



Coventry Health and Well-being Board

Time and Date

2.00 pm on Monday, 17th October, 2016

Place

Diamond Room 2 - Council House, Coventry

Public Business

1. **Welcome and Apologies for Absence**
2. **Declarations of Interest**
3. **Minutes of Previous Meeting** (Pages 3 - 12)
 - (a) To agree the minutes of the meeting held on 5th September, 2016
 - (b) Matters Arising
4. **Health and Wellbeing Strategy Updates**
 - (a) Reducing Health and Wellbeing Inequalities - Update from the Marmot Steering Group (Pages 13 - 22)

Report of Gail Quinton, Executive Director of People. Group Commander Ben Diamond, West Midlands Fire Service will report at the meeting
 - (b) Improving the Health and Wellbeing of Individuals with Multiple Complex Needs

Chief Inspector Danny Long, West Midlands Police will provide an update at the meeting
5. **Partnership for Coventry Conference 'Feeding Coventry Addressing Food Poverty and Creating a Sustainable Food Network'** (Pages 23 - 24)

Report of Councillor Faye Abbott, Cabinet Member for Adult Services
6. **Sustainability and Transformation Plan Update and Submission**

Andy Hardy, Chief Executive, University Hospitals Coventry and Warwickshire and Programme Board Chair will report at the meeting

7. **Reflection and Next Steps from Coventry and Warwickshire Health and Wellbeing Boards Development Session**

The Chair, Councillor Caan will report at the meeting

8. **Coventry's Draft Carers Strategy 2016-19** (Pages 25 - 58)

Report of Gail Quinton, Executive Director of People

9. **Forward Plan Agenda Items**

To give consideration to items to be discussed at future meetings

10. **Any other items of public business**

Any other items of public business which the Chair decides to take as matters of urgency because of the special circumstances involved

Private Business

Nil

Chris West, Executive Director, Resources, Council House Coventry

Friday, 7 October 2016

Note: The person to contact about the agenda and documents for this meeting is Liz Knight Tel: 024 7683 3073 Email: liz.knight@coventry.gov.uk

Membership: Cllr F Abbott, S Banbury, S Brake, Cllr K Caan (Chair), A Canale-Parola (Deputy Chair), G Daly, B Diamond, Cllr G Duggins, S Gilby, A Green, A Hardy, S Kumar, R Light, D Long, J Mason, J Moore, G Quinton, M Reeves, Cllr E Ruane, Cllr K Taylor and D Williams

Please note: a hearing loop is available in the committee rooms

If you require a British Sign Language interpreter for this meeting OR if you would like this information in another format or language please contact us.

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Coventry City Council
Minutes of the Meeting of Coventry Health and Well-being Board held at 2.00 pm
on Monday, 5 September 2016

Present:

Board Members: Councillor Abbott
Councillor Caan (Chair)
Councillor Duggins
Councillor Ruane
Councillor Taylor
Stephen Banbury, Voluntary Action Coventry
Simon Brake, Coventry and Rugby GP Federation
Dr Adrian Canale-Parola, Coventry and Rugby CCG (Deputy Chair)
Professor Guy Daly, Coventry University
Simon Gilby, Coventry and Warwickshire Partnership Trust
Andrea Green, Coventry and Rugby CCG
Andy Hardy, University Hospitals Coventry and Warwickshire
Marc Hudson, West Midlands Fire Service
John Mason, Coventry Healthwatch
Dr Jane Moore, Director of Public Health
Gail Quinton, Executive Director of People

Employees (by Directorate):

People: P Fahy
L Gaulton

Resources: L Knight

Apologies: Ben Diamond, West Midlands Fire Service
Professor Kumar, Warwick University
Ruth Light, Coventry Healthwatch
Martin Reeves, Coventry City Council
David Williams, NHS England

Public Business

61. Welcome

The Chair, Councillor Caan welcomed Andrea Green, Coventry and Rugby CCG who was attending her first meeting of the Board.

62. Declarations of Interest

There were no declarations of interest.

63. Minutes of Previous Meeting

The minutes of the meeting held 27th June, 2016 were signed as a true record.

Further to Minute 54 concerning 'Health Select Committee Visit to Coventry', the Chair, Councillor Caan informed that the first report referring to the Health Select Committee visit to the city on 23rd May, 2016 was now available and was very positive for Coventry. There was an acknowledgement of all the good work going on around the city, the strong partnership work and the positive results from projects contributing to improvements in people's health and wellbeing.

64. **Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy**

The Board considered a report of Dr Jane Moore, Director of Public Health concerning the Coventry Joint Strategic Needs Assessment (JSNA) 2016 and the Coventry Health and Wellbeing Strategy for 2016-2019, copies of which were attached as appendices to the report.

The report indicated that, in accordance with national guidance, work had been undertaken to refresh both the JSNA and the Health and Well-being Strategy during 2015. The JSNA looked at the current and future health care needs of the local population to inform and guide the planning and commissioning of health, well-being and social care services. A wide range of data and information resources had been reviewed to identify the key issues affecting Coventry residents. A Stakeholder Call for Evidence was undertaken and 53 responses were received which were incorporated in the JSNA as appropriate.

Key messages from the JSNA were highlighted which included an increasing population due to net international immigration and the number of births; that Coventry has a younger population than the average for England; and that the city was ethnically diverse. Quality of life indicators included 18.5% of residents living in neighbourhoods which were amongst the 10% most deprived in England; a 6.2% unemployment rate for the economically active working age residents; male life expectancy at birth was 79.4 with female life expectancy being 82.3 years; and that there was much inequality in life expectancy within Coventry.

The Health and Wellbeing Strategy provided a picture of what the Board needed to deliver over the next 3 years and how partners would work together to achieve this. Attention was drawn to the Board's decision to focus on the three new priority areas where the Board felt that a difference could be made, Minutes 65, 66 and 68 below refer. Work had been taken forward by a number of sub-groups. Progress against the priorities was detailed in a further appendix to the report. The Board were reminded of the vision for Coventry for local people to live happier, healthier, longer lives and have improved health and wellbeing.

The Board discussed the quality of life indicators and it was emphasised that Coventry compared well when comparing against comparable local authorities. They noted that education outcomes were improving. Further information was provided on what was being done to deal with and reduce the high levels of residents with TB in the city.

RESOLVED that the Joint Strategic Needs Assessment 2016 and the Health and Wellbeing Strategy 2016-19 be agreed and endorsed.

65. **Reducing Health and Wellbeing Inequalities (the Health and Wellbeing Gap)**

Further to Minute 64 above, the Board received an update from Marc Hudson, West Midlands Fire Service, on progress with the Health and Wellbeing Strategy priority 'Working together as a Marmot City to reduce Health and Wellbeing Inequalities'.

Coventry's Marmot City partners had worked together to produce a suggested action plan for the next three years which was based on the priority areas identified during the development of the Joint Strategic Needs Assessment and the Health and Wellbeing Strategy. Some of the aims of the proposed action plan included:

- Develop an integrated model for primary school children building on the acting early model for 0-5 year olds
- Support young people not in employment, education and training (NEET) through the Ambition Coventry Programme including young people who are at risk of NEET
- Support young people and build resilience and self-esteem at an earlier age through extending the scope of the Early Intervention Service to primary school age children
- Work with primary care professionals to encourage and support people to enter into or stay in employment
- Promote good employment practices among Marmot City partner organisations to drive up standards across the city and demonstrate economic benefits
- Provide employers with information, skills and support to promote good quality jobs in Coventry
- Developing a mechanism for assessing the impacts on health and health inequalities when decisions are made by the Council and other Marmot City partners.

A consultation exercise with young children was planned for September and a workshop with voluntary sector partners was planned for 9th September to provide an opportunity for further discussion and input.

Members raised a number of issues arising from the update including:

- A request for members to have a copy of the draft action plan
- A suggestion that Board members seek the support of their organisations to offer vulnerable, out of work residents the opportunity for work placements
- Information about the plans to ensure that children and young people have mental and emotional resilience
- The importance of the involvement of the Chamber of Commerce to engage with businesses to offer employment opportunities
- The importance of supporting people with physical needs to fulfil their potential
- How to ensure that opportunities were available to meet people's rising aspirations
- The need to provide more support to homeless people in the city.

RESOLVED that:

(1) The update be noted and a copy of the draft action plan for reducing health and wellbeing inequalities be submitted to the next meeting of the Board.

(2) Proposals for a strategy for getting Board Members involved in a programme offering work experience opportunities to vulnerable and out of work residents be considered at the next meeting of the Board.

66. Improving the Health and Wellbeing of Individuals with Multiple Complex Needs

Further to Minute 64 above, the Board received an update from Dr Jane Moore, Director of Public Health on progress with the Health and Wellbeing Strategy priority 'Improving the Health and Wellbeing of individuals with Multiple Complex Needs (MCN)'.

The Coventry Multiple Complex Needs Board had been established from the partner organisations. The Board was committed to developing a strategy to:

- Develop a service offer that addressed the needs of the individual rather than a single issue (service reform that is preventative, co-ordinated and person centred)
- Reduce the risk of adverse childhood experiences within the family setting
- Deliver better health outcomes for the individual
- Support demand management/ reduction for public sector services
- Identify cost savings to the system

The Board was holding a workshop on 5th October to define the strategy and agree the key performance indicators for the project. Workstreams would be identified following this meeting and working groups would undertake the development and delivery of the objectives identified.

Public Health England were providing research support for the work and representatives from the City Council, the Police and Fire Services, Whitefriars Housing and Coventry Law Centre were included and the group would undertake the following four main strands of work:

- Describing the characteristics of individuals with complex needs in Coventry
- A deep dive analysis of individuals with MCN
- Describing the lived experience of individuals with MCN
- Experience of frontline professionals working with individuals with MCN.

The Board were informed that this workstream was linking into and informing the West Midlands Combined Authority work on multi complex needs and public sector reform.

Members raised a number of issues arising from the update including:

- What was going to be done in terms of improving education and job opportunities for NEETS, especially for those with multi complex needs and no qualifications

- The opportunities for linking with the Local Enterprise Partnership to help to engage local businesses
- Further information about the work with schools
- The importance of the Board taking a lead to encourage companies to employ people with MCN
- A suggestion that a representative from the private business sector be invited to become a representative on the Health and Wellbeing Board.

RESOLVED that:

(1) The update be noted and representatives from the Local Enterprise Partnership and the Coventry Chamber of Commerce be invited to attend a future meeting of the Board to discuss engaging with local businesses to provide jobs opportunities and work placements for individuals with multiple complex needs.

(2) Consideration to be given to appointing a representative from the private business sector as a member of the Health and Well-being Board.

