

MANCHESTER JOINT STRATEGIC NEEDS ASSESSMENT

ADULTS AND OLDER PEOPLE

CHAPTER: Key Groups

TOPIC: Carers Health

WHY IS THIS TOPIC IMPORTANT?

Introduction

A carer is someone of any age who looks after and supports a family member, friend or neighbour in need of help because of long-term physical or mental ill health, disability or problems related to old age*. This includes parents caring for a disabled child and young carers under the age of 18. Individuals who provide informal care for another person which is not part of paid employment are commonly referred to as either “unpaid” or “unwaged” carers.

Unpaid carers make a huge positive contribution to our society. Their work enhances quality of life for millions of people with care and support needs, and saves the UK economy an estimated £132 billion per year¹. Nationally, an estimated 5.8 million people provide unpaid care, over a third of whom provide over 20 hours of care per week*. Between 2001 and 2011, the number of unwaged carers increased by 600,000, with the largest growth in the number of people providing more than 50 hours of care a week*. In 2015, one fifth of men and one third of women aged 65 and over in the UK needed help with at least one activity of daily living ([Health Survey for England, 2015](#)). The proportion of the population aged 65 and over is projected to increase from 9.4% in 2017 to 11.1% in 2030, and therefore demands for care are also likely to increase.

Impact of care on health

Caring can be extremely rewarding for those providing it. However, it is well-recognised that caring can have a detrimental effect on both physical and mental health. Carers are more likely than the general population to suffer from poor health and require care themselves. Men and women who are carers across England and Wales are 2-3 times more likely than non-carers to report poor general health if they are providing 50 or more hours of unpaid care per week*. Time spent caring can make it difficult for carers to make time to look after themselves, and to attend GP and hospital appointments.

Impact of care on finances

Financial difficulties are reported by 45% of carers in the UK ([Personal Social Services Survey of Adult Carers in England \(SACE\), 2016-17](#)). Employment options are limited for many carers given the hours already dedicated to their caring role, and this is reflected in the figure that only 24% of carers are in employment. Of these carers, less than half are employed on a full-time basis. In order to maintain paid employment, carers may have to use annual leave for caring, work overtime to make up hours lost to caring, turn down promotions or change to less-qualified jobs ([Carers UK. State of Caring 2016](#))

¹ Buckner, L. & Yeandle, S. Valuing carers 2015: The rising value of carers' support. carersuk.org (2015)

* Office for National Statistics: [2011 Census](#)

The Carers Allowance is a benefit specifically for people with a caring responsibility. This is currently £62.70 per week. To receive this benefit, the carer must provide at least 35 hours care a week, and the cared-for person must be a recipient of one of the main disability benefits. Those earning over £116 per week are not eligible for carers allowance, and there are multiple exclusion criteria meaning many carers do not qualify for the benefit. If a cared-for person loses their benefit entitlement, the carer will also lose carers benefit, and families may encounter a sudden drop in household income.

Unpaid care and social isolation

Caring can often be associated with loneliness and social isolation, as highlighted in the [Personal Social Services Survey of Adult Carers in England, 2016-17](#). 48% of carers reported that they had “some social contact with people but not enough”, and 16% reported that they had “little social contact with people” and felt “socially isolated”. Loneliness can affect both physical and mental health, and can be a further contributor to the poor health seen in the carer population.

Carers assessments and personal budgets

People identified as unpaid carers, either by a health professional, social worker or through self-referral are eligible for a carers assessment. This is an opportunity to assess the specific needs of the carer, assess health and wellbeing and determine whether the carer would benefit from extra support. Carers assessments are usually carried out by social care staff. One component of the carers assessment is to determine whether a carer would benefit from an individual budget. This is a payment which can be made directly to the carer to be spent on something which will make their caring role easier.

Issues facing specific groups of carers

1. Young Carers

The Children and Families Act 2014 defines a young carer as a person under 18 who provides or intends to provide care for another person (except where this care is provided for payment, pursuant to a contractor as voluntary work). The 2011 Census identified 160,000 young carers in the UK, however national data suggests this figure is likely to be a significant underestimate ([The Children’s Society. Hidden from View](#)). The poor health impacts associated with caring affect young people disproportionately ([NHS England. GP Patient survey \(2017\)](#)) and young carers also suffer the consequences of interrupted education and employment opportunities. People in education for 21 or more hours a week or under the age of 16 are not eligible for Carers Allowance which excludes many young carers from receiving this extra financial aid.

