Oxfordshire Carers' Strategy 2017-2020
Foreword
By Cllr Tilley, Cllr Heathcoat, OCCG signatory to be confirmed

Many of us at some point in our lives will care for a relative, friend or neighbour who needs support in their daily lives. Carers come from all backgrounds and can be any age. They may be working or in education, they may also have support needs themselves, or in the case of young carers, the extent of their caring role may be inappropriate.

There is an increasing population of people with care and support needs, which will impact on the number of family carers there will be in the future. Every year it is estimated that around 2.1 million people take on a new caring role, and a similar number stop.\(^1\)

Informal carers are the largest source of care and support in the UK; they have a vital role in the lives of the people they care for and their caring input brings value to the local economy. A report by the Universities of Leeds and Sheffield calculated the replacement care costs for the work carried out by informal carers in Oxfordshire at £1,057 million pa.\(^2\)

Caring can be rewarding and fulfilling, but it can also be challenging and demanding and can have a negative impact on a carer's physical and mental health. Some carers may face financial, social and health disadvantages because of their caring role. We need to actively identify where carers have inappropriate caring roles leading to safeguarding concerns, and address these across agencies.

Oxfordshire County Council and Oxfordshire Clinical Commissioning Group work in partnership with other organisations to identify and support many of the 61,000 family, informal or unpaid carers in Oxfordshire.

We recognise the crucial role that carers play in the lives of those they care for, and we want to enable carers in Oxfordshire to have the information, advice and support they need and to have a life of their own alongside their caring roles.

Introduction

The strategy sets out our commitment to carers and describes how Oxfordshire County Council and Oxfordshire Clinical Commissioning Group will support carers of all ages in the period 2017 - 2020.

This updates the work of the previous strategy published in 2013 to include new legislation which consolidates the rights of carers of all ages and requires collaborative working between Children's and Adult Social Care and health organisations.

The strategy covers adult and young carers and parent carers of children with disabilities. It sets out how we are responding to our duties and responsibilities to

\(^1\) Carers UK (2014) Need to Know: Transitions in and out of caring: the information challenge
\(^2\) Valuing Carers 2015
carers whilst ensuring that we are able to target our resources to support carers effectively and efficiently.

**National policy context**

The Care Act 2014 represents the most significant legislation in adult social care in over 60 years, consolidating law that has grown incrementally into a single statute, including legislation relating to carers. The Act aims to create an outcome-focused, person-centred, clear and fair care and support system to support people’s health and wellbeing which focuses on prevention.

The Act recognises the support provided by carers and aims to support them to care effectively and safely; look after their own health and well-being; fulfil their education and employment potential; and have a life of their own alongside caring responsibilities. It aims to support carers to achieve the outcomes that matter to them as an individual.

The Act relates mostly to adult carers – people aged 18 and over who are caring for another adult. However, it contains new duties on working with young carers who are approaching adulthood, such as to undertake a transition assessment and develop a support plan, and allows for adult carers whose disabled children are approaching adulthood to plan an effective and timely move to adult care and support.

The Children and Families Act 2014 seeks to improve services for vulnerable children and support strong families. It underpins wider reforms to ensure that all children and young people can succeed, no matter what their background.

The Act consolidates the rights of all young carers under the age of 18, young adult carers and their families under a single law. Young carers now have a right to an assessment of their need (no matter whom they care for, what type of care they provide, or how often they provide it).

Historically, support for parents of children with disabilities in Oxfordshire has operated largely separately from support for carers of adults. This Act provides opportunities for further integration.

The importance of support for carers is recognised within the NHS Five Year Forward View\(^3\), which sets out a vision of a better NHS with a more engaged relationship with patients, carers and citizens in order to promote wellbeing and to prevent ill-health.

Please see Annex 1 for more detail about national policy and legislation relating to adult and young carers.

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\(^3\) NHS Five Year Forward View
What do we know about carers in Oxfordshire?

Local and national data on carers provides a valuable picture of the likely number of carers in Oxfordshire. We know, for instance, that the largest group of carers in the county are between 50-64 years old, but also that the number of young carers referred to our services increased by 81% in 2015-2016.