67. Developing an Integrated Health and Care System that Provides the Right Help and Support to Enable People to Live their Lives Well

Consideration of this item took place under Minute 69 below.

68. Update on Coventry and Rugby Clinical Commissioning Group - Actions Following Assurance Rating 'Inadequate'

Andrea Green, Coventry and Rugby CCG informed the Board of the actions that had been put in place following the recent inadequate assurance rating of the CCG by NHS England which had placed the CCG in special measures. She had been appointed as Chief Officer from 16th July, 2016.

Work had been undertaken on the development of an improvement plan to address the areas of inadequacies. The main concern was the financial overspend on services and the plan included measures to reduce this deficit. Commissioning as a whole had been looked at and there would be a more robust infrastructure going forward. Consideration was being given to partnership working between CCGs to enable improvements to be made.

The improvement plan was to be submitted to NHS England the following week and an indication could be given as to when the CCG could expect to come out of its inadequate rating.

Further information was requested on the reasons for the failings and whether there were concerns about the quality of care and it was clarified that key issues were financial and leadership. It was suggested that the inadequate rating reflected the strain on the whole health and care system, there was a growing demand for services with finite capacity and resource. The importance of partners working collectively was highlighted.

69. **Sustainability and Transformation Plan - Governance, Structure and Engagement**

The Board received a presentation from Andy Hardy, University Hospitals Coventry and Warwickshire and Chair of the Programme Board on the Coventry and Warwickshire Sustainability and Transformation Plan (STP) Programme.

The Board were reminded of the guidance from NHS England was that draft plans were unable to be shared. The main questions to be addressed in the Plan were: How will you close the health and wellbeing gap? How will you drive transformation to close the care and quality gap? and How will you close the finance and efficiency gap?

The presentation included the timeline for the STP informing of the milestones to date and concluding with the financial template submission to close the financial gap on 16th September and the detailed STP with implementation dates and updated financial details by 21st October. Information was provided on the Programme Board and Finance Group along with the main workstreams which had been identified. The Board noted that mental health linked into each of these workstreams.

The design authority had been established with initial work facilitated by Price Waterhouse Cooper. Objectives included acting as a sounding board for the emerging whole system vision proposed by the Transformation Board; providing whole system and clinical input into the design of the new system; and designing and agreeing the appropriate programme structure and remit of the workstreams for the next STP check point.

The Board were given an update with progress with the following individual workstreams: proactive and prevention; urgent and emergency care; planned care; maternity and paediatrics; and productivity and efficiency. Lead officers were highlighted along with the key actions required by 16th September submission date.

The presentation concluded with the next steps to be taken in respect of workstreams, programme delivery and finance, along with key risks associated with the Sustainability and Transformation Plan which included:

- No history or track record of delivering large scale transformation across the footprint
- Potential for reversion to silo approaches
- Individuals representing organisation against STP/footprint
- Continued misalignment of regulations, priorities, expectations, processes etc between the respective organisations
- Current operational and financial challenges against the need to prioritise STP work
- Funding and access to capital resource
- Sourcing appropriate capacity to implement the programme of work.

Members raised number of issues arising from the presentation including how to ensure the silo approach didn't happen; the costs of using Price Waterhouse Cooper; whether the STP would allow for public expectations to be met; and how to educate the public as regards to having realistic expectations.

70. **Strategic Commissioning Vision**

The Board noted a report of Andrea Green, Coventry and Rugby CCG which informed of the development of a strategic vision for Coventry and Warwickshire.

The report indicated that the senior leaders from the Peoples Directorates at Coventry and Warwickshire local authorities, Public Health and the Clinical Commissioners had been working together as part of the collaborative working set out in the Health and Wellbeing Alliance Concordat to produce a vision for the future.

The early vision was for a future sustainable system of wellbeing and care, in which people were enabled to stay well, supported to manage their health and care as independently as possible, reducing the pressure on health and social care. The aim was to develop a future system of 'accountable care' with the following key characteristics:

- All services (health, social care, community, mental health) are commissioned for long term outcomes on population budgets;
- All services designed within three domains; proactive and preventative, urgent and emergency, and planned care, to reflect a simpler patient focussed view;
- At the core of the new system, there will be a focus on proactive and preventative care, delivered across approximately 15-18 integrated teams/communities (covering around 50k population each);
- The new system will actively engage, develop, and use the community assets, and empower our local population to stay well;
- Services will be commissioned and delivered at the scale most appropriate for supporting the health of our communities and clinical and financial sustainability, (e.g. specialised services at a West Midlands level);
- Hospitals will be an active part in managing population demand; and
- The future system will be enabled by integrated IT systems and the use of data.

The report informed about the role of commissioning in the future and the intention to have a consistency across the footprint to enable service providers to operate effectively. Commissioners would work collaboratively with providers and other stakeholders to determine what the 'must do's' were alongside elements that could evolve within the agreed parameters. Service delivery would be equitable across the population.

The Board were informed that the Commissioners had shared the vision to inform the Sustainability and Transformation Planning and were working together to develop a road map on what needed to be done over the coming years to better shape commissioning to fit the vision.

The Board discussed the merits of the consideration of international evidence and best practice when developing new systems.

71. **Coventry and Warwickshire Concordat and Health and Wellbeing Board Alignment**

Further to Minute 58/16, the Board noted a report of the Executive Director of People which sought final approval of the Coventry and Warwickshire Health and Wellbeing Concordat and informed of work undertaken to date on the opportunities for Coventry and Warwickshire Health and Wellbeing Boards to work in alignment to deliver the Sustainability and Transformation Plan.

The report indicated that when considering the draft concordat in June/July both Boards endorsed the overall intention and identified further work on two particular areas prior to formal publication. Firstly, the inclusion of the financial gap figure of £500m. Detailed calculation of this total had now been incorporated within the STP development process and the same figure was to be used for both the STP and the Concordat. Secondly, further discussion had taken place on the wording of principle 4 and Warwickshire had put forward 'We will only take decisions that we know will impact on other parts of the system, only after we have talked to each other'.

In support of the Concordat and the STP, there was an expressed commitment to seek greater alignment of interest and approach across the two Health and Wellbeing Boards. The Board were informed of the intention for the two Boards to participate in two development sessions in the current municipal year. Arrangements had been put in place for the first session to be held on 13th October and would be focussed on the STP. It was anticipated that both sessions would shape the work programmes and direction of the Boards in 2017/18. It was also proposed that two further development sessions be held in 2017/18.

The Board discussed the proposed change to the wording of principle 4 and there was an acknowledgment that this provided the positive commitment to start conversations, engagement and partnership working between the Boards.

RESOLVED that:

(1) The proposed revisions to the Concordat and its formal publication in September, 2016 be approved.

(2) The approach to greater alignment between Coventry and Warwickshire Health and Wellbeing Boards as set out in the report be approved.

(3) Agreement be given to a joint development session for both Health and Wellbeing Boards on 13th October, 2016 which will focus on the Coventry and Warwickshire Sustainability and Transformation Plan.

72. **Coventry Safeguarding Adults Board Annual Report 2015/16**

The Board considered a report of the Executive Director of People concerning the Coventry Safeguarding Adults Board Annual Report for 2015/16, a copy of which was set out at an appendix to the report.

The Coventry Safeguarding Adults Board was a multi-agency partnership made up of a range of organisations that contributing towards safeguarding in Coventry. The Board was required to publish an annual report and business plan. The report summarised the key messages for the year and included the business plan which enabled the Board to plan upcoming work. The annual report also included performance data for the year which was monitored on a quarterly basis by the Board. The annual report was a key way of raising awareness of the issue of safeguarding adults.

Members raised several issues arising from the report including the successes that had been achieved and a concern about levels of abuse in different locations. It was clarified that higher levels of reporting was a positive as this meant increased levels of awareness of safeguarding issues.

RESOLVED that, having considered the content of the Coventry Safeguarding Adults Board Annual Report, the report be noted.

73. **Reshaping Drug and Alcohol Services in Coventry**

The Board considered a report of Dr Jane Moore, Director of Public Health, concerning the new model for adult drug and alcohol recovery services in Coventry. The current contract expired in November 2017 and work had recently been undertaken to develop a potential future treatment model based on the needs of the Coventry population, evidence of what worked and findings from engagement and consultation undertaken with service users, wider stakeholders and the general public. Details of the proposed recovery model/ system with objectives and the priority groups were set out in the appendices to the report.

The Coventry vision was to reduce the harms caused by alcohol and drug misuse and make the city a healthier, wealthier and happier place to live, where less alcohol and fewer drugs were consumed and where professionals were confident and well-equipped to challenge behaviour and support change.

The future model for Coventry was a key component of Coventry's Health and Wellbeing Strategy and linked to the three priorities.

The future services for adults would take a whole system approach, would be outcome based and recovery focused. It would be characterised by its ability to motivate and support people to achieve both short and long term goals through innovative approaches.

For some individuals, their family would be key to recovery. Families had a role in both supporting individuals through recovery and also required support themselves to promote resilience and reduce the likelihood of future problematic drug or alcohol use.

Young people's substance misuse was complex and children of a younger age were requiring support for substance misuse which linked to other risky behaviours and vulnerability. Aligning the young person's substance misuse service to the children and young people's early intervention service was an effective way of delivering services to young people.

The Board noted that the proposed model was out for consultation until the end of September. The treatment model would then be finalised and the necessary approvals sought through the Council's decision making process.

Members discussed the family support to be provided.

RESOLVED that, having reviewed the proposed future treatment model and supporting documentation, the proposed approach to drug and alcohol treatment in Coventry be endorsed.

74. Any other items of public business - Joint Coventry and Warwickshire Health and Wellbeing Boards Development Session

Members were reminded that arrangements had been put in place to hold a joint Coventry and Warwickshire Health and Well-being Boards Development Session at 9.30 a.m. on Thursday, 13th October at Warwick University. The purpose of the session was to review the emerging Sustainability and Transformation Plan, Minute 71 above also refers.

(Meeting closed at 3.55 pm)



Coventry City Council

Report

To: Coventry Health and Wellbeing Board

Date: 17 October 2016

From: Liz Gaulton, Deputy Director of Public Health, Coventry City Council

Subject: Progress update on Coventry's Marmot City Strategy 2016-2019

1. Purpose

The purpose of this paper is to present an update to Coventry Health and Wellbeing Board on the progress made against the first priority of the Coventry Health and Wellbeing Strategy (Working together as a Marmot City to reduce health and wellbeing inequalities).