2. Older Carers

Elderly people often provide care for a partner. If the person providing care becomes unwell and is admitted to hospital, this increases the likelihood that the cared-for person will need hospital admission due to a lack of other available support. National data shows that in the over 85 age group, 70% of carers look after someone who is also over the age of 85 ([Personal Social Services Survey of Adult Carers in England, 2016-17](#)). In this age group, 35% of carers report they have a physical impairment or disability and 45% have sight or hearing loss.

3. Parent Carers

Parent carers look after one child or more who have a special educational need and/or a disability. Parents naturally provide care for their children, so parent carers are often not identified, however they may be providing a significant amount of extra support for their child. Children with a disability may remain living with their parent carers into adulthood until their carer is no longer well enough to provide care. Additional support and guidance is needed at this time to ensure a smooth transition to alternative care services. This group of carers is often required to provide the same level of care in older age as they provided in their 30s and 40s and is particularly affected by recent cuts in public services. At a time in their lives when they are becoming physically less able, they are finding that the extra support they need is no longer available. Another group of carers under significant pressure is the 'sandwich' generation of carers; those who are caring for an elderly parent whilst simultaneously caring for their own children.

THE MANCHESTER PICTURE

The size of the carer population

The 2011 Census included a question on unpaid care provision. Respondents were asked about the extent of unpaid care they provide in three specific durations per week, ranging from 1 to 19 hours through to 20 to 49 hours and 50 or more hours.

The unpaid care question asked as part of the 2011 Census form in England and Wales is included below.

14 Do you look after, or give any help or support to family members, friends, neighbours or others because of either:

- long-term physical or mental ill-health/disability?
- problems related to old age?

➔ Do not count anything you do as part of your paid employment

No

Yes, 1 - 19 hours a week

Yes, 20 - 49 hours a week

Yes, 50 or more hours a week

At the time of the 2011 Census, 42,640 people (8.5%) in Manchester reported that they provided unpaid care*. This is slightly lower than the Greater Manchester (GM, 10.5%) and national (10.2%) figures. However, the percentage of carers providing more than 50 hours of care per week is higher (28%) than in GM (25.4%) and the UK (23.1%). The percentage of Manchester's population providing care has remained stable compared with the previous census (8.8%). The proportion of carers providing more than 50 hours of care a week has increased by 1%.

Demographics of the Manchester carer population

Age	Total Population in Manchester	Provides unpaid care:	% of population	Provides 1 to 19 hours unpaid care a week	% of carers	Provides 20 to 49 hours unpaid care a week	% of carer	Provides 50 or more hours unpaid care a week	% of carers
All ages	503,127	42,640	8.5	23,109	54.2	7,568	17.7	11,963	28.1
0 to 15	97,418	1,138	1.2	859	75.5	152	13.4	127	11.2
16 to 24	99,697	4,523	4.5	3,178	70.3	768	17.0	577	12.8
25 to 34	101,599	6,931	6.8	4,160	60.0	1,236	17.8	1,535	22.1
35 to 49	95,073	12,938	13.6	6,989	54.0	2,499	19.3	3,450	26.7
50 to 64	61,796	11,119	18.0	5,705	51.3	2,064	18.6	3,350	30.1
65+	47,544	5,991	12.6	2,218	37.0	849	14.2	2,924	48.8

Table 1. Demographics of the carer population in Manchester at the time of the 2011 census

The percentage of people providing unpaid care varies between ethnic groups. Almost 11% of Gypsy or Irish Traveller populations, and people of Caribbean ethnicity provide unpaid care. Out of the five broad ethnic categories included in the 2011 census, the category with the highest percentage of unpaid carers was first the White population (9.2%), followed by the Asian/Asian British population (8%). In the North West, women are more likely to provide unpaid care than men (18% and 14% respectively).

