning transport services.

Case Study – Telecare Equipment

(Hampshire County Council and the Argenti Telehealthcare Partnership)

Mrs H lives with her husband, Mr H, both are retired and have enjoyed full, active lives. Following Mr H's diagnosis of dementia, Mrs H has become his main carer. Mr H had to stop driving, which has left him feeling frustrated and trapped. Mr H wants to maintain his independence in his community.

Mrs H was worried that her husband would get lost when he was out on his own. So she accompanied him everywhere he went and locked the doors so that he couldn't go outside without her. Over time, Mrs H felt increasingly pressured in her caring role and struggled to support her husband. A carer's assessment from adult social care showed that Mrs H needed support to avoid breaking down in her caring role.

Mr H was assessed by the County Council's care technology team, which provided him with a tailored care technology solution. This included a small mobile device with GPS tracking to help instantly locate Mr H if he became disorientated and lost when out in his community. The device could also detect if he suffered a fall. Door monitors were also installed to alert Mrs H if Mr H was to leave the house at inappropriate times.

Mrs H's anxiety has been significantly reduced as a result as she is confident that her husband has regained his independence. She is able to go out alone and no longer feels a need to lock doors. Mr H feels liberated and is able to attend his regular social gatherings again.

Mrs H can carry on in her caring role in the way she wants, without the need to introduce further care or restrictions on her husband. Crucially, the risk of Mrs H not being able to support her husband has been greatly reduced.

9. Key Aims:

Young Carers and Young Adult Carers

Young adult carers are carers who are aged between 16 and 25 years. Hampshire County Council's Children's Services has a responsibility to all young carers until they reach the age of 18, regardless of the age of the person that they care for. The County Council's Adults' Health and Care Department has a responsibility to support carers from the age of 16 upwards. This chapter covers young adult carers aged 16-25 years.

The Hampshire Young Carers Strategy outlines the responsibilities that Children's Services has to young carers under the age of 18. This strategy sits alongside the Hampshire Joint Carers Strategy and can be found on the Council's website at www.hants.gov.uk.

The table below shows which County Council department a carer can refer to for support, depending on their own age and the age of the person they care for.

Hampshire County Council Departmental Responsibilities*

Age of carer	Age of Person Being Cared for	County Council Departmental Responsibility
Under the age of 16	Any age	Children's Services
16 years or older	Under the age of 18	Children's Services
16 years or older	18 years or older	Adults' Health and Care

*Please note the actual duties are not divided between Adult's Health and Care and Children's Services in legislation.

For carers aged under 25, the type of care that they provide can sometimes be inappropriate for their age. Being a young carer or young adult carer can also impact on their education, in addition to their physical health and emotional wellbeing and social life. Data shows that young carers often have significantly lower educational attainment at GCSE level compared to their peers who are not carers.

Younger carers are also less likely to identify as carers than adults. It is essential for young carers and young adult carers to be supported to develop a life outside of caring and to fulfil their potential. This may include opportunities for education, training, employment, volunteering, socialising or leisure.

There are also additional issues faced by young adult carers aged 16-25 due to going through a transitional phase in their lives. These issues can include financial hardship, struggles with educational commitments due to their caring responsibilities, and not being able to access employment. To address this, the County Council is improving how its Children's Services and Adults' Health and Care departments work together to support young adult carers; this work is being led by the County Council's Independent Futures Team. For more information about how organisations should work together to safeguard children and young people, refer to the 'Working together to safeguard children'

document available on the gov.uk website. The County Council's Adults' Health and Care Department has a responsibility to identify young carers and refer to Children's Services when appropriate. Children's Services also has a responsibility to make Adults' Health and Care aware of young adult carers.

We want to identify young and young adult carers as soon as possible to ensure that they are not undertaking inappropriate and harmful caring roles. All young carers aged under 16 are entitled to a young carer's assessment from Children's Services, and all young adult carers aged 16-25 are entitled to a carer's assessment from Adults' Health and Care.