At the time of the 2011 Census, around 61,100 people in Oxfordshire said they provided some level of informal care to a relative or friend, representing 9.4% of the county's population (up from 8.8% in 2001).

The census also showed that there are 1,300 (1.1%) children aged 0-15 providing some unpaid care, along with 2.1% of people under 25. However, a study by the University of Nottingham and the BBC estimated that a truer figure of the number of young carers is between 6-10% of children 17 years and younger, which would mean there could be around 8,000 young carers in Oxfordshire.

Young carers are more likely to have mental health problems, poorer school attendance than average, and are more likely to be eligible for free school meals, to be identified as having Special Educational Needs and to have poor educational attainment. In 2013 they were seven times more likely to be Not in Education, Employment or Training (NEET).

As of the end of September 2015, around 17,200 adult carers were known to Oxfordshire County Council’s social care teams. This figure has been increasing over time. It includes all carers whose needs have been assessed, some of whom will also have received a service from the council. In addition, the Young Carers Service has identified over 2,000 young carers in Oxfordshire.

In 2015/16, carers of 1,098 children with disabilities were supported by short breaks services.

For more detailed information about carers in Oxfordshire, please see Annex 2.

What are we currently doing for carers in Oxfordshire?

Oxfordshire County Council and Oxfordshire Clinical Commissioning Group are committed to working together to raise the quality and improve the value of health and social care services for both service users and for carers. This commitment is reflected in Oxfordshire’s Health and Wellbeing Strategy.

Oxfordshire Clinical Commissioning Group has a legal obligation to support the council in their statutory responsibilities towards carers, and co-commissions some carers' services such as the Carers Oxfordshire Service, which includes specific support for carers of people with mental health issues and people diagnosed with dementia. Oxfordshire Clinical Commissioning Group also recognises the roles that the wider NHS plays in ensuring carers' needs are considered.

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Making a Step Change evaluation report
The way the partnership works means that Oxfordshire County Council takes the lead for most of the contracted services for carers, with Oxfordshire Clinical Commissioning Group leading work to ensure that carers' health needs are supported across the NHS.

**Oxfordshire Clinical Commissioning Group:**

- Leads work ensuring that contracts with health providers can demonstrate that they consider carers' needs in service delivery
- Leads work with primary care to raise the profile of carers within primary care through ongoing campaigns to identify carers
- Funds a bespoke training package for carers to help improve their health and wellbeing
- Funds a free online support network for carers and the person they care for

**Oxfordshire County Council is lead commissioner for:**

- [Carers Oxfordshire](#), a partnership between Action for Carers, Rethink, Guideposts Trust and the council’s Customer Services Centre, and funded by the council and Oxfordshire Clinical Commissioning Group.

  The Carers Oxfordshire service includes:
  - information, advice and support online, over the phone and face to face
  - carers' assessment, support planning and review
  - mental health carers' support service
  - peer support, training and befriending services
  - Care Matters, a quarterly newsletter for people who look after family members, friends or neighbours

- The [Young Carers Service](#) works with children aged 4 to 18 and young adult carers aged 19 to 25 who have a caring role due to an illness, disability or addiction in their family.

  The service provides:
  - Young Carers needs assessments and Young Carers transition assessments
  - support based on the identified needs from these assessments
  - specialist young carers' one to one support is provided to the most vulnerable young carers

The service works in partnership with health partners, schools, the Oxfordshire Safeguarding Children Board and with voluntary sector providers such as Spurgeon's Young Carers Project. There is a well-developed Young Carers School Standards Awards Project that runs alongside the national scheme, and has contributed four examples of good practice nationally to the Carers Trust. Oxfordshire is proud to be one of the six trailblazing authorities.
working as part of the national Making A Step Change project, developing examples of good practice with young carers around the implementation of the Care Act

- **Dementia Oxfordshire**, a partnership between Age UK Oxfordshire, Guideposts and Young Dementia UK which provides support to people with dementia and their carers

Oxfordshire County Council continues to face significant financial pressures, which will require widespread and fundamental organisational change.