In Manchester, the areas with the highest percentage of the population providing unpaid care were Moston (15.1%) and Higher Blackley (14.9%) in North Manchester, and Sharston (14.4%) in South Manchester. On the other end of the spectrum, in 13 wards less than 3% of people reported providing unpaid care.

Support needs of the cared-for person

90% of carers surveyed in Manchester in the 2015 Manchester CCG carers survey cared for a family member (spouse/partner, son/daughter or parent). In keeping with national data, the most common support need of the cared-for person was a physical disability (43% in Manchester, 53% nationally). The largest discrepancies between local and national data were the percentage of cared-for people with drug/alcohol dependency and mental health problems. 6% of cared-for people in Manchester had alcohol/drug dependency compared with 2% nationally. 38% of cared-for people in Manchester had mental health problems, much higher than in the North West and nationally (22% and 21% respectively). Furthermore, Manchester had the highest percentage of cared-for people with drug/alcohol dependency and mental health problems of all the Greater Manchester boroughs.

A survey of 114 parents in Manchester performed by [Manchester Parent Carer Forum](#) showed that the most common need in children with a special educational need or disability was Autism Spectrum Disorder (68%) followed by speech and language impairment (30%). 25% of parents classed their child's disability as severe.

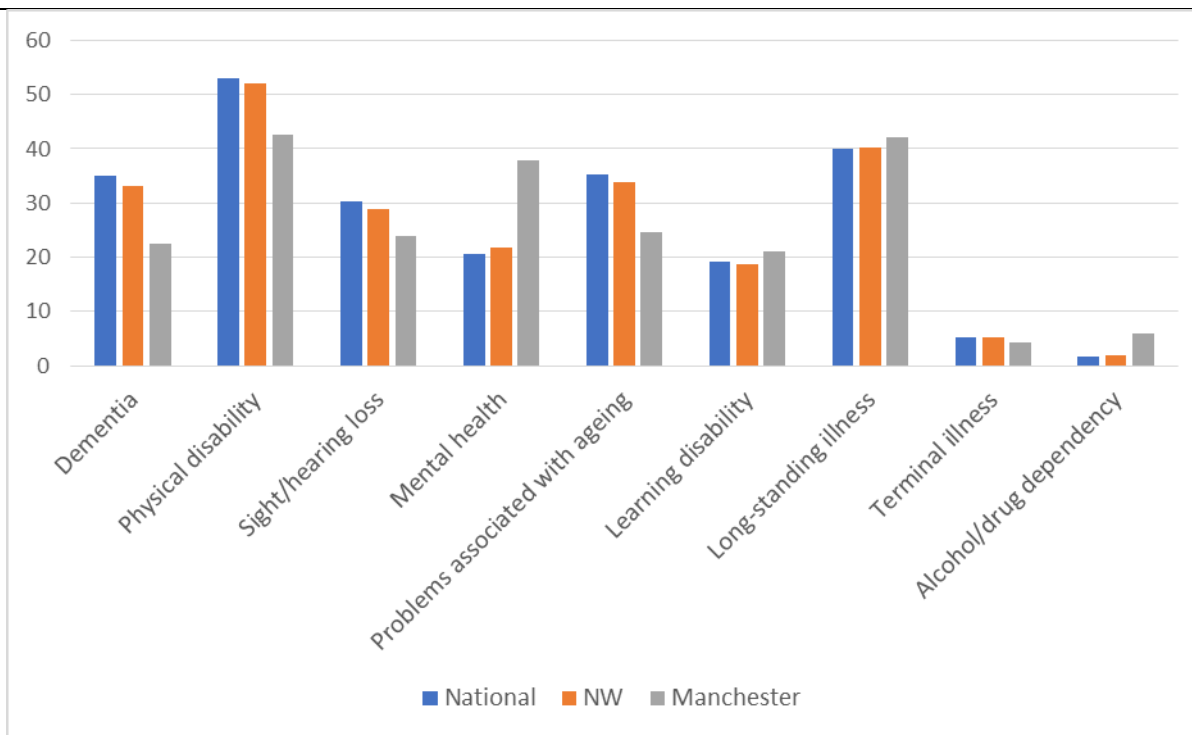


Figure 1. Support needs of the cared-for person in Manchester. Data from the Personal Social Services Survey of Adult Carers in England (2017)

Identification of carers

Identification of those providing unpaid care is not always straightforward. An important opportunity to identify carers is in primary care, where all GPs are encouraged to keep a register of carers within their catchment. Registers are created using coded data from GP computer systems. However, only a quarter of the 42,000 Manchester carers currently appear on this register. This is a missed opportunity to promote access to primary healthcare services for carers, including the provision of the annual influenza vaccine to a high-risk and eligible population.