2. Recommendations

Coventry Health and Wellbeing Board is recommended to:

- i) Endorse progress made to date and contribute comments and suggestions to reduce inequalities in Coventry
- ii) Approve the action plans, indicators and targets for 2016-2019
- iii) Agree to receive further progress updates from the Marmot Steering Group every six months

3. Background and context

In April 2013, the transfer of Public Health to local government provided Coventry with an opportunity to broaden the ownership of the health inequalities agenda. Coventry committed to delivering rapid change in health inequalities and was one of seven cities in the UK invited to participate in the UK Marmot Network and become a Marmot City. From 2013 to 2015, partners across the city worked together as part of the Marmot Programme to reduce health inequalities. There were improvements across health and across society, including a reduction in the gap in male life expectancy (11.2 years to 9.4 years), improvements in educational attainment, employment, life satisfaction and reductions in crime in priority locations.

In 2016, Professor Sir Michael Marmot and his team at University College London and Public Health England committed to working with Coventry for a further three years to enable Coventry to build on progress made in tackling health inequalities. Partners are continuing to work together on a number of projects initiated as part of the first two years of Coventry's Marmot City programme. In addition, for the next three years, the Marmot City priorities are tackling inequalities disproportionately affecting young people and ensuring that all Coventry people, including vulnerable residents, can benefit from 'good growth' which will bring jobs, housing and other benefits to the city.

4. Action plan, indicators and targets

Coventry's Marmot City partners (People, Place and Resources directorates in Coventry City Council, West Midlands Police, West Midlands Fire Service, Coventry and Rugby Clinical Commissioning Group, Voluntary Action Coventry, the Coventry and Warwickshire Chamber of Commerce and the Department for Work and Pensions) have worked together to produce an action plan with indicators and targets for the next three years to achieve the Marmot City priorities. The action plan is based on the needs identified in the Joint Strategic Needs Assessment and feedback from a range of stakeholders including children's services, employment services, the Children and Young People's Partnership Board, the Employment Skills and Financial Inclusion group, voluntary and community sector providers and the views of young people. It is a live document which will be revised and updated on a regular basis.

Since partners signed up to continue working as a Marmot City in April 2016, identified priorities and started developing the Marmot City Action Plan for 2016-2019, there has been progress against a number of aims and actions identified. Progress is outlined against individual actions below.

Action plans, indicators, current baseline data and targets for the first, second and third years of the Marmot City programme are outlined below. Indicators are split into programme indicators (output focused) and overarching indicators (outcome focused). Data will be reported against programme indicators on a quarterly basis and against outcome indicators on an annual basis. The Marmot Steering Group will meet once per quarter to receive updates from partners, discuss progress and identify areas for development and partnership working.

5. Young People

Inequalities in educational attainment, high numbers of 16-18 year olds not in education, employment and training and poor mental health in young people can lead to increases in health inequalities and poorer health and social outcomes for the people of Coventry. In addition, high rates of teenage pregnancy can lead to poorer outcomes for both teen parents and their children, creating a cyclical affect which promotes further inequalities.

Tackling these issues involves building resilience in young people, so that they are able to cope with the pressures they face and develop the skills that will help them to flourish. The key areas of focus for the next three years are to build resilience, aspiration and mental health in young people and improve levels of education, employment and training so that young people are supported to live happy, healthy lives, whatever their background.

Action Plan: Tackling inequalities disproportionately affecting young people

Aim	Actions	Lead	Progress from 1 April 2016 to 30 September 2016
1. Develop an integrated model for school age children which builds on the <i>Acting Early</i> model for 0-5 year olds	<ul style="list-style-type: none"> Evaluate the effectiveness of the <i>Acting Early</i> model Work with schools and other partners to implement 'perfect week' cycles to continuously improve team performance and integration Integrate <i>Acting Early</i> with the family hub model 	Public Health in partnership with Education, Coventry City Council	An internal and external evaluation of <i>Acting Early</i> has been completed. The report is being finalised and will be disseminated in the near future. A new <i>Acting Early</i> model of care for school age children has been developed in the North East of the city.
2. Support young people who are not in education, employment or training through a range of ways, including the <i>Ambition Coventry</i> programme	<ul style="list-style-type: none"> Ambition coaches will support young people through their journey into sustained employment or learning Employer led programmes will strengthen young people's employability skills Personal development and support programmes will be delivered, such as the 'Boot Camp' delivered by Valley House Valley House and Positive Youth Foundation will use activities such as sports and peer-to-peer networking to conduct outreach to those who are disengaged 	Economy and Jobs Team, Coventry City Council, in partnership with other partners	The <i>Ambition Coventry</i> programme is up and running. Ambition coaches have been recruited and are working with young people aged 16 to 29 who are not in education, employment or training to support them to achieve their ambitions and realise their potential.
3. Support young people who are at risk of becoming NEET through extending the <i>Ambition Coventry</i> programme	<ul style="list-style-type: none"> Submit a bid to the ESIF Growth programme to extend provision of <i>Ambition Coventry</i> to young people who are at risk of leaving education, employment or training If successful, implement extended provision and support 	Economy and Jobs Team, Coventry City Council, in partnership with other partners	A bid to the ESIF Growth Fund was also submitted on 23 September and partners are awaiting the outcome. If successful, the <i>Ambition Coventry</i> programme will be extended to young people who are at risk of leaving education, employment or training.
4. Change attitudes and behaviour and prevent sexual violence through introducing a prevention programme in schools	<ul style="list-style-type: none"> Raise awareness and provide definitions of sexual violence, CSE and other grooming Address attitudes to women, educate about consent, identify appropriate behaviour and keep safe online Evaluate the sexual violence prevention programme and extend the remit to include 	Public Health, Coventry City Council, in partnership with CRASAC and	Public Health have commissioned CRASAC and Barnados to provide a sexual violence prevention programme to raise awareness and educate young people about sexual violence, appropriate behaviour and consent. CRASAC and Barnados are now working with children, young people, teachers and parents in schools and youth groups. Further work is underway

	intimate partner violence	Barnados	to develop an intimate partner violence prevention programme alongside this.
5. Improve mental health in young people and build resilience and self-esteem at an earlier stage	<ul style="list-style-type: none"> Extend the scope of the Early Intervention Service beyond secondary schools to support primary school children and tackle issues at an earlier age Improve and extend primary mental health services for young people Implement a tool to measure wellbeing in schools 	Public Health and Education, Coventry City Council in partnership with Compass and Coventry and Rugby CCG	The Early Intervention Service provided by Compass has been extended beyond secondary schools and is now supporting primary school age children.

Programme Indicators: Tackling inequalities disproportionately affecting young people					
Indicator	Definition	Baseline data (15/16)	16/17 Target	17/18 Target	18/19 Target
1. Number of young people supported by Ambition Coventry into employment, education or training	The Ambition Coventry programme supports young people who are not in education, employment or training to access Ambition coaches who will work with them to support them into education, employment or training.	0	232	452	214 Ambition Coventry target: 898 young people over three years
2. Number of young people with disabilities or health problems accessing Ambition coaches	This indicator focuses on young people who are not in education, employment or training and have learning disabilities and / or special educational needs and who are supported by the Ambition Coventry programme	0	93	170	68 Ambition Coventry target: 254 young people over three years
3. Number of 16-24 year olds not in education, employment or training who are supported by the Ambition Coventry programme	This indicator focuses on all young people aged 16-24 who are not in education, employment or training and receive support from the Ambition Coventry programme.	0	401	777	331

4. Percentage of young people reporting increased awareness of risks, support services, CSE and online safety	Self-reported results of surveys undertaken by CRASAC of school children following interventions to increase awareness, knowledge and confidence.	No reporting undertaken at present – programme commenced in 2016/17 0 children reporting, 0% increased awareness	90% increased awareness	N/A (one year project only)	N/A (one year project only)
5. Implementation of system or tool to measure mental wellbeing in schools	Further indicator to follow around mental wellbeing once tool is implemented	Indicators to be agreed once system is in place	System in place	Target to be agreed once system is in place	Target to be agreed once system is in place
6. Percentage of all children who are accessing Compass' Early Intervention Service who are aged 11 and under	Compass Aspire (Early Intervention Service) is a service for young people who are affected by substance misuse, poor sexual health, teenage pregnancy and / or poor and abusive relationships	8%	15%	17%	20%
7. Number of new clients accessing CRASAC's counselling service and helpline, aged 25 and under	CRASAC provide information, advice and support for anyone affected by sexual violence	183	183	183	183
8. Reporting of sexual violence in young people	Reporting of sexual violence in young people (aged 24 and under) to West Midlands Police	77 incidents (Q1 2016)	308	308	308

Outcome Indicators: Tackling inequalities disproportionately affecting young people

Indicator	Definition	Baseline data (15/16)	16/17 Target	17/18 Target	18/19 Target
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1. Percentage of children achieving a good level of development at age 5	http://www.phoutcomes.info/search/development	63.9%	66.3% (Better than or equal to national average)	66.3% (Target may change if national average changes)	66.3% (Target may change if national average changes)
2. Percentage of children achieving expected level of progress (national standard) in reading, writing and mathematics at the end of primary school	http://standards.esd.org.uk/?uri=metricType%2F892&tab=details	78%	80% (Better than or equal to national average)	80% (Target may change if national average changes)	80% (Target may change if national average changes)
3. Gap between the lowest achieving 20% and the highest achieving 80% in the early years (age 5)	http://standards.esd.org.uk/?uri=metricType%2F3657&tab=details	29.5%	30% (Better than or equal to national average)	30% (Target may change if national average changes)	30% (Target may change if national average changes)
4. Hospital admissions as a result of self-harm (10-24 years)	http://www.phoutcomes.info/search/self%20harm	552 per 100,000	500	450	399
5. Percentage of 16-18 year olds not in education, employment or training	http://www.phoutcomes.info/search/NEET#pat/6/ati/102/par/E12000005	4.7%	4.3% (Equal to regional average)	4.2% (Equal to national average)	4.0% (Better than national average)

5. Good Growth

Inequalities in employment, pay below the living wage, the decline in intermediate occupations and the rise of lower paid jobs are likely to lead to increases in health and social outcomes for

the people of Coventry. There are economic as well as social benefits to addressing these issues. Investing in the workforce through paying employees a competitive wage, recruiting locally, providing attractive benefits, career progression, a good working environment and looking after the health of employees will increase recruitment and retention and improve productivity for businesses in Coventry.

Tackling these issues requires a broadening of the Marmot agenda to the private sector and businesses. Working with organisations such as the Local Enterprise Partnership, the Chamber of Commerce and businesses across the city is essential in order to nurture 'good growth' in Coventry. The key areas of focus for the next three years are to help vulnerable people into work, to improve the quality of jobs, and to create health promoting workplaces, so that growth in Coventry benefits everyone and contributes to a reduction, rather than an increase, in inequalities.