To respond effectively to these challenges in terms of our day to day work, the council will:
- prioritise work we are required to do by legislation, regulation or policy
- have a concentrated focus on prevention and early intervention
- provide a vital safety net for the most vulnerable people in our communities who we have a duty to support

For both adult and young carers, the council’s support is particularly focused on safeguarding carers with significant caring responsibilities, or where caring has a higher negative impact on the carer.

We want to ensure that the funding we have available to support carers is used in the most effective way to support carers of all ages, and reflects the vision and priorities within this strategy.

Oxfordshire County Council is therefore reviewing and recommissioning some existing services:

- A range of **daytime support services** for adults and carers’ support provided via **carers’ personal budget payments**. The findings will be consulted on in 2016

- **Community short breaks for children with disabilities** which include after school activities, summer play schemes and youth groups which run across Oxfordshire. These services support vulnerable children and young people who find it difficult to access mainstream provision and also provide child care for working parents

- **Specialist residential short breaks and respite** services that support the carers and families of children with high health care needs

- Together with service users and carers, we are co-designing our new **respite service for adults**

- **Emergency Carers Support Service**, which supports carers by providing replacement care when the carer is suddenly or unexpectedly unable to look after the person they care for

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5. [Oxfordshire County Council Corporate Plan](#)
6. Please see **Annex 3** for more detail about Oxfordshire County Council's policies relating to carers.
Our strategic intentions - the vision to 2020

Oxfordshire County Council and Oxfordshire Clinical Commissioning Group's vision for carers is:

*Carers will be recognised as partners by health and social care services and will be enabled to access the services and opportunities that they need to support them in their caring role, as well as to have a life of their own*

In line with our vision, we are proposing the following priorities for carers:

**PRIORITY 1: To identify carers and effectively support them, improving their health and wellbeing and providing opportunities for a break from their caring role**

People providing unpaid care for another person do not always identify themselves as a carer. There are large numbers of ‘hidden’ carers, particularly young carers and those early on in their caring role. It is important that health and social care services who may be more likely to come into contact with people with caring responsibilities encourage carers to recognise themselves as such and signpost them to access relevant information, advice and support.

Support for carers can come from a variety of sources: informally from friends, family and the local community, formally through statutory agencies like health and social care, and from voluntary, community and faith sector organisations.

We know that carers need good quality, clear, consistent, accurate, reliable and easy to find information and advice on a wide range of issues. Carers tell us that often they are not aware of what support may be available to them or where to get relevant information.

We know that most carers value a break from their caring role, whether this is for a few hours once a week or for a week at a time. It can be this time away from their caring responsibilities that really ‘keeps them going’.

Services which provide short breaks, respite care, emergency and crisis response should be available so that carers can feel reassured that the person they care for can be supported safely, reliably and respectfully whilst the carer has some time away from their caring role.
Many carers have many responsibilities in their lives; they may be working or attending school or college, looking after children, have health needs of their own or other demands on their time.

Carers may belong to communities where, for a variety of reasons it is difficult to access services. Some carers may find seeking support and advice difficult, or may have felt let down or ignored in the past and be reluctant to engage with services again.

Carers will also experience changes in their own situation and circumstances or related to the person they are caring for, and may need extra support through periods of transition. Some changes may be anticipated and planned for but others may not and support should be responsive to carers' needs.

Services need to recognise and take into account all of these complexities in order to effectively safeguard and support carers in Oxfordshire's diverse and dispersed communities.

**PRIORITY 3: To encourage and enable carers to have an active life outside their caring role, including fulfilling their education, employment and training potential**

It is important for carers to have time for themselves, to have a break and to maintain a life outside their caring role. For many carers, this means continuing to work, train or study alongside their caring responsibilities.

Young carers in particular need to be recognised as such and be fully supported to reach their educational potential through the school, college and training opportunities available.

Working carers need to be supported to continue in their working life, if they choose or need to be in employment. Statutory services will continue to promote good practice amongst local employers to improve the recognition and support that they give to their staff who are also carers.