	Has a Carer			Is a Carer		
	Ever Coded	Coded in 2016/17	Percentage Coded in 2016/17	Ever Coded	Coded in 2016/17	Percentage Coded in 2016/17
City	3,424	848	25%	4,849	936	19%
Central	957	265	28%	1,368	282	21%
North	1,348	319	24%	1,957	388	20%
South	1,119	264	24%	1,524	266	17%
Total	6,848	1696	25%	9698	1872	19%

Table 2. Unpaid carers listed on GP carer registers in Manchester

Health of carers

Three quarters of carers in Manchester reported feeling tired or exhausted in both the [Personal Social Services Survey of Adult Carers in England survey](#) and [We Care, Our Care 2015 - Manchester Carers Survey](#) (Manchester Carers Forum and Manchester CCGs). As well as a third of carers experiencing physical strains from their caring role, mental health problems were also an issue for many. Roughly half of carers reported general feelings of stress, 36% felt short-tempered or irritable and 43% felt depressed.

In line with national data, around one in five carers said their caring role led to a new health problem, and one in five said their role made an existing health problem worse. Only half of carers felt that they looked after themselves, with one in five believing that they neglected themselves.

The national [GP Patient Survey 2017](#) showed that three in five carers suffer from a long-term health condition compared with half of non-carers. These figures are the same for patients in Manchester. The difference is particularly pronounced in younger carers. In carers aged 18-24, 40% report a long-term health problem compared with 29% of their non-caring peers whereas in people over 65, the percentage of patients with long-term health problems is the same for carers and non-carers.

Financial difficulties

Three out of five carers in Manchester in the 2016 social services survey reported that their caring role caused some degree of financial difficulties. For one in five of carers, their role caused “a lot” of financial difficulty. 27% of carers were in paid employment (part-time, full-time or self-employed), with only 13% working full-time. 40% of carers were retired and 35% of carers said they were unable to work due to their caring responsibilities. 7% of carers were in employment, but did not feel supported by their employer. Carers who are very or extremely dissatisfied with the support they have received from Social Services also report the highest level of financial difficulties caused by their caring responsibilities.

Young carers

Data from the 2011 Census indicates that there were 1,138 children aged 0-16 years living in Manchester who identified themselves as providing some form of unpaid care. This is equivalent to just over 1% of the population in this age group which is similar to the national figure. Around 11% of these young carers were providing 50 or more hours of unpaid care a week. In research carried out in 2009-10, 16%-18% of young people reported that they had caring responsibilities for someone disabled or sick, suggesting that there may be a much larger hidden population young carers in Manchester. There is a specific [JSNA for young carers](#) which can be referred to for further details.

Older carers

In Manchester, there are currently an estimated 6,660 unpaid carers over the age of 65. This is projected to increase to 8,700 by 2030 ([Projecting Older People Population Information \(POPPI\) 2017](#)). In this group, half of carers provide at least 50 hours of care a week. This means that the population most likely to be suffering from a long-term health condition also has the highest burden of unpaid care provision. This high level of caring responsibility may affect the ability of the carer to look after their own health by attending GP or hospital appointments, and existing health problems may be worsened by the additional physical and mental stresses of caring.

Impressions of current care and support provision in Manchester – lived experience

In the [2016-17 Adult Social Care Outcomes Framework \(ASCOF\) survey](#), opinions regarding social care provision were collected from 395 people who received community-based or residential care at least partly funded by Manchester City Council. 62% of respondents were satisfied with the support services they received, an increase from 58% the preceding year.