Action Plan: Ensuring that all Coventry people, including vulnerable residents, can benefit from 'good growth', which will bring jobs, housing and other benefits to the city			
Aim	Actions	Lead	Progress from 1 April 2016 to 30 September 2016
1. Work with primary care professionals to encourage and support people to enter employment	<ul style="list-style-type: none"> Educate primary care professionals on the importance of employment for health and how they can support people to stay in employment Trial placements of employment support services in GP surgeries to help people access support Encourage GPs to signpost to the employment support services which are available 	Department for Work and Pensions	DWP are working with primary care services to look at how to educate professionals and trial employment support placements in GP surgeries.
2. Review and develop employment support services to provide effective, targeted support to get people into good jobs that are right for them	<ul style="list-style-type: none"> Review employment support allowance claimants using the Job Shop and other support available and implement improvements based on the findings Improve and promote awareness of available in-work benefits Develop the Job Shop offer for people at the initial point of claiming ESA, taking a holistic view of needs and support 	Economy and Jobs Team, Coventry City Council, in partnership with Department for Work and Pensions and Public Health	A review of employment support allowance claimants and their use of the Job Shop and other employment services is underway. The findings will be used to implement improvements to support ESA claimants to access employment support services. In addition, an evidence review around supported employment service models is being completed.

<p>3. Act as organisational exemplars of good employment practices to drive up standards across the city and demonstrate economic benefits</p>	<ul style="list-style-type: none"> • Devise and disseminate a 'social value' toolkit that enables other employers in Coventry to adopt the Council's approach to social value • Act as champions for the workplace wellbeing charter • Offer work experience placements to vulnerable people • Update the Council's Equality and Consultation Analysis process to ensure Marmot implications are considered when decisions are made • Embed a 'health in all policies' approach at West Midlands Fire Service 	<p>All organisations, led by Resources Directorate, Coventry City Council and West Midlands Fire Service</p>	<p>A social value toolkit has been developed by the Resources directorate at Coventry City Council for other organisations to use and is available to download on the Council website.</p> <p>Employment services in the Council, the voluntary sector and the Chamber of Commerce are working together to offer work experience placements to vulnerable people.</p> <p>A new version of the Council's Equality Consultation Analysis form is being piloted in the People Directorate and, pending approval, will be rolled out Council-wide.</p>
<p>4. Provide employers with information, skills and support to provide and promote good quality jobs in Coventry</p>	<ul style="list-style-type: none"> • Create more supportive and productive work environments • Understand the benefits (including economic) of recruiting locally • Provide good quality jobs • Increase opportunities for people with disabilities and maximise take-up of Access to Work fund • Work with employers to increase the number of apprenticeship opportunities 	<p>Coventry and Warwickshire Chamber of Commerce</p>	<p>Coventry and Warwickshire Chamber of Commerce are working with employers to educate them about the benefits of recruiting locally and supporting them to do so, as well as to provide 'good quality' jobs and increase the number of apprenticeship opportunities.</p>
<p>5. Continue to develop the reach and effectiveness of the workplace wellbeing charter</p>	<ul style="list-style-type: none"> • Roll out the charter to all organisations who express an interest • Adapt the evidence requirements of the charter to meet the needs of small businesses • Evaluate the impact of the charter 	<p>Economy and Jobs Team, Coventry City Council</p>	<p>The Workplace Wellbeing Charter is being rolled out to all organisations who express an interest and is being adapted to meet the needs of small businesses.</p>

Programme Indicators: Ensuring that all Coventry people, including vulnerable residents, can benefit from 'good growth', which will bring jobs, housing and other benefits to the city					
Indicator	Definition	Baseline data (15/16)	16/17 Target	17/18 Target	18/19 Target
Percentage of relevant Coventry City Council decisions which consider Marmot implications	Number of completed ECAs for major Council policy and commissioning decisions which consider Marmot implications	0%	30%	80%	100%
Percentage of people recorded as unfit for work claiming ESA (and comparison with regional / national rate)	Fit notes are known as a 'statement of fitness for work'	15,010 / 6.8%	6.5%	6.3%	6.2% (Better than or equal to national average – target may change if national average changes)
Percentage of residents claiming Job Seekers Allowance	http://lginform.local.gov.uk/reports/view/thomas-evans/jsa-headline-data-table-last-24-months	1.9%	1.8%	1.7%	1.6%
Number of people supported into employment by the Coventry Job Shop	Support provided through the Job Shop to enable people into employment	1,844	2,000	2,000	2,000
Number of workplaces signed up to workplace wellbeing charter	The award of a Workplace Wellbeing Charter is clear recognition of the positive way in which organisations run their businesses and support their work forces	25	41	57	73
Number of interactions and engagements with businesses to improve employment practices	Coventry and Warwickshire Chamber of Commerce are engaging businesses to improve working practices, workplace wellbeing, recruitment and retention	0	1,000	1,000	1,000

Outcome Indicators: Programme Indicators: Ensuring that all Coventry people, including vulnerable residents, can benefit from 'good growth', which will bring jobs, housing and other benefits to the city

Indicator	Definition	Baseline data (15/16)	16/17 Target	17/18 Target	18/19 Target
Gap in the employment rate between those with a long-term health condition and the overall employment rate	http://www.phoutcomes.info/search/employment#page/3/gid/1/pat/6/par/E12000005/ati/102/are/E08000026/iid/90282/age/204/sex/4	30.5%	28.9% (Better than or equal to national average)	28.9% (Target may change if national average changes)	28.9% (Target may change if national average changes)
Working days lost to sickness absence	Indicator to be developed. Baseline data to be requested from organisations when they sign up to the Workplace Wellbeing Charter, and again 12 months later.	N/A	To be developed		
Gap in the JSA claimant rate between the most affluent and most disadvantaged areas.	Gap in the JSA claimant rate between Binley and Willenhall and Wainbody (wards with the highest and lowest employment rates in Coventry)	3.2%	3.1%	3.0%	2.9%
Gap in earnings between those living and working in the city	Average earnings of those living in the city compared with average earnings of those working in the city	£506.20 average earning of residents / 94.8% of city workers	£516.20 / 95.3%	£526.20 / 95.8%	£536.20 / 96.3%
Investment in training across organisations in Coventry	Average investment in staff training. Number of staff trained as a % of total staff and training days per year	62.8% of staff trained as a percentage of total staff / 5.46 average training days per year	63.8% / 5.96	64.8% / 6.46	65.8% / 6.96



Report

To: Coventry Health and Wellbeing Board

Date: 17 October 2016

From: Cllr Faye Abbott

Subject: Partnership for Coventry Conference on 22 November 2016

Conference Title: 'Feeding Coventry – addressing food poverty and creating a sustainable food network'

1 Purpose

- 1.1 To ask the members of the Coventry Health and Wellbeing Board to commit to and support the Partnership for Coventry Conference *'Feeding Coventry – addressing food poverty and creating a sustainable food network'*.

2 Recommendations

- 2.1 It is proposed that the members of the Coventry Health and Wellbeing Board:
- support the principles of Coventry joining the Sustainable Food Cities Network
 - raise the awareness, within their organisations, of the key objectives of the Feeding Coventry Initiative. This will be further developed and supported at the Partnership for Coventry Conference on 22 November 2016.
 - acknowledge the link between the overall aim of the Coventry's Health and Wellbeing Strategy to create health, wealth and happiness for the people in Coventry and working together as a Marmot City to reduce health and wellbeing inequalities.

3 Information/Background

- 3.1 In December 2014, an All Parliamentary Enquiry led by Frank Field MP issued an extensive report "A strategy for zero hunger in England, Wales, Scotland and Northern Ireland". It looked at the causes of food poverty in the UK and suggested ways in which communities, local and national government could address the causes with the objective of eliminating food poverty.
- 3.2 An initial recommendation was to establish twelve national pilot projects to draw together private, voluntary and public expertise to eliminate hunger; Coventry has been identified as the 5th pilot project.
- 3.3 A Feeding Coventry Steering Group was established in January 2016 and is chaired and championed by Cllr. Faye Abbott and backed by Bishop Christopher from Coventry Cathedral. The members of the group bring in strength from all sectors and are from a wide range of organisations, including Coventry University and the University of Warwick. They will all take responsibility for making things happen.

4 Feeding Coventry Initiative

- 4.1 The key objectives of the Feeding Coventry initiative is to tackle food poverty in Coventry:-
- addressing emergency food needs;

- increasing the understanding of the causes of food poverty;
- promoting a sustainable food economy;
- joining support networks which offer mentoring to achieve their goals.
- developing cohesive partnerships across all organisations involved in emergency food provision, welfare and research
- to provide a single simple information source for the city on the provision of food and related support.

4.2 Sub-groups have been established to take some of the priority areas forward and the current 4 priority areas for Feeding Coventry are:

- More than Food – where advice and support will be given at point of accessing food support e.g. job clubs and Job Shop and to address wider challenges than just food poverty, such as skills and capability to succeed, childhood obesity (and the underlying causes).
- Fuel Vouchers - this initiative will provide credit for struggling families who use prepayment meters and is designed to address the austerity-era dilemma of “heat or eat”.
- School Holiday Provision - school holiday meals and breakfast clubs.
- Food access/secureities/resilience - community shops, surplus food distribution, support to grow food.

4.3 The ‘Partnership for Coventry’ Conference aims to broaden the local awareness and involvement in current initiatives led by the Feeding Coventry partnership around sustainable food policies, food poverty, and food justice and to gain support towards new ambitious goals. It aims to:

- celebrate policy innovation and new cross-sector collaborative efforts.
- enlarge and strengthen the partnership between the community, public, private and third sector organisations.
- be an opportunity to publicly commit to work towards ambitious goals that can deliver sustainable food practices.

4.4 **Sustainable Food Cities Network** - Communities have recognised the key role food can play in dealing with some of today’s most pressing social, economic and environmental challenges and are taking a joined up approach to transforming their food culture and food system.

From obesity and diet-related ill-health to food poverty and waste, climate change and biodiversity loss to declining prosperity and social dislocation, food is not only at the heart of some of our greatest problems but is also a vital part of the solution.

The Sustainable Food Cities approach involves developing a cross-sector partnership of local public agencies, businesses, academics and third sector organisations committed to working together to make healthy and sustainable food a defining characteristic of where they live. Attendees at the Partnership for Coventry Conference will be asked to support the principle of Coventry joining the Sustainable Food Cities Network.

The Sustainable Food Cities Network helps people and places share challenges, explore practical solutions and develop best practice on key food issues.