Support needs to be flexible to meet the needs of young carers and working carers; services need to be available outside of standard working/educational hours.
These are the outcomes we want to achieve with carers:

- Carers feel recognised and valued in their caring role
- Carers are enabled to access information, advice and practical support that is relevant to their needs in supporting them in their caring role
- Carers have time for themselves and a break from their caring role
- Carers will be supported to maintain their health and wellbeing alongside that of the person they care for
- Carers are supported to access or remain in education, employment or training where possible
- Carers are supported to manage complex situations
- Carers have access to emergency support when they need it
- Young carers are supported to achieve full attendance and engagement in education
- Young carers are encouraged to engage with community activities of their choice to pursue their interests
- Young carers are protected from undertaking inappropriate caring roles
- The carers' voice is heard during the assessment of the person for whom they care and the carers' own needs are assessed in their own right
- Consideration for the needs and wishes of carers is embedded into all services offered to the person being cared for

We will measure these outcomes using a variety of methods, such as:

- through carers' assessments and reviews
- the number of carers having a break when the cared for person uses a type of respite service
- use of services such as the emergency carers' support service
- number of young carers achieving 5 A-C grades in their GCSEs
- surveys and questionnaires e.g. the bi-annual carers' survey
- Joint Health and Wellbeing Strategy proposed measures/targets relating to carers:
  - Increase the number of carers receiving a social care assessment from 7,036 in 2015/16 to 7,500 in 2016/17
  - Increase % carers who are extremely or very satisfied with support or services received. 43.8 % baseline from 2014 Carers survey.
Annex 1: National policy

1. The Care Act 2014
The Care Act 2014 represents the most significant legislation in adult social care in over 60 years, bringing together law, including legislation related to carers, into a single statute.

The Act aims to create an outcome-focused, person-centred, clear and fair care and support system to support people’s health and wellbeing focusing on prevention. The core purpose of adult care and support is defined as helping people to achieve the outcomes that matter to them in their life. The Act emphasises integration of social care and health as well as working with people and organisations to achieve this.

The Act recognises the support provided by carers and aims to support them to care effectively and safely; look after their own health and well-being; fulfil their education and employment potential; and have a life of their own alongside caring responsibilities.

The Care Act relates mostly to adult carers – people aged 18 and over who are caring for another adult. Young carers (aged under 18) and adults who care for disabled children are assessed and supported under children's law.

However, regulations under the Act allow the government to make rules about looking at family circumstances when assessing an adult's need for care, which means, for example, making sure the position of a young carer within a family is not overlooked.

The Act also contains new rules about working with young carers who are approaching adulthood and adult carers whose disabled children are approaching adulthood to plan an effective and timely move to adult care and support.

2. What does the Care Act do?
- A “carer” is defined as an adult who provides or intends to provide care including practical or emotional support for another adult needing care, not as a paid or voluntary worker. A carer is a young carer where he or she is younger than 18.
- Carers have the same rights as the people they care for. They can have their own assessment, support plan and a direct payment if applicable to meet their eligible needs.
- Carers now have a legal right to request an assessment of their own needs. This replaced the law which said the carer must be providing "a substantial amount of care on a regular basis" to qualify for an assessment.
- Following the assessment, local authorities will provide support according to the needs and the impact of caring identified by the assessment.
- The assessment will consider what the carer wants to achieve in their own day-to-day life, such as whether the carer is able or willing to carry on caring, whether they work or want to work, and whether they want to study or volunteer.
• If both the carer and the person they care for agree, a combined assessment of both their needs can be undertaken.
• The Act introduced a separate eligibility criteria for carers that focuses on impact of caring on carer’s wellbeing.

3. What are the eligibility criteria for carers?
• A carer’s needs are eligible where:
  i. they arise as a consequence of providing necessary care for an adult;
  
  ii. the carer’s physical or mental health is, or is at risk of, deteriorating OR the carer is unable to achieve any of the following outcomes:
    • carrying out any caring responsibilities the carer has for a child
    • providing care to other persons for whom the carer provides care
    • maintaining a habitable home environment in the carer’s home (whether or not this is also the home of the adult needing care)
    • managing and maintaining nutrition
    • developing and maintaining family or other personal relationships
    • engaging in work, training, education or volunteering
    • making use of necessary facilities or services in the local community, including recreational facilities or services
    • engaging in recreational activities

  iii. as a consequence there is, or there is likely to be, a significant impact on the carer’s wellbeing.