Key Aims – Young Adult Carers (age 16-25)

Where we are (2018)	Where we want to be (2023)	How we will get there
Young adult carers may not always be recognised as a carer and that the caring role they provide is not appropriate.	Young adult carers are identified at, or before, the point of assessment for the cared for person and are made aware of all services available for carers.	Awareness training for professionals. Better data recording systems/ processes to be implemented.
Young adult carers do not always receive a carer's assessment in their own right.	All identified young adult carers are offered a carer's assessment.	Ensure young adult carers are aware of the right to a separate carer's assessment. This will be achieved by increased training for frontline staff.
Young adult carers may not always be signposted to the most appropriate support, such as a young carers project.	A clear pathway is in place to ensure young adult carers are signposted to appropriate support.	Develop a Memorandum of Understanding between Adults' Health and Care and Children's Services and ensure a revised joint working protocol is put in place.
Young carers are not always considered as a key care partner and are excluded from key conversations. There is feedback from young carers that they sometimes feel patronised or ignored in the decision making process.	Young adult carers will be considered in the context of their whole family, not in isolation. Young adult carers and their families are the experts in their own lives and as such must be fully involved in the development and delivery of support services.	Training for Social Workers, case workers and others will be available. Ensure that Adults' Health and Care staff are aware of young carer's needs and ask appropriate questions in the cared-for person's needs assessment.
Specific support for young adult carers has been established in certain areas of the county. This is not consistent county wide.	Transition to adulthood for all young carers is supported. The challenges faced by young adult carers (16-25) around education, training, employment and independence are responded to.	By raising professional awareness of the risks and challenges faced by young adult carers around low aspirations and the impacts of caring responsibilities on take up of further education, training and employment. Develop a clear pathway to ensure young carers are signposted or referred to appropriate support.

9. Key Aims:

Young Carers and Young Adult Carers – continued

Case Study –

Initiatives for Young Carers and Young Adult Carers

There are various organisations and initiatives across Hampshire that specifically support young carers and young adult carers. Young carer projects across Hampshire work with schools to help identify young carers, offer early intervention, and support in their educational attainment and emotional wellbeing. Young carers are supported to improve their motivation, self-confidence, attendance and engagement with their education.

Winchester University is developing an outreach programme for young adult carers in partnership with Healthwatch Hampshire, Hampshire Young Carers Alliance (HYCA), Princess Royal Trust for Carers in Hampshire (PRTCH) and the Carers Trust. The university is also working to enhance support for students who care for family members with long-term illnesses or disabilities.

The PRTCH is working with young carers projects in Winchester and Eastleigh to pilot a support group for carers aged 16-25. This initiative is aimed at helping young carers to transition into adulthood and be an adult carer. For carers aged 18 and over, the initiative provides support for topics such as CV writing, sexual health and attending higher education.

Volunteer befrienders from Romsey Young Carers, which is part of HYCA, supports young carers with extra tuition to pass exams. Young carers are also supported to attend college open days and provided with help for college applications and to develop their interview skills.

As well as young carer and youth groups, Romsey Young Carers also runs a 'moving on group' for 16 to 18 year olds. Group members decide what activity they would like to do each month and are supported by staff and volunteers. The group is encouraged to form links and provide peer support to each other. When they reach 18, some young adult carers return as volunteers to support the younger groups. Some of the support provided includes:

- Advocating for support for the whole family to enable young carers to continue their education, training or apprenticeship opportunities
- Referring young carers for benefits advice, which may result in additional funding for the carer's family.

10. Key Aims:

Seldom Heard Carers

We know that many people who help or support a family member or friend do not think of themselves as being a carer. Some people may be identified as a carer by a health professional, such as a GP, when they use health services. Others may realise that they are a carer through information provided by voluntary organisations. But some people come into contact with these services very infrequently, if at all. They are known as 'yet to be reached' or 'seldom heard' carers.

While the majority of Hampshire's population is white British, the 2011 Census recorded just over 8% as being of other ethnic origins. Asian ethnic groups make up the largest non-white categories in Hampshire. Rushmoor has the largest non-white population at 15.3% (up from 4.4% in 2001), mostly due to a growing Nepalese population.