Report Author(s):

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Directorate: People Directorate

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Enquiries should be directed to the above person.



Coventry City Council

Report

To: Coventry Health and Wellbeing Board

Date: 17 October 2016

From: Pete Fahy, Director of Adult Services

Subject: Coventry's Draft Carer's Strategy 2016-19

1 Purpose

1.1 The purpose of this report is to seek endorsement from the Coventry Health and Well-Being board for the Carer's Strategy 2016-2019

2 Recommendations

2.1 Health and Wellbeing Board is recommended to:

- Endorse the Coventry Carers Strategy noting the manner in which this strategy has been developed with a wide range of stakeholders
- Request that members of the Board take responsibility for arranging sign off of the Strategy through their respective governance arrangements

3 Background

3.1 A carer is someone who provides unpaid care for a family member or friend, who due to illness, disability, a mental health condition or an addiction, cannot cope without support.

3.2 One in ten adults are carers and the 2011 census identified that there are 32,101 carers in Coventry. Of these, 3,100 were young carers or young adult carers under the age of 25 with approximately 28% of these under 16 years of age. Approximately 25% of carers in Coventry said they were caring for 50 plus hours per week, which is in line with the national average. It is estimated that the economic value of the contribution made by carers is approximately £132bn a year nationally and £680m in Coventry.¹

3.3 The Care Act (2014) put carers on the same legal footing as the people they care for, and the Children and Families Act (2014) gave new rights to assessment for young

¹ [Valuing Carers 2015 – Carers UK](#)

carers and parent carers. NHS England's Commitment to Carers (2014) puts further emphasis on the need for carer support both locally and nationally.

3.4 Coventry has had a multi-agency Carers Strategy before with the most recent expiring in 2015. This new strategy would be Coventry's third Carers' Strategy. It applies to carers of all ages and builds on the progress and achievements already made, in addition to responding to requirements set out in the National Carers' Strategy Second Action Plan 2014-2016.

4 Developing the Strategy

4.1 The draft Strategy has been developed through a multi-agency approach including health partners and voluntary sector organisations who play a key role in supporting carers. The carer reference group has also been engaged to ensure the priorities contained within the strategy reflect what is important to carers and support the approach that the strategy reflects the four priorities laid out in the national carers strategy, which are:

- Identification and recognition
- Realising and releasing potential
- A life alongside caring
- Supporting carers to stay healthy

4.2 For each priority a number of improvement areas have been identified based on local carers' feedback and evidence of what support carers find most effective. These improvement areas are included in Appendix A and will be accompanied by an action plan to deliver. These improvement activities include:

- Developing and implementing a Carers' Charter
- Clarifying the pathway for carers and simplifying processes for registering and signposting carers
- Increasing Carers' Clinics and information available in GP surgeries
- Improved co-ordination with other parts of the health and social care system including urgent care and end of life care

4.3 Since the first draft was issued in June 2016 there has been further engagement with carers and other stakeholders through, two workshops one specifically for carers and one for other stakeholders and with representation from a number of councillors. Stakeholders have also had the opportunity to provide feedback on the draft strategy on-line.

4.4 The draft strategy has also been presented at various existing carers groups and meetings and has been considered at the Better Care Programme Board, Adult Commissioning Board, and the Children's and Young People Partnership Board to ensure appropriate organisational oversight of the work as it has developed.

4.5 Feedback has been very positive overall and the priorities and improvements were widely supported. The process of engagement has raised the profile of carers and generated a lot of discussion and interest in how the strategy will be implemented and how different organisations can support it over the years to come.

4.6 During engagement on the draft strategy there were some specific comments made about the layout and the complexity of some of the content in the draft strategy and this has now been updated in line with the feedback received. Changes include:

- Re-writing some of the text to make it clearer that the strategy relates to carers of all ages and to pick out some of the key challenges/issues for particular groups of carers (e.g. young carers, older carers, carers of people with mental ill-health)
- Changing or explaining particular words that might be confusing (this will also be supported by an online glossary on the Carers Strategy web pages)
- Separating out some of the text and making some of the headings clearer to make it easier to read

4.7 The draft strategy now includes referencing to links with the Sustainability and Transformation Programme to ensure synergy with this major change programme across the health and care system.

4.8 There are no direct financial implications associated with the strategy as improvements are expected within the existing financial envelope. However, ensuring the priorities identified in the strategy are delivered may mean changes to how resources used to support carers are deployed. The ability to continue to fund carer support at its current level will need to be considered in the context of the overall resources available to the City Council and health partners and the requirements to deliver our statutory responsibilities.

Report Author(s) and Job Titles:

Pete Fahy – Director of Adult Services

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Appendices

Appendix A: Key Priorities and Improvement Areas

Appendix B: The draft Carer's Strategy

Appendix A: Key Priorities and Improvement Areas

Priority Area 1

Identification and Recognition

We will improve

- a. how carers are identified and supported to recognise themselves as carers
- b. access to information, advice and support, ensuring this is given at the right time no matter who they talk to
- c. carer involvement, on an individual level and in contributing to design of local provision, making sure they are treated as equal expert partners

Priority Area 2

Realising and releasing the potential

We will improve:

- a. access to education, training and information that helps them stay in employment or gain employment
- b. the way the needs and wishes of the carer to work or study are considered and respected
- c. how we work with education and employment providers to ensure they are carer-friendly and are able to support carers effectively

Priority Area 3

A life alongside caring

We will improve:

- a. information, advice and access to preventative support such as Telecare, other equipment and training
- b. support with planning for difficulties and emergencies, building resilience and making sure carers can get the right support in a crisis
- c. how carers' needs are assessed, making sure it happens at the right time and gives access to flexible, personalised support, including opportunities to take a break

Priority Area 4

Supporting carers to stay healthy

We will improve:

- a. access training and other preventative support, information and breaks from caring to help carers stay healthy and care safely
- b. support to enable carers to get to their own health appointments and access regular health checks
- c. support to carers in the community to help reduce emergency hospital admissions and the need for urgent care

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DRAFT COVENTRY Carers' Strategy 2016-2019

Improving lives for Coventry carers





Foreword

We are pleased to introduce Coventry's third Carers' Strategy. Carers look after family, partners or friends in need of help because they are disabled, ill or frail. The care they provide is unpaid. This strategy sets out the priorities that local carers have told us are important to them and explains how we are responding to the needs of carers in the city over the next three years.

Carers can be of any age and most of us are likely to be affected by, or have, caring responsibility at some stage in our lives. Caring can be very rewarding but it can also have a major impact on carers' lives and limit the opportunities available to them.

Carers make a huge contribution to the health and social care system in Coventry and we could not cope without the support that they give to their friends and family members. It is, therefore, very important that we plan how we are going to support carers over the coming years to help them in this role. The economic value of the contribution made by carers across the UK is now estimated at £132bn per year. In Coventry this means that carers contribute £680m worth of support¹.

We have made a lot of progress over the years in supporting carers by raising awareness, providing quality information, advice and emotional support, as well as direct support for carers to take a break and get support in emergencies.

This multi-agency strategy builds on these achievements and has been developed in response to carers' views and contributions both locally and nationally. It also reflects some very important national legislative and policy changes. In delivering this strategy it is expected that we will make practical and targeted improvements and changes that make a positive difference to carers in the City and promote a joined up approach between council, health and voluntary services.

You will be able to keep up to date with progress on this strategy on Coventry City Council's web pages.

¹ Valuing Carers 2015 – Carers UK

Carers contribute
£680m
worth of support
in Coventry



Introduction

There are nearly six and a half million carers in the UK and this number is expected to rise as people live longer.

The 2011 census identified 32,101 residents in Coventry providing some form of unpaid care, and 3,100 are young carers and young adult carers under the age of 25. About 28% of young carers are under 16 years of age. Many young carers remain hidden from view. A BBC survey in 2010 estimated there are 700,000 young carers in the UK so the number of young people caring in Coventry is likely to be much higher and nearer 5000.

About a quarter of carers in Coventry said they were caring for 50+ hours per week. This is about the same as the England average. But the number of carers is not static - thousands of people become carers every year.

The number of carers in the city has increased since the previous census in 2001 but so has the population. This means the percentage of people who are caring - 10% - hasn't changed much, but those who are caring are providing more hours of support per week on average. Statistics show, the older you are, the more likely you are to be a carer.

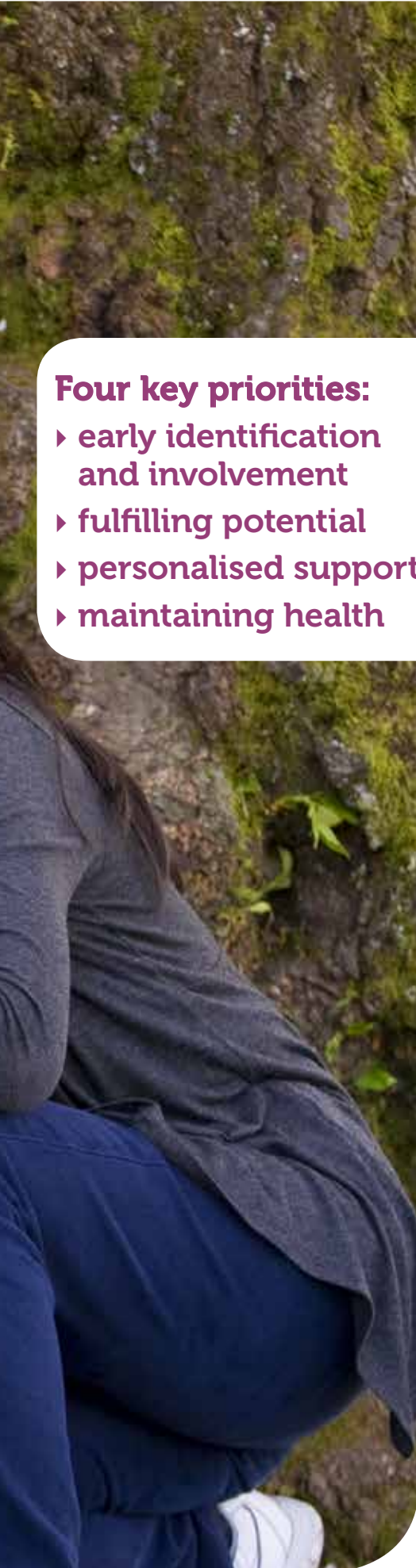
Each carer's experience is unique to his or her own circumstances and the care and support they provide can vary. However, carers share many similar experiences and challenges that impact on different aspects of their lives.