• Carers’ needs can be eligible for the council’s support even if the person they care for does not have eligible needs.

4. Recent national publications:
  1. National carers’ strategy - the second national action plan 2014-16\(^7\) sets out the Government’s actions to support carers in four priority areas:
    • Priority area 1: identification and recognition
    • Priority area 2: realising and releasing potential
    • Priority area 3: a life alongside caring
    • Priority area 4: supporting carers to stay healthy

  2. Based on emerging themes, NHS England\(^8\) has developed 37 commitments around the following eight priorities:
    • Raising the profile of carers
    • Education, training and information
    • Service development
    • Person-centred, well-coordinated care
    • Primary care
    • Commissioning support
    • Partnership links
    • NHS England as an employer

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\(^7\) National carers’ strategy - second national action plan 2014-16, October 2014
\(^8\) NHS England’s Commitment to Carers, April 2014
3. ‘Transforming Primary Care’ underlines NHS England’s commitment to provide people caring for family or friends with greater support and information, both to help them care for others and to support their own health and wellbeing.

4. Regarding supporting carers to remain in employment, ‘Supporting working carers’ calls for joint working between local authorities and care providers, and sharing of best practice on how they can work with Local Enterprise Partnerships (LEPs), Health and Wellbeing Boards, Chambers of Commerce, local business and other stakeholders in their area to support carers to remain in employment.

5. In March 2016, the Government launched a call for evidence to be used in the new national carers’ strategy. The work is likely to include references to best practice from other countries and there are signs that it may include support for multi-generational households. The national strategy is expected to be published towards the end of 2016.

5. Young Carers

A young carer is a person under 18 who provides or intends to provide care for another person (of any age, except where that care is provided for payment, pursuant to a contract or as voluntary work).

The national policy for young carers builds on the principles of the Children and Families Act 2014. The main principle is that young carers have the same rights as all children and young people. Young carers should be able to learn, achieve, develop friendships and enjoy positive, healthy childhoods; just like other children. To achieve this, the services should ensure that the needs of children in the family, including those who may be assisting with caring, are recognised.

All young carers under the age of 18 have a right to an assessment of their need (regardless of who they care for, what type of care they provide, or how often they provide it) under the law. Young carers’ needs assessment must include an assessment of whether it is appropriate for the young carer to provide, or continue to provide, care for the person in question, in the light of the young carer’s needs for support, other needs and wishes. This includes the extent to which the young carer is participating in or wishes to participate in education, training or recreation, and work.

The Care Act says adult social services need to be involved in planning the support a young carer may need once they reach 18. This also applies to adult carers of

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9 Transforming Primary Care, April 2014
10 Supporting Working Carers
12 For more details, please see Section 17ZA and 17ZC of the Children Act 1989 (as inserted by Sections 96 and 97 of the Children and Families Act 2014); Sections 63-65 of the Care Act 2014 in relation to transition assessment for young carers as they approach adulthood, and to assessing adults to enable a “whole family approach” to providing assessment and support; The Young Carers (Needs Assessments) Regulations 2015; Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children
children where it appears likely that the adult carer will have needs for support after the child turns 18.
Annex 2: Data on carers in Oxfordshire

Carers in Oxfordshire - Oxfordshire County Council data

Adult carers - in the year 1st April 2015 - 31st March 2016, just over 7,000 adult carers were assessed, many at the same time as the person they care for but 2,040 carers completed a separate carers' assessment, with 1,712 of these receiving a Personal Budget. These figures include carers' assessments for adults caring for a disabled child/young person under the age of 18; 161 carers' assessments were completed, with 146 parent carers receiving a Personal Budget.

Young carers - in the year 1st April 2015 - 31st March 2016, there has been an 81% increase in the number of new referrals of young carers (406) compared to last year (224). The Young Carers Team has directly supported 729 young carers during the year.