Carers within Hampshire's Asian and Nepalese communities are often seldom heard. Other under represented groups where carers are often seldom heard include:

- Military carers, including military young carers and military young adult carers
- Carers from travelling communities
- Lesbian, gay, bisexual and transgender (LGBT) carers
- Carers caring for people with mental health problems
- Carers caring for people with substance abuse problems
- Young carers and young adult carers
- Rural carers
- Working carers (who may not be able to access traditional '9-5' support).

It is important to work with groups who do not traditionally identify members of their communities as carers. This ensures that information, support and services are provided in an appropriate way and are accessible to all. For seldom heard carers, it is especially important that these carers are made aware of carer breaks, which are discussed in more detail in the 'How Carers Access Support' chapter on page 11 and the Carers Directory on page 25.

Some work has already been undertaken in North East Hampshire and Farnham to identify the specific issues that impact some of the groups listed above. This is outlined in the Healthwatch Hampshire report 'Support for carers: Exploring support requirements for carers in response to engagement carried out in 2016'.

This Hampshire Joint Carers Strategy recognises all carers, including not yet identified carers.

10. Key Aims:

Seldom Heard Carers – continued

Key Aims – Seldom Heard Carers

Where we are (2018)	Where we want to be (2023)	How we will get there
Hampshire County Council Adults' Health and Care department is currently working with a number of community groups across Hampshire to co-ordinate services better.	Community groups will have support to identify carers within their communities and signpost them to appropriate information, advice and support.	Make connections and work together with local communities to identify hidden and hard to reach carers and offer support in a way that is appropriate and accessible within the community.
Accessible information is available to carers but not always offered or provided. Information could be improved by working together with local communities.	Information is available, offered and publicised in local communities, in appropriate formats.	Work with local communities to ensure that information is helpful and accessible to all groups. Use a variety of resources to raise awareness, e.g. internet, local meetings, community and outreach work, accessible posters and leaflets. Examine ways of providing interpreters.
The offer of a carer's assessment is not always taken up in some communities.	Increased uptake of carer's assessments from seldom heard carers.	Work with local communities to ensure the carer's assessment offer is accessible and a useful tool for all individuals within local communities.
Carers do not always feel they are asked how they would like to be contacted or how they would like to express their views.	More carers are able to express their views and contribute to the development of services.	Explore more effective ways of communicating with carers through the new Strategy Implementation Group.
Carers do not always feel they are given appropriate information and support when caring for someone who is terminally ill.	Carers who are looking after someone who is terminally ill are given the appropriate support and information to know what to expect at the end of their caring role and to continue to be supported after end of life.	Continued training for practitioners for end of life care.

11. Carers Directory*

Listed below are just a few of the resources and services that provide information and support for carers in Hampshire. Additional services can be found on the Connect to Support Hampshire website, including services to directly meet the needs of the person being cared for.

* Please note the providers listed below are delivering these services at the time of writing the strategy and may change in the future. For up to date information please visit the Connect to Support Hampshire website.

Information guides available online

**Connect to Support Hampshire at
www.connecttosupporthampshire.org.uk**

Connect to Support Hampshire is an online information directory and advice guide for Hampshire residents to find out about local groups, activities and services within their local community. Connect to Support Hampshire provides information and advice for a range of topics that relate to carers and their caring responsibilities.

**The Hampshire County Council website at
www.hants.gov.uk/socialcareandhealth/adultsocialcare**

The County Council's website is full of information about social care services and general advice for carers. By clicking on the 'Support for Carer's' tab, carers can download information packs about: looking after someone; getting a carer's assessment, young carers; assistance for caring while working; and registering as a carer with your GP.

**The Family Information and Services Hub (FISH Hub) at
fish.hants.gov.uk**

The FISH Hub was established by the County Council's Children's Services in May 2017 and contains several useful resources for young carers and those who care for children. This include Hampshire's Local Offer, Hampshire Gateway, the Family Support Service Directory, Spark (for children in care and care leavers), Your Future youth support services, the Family Information Directory (FID) for early years and the Directory of Alternative Provision. The FISH Hub also provides information on services available in Hampshire for children and young people from birth to 25 who have special educational needs and/or disabilities.