Feedback from carers

According to the [2016-17 Adult Social Care in Manchester Local Account](#), only 3,300 of Manchester's unpaid carers are in receipt of adult social care support. Carer satisfaction according to the results of the 2016-17 [Personal Social Services Survey of Adult Carers in England \(SACE\) survey](#) is declining year by year. Half of unpaid carers who had looked for information or advice regarding services, support or benefits in Manchester found it fairly or very difficult to find. This is higher than nationally (36%). 36% of carers in Manchester compared with 29% in England felt they were not adequately involved (either sometimes involved or never involved) in discussions regarding support of services for the person they cared for.

A particular problem for carers in Greater Manchester is not having as much social contact as they would like. Seven of the ten GM local authorities are performing below the national average on this measure of carer satisfaction. High levels of social isolation may be contributing to poor health in Manchester's carer population.

Feedback on support services

The percentage of carers who were dissatisfied with the support and services they or the person they care for received from Social Services was slightly higher in Manchester (13%) than the average for England (10%). Of the carers who were very or extremely dissatisfied with the support or services, a higher proportion also reported that they never had enough time to care for the other people they have caring responsibilities for (30% or 3,300 of the 11,150 carers). Feedback from the Manchester Carers Forum suggests that carers don't feel respected, and that greater awareness of their role is needed.

Training

[72% of carers surveyed \(We Care, Our Care\) in Manchester](#) thought that training or support should be offered to carers, with popular suggestions being techniques for improving mental health and well-being, improving caring skills e.g. moving and handling, and clinical skills such as medication management.

Carers assessments and person budgets

In 2014/15, 4,250 carers assessments and re-assessments were carried out. This dropped to 1,933 in 2015/16 and to 1,793 in 2016/17. Similar to carers assessments, there was fall in requests for a personal budget. In 2014/15, 3,954 requests were recorded for a personal budget. This dropped to 1,569 requests in 2015/16 and 1,446 in 2016/17. The numbers have decreased following the introduction of new Care Act guidance.

Prior to 2015, local authorities had a discretionary offer to identify carers and offer them a small budget. With the Care Act, there is now a statutory requirement to carry out a formal assessment before offering personal budgets. The Care Act means that carers are now offered advice, information, signposting, funding for small breaks as well as a small budget which can be put towards pamper sessions, new electrical items or other items which may help in their caring role. The package offered by local authorities is now much more comprehensive, but tighter eligibility checks mean fewer budgets are awarded overall.

Case Study: Eileen's Story

Adapted from [Greater Manchester Mental Health NHS Foundation Trust: Your carer stories](#)

Eileen has cared for her 27-year-old son since his late teens when he developed problems with drugs and alcohol. He became withdrawn, developed behavioural changes and was diagnosed with paranoid schizophrenia. At first, Eileen found it difficult to distinguish between her son's illness and his behaviour. She realised that he was self-medicating with drugs and alcohol to mask his symptoms, but this was making things worse. Eileen had no previous experience with mental illness, but didn't receive any support initially as she didn't associate looking after a family member with being a carer.

Juggling her carer role with her work commitments was difficult, and she found it increasingly stressful working long hours to support her family, whilst trying to fit in caring for her son. In the end, she changed her career so that she could manage her work around her caring responsibilities, even though this meant a pay cut.

By engaging with health professionals in her capacity as a carer, she started to find help and support in her caring role. Local carer support groups were a valuable source of guidance, providing opportunities to share experiences with other carers. Stress management training, pampering sessions and counselling gave her the opportunity to concentrate on her own health. Over the years, Eileen feels there has been a positive change in attitudes towards carers.

Although Eileen has faced challenges in her role as a carer, she says she has learnt a lot too and would encourage other carers to get as much help as possible as early as they can. "I have a better understanding of mental illness and the effects this has on the cared for person and the carer. The main advice I would give to other carers is to get help early; often the person that shouts the loudest gets heard."

WHAT WOULD WE LIKE TO ACHIEVE?

Current national vision for carers

The last ten years have seen increased awareness of the scale and role of the unpaid carer population and several government documents have been produced outlining key priorities and strategies for improving support for carers. In 2008, the National Carer Strategy was published, setting out the vision that by 2018:

"Carers will be universally recognised and valued as being fundamental to strong families and stable communities. Support will be tailored to meet individuals' needs, enabling carers to maintain a balance between their caring responsibilities and a life outside caring, while enabling the person they support to be a full and equal citizen."