For example, looking after their own health; having a life of their own and doing things they enjoy; coping financially; juggling caring roles with education or paid employment; managing multiple caring roles or other family responsibilities and providing care from a distance. Instead of seeing friends, enjoying hobbies and doing homework, children as young as ten are cooking, cleaning, managing medication, shopping and looking after brothers and sisters.

32,101
residents in Coventry
provide some form
of unpaid care

3,100
are young carers
under the age of 25





Developing the strategy

Four key priorities:

- ▶ early identification and involvement
- ▶ fulfilling potential
- ▶ personalised support
- ▶ maintaining health

In 2010 the Coalition Government launched **Recognised, valued and supported: next steps for the Carers' Strategy** identifying four key priorities: early identification and involvement, fulfilling potential, personalised support and maintaining health.

Carers' Strategy: the second national implementation plan 2014 to 2016, published in October 2014, explains the progress that has been made so far and sets out what the Government is doing and intending to do to support carers. It describes in more detail how different pieces of legislation, such as the Care Act 2014 and the Children and Families Act 2014, contribute towards significant improvements for assessing and supporting carers of all ages. It explains how the Better Care Fund presents new opportunities to improve the integration of health and social care and provide more seamless support for individuals and their families.

The implementation plan also puts into context the many projects and policy developments that are influencing the way that organisations work with and support carers of all ages. This includes NHS England's Commitment to Carers and the 'Making a step' change programme for young carers and their families.

Our local strategy is based on the four national priorities. Its development has been led by Coventry Carers' Strategy Steering Group with representatives from across health and social care and the voluntary sector. The group has engaged widely with carers and other stakeholders.

Local provision

Coventry has a proud history of support to carers with innovative schemes, such as establishing one of the first Carers' Centres in the country, the Carers' Response Emergency Support Service (CRESS), training for carers, and the Young Carers' Project funded by Children in Need and the Big Lottery.

Two of our main carer providers, **Crossroads Care** and **Coventry Carers' Centre** merged in June 2015 to form a new organisation called **Carers Trust Heart of England**. This provides a one stop shop for carer support and the local authority has taken this opportunity to develop services further through a pilot project. This includes delegating some of its responsibility to carry out Carers' Assessments under the Care Act 2014

Carers Trust Heart of England provides a wide range of emotional and practical support. This includes: opportunities for carers to talk with an advisor on a one to one basis through drop-in sessions, a telephone helpline and outreach support sessions in community venues such as at GP surgeries; a range of carer support groups and discounted therapy sessions; the Young Carers Project; the CRESS service; a range of training opportunities; Carers' Short Breaks scheme for adults; the Stars Club for young people with disabilities; and domiciliary care services for children and adults.

There are a range of short break options for disabled children, both in the community and through residential respite services. The options include providing direct payments to families to enable them to have more choice and control about the way they are supported.

Services provided by the **Alzheimer's Society** to support people living with dementia and their carers have also been redesigned to make the most of resources available and improve dementia support as outlined in **Coventry's Living Well with Dementia Strategy**. Support available includes advisory support workers, day service, dementia cafés, 'Singing for the Brain' and other activity sessions.

Other organisations, such as **Age UK Coventry**, **Grapevine** and **Macmillan**, also provide carers with essential information, advice and support in relation to older people, people with learning disabilities and people living with cancer.

What local carers tell us

It is really important to all organisations working with carers in Coventry that we listen to what carers have to say and include them in the planning and development of carers' support.

We gather information in lots of ways, including surveys, engagement sessions and focus groups, carer forums and other carer groups. This is across health, social care and the voluntary sector and we are getting better at sharing our information and using it together to plan for the future.

In developing this strategy we have compared what our local carers tell us to what we hear from carers nationally and there are many common themes which are reflected in our strategy objectives.

Here are some of those themes that come up regularly:

- ▶ Raising awareness across the city so that carers are linked up early to the right support
- ▶ The need for high quality information, advice and support
- ▶ Joined up working, especially between health and social care, and between adult and children's services
- ▶ Flexible support to help carers take breaks and help in emergencies
- ▶ Training and learning – a chance to develop skills and knowledge
- ▶ Opportunities to network and get peer support from each other

Young carers have also told us:

- ▶ They want to be listened to by professionals and be involved in discussions and decisions alongside the person they care for
- ▶ They want to be supported at school and for teachers to understand how caring can affect them

Described in this next section are some of the ways we have engaged with carers in the past couple of years, what this has told us and how we are using that information ▶▶▶▶

Surveys

The Council, along with all local authorities in England, carries out a statutory survey every two years to gather people's views and experiences about the support they have received. Providers in the voluntary sector also conduct annual customer surveys to monitor satisfaction levels and report on outcomes achieved. Here are some of the things we learnt from respondents:

Coventry City Council Statutory Survey of ADULT CARERS 2014/2015

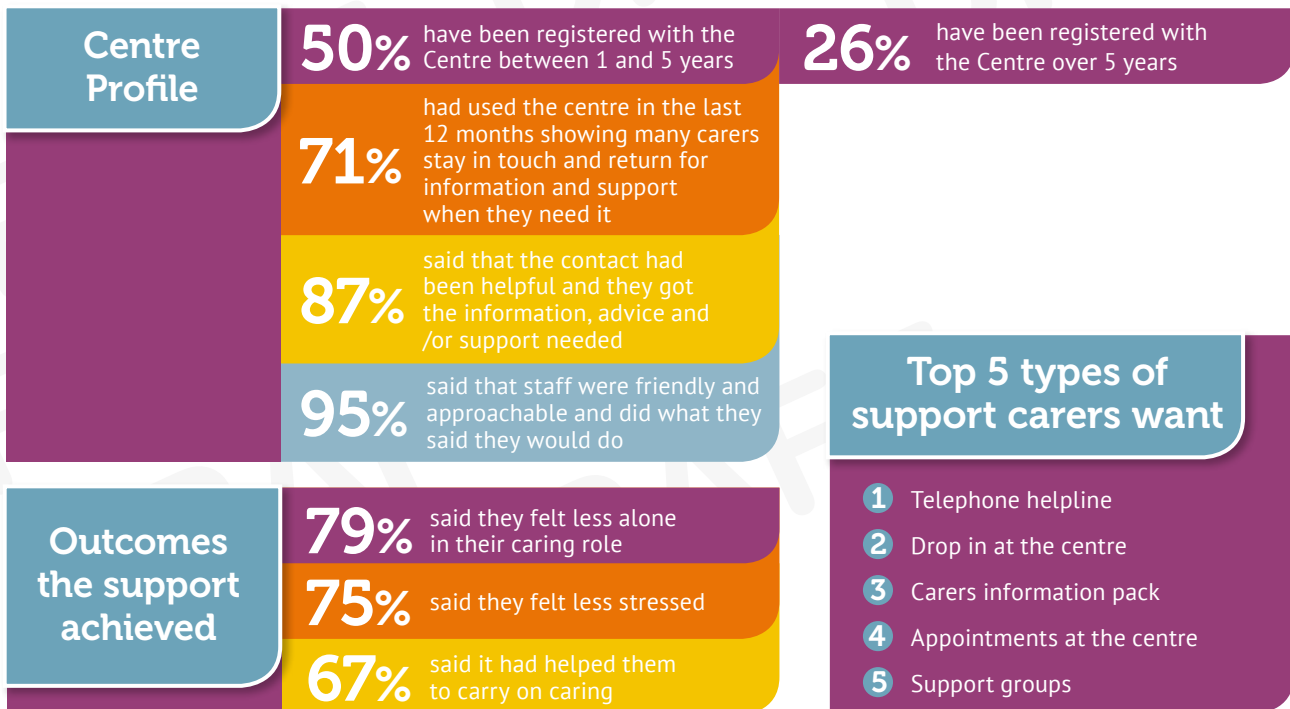
366 responses 45%



Information like this helps us plan our strategy and target resources to those who need it most. It helps us make decisions about how to continue providing support and services that carers value most and where we need to make improvements.

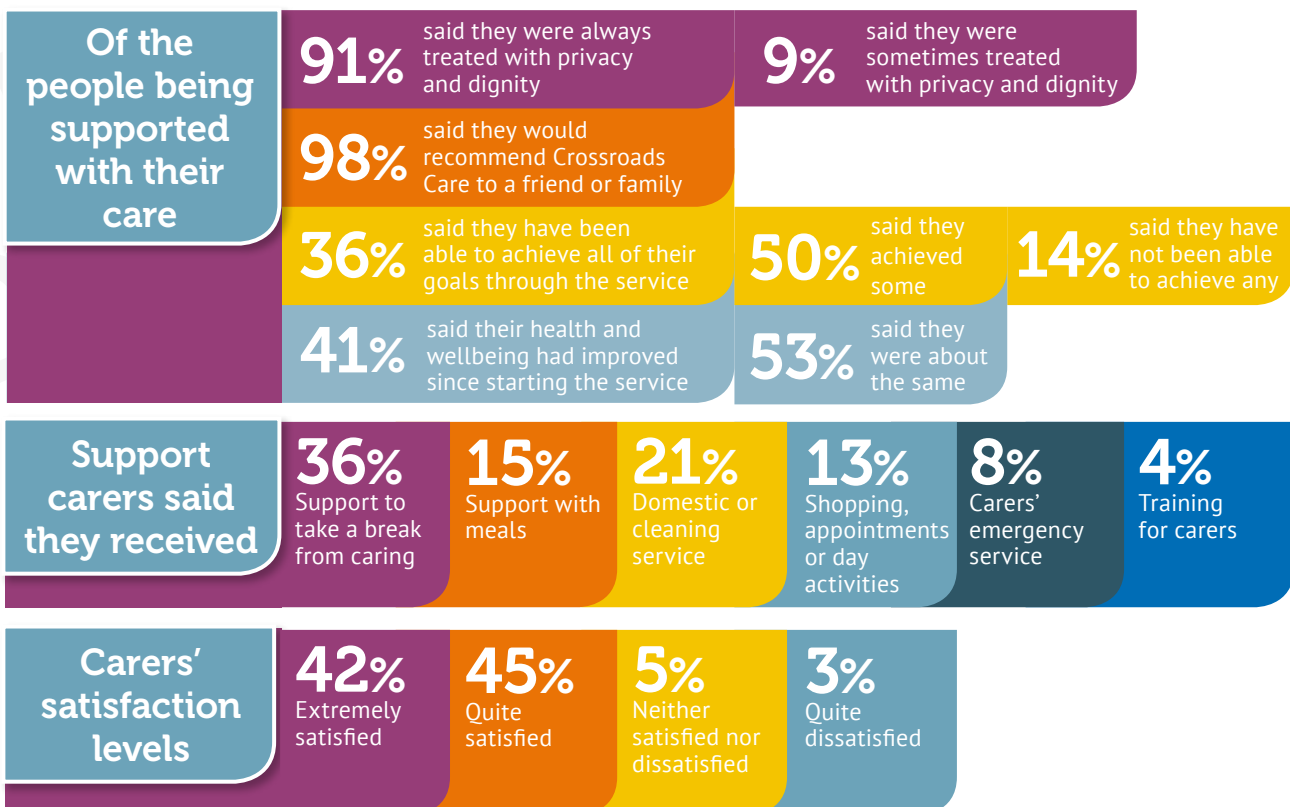
COVENTRY CARERS' CENTRE Customer Survey 2015