11. Carers Directory* – continued

Services for carers

Argenti Telecare care technology

Care technology services can offer reassurance to carers and those they care for by reducing the pressure they are under in a wide variety of ways. Personalised equipment can be provided to suit individual needs, and it can offer peace of mind if an emergency were to arise. Care technology is playing an increasing role in how social care and health services can support carers.

Care technology services can include: environmental monitoring devices for a person's home (to identify gas leaks or fires, for example), devices to detect when a person has fallen or is experiencing an epileptic fit, and other communication aids to help people with care needs to stay safe in their homes and community. Care technology allows carers to easily monitor the person they care for, either directly or via a monitoring centre.

Hampshire County Council may fund the provision of care technology equipment following an assessment which shows that a person has an eligible need for funded care technology.

www.connecttosupporthampshire.org.uk/equipmentforhouse

www.argenti.co.uk

Phone 0345 265 8003

A Personal Assistant in Care

A Personal Assistant in Care assists an individual to live more independently, which in turn supports their carer. Personal Assistants in Care help in various ways, such as providing support at home, with leisure activities or at work, and carrying out a range of duties, not just personal care.

The County Council has implemented personal budgets for those who are eligible following an assessment under the Care Act 2014. One form of receiving these is through a direct payment. People who choose to have a direct payment can use this money to purchase their own care and support from a Personal Assistant in Care. There is a known shortage of PAs across Hampshire and this is delaying some people from using their direct payments to purchase a Personal Assistant in Care. To change this, the County Council and NHS have developed an online PA Finder service. This is a free online service that provides information about employing a Personal Assistant in Care, and allows users to search a local directory to help find for a Personal Assistant in Care in Hampshire.

www.hampshirepafinder.org.uk

Voluntary organisations that support and work with carers

Princess Royal Trust for Carers in Hampshire (PRTCH)

Offering countywide services to carers on information and advice, advocacy, access to training and education, carers hubs, carer clinics, regular support groups, counselling, emergency planning service.

Address: Andover War Memorial Hospital, Charlton Road, Andover, SP10 3LB

Phone 01264 835246/835205 | www.carercentre.com

Carers Together

Offering information and advice, help filling in forms and making appeals, training for carers and professionals, support and advocacy, local support and social groups, support planning and help with direct payments, Take A Break service in some areas (there is a small charge for this), and planning for emergencies.

Carers Together also runs Community Information Cafés around the county which provide information and signposting support.

Address: Hampshire Carers Centre, 9 Love Lane, Romsey, Hampshire, SO51 8DE

Phone 01794 519495 | www.carerstogether.org.uk

One Community (Eastleigh)

Information and signposting, social opportunities, IT and form filling support, emotional support and counselling.

Phone 02380 902404 | www.1community.org.uk/support-at-home/carers-centre

Hampshire Young Carers Alliance (HYCA)

HYCA works with young carer projects across Hampshire. These projects support young carers' educational attainment and wellbeing and help schools to identify and support young carers.

Phone 02380 902465 | www.hyca.org.uk

11. Carers Directory* – continued

Alzheimer's Society

Dementia advisor services for Bordon, Fareham, Gosport, Havant, New Forest, Petersfield

Phone 02392 892034 | hampshireDAservice@alzheimers.org.uk

Andover Mind

Dementia advisor services for Alton, Basingstoke and Deane, Eastleigh, Hart, Romsey, Rushmoor, Test Valley, Winchester

Phone 01264 353363 | dementiaadvice@andovermind.org.uk

Carer's assessments and support from Hampshire County Council over the phone

Adults' Health and Care call centre

0300 555 1386 (out of hours: 0300 555 1373)

If a carer cannot find the information they are looking for online, or would like a carer's assessment, then they should contact Hampshire County Council's Adults' Health and Care call centre.