The Carers Strategy was updated in 2010 ([Dept of Health. Recognised, Valued and Supported](#)) and 2014 ([Dept of Health. Carers strategy](#)).

Legislation – the 2014 Care Act

The 2014 Care Act outlines the responsibilities of local authorities in the provision of care and support services. Through this Act, local authorities have a duty to:

- Provide services that delay the onset or impact of care needs
 - identify carer
 - identify people who need care and carers that need support
 - provide and arrange services that improve independence
- Provide information and advice about care and support provision
 - types of care available
 - how services can be accessed
 - independent financial advice
 - how to raise concerns
- Improve the range and quality of services available
 - Buy and arrange services, considering how they might affect wellbeing
 - Engage with local people and local providers

Manchester vision for carers

Based on the current priority areas for carers as defined in the National Carer Strategy, we would like to achieve the following in Manchester:

1. **Supporting those with caring responsibilities to identify themselves as carers at an early stage, recognising their value and involving them from the outset in designing local care provision and planning care packages**

Our data demonstrates that a large proportion of Manchester's 40,000+ carers are missing out on carers assessments and support from their GP. We aim to increase identification of carers through general practice, the acute healthcare setting and self-reporting. We aim to have clear and accessible information available to help signpost carers to available support. By developing mechanisms to allow more direct communications and capture carer experiences, we will allow carers to influence the provision and planning of local services.

2. **Enabling those with caring responsibilities to fulfil their educational and employment potential**

Young carers are particularly affected by a lack of access to education and employment. We aim to increase awareness of the existence of young carers across all agencies through partnership working, strengthen pathways to support and work with young carers to ensure their voice is heard.

[Manchester Young Carers Strategy](#)

3. **Personalised support both for carers and those they support, enabling them to have a family and community life**

We aim to offer a carers assessment to all Manchester carers, and encourage individual budget applications to support them in their role. Giving carers good access to respite and breaks is essential to allow carers to have a life outside caring.

Local voluntary organisations provide a valuable source of advice and community for carers, and we need to support these organisations.

4. Supporting carers to remain mentally and physically well

Increasing identification of carers and support from their GP will help carers to maintain their own health as well as the health of the person they care for. Allowing carers time to see their GPs and attend hospital appointments will also require increased access to breaks and respite care. As well as physical health, we aim to support the mental health of carers by offering emotional support. Offering training to carers would have benefits for both physical health e.g. manual handling training and mental health e.g. stress management

WHAT DO WE NEED TO DO TO ACHIEVE THIS?

1. Support those with caring responsibilities to identify themselves as carers at an early stage, recognising their value and involving them from the outset in designing local care provision and planning care packages

- Commission services that not only support carers but who proactively identify carers.
- Work with providers who have historically delivered 'adult' carer services to identify young carers
- Utilise School Nurses to aid identification of young carers
- Host an annual Carers event (during Carers Week) to both help identify new carers and support exiting ones
- Maintain and update GP carer registers
- Promote an annual carers survey
- Train front-line staff to better engage with and support carers

2. Enable those with caring responsibilities to fulfil their educational and employment potential

- Raise awareness agencies and professionals who work with children to increase identification and support to young carers through the implementation of the Young carers strategy ([Hyperlink](#))
- Support carers to achieve their full education and employment potential through working with schools, colleges and other educational settings.
- Ensure all young carers have access to information, advice and support through an effective offer of Early Help.
- Ensure carers are receiving the maximum financial support to which they are eligible, and ensure this information is up to date
- Provide targeted, fast-tracked debt management and housing advice via commissioned advice services

3. Personalised support both for carers and those they support, enabling them to have a family and community life

- Improve access and awareness of carers assessments
- Engage regularly with carers via carers surveys and carers week to make sure we are up to date with the issues affecting carers
- Support the development of the carers forum and other local voluntary organisations

- Continue to offer individual budgets, and support and guide carers through the application process

4. Supporting carers to remain mentally and physically well

- Introduce a protocol for use in general practice to improve identification of carers, and to improve the process of referring carers on to relevant services
- Offer annual health checks with a GP for carers
- Provide emotional support with the help of voluntary sector organisations
- Continue support for carers even after the death of the cared-for person
- Increase the number of school nurses
- Provide training for carers

WHAT ARE WE CURRENTLY DOING?