296 responses

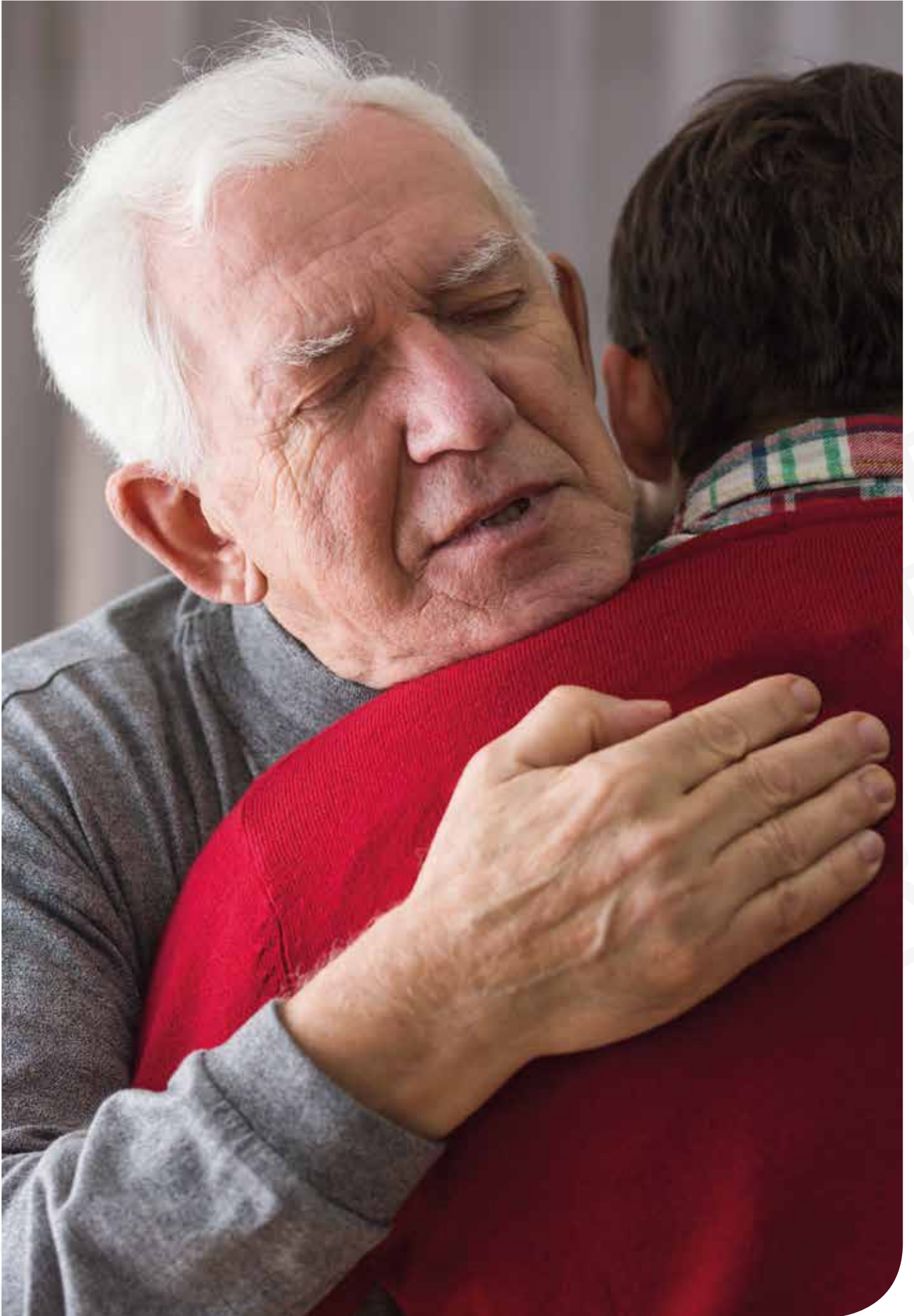


CROSSROADS CARE Customer Survey 2014

124 responses 35.4%



You can find out more details about the national Carers Survey and from Carers Trust Heart of England Annual reports by following the links below. [Carers Survey report from 2014/15](#) Health and Social Care Information Centre. [Carers Trust Annual Report 2014/15](#)



Carer engagement and involvement

Since April 2013, NHS Coventry and Rugby Clinical Commissioning Group (CRCCG) has undertaken significant **community involvement activity** to find out the views of its population about local health services. With the help of patients, carers and the general public, key local health priorities (commissioning intentions) were identified:

- ▶ diabetes
- ▶ dementia
- ▶ urgent care
- ▶ stroke
- ▶ end of life care
- ▶ elective care
- ▶ maternity, children & young people
- ▶ information sharing

Since then, targeted and on going involvement has enabled patients and carers to have input into the improvement of services in each area. A new **Communication and Involvement Strategy** identifies carers as an important group to include when it comes to decision-making about services and the ways people can get involved include regular Community **Health Events**, a refreshed and re-launched **Patient Voice Champion Programme** and standard feedback questionnaires. CRCCG has also carried out significant work to allow patients, carers and the general public to engage via online channels such as social media and its website. CRCCG has already recognised a noticeable amount of feedback from carers regarding a perceived lack of support from local services in helping them to carry out their roles effectively. In 2014/15, carers of people with mental health conditions in particular, seemed to be struggling with the system. As NHS funds become increasingly strained, CRCCG understands that more pressure than ever is likely to fall on carers. As an organisation it has a key role in the implementation of this carers' strategy. In order to help achieve the aims set out in this document and in the NHS Commitment to Carers, CRCCG has factored the needs of carers into its commissioning intentions.

Coventry City Council also regularly involves and engages carers through its carer forums, partnership boards, rigorous consultation processes before major decisions and changes take place, and through working in partnership with voluntary and health organisations to gather carers' views and feedback about particular issues that affect them.

For example, the introduction of the Care Act 2015 requires the Council to implement some changes to the charging policy which are likely to affect service users and carers. For some people the changes will have a positive impact, but not all. To inform the final decisions, a 12 week public consultation was launched and this included inviting all those who are known to be directly affected to attend information sessions to help increase their understanding about the proposals being made. This enabled carers and users to give their views and contribute more effectively to the consultation process.



Reviews of carers' support

Coventry City Council, Coventry and Rugby CCG and Coventry and Warwickshire Partnership Trust have been reviewing short breaks services for disabled children and their families in Coventry to ensure they meet the needs of families, conform to the Special Educational Needs and Disability (SEND) Code of Practice (2014) and are affordable for the future.

Information gathered from surveys and events with young people and their families in 2006, 2008, 2013 and 2014 fed into the review.

Families told us:

- ▶ Short breaks should be more than just childcare – they should be an opportunity for children to develop new skills, such as independence and social skills
- ▶ Short breaks should be accessible, engaging for the child and long enough that the parent actually gets a break
- ▶ Disabled children and their families should be encouraged and supported to get out and be seen in the local community and mix with non-disabled children
- ▶ There should be a variety of short breaks – one size does not fit all

We've used what families have told us to suggest some changes to short breaks for disabled children, which will be consulted on.

Have a Coventry Carers' Pathway - services should be mapped, so that there is a clear picture of what is available

There should be a variety of short breaks - one size does not fit all

Health and social care to work more closely on emergency planning with carers

In 2014 Coventry City Council and Coventry and Rugby CCG carried out a review of Adult Carers' Support and Services.

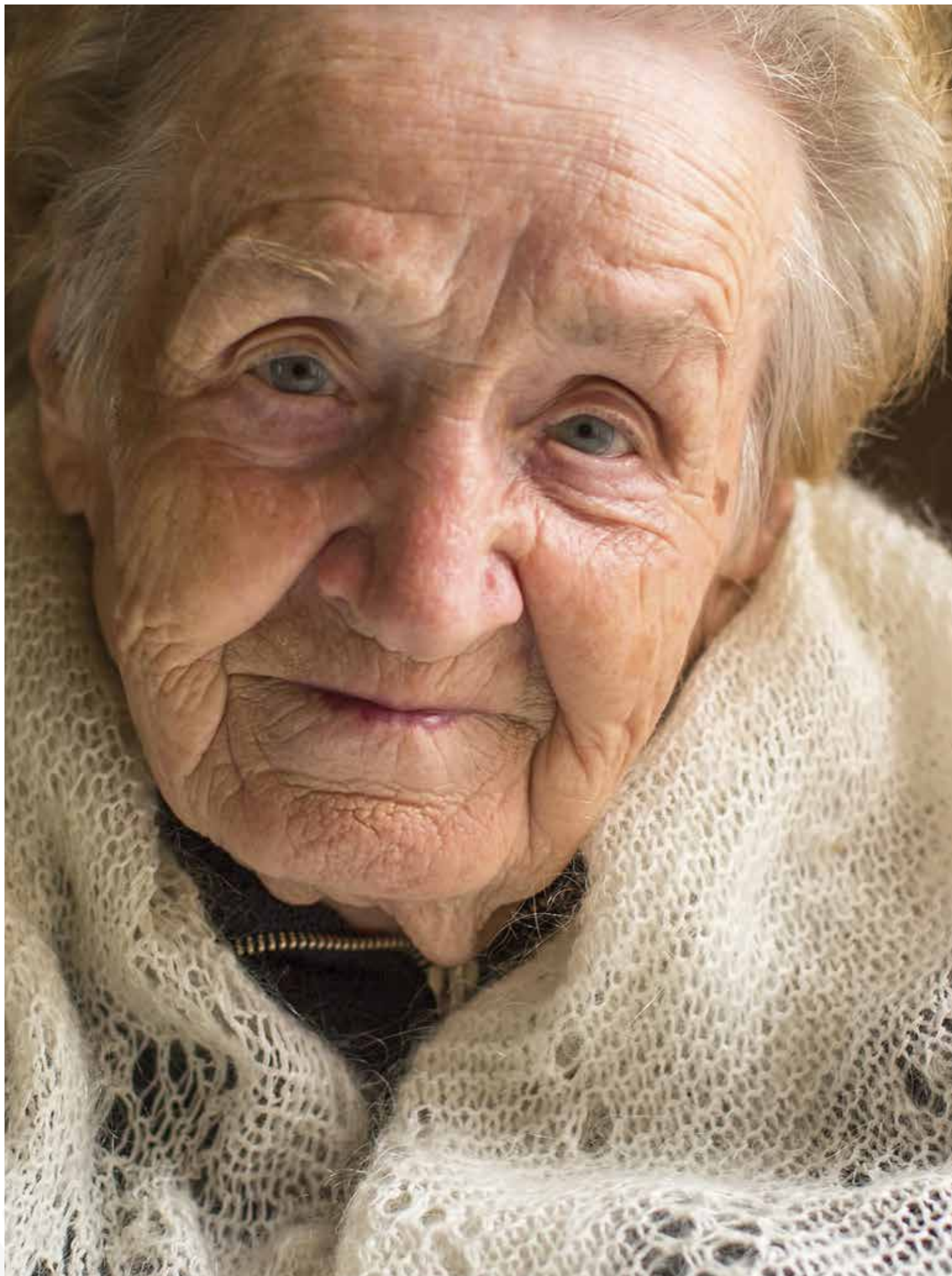
This review looked at the services and support available for carers of adults living in Coventry and helped us plan future commissioning options. The review also looked more specifically at the support for people living with dementia and their carers.