A carer's assessment will identify what support a carer needs and how they can access this support, whether it's from their family, friends, community or Adults' Health and Care. It can help a carer to understand how to maintain their own health and wellbeing alongside their caring responsibilities. A carer's assessment can be completed over the phone or during a face to face meeting.

Alternatively, a carer may want to request a joint assessment together with the person they care for. Joint assessments are carried out face to face with a social worker.

Information and carer's assessments for young carers are available from Children's Services.

Children's Services

0300 555 1384 (out of hours 0300 555 1373)

12. Appendix:

National Policies and Guidance for Supporting Carers

The role of carers, and the importance of supporting them, is well understood by national Government. As a result, there are several key national documents that relate to carers, which are summarised below.

NHS England's Commitment to Carers 2014

NHS England held a series of engagement events for carers and as a result developed 37 commitments based around the following 8 priorities:

- Raising the profile of carers
- Education, training and information
- Service development
- Person-centered, well-coordinated care
- Primary care
- Commissioning support
- Partnership links
- NHS England as an employer.

Individual Wellbeing Outcomes (Care Act)

- Personal dignity (including treatment of the individual with respect)
- Physical and mental health and emotional wellbeing
- Protection from abuse and neglect
- Control by the individual over their day-to-day life (including over care and support provided and the way they are provided)
- Participation in work, education, training or recreation
- Social and economic wellbeing
- Domestic, family and personal domains
- Suitability of the individual's living accommodation
- The individual's contribution to society.

All of these outcomes are equally important as each other and should be promoted through the Care Act assessment and support planning process.

Care Act 2014

- New rights have been introduced for carers and new duties are in place for local authorities
- Carers have the same rights to an assessment and support as those who they care for
- There is a national eligibility criteria for carers and those who they care for which identifies whether they are entitled to support from the Local Authority with meeting their care and support needs
- Following assessment a support plan should be generated with the carer that sets out how their eligible needs will be met. This may include services funded by the Local Authority and other ways of meeting their outcomes, including from their own resources and support from the local community.

12. Appendix:

National Policies and Guidance for Supporting Carers – continued

Carers Strategy: Second National Action Plan 2014-2016

Hampshire's strategy reflects the key priorities set out in the Carers Strategy: Second National Action Plan 2014-2016. The national plan focuses specifically on progress in four priority areas:

Identification and recognition

- Supporting people with caring responsibilities to identify themselves as carers so they can access the information advice and support that is available
- Carers feeling their knowledge and experience are valued by health and social care professionals
- Involving carers in planning individual care packages and in developing local strategies.

Realising and releasing potential

- Enabling those with caring responsibilities to fulfil their education and employment potential
- Support for young carers and young adult carers
- Support for carers of working age.

A life alongside caring

- Personalised support both for carers and those they support, enabling them to have a family and community life
- Personalising support for carers and the people they support
- Availability of good quality information, advice and support.

Supporting carers to stay healthy

- Supporting carers to remain mentally and physically well
- Recognising the impact of caring on health and wellbeing
- Prevention and early intervention for carers within local communities
- Supporting carers to look after their own health and wellbeing.

NHS Five Year Forward View 2014

- To develop quality markers for carer friendly GP practices that promote carer identification, health checks, flu jabs and referral/signposting to advice and support, in order to reduce carer breakdown and improve carer health-related quality of life
- Help health and social care organisations to support carers, including young carers, to avoid reaching breaking point, so that they, and the cared-for person, will be less likely to end up in hospital
- To find new ways to support carers, building on the new rights created by the Care Act, and especially helping the most vulnerable amongst them
- Work with voluntary organisations and GP practices to identify carers and provide better support
- For NHS staff, to look to introduce flexible working arrangements for those with major unpaid caring responsibilities.

NHS England: An Integrated Approach to Identifying and Assessing Carer Health and Wellbeing 2016

- Supporting the identification, recognition and registration of carers in primary care
- Committing to carers having their support needs assessed and receiving an integrated package of support in order to maintain and/or improving their physical and mental health.
- Empowering carers to make choices about their caring role and access appropriate services and support for them and the person they look after
- Promoting awareness of the needs of carers and of their value to communities
- Encouraging information sharing between health, social care, carer support organisations and other partners to improve carer support.
- Recognising carers as expert care partners, actively involving carers in care planning, shared decision-making and reviewing services
- Promoting the early identification of support needs for carers who are more vulnerable or at key transition points.