Extract from the Joint Strategic Needs Assessment 2016 - adult carers in Oxfordshire

Number of Carers
At the time of the 2011 Census, around 61,100 people in Oxfordshire said they provided some level of informal care to a relative or friend, representing 9.4% of the county’s population (up from 8.8% in 2001). This proportion was slightly lower than in the South East (10.2%) and England overall (9.8%).

Across the county, there were proportionately fewer carers in Oxford (7.7%) than in other districts: 10.3% in Vale of White Horse, 9.9% in both South and West Oxfordshire and 9.4% in Cherwell.

Of those providing informal care in Oxfordshire, 71.6% provided between 1 and 19 hours of care per week, 10.5% provided between 20 and 49 hours, and 17.9% provided more than 50 hours.

The group most likely to provide unpaid care was aged 50-64, with one in five providing some level of care (19.8%). Meanwhile, 13.8% of people aged 65 and over provided some unpaid care compared with 8.5% of people aged 25 to 49, and 2.1% of people under 25. 1.1% of children aged 0-15 provided some unpaid care, numbering 1,300.

A larger proportion of unpaid care in Oxfordshire was provided by female residents (58.1%) than by male residents (41.9%). This was particularly the case for higher-intensity care, 60.2% of which was provided by female residents.

As of the end of September 2015, around 17,200 adult carers of adults were known to Oxfordshire County Council’s social care team. This figure has been increasing over time. It includes all carers whose needs have been assessed, some of whom will also have received a service from the council.
Carers’ Needs and Outcomes

The Personal Social Services Survey of Adult Carers in England is carried out every two years and took place for the second time in 2014-15. The survey covers informal, unpaid carers aged 18 or over, caring for a person aged 18 or over, where the carer has been assessed or reviewed, either separately or jointly with the cared-for person, by social services during the 12 months prior to the sample being identified. (This sample is clearly more specific than for the Census, which may explain differences in, for example, reported numbers of hours spent caring. It does not include young carers, under 18 years.)

715 carers in Oxfordshire responded to the survey in 2014/15. The following analysis highlights where the survey results for Oxfordshire differed significantly from national averages; otherwise they can be assumed to be similar. Due to relatively wide confidence intervals around the local figures, it is not possible to identify any changes since the previous survey in 2012/13. It may be possible to get a better sense of trends in future years.

About three quarters were living with the person they cared for. Most (three fifths) had been caring for them for between one and ten years. However, more than one in three had been caring for more than ten years. Slightly under half of respondents (44.1%) reported providing 100 or more hours of care per week.

Nearly two thirds of the carers (65.3%) were retired. Whilst 12.0% were in paid work and felt supported by their employer, 4.1% did not feel supported. A further 16.4% of respondents said they were not in employment because of their caring responsibilities.

For over half of the carers in Oxfordshire who responded to the survey, the person they cared for had a physical disability.

![Figure 28: Carers in Oxfordshire, by health condition of the person they care for (2014/15)](image-url)
This pattern broadly reflected that at national and regional levels, although carers in Oxfordshire were more likely than nationally to be caring for someone with problems connected to ageing. This is likely to be linked to the fact that many care for a partner.

Over half of the carers surveyed reported having a health problem themselves, commonly a physical impairment or disability, a long standing illness, and/or loss of sight or hearing.

Compared with the national picture, Oxfordshire carers were more likely to report having a physical impairment or disability, and loss of sight or hearing.

Figure 29: Health conditions of carers in Oxfordshire (2014/15)

Only one in five respondents to the survey in Oxfordshire said they were able to spend their time as they wanted, doing things they value or enjoy. Most said they were able to do some of these things but not enough (65.8%). 14.3% said they didn’t do anything they value or enjoy. The pattern of responses did not differ significantly from the national picture.

Likewise, over seven in ten respondents said they did not have as much control over their daily life as they want. Some of these said they had no control (making up 12.4% of all respondents). The pattern of responses did not differ significantly from the national picture.