The current support structure for carers in Manchester is provided by a combination of voluntary and statutory services.

Manchester Carers Network

[Manchester Carers Network](#) is a group of 20 voluntary organisations in Manchester who provide information, help and support for carers. Working together with a wide range of statutory and voluntary organisations, the Network aims to better identify and support carers, to help them with own health and wellbeing. Details of the organisations included within the network are outlined below under specialist carer support. The number of different organisations working within the City of Manchester can appear complex and overwhelming, and the Carers Network acts as a coordinating organisation to signpost individuals to relevant services. A new website has recently been produced where different carer groups can easily access information about the organisations relevant to them.

Manchester Carers Forum

This organisation is led by unpaid carers, and provides a point of contact for carers in need of advice, advocacy and support groups. Around 1000 carers are currently registered with this forum. Support groups take place in Central, South, North and East Manchester and there are also specialised support groups ([H.A.N.D.S. Group](#)) for people caring for someone with dementia or substance misuse. A specialist mentor scheme is provided for carers caring for someone with dementia. The forum is also involved with educating social work students through its involvement with teaching and assessment at Manchester University and Manchester Metropolitan University.

Greater Manchester Carers Partnership

A partnership of carers' organisations across Greater Manchester has recently been set up. In collaboration with carers from the region, representatives will work together with strategic leads across the region to work on 6 key themes. Greater Manchester's carers were given the opportunity to contribute to these plans during Carers Rights Day in November 2017.

The Greater Manchester Health and Social Care Partnership have been working with partners from the public, independent and voluntary community sector to develop a Commitment to Carers in order to encourage, drive and facilitate the commitment of organisations to improve the experience of unwaged carers across Greater Manchester.

The Commitment to Carers will be underpinned by a clear delivery plan which will define what needs to be done in order to improve the support for carers of all ages in Greater Manchester.

A Carers Charter has also been developed to support Greater Manchester in adopting a rights based approach for its carer population and to articulate a universal offer of support to be made available. The Carers Charter will be complemented by local easy read information that will describe the local models which 'talk to' the Charter and the Commitment to Carers and which will be accessible, clear, and readily available for carers locally in a format that works best for local people - in effect bringing the Charter to life as to what this means/is achieving in practice.

Specialist carer support

The following organisations make up the [Manchester Carers Network](#), who work together to provide support for a wide range of carers.

<p>Dementia</p>	<ul style="list-style-type: none"> ● Manchester Carers Forum provides a specialist support group for carers of people with dementia ● There are also nurse specialists (Admiral nurses) in dementia working to support carers in the community ● The Alzheimer's Society also provides local information for carers
<p>Stroke</p>	<p>The Stroke Association provides long-term support for carers of stroke survivors via the central Manchester Stroke Recovery Service</p>
<p>Ethnic minorities</p>	<p>There are several organisations who provide support for carers within individual ethnic groups. These include:</p> <ul style="list-style-type: none"> ● The African Caribbean Care Group ● African and Caribbean Mental Health Services ● Asian Parent Carers Project (through the Manchester Council for Community Relations) ● Indian Senior Citizens Centre ● LMCP link for South Asian carers ● The Jewish Federation ● The Himmatt Support Centre for carers of people with a physical or learning disability from a South Asian background ● Wai Yin Society for carers from Chinese families and other ethnic minority groups including Somali, Pakistani, Bangladeshi and Indian
<p>Young carers</p>	<ul style="list-style-type: none"> ● Manchester Targeted Youth Support Service provides career support and advice for young people including young carers. ● Manchester Carers Centre runs a young adult carers project to support education and employment for carers aged 16-25 ● The Early Help Hubs offer support to young carers through the Early Help assessment.
<p>Mental health</p>	<p>Many of the organisations listed above provide holistic support including emotional support for carers. Also -</p> <ul style="list-style-type: none"> ● Moodswings provides one to one support to manage mental health symptoms