13. Reference List

Care Act 2014

www.legislation.gov.uk/ukpga/2014/23/contents/enacted

Care Act 2014 Guidance Easy Read Version

assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/365345/Making_Sure_the_Care_Act_Works_EASY_READ.pdf

Carers UK: State of Caring 2015 Report

www.carersuk.org/for-professionals/policy/policy-library/state-of-caring-2015

Carers UK: State of Caring 2016 Report

www.carersuk.org/for-professionals/policy/policy-library/state-of-caring-2016

Carers Strategy: Second National Action Plan 2014-2016

www.gov.uk/government/uploads/system/uploads/attachment_data/file/368478/Carers_Strategy_-_Second_National_Action_Plan_2014_-_2016.pdf

Carers UK: Valuing Carers 2015

www.carersuk.org/for-professionals/policy/policy-library/valuing-carers-2015

Census 2001

www.ons.gov.uk/census/2001censusandearlier

Census 2011

www.ons.gov.uk/census/2011census

Hampshire Joint Strategic Needs Assessment

www.hants.gov.uk/socialcareandhealth/publichealth/jsna

NHS England: An Integrated Approach to Identifying and Assessing Carer Health and Wellbeing 2016

www.england.nhs.uk/publication/an-integrated-approach-to-identifying-and-assessing-carer-health-and-wellbeing

NHS England's Commitment to Carers 2014

www.england.nhs.uk/wp-content/uploads/2014/05/commitment-to-carers-may14.pdf

NHS Five Year Forward View

www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf

Personal Social Services Survey of Adult Carers in England, 2014-15

digital.nhs.uk/catalogue/PUB18423

Personal Social Services Survey of Adult Carers in England (SACE) 2016-17

digital.nhs.uk/catalogue/PUB30045

Public Health Profiles: Adult Social Care

fingertips.phe.org.uk

Working Together to Safeguard Children 2015 Statutory Guidance

www.gov.uk/government/publications/working-together-to-safeguard-children--2

HAMPSHIRE COUNTY COUNCIL

Report

Committee/Panel:	Health and Wellbeing Board
Date:	7 June 2018
Title:	Update from the Hampshire Districts Health and Wellbeing Forum
Report From:	Councillor Anne Crampton, Chair of the District Forum

Contact name: Cllr Anne Crampton
Email: anne.crampton@hart.gov.uk

1. Recommendation

- 1.1. That the Hampshire Health and Wellbeing Board notes the intention of the Hampshire Districts Health and Wellbeing Forum in focussing resources, for the next six months, to support the development of the new Health and Wellbeing Strategy.

2. Summary

- 2.1. This report provides an update on the work of the District Health and Wellbeing Forum which was set up as a subgroup of the Hampshire Health and Wellbeing Board, to ensure an effective two-way communication between the Forum and its parent Board.
- 2.2. This report highlights a range of approaches that members of the Hampshire Districts Health and Wellbeing Forum have been considering, in helping the Hampshire Health and Wellbeing Board take forward the development of the new Health and Wellbeing Strategy.

3. Future scanning

- 3.1. The Forum met on both the 20th February 2018 and the 24th May 2018, where it considered the future direction from 2018 and in particular, the exploration and development of priority actions under the auspices of 'Healthier Communities'.
- 3.2. Within the existing Strategy, it is clear that there is a clear role for Local Government with a vision of Healthier Communities defined as a "place where people feel safe, and have high quality services". It also reflects the need for "flexible transport links, adequate access to shops and good quality housing".
- 3.3. In identifying what the Strategy intended to achieve, the success factors were identified as working to 'reduce the significant differences between those with the best and worst health in Hampshire'.