The process included surveys and focus groups during June and July 2014 with carers, staff in health and social care and service providers, as well as taking account of what we already know.

Some of the ideas that came out of this work include:

- ▶ Develop more links between the different agencies offering information/advice at every stage in the pathway so that appropriate referrals are made, and to avoid duplications
- ▶ Have a Coventry Carers' Pathway - services should be mapped, so that there is a clear picture of what is available
- ▶ Health and social care to work more closely together, with primary care having greater involvement as a key role for supporting carers' health and wellbeing
- ▶ Look at different types of breaks being made available – more flexibility, possibility of using housing with care schemes in local areas, opportunities for carers and cared for to go out together, overnight care to manage difficult situations
- ▶ Consider options for pooled budgets with CRCCG to fund break services for people with dementia
- ▶ Health and social care to work more closely on emergency planning with carers
- ▶ Have Emergency Cards for carers with the main contact details and what to do when
- ▶ Calendar of training should be available and should be widely advertised and practitioners briefed and informed about what is available

As a result of this work and the Better Care Fund programme, we have now pooled some of the budgets for carer support and increased funding for emergency support and carers' training to enable Carers' Trust Heart of England to take forward some of the above ideas. Support for carers to take a break will be allocated on a more flexible and individual basis through a combined assessment of the person cared for and the carer in line with the Care Act. This information will continue to feed into the development work and improvements outlined in the strategy.





What we aim to improve and develop through this strategy

We have identified a number of issues to address throughout the duration of this strategy and we want to see noticeable improvements in some key areas aligned to the four national priority areas.

The annual implementation plans will set out the detail about how the improvements will be made and outline the various projects and work plans in progress or planned for the future.

It is important to note that all of these areas relate to carers of all ages and, therefore, the implementation plans will be varied to ensure that we focus on the needs of particular groups such as young carers and young adult carers, parent carers, working carers, older carers, carers of people with mental ill-health and carers from black and minority ethnic backgrounds.

The implementation plans will also be closely linked to the Coventry and Warwickshire Sustainability and Transformation Plan which aims to deliver high quality care which support our communities to live well, stay independent and enjoy life.

As the health economy comes under increasing pressure it is really important health and social care services co-ordinate better to address the challenges of shrinking budgets and rising demand.

Available resources to support carers will be aligned to the priorities set out in the strategy.

Urgent care remains a top priority, working to reduce unnecessary hospital admissions, prevent delayed discharges and help free up resources that can be spent more creatively on community healthcare as well as contribute towards the inevitable savings targets. ▶▶▶▶

The annual implementation plans will set out how the improvements will be made



- ▶ Identify carers
- ▶ Information & advice
- ▶ Involvement

Priority Area 1

Identification and recognition

Background and challenges

People often don't recognise themselves as carers for a number of reasons and this can prevent people from getting access to information, advice and support at an early stage.

Carers do not always self-identify or associate with the term 'carer'. They also don't often come into contact with social or voluntary services that could help. Many young carers remain hidden from official sight for a host of reasons, including family loyalty, stigma, bullying, not knowing where to go for support.

Carers report mixed experiences about receiving information and advice and how easy it is to find.

Whilst a lot of work has been done to improve the information available and raise awareness about how to find it across all sectors there are clearly improvements still to be made to ensure it is more consistent, more joined-up and more widely available. Local venues such as libraries, community centres, places of worship, schools and health centres play an important role in helping to reach hidden carers.

We know that carers do not always feel valued or as fully involved as they should be

The Care Act requires local authorities to carry out assessments and plan support in a way which promotes wellbeing and the needs of the whole family. It places carers on an equal footing with the person they care for and as this improved way of working is put

into practice, it should have a positive impact for the recognition of carers. The Children and Families Act also promotes a whole-family approach and increases the rights to an assessment for young carers and parent carers.

What we have done well

Numbers of carers registering with Carers Trust Heart of England have increased with nearly 1400 new carers being identified and supported in 2015/16

There was an increase in the number of carers being referred or sign-posted following contact with health professionals and an increase in the number of young carers registering.

These improvements are as a result of targeted work in GP surgeries, the local hospital and in schools. Further funding has been secured to work with primary schools to help identify and support more children with caring responsibilities.

There some good examples of how organisations are working to involve carers

University Hospitals Coventry & Warwickshire have developed the **Forget-me-not Care Bundle** for patients living with dementia which has a strong focus on carers as equal care partners.

The Carers' Centre has moved to Central Library giving it a more prominent position in the city centre and adult carers can now have a Carer's Assessment completed by the workers based there giving them access to this support at an earlier stage.

More carers are being signposted much earlier to the Alzheimer's Society as part of the Dementia Diagnostic Pathway.

Coventry and Warwickshire Partnership Trust worked with carers and users to develop the information leaflets about the new Care Clusters system so that it was written in a way that would be most useful to families.

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

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We will improve:

- a how carers are identified and supported to recognise themselves as carers
- b access to information, advice and support, ensuring this is given at the right time no matter who they talk to
- c carer involvement, on an individual level and in contributing to design of local provision, making sure they are treated as equal expert partners



- ▶ Education
- ▶ Training
- ▶ Employment

Priority Area 2

Realising and releasing potential

Background and challenges

The caring role can impact significantly on educational and vocational opportunities. Managing paid work alongside caring can be tough. The public expenditure costs of carers unable to stay in employment have been estimated to be £1.3 billion a year.

Nearly half of the UK’s carers are juggling work with caring and many give up work to care or reduce their hours. Employers are losing skilled and experienced staff between the ages of 45 and 64 who are in the ‘peak age’ of caring. Carers UK’s **Caring and Family Finances Inquiry** highlighted

the significant concerns among carers about ‘the income shock’ in reducing working hours or giving up paid work altogether at a time when the family is facing additional costs of ill health and disability, care services, adaptations and equipment, higher household and transport bills.

The Children’s Society report **Hidden from view: the experiences of young carers in England** found that excessive and inappropriate caring responsibilities can have a significant and long-lasting effect on education and future prospects.

It highlighted that young carers had significantly lower educational attainment and a greater likelihood of being not in education, employment or training (NEET). Young adult carers not in paid employment

can face significant financial hardship, both in the short and longer term. The average family annual income was £5,000 lower than families who do not have a young carer.

What we have done well

The Young Carers Project run by Carers Trust Heart of England works closely with Coventry schools to raise raising awareness of young carers' issues and ensure these are taken into account in school policies. This service is funded by the Big Lottery and Children in Need.

A wide range of individual learning activities is available for young carers, with the emphasis on encouraging healthier lifestyles and improved skills. Coventry City Council's Passport to Leisure and Learning is issued free to young carers to enable them to

access a wide range of sporting, cultural and educational opportunities at reduced or no cost. The project runs a regular homework and study club which enables young carers to have a quiet space to work and time out from their caring role.

It is really important to help working carers understand their rights in relation to employment and get the support they need to balance work with their caring responsibilities.

We use Carers' Rights Day to raise awareness amongst employees about carer-friendly policies and support available in the city with staff bulletins and drop in advice sessions.

The Job Shop and Job Centre Plus both have links with Carers Trust Heart of England and regularly refer and signpost carers to the information, advice and support service in central library. Job Centre Plus has a team of advisors that handle appointments for people who claim Carers' Allowance so that they are engaging with someone who understands the needs and impact of caring in relation to employment and training.

Coventry City Council works in partnership with Macmillan to ensure that employees who are dealing with a diagnosis of cancer, either personally or who are supporting a loved one, get the help and support they need to help them maintain their employment.

We need to build on this work so that good practice can be rolled out across educational facilities and support can be given to local employers to help improve things further and reach more carers.

A co-ordinated approach through our strategy implementation plan will help maximise resources and have greater impact.

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Enabling those with caring responsibilities to fulfill their education and employment potential

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We will improve:

- a** access to education, training and information that helps them stay in employment or gain employment
- b** the way the needs and wishes of the carer to work or study are considered and respected
- c** how we work with education and employment providers to ensure they are carer-friendly and are able to support carers effectively



- ▶ Preventative support
- ▶ Emergency planning
- ▶ Carers' assessments

Priority Area 3

A life alongside caring

Background and challenges

The caring role can impact enormously on a person's opportunities to spend time doing things they enjoy and maintain and develop friendships and other relationships. Many carers find themselves isolated if they can no longer go out without having support for the person they care for.

This can have a huge effect on a person's emotional and physical wellbeing. Carers' individual circumstances vary enormously and this means that a one-size-fits-all approach to support will not deliver the outcomes that matter most to them and their families. Personalising support so that it fits around the lives, goals and needs of the carer is critical to support them to continue in their caring role, and maintain their own health and well being.

The provision of quality information, advice and support is crucial to make sure families can make informed choices and decisions about the care they are able to provide. We know that wrong assumptions are still often made about the extent and nature of care and support that individuals and families are able and willing to provide, and about the levels of knowledge and preparedness that families have, for example, when a relative is being discharged from hospital or at the end of a period of reablement.

What we have done well

Helping carers and their families to plan and prepare for difficulties or events can help avoid a crisis and is really important. Coventry's CRESS service provides practical support if a carer has an emergency, helping to avoid the need for more disruptive and costly services being put in place, such as an emergency residential placement

Recent years have seen an increase in people using the service, with over 1,000 families registered. The majority of the urgent situations