	<ul style="list-style-type: none"> • Connect Support also offers a range of services to support carers of people with mental health problems
Women's health	Neesa Well Women provides pampering sessions, day trips, English lessons and health seminars for carers.
Substance misuse	HANDS is a support group for carers of people with substance misuse problems. This group is part of the Manchester Carers Forum.
Learning disabilities	<p>Talbot House is a support service for parents/carers of people with a learning disability who live in Manchester.</p> <p>Manchester's SEND Local Offer is a resource which has a wealth of information and resources to support parent carers and children and young people 0-25 years.</p>

Respite care

Statutory respite care in Manchester provides 19 beds per night for adults with learning disabilities, and can support planned and emergency respite requests. Emergency respite can be provided in times of crisis, or to support hospital discharges. Several of the voluntary sector organisations listed above can also provide respite, as well as arranging short breaks and holidays for carers.

Emergency support for carers

The Manchester out-of-hours emergency duty service is a statutory service which provides emergency social work response on weekends, bank holidays and out of office hours. This service can respond to carer breakdown and provide urgent respite care, as well as emergency provision of accommodation and financial assistance.

Carers assessments and personal budgets

Carers' assessments in Manchester are usually carried out by adult social care staff as a face-to-face assessment or over the phone. Recently, an online [Carers Toolkit](#) has been produced, providing an information resource allowing carers to find relevant services to which they can self-refer.

Manchester Carers Strategy

A new carers support strategy for Manchester is currently in development in a collaboration between Manchester Health and Care Commissioning and frontline carer services. The chair of the Manchester Carers Network will be leading the development of this strategy and will consult directly with carers to ensure future services directly address the needs of this population. The agreed completion date for the strategy is April 2018.

Manchester Carers Standard

Manchester is currently working on a set of Primary Care Standards, which aim to reduce variation and improve quality of care in General Practice. Standards cover a broad range of issues, from access to primary care to improving cancer survival rates. Each standard defines aims, expectations for the practices and intended outcomes. There is a carers standard currently in development, providing GPs with a framework to identify and support carers. GPs will be encouraged to add carers to the carers register, attend carer awareness training, offer annual health checks for carers and promote the carers survey. The expected date for introduction of this standard is April 2018.

OPPORTUNITIES FOR ACTION

Greater Manchester Commitment to Carers and the Carers Charter

Adopt the Greater Manchester Commitment to Carers and the Carers Charter as the basis for the development of a co-produced Carers Charter for the City based on the Greater Manchester framework.

Develop a new Carers Support Strategy for Manchester

Work in collaboration with Manchester Carers Network and their voluntary and community sector organisations to develop a local Carers Support Strategy which addresses the needs of the carer population in the city

Establish a new Our Manchester Carers Board which allow Manchester Carers to play a significant role in design and delivery as real and expert partners.

Ensure that all health and care organisations in Manchester have employment practices which effectively support working carers

Improving identification and support from GPs

Support every GP practice to adopt the Manchester Carers Standard from April 2018, increase the number of carers on the carers register and consequently improve access to both healthcare and carer support services.

Online information

Adopt and actively promote the [Carers Toolkit](#) on the Manchester City Council website as a single point of access for carers who require information, advice and support. This includes a section specifically for young carers.

Feedback from carers

Involve carers as real and expert partners in the assessment and planning of care and support for the person they care for (including the take up of personal budgets) and also shared decision making around reviewing services/designing commissioning principles

Undertake an annual Manchester-specific Carers Survey to give carers a more regular opportunity to feed back their experiences and provide up-to-date local intelligence on the health and wellbeing of the carer population as well as gaps and shortcomings in service provision.

Young Carers Partnership

The partnership meets on a regular basis and includes young carers, schools, colleges, voluntary sector, social care, early help and youth and play providers to improve identification and support for young carers in Manchester.

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OTHER RELATED JSNA TOPICS

- [Young Carers](#)

It is hoped that you have found this topic paper useful. If you have any comments, suggestions or have found the contents particularly helpful in your work, it would be great to hear from you.

Responses can be sent to jsna@manchester.gov.uk