- 3.4. Reflecting on this, the Forum recognised that whilst the vision spoke to the 'wider determinants of health' and universal service provision, the ambition of the strategy appeared to be targeted to those with the worst health outcomes.
- 3.5. The Forum considered the distinction between these two very different roles and how we could use this knowledge in shaping the next Strategy.
- 3.6. Our role in tackling the wider determinants of health, such as the inclusion of health and wellbeing policies within Local Plans is well known. Indeed we have provided the Board (December 2017 and March 2018) with strong evidence linking contact and exposure to the natural environment with improved health and wellbeing e.g. improved physical and mental health and reduced risk of cardiovascular disease as well as consistent evidence that having access to recreational infrastructure, such as parks and playgrounds, is associated with reduced risk of obesity among adolescents and increase in physical activity
- 3.7. However our role in delivering specific 'interventions', such as local campaigns or projects to tackle health inequalities is an area where there appears to be less recognition of the role of Local Government (and the Forum) as a delivery body either directly or through achieving solutions and added value, working with our partners.
- 3.8. The Forum therefore raised a host of additional approaches which could seek to either deliver on the wider determinants of health, or target those with the worst health outcomes by;
- Ensuring the Forum is engaged in the system planning and commissioning intentions for community based services
 - Involving the Forum as a stakeholder at an early stage, to help formulate specifications that can provide added value to 'Healthier Communities'
 - To support an approach which is responsive to the differences between communities including focused activity in Lower Super Output Areas/deprived communities
 - Continue to share best/innovative practice around planning, design of green spaces etc.
 - Develop the links between CCG/HCC commissioned services and local physical activity opportunities
 - To work with HCC and CCG's to help shape commissioning of local services and the roll out of initiatives such as Connect to Support and the new mental health and wellbeing data toolkit.
 - Working and aligning prevention activity with the work undertaken by CCG's with the potential for use of Transformation funding or establishing 'invest to save' opportunities to enable the collaborative use of expertise and knowledge.

4. Next steps for the Forum and the new Health and Wellbeing Strategy

- 4.1. There is a real opportunity to harness the expertise and enthusiasm in driving forward a healthier communities agenda amongst Local Government and our broader partnership and networks. As part of this, Local Government is in a unique position to 'build in' opportunities for improved wider determinants of health through a range of levers at the local level.
- 4.2. Austerity remains a feature for all organisations involved in health and wellbeing. However, opportunities exist to improve outcomes on the wider determinants of health through 'invest to save' collaborative approaches.
- 4.3. The forum would like therefore to work with the Board on identifying where we can collectively, make the biggest impact. As part of this, there may need to be a discussion regarding the timespan for that impact, recognising that actions taken today may not produce a monitorable benefit for years to come.

CORPORATE OR LEGAL INFORMATION:**Links to the Strategic Plan**

Hampshire maintains strong and sustainable economic growth and prosperity:	yes
People in Hampshire live safe, healthy and independent lives:	yes
People in Hampshire enjoy a rich and diverse environment:	yes
People in Hampshire enjoy being part of strong, inclusive communities:	yes

Section 100 D - Local Government Act 1972 - background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

Document

Location

None

IMPACT ASSESSMENTS:

1. Equality Duty

- 1.1. The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act;

Advance equality of opportunity between persons who share a relevant protected characteristic (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation) and those who do not share it;

Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Due regard in this context involves having due regard in particular to:

The need to remove or minimise disadvantages suffered by persons sharing a relevant characteristic connected to that characteristic;

Take steps to meet the needs of persons sharing a relevant protected characteristic different from the needs of persons who do not share it;

Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity which participation by such persons is disproportionately low.

1.2. Equalities Impact Assessment:

- 1.3. An impact assessment has not been undertaken as this report is an update and is not proposing any decision.

2. Impact on Crime and Disorder:

- 2.1. An impact assessment has not been undertaken as this report is an update and is not proposing any decision.

3. Climate Change:

a) How does what is being proposed impact on our carbon footprint / energy consumption?

b) How does what is being proposed consider the need to adapt to climate change, and be resilient to its longer term impacts?

- 3.1 An impact assessment has not been undertaken as this report is an update and is not proposing any decision.

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