Only a minority of carers in Oxfordshire felt they had as much social contact as they want (fewer than two fifths). 14.6% said they had little social contact and felt isolated. Again, this pattern of responses did not differ significantly from the national picture. The majority of respondents reported being able to look after themselves, although 13.2% felt they were neglecting themselves. The pattern of responses did not differ significantly from the national picture.

Carers who had accessed support or services were most likely to say this was in the form of information or advice.
Most respondents said they had found it (very or fairly) easy to find information and advice about support, services and benefits. Nearly 90% had found the information and advice they had received (very or quite) helpful.

More than three quarters of carers who had received support or services from Social Services said they were satisfied with what they had received. A little under half said they were very or extremely satisfied. These satisfaction levels were broadly similar to regional and national averages, and to the results of the previous survey in Oxfordshire in 2012/13.
Annex 3: Oxfordshire County Council policies relating to carers

All adult carers (above the age of 18) are entitled to have a needs assessment as set out by Oxfordshire County Council Policy for Assessment and Reviews in Adult Social Care.13 An extract from this policy is included below. Carers whose needs are eligible for council support will have a support plan and may receive a personal budget to meet their eligible needs.

The council has a specialist team for young carers (under the age of 18), to assess their needs and provide support. Depending on the level of need and the impact of caring on the young carer’s wellbeing, the council may provide information and advice, signpost them to services available in the community, make referrals to health, safeguarding, school support etc. or may provide some financial support.

Policy extract - Oxfordshire County Council’s Policy for Assessment and Reviews for Adult Social Care:

Carer’s Assessment

73. A “carer” is somebody who provides necessary support or who looks after a family member, partner, friend or a neighbour who needs help because of their age, physical or mental illness, or disability and not as paid or voluntary work.

74. A “young carer” is a person under 18 who provides or intends to provide care for an adult or a child and not as paid or voluntary work.

75. Where the council becomes aware that a young person or a child is involved in care, it will offer an assessment for the adult requiring care and support using a whole family approach.

76. The council will decide whether the child or young person should be referred for a young carer’s needs assessment or a child’s needs assessment under the Children and Families Act 2014 to identify the impact of caring on the child’s health, emotional and physical wellbeing, welfare, education and development. The assessment will also examine whether any of the caring responsibilities are inappropriate (such as personal care, lifting, administering medication, maintaining the family budget, emotional support to the adult).

77. Where it appears to the council that a carer may have needs for support (whether currently or in the future), the council will carry out a carer’s assessment to understand:
   a. whether the carer has needs for support (or is likely to have in the future), and
   b. if the carer does, what those needs are (or are likely to be in the future).

78. The council will ensure carers access to a carer’s assessment regardless of the level of their needs and financial resources.

79. The carer’s assessment will establish the carer’s needs for support and the sustainability of the caring role, which relates to a consideration of whether the carer

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13 OCC Policy for Assessment and Reviews in Adult Social Care
is able and willing, and likely to continue to be, to provide care. (Where necessary, sustainability may be discussed in a separate conversation with the carer).

80. A carer’s assessment will include an assessment of
a. whether the carer is able, and is likely to continue to be able, to provide care for the adult needing care,
b. whether the carer is willing, and is likely to continue to be willing, to do so,
c. the impact of the carer’s needs for support on their wellbeing,
d. the outcomes that the carer wishes to achieve in day-to-day life, and
e. whether, and if so to what extent, the provision of support could contribute to the achievement of those outcomes.

81. The carer’s assessment will consider the carer’s activities beyond their caring responsibilities and the impact of caring upon those activities. In particular, the council will consider whether the carer works, participates in education, training or recreation, or wishes to do so.

82. In carrying out a carer’s assessment, the council will involve the carer and any person whom the carer asks the council to involve.

83. The council will also consider
a. whether, and if so to what extent, matters other than the provision of support could contribute to the achievement of the outcomes that the carer wishes to achieve in day-to-day life, and
b. whether the carer would benefit from the provision of preventative services, information and advice or any opportunities which might be available in the community.

84. The council will consider whether any relative or other person who is involved in caring for the person would benefit from the provision of information and advice and signpost them to services available in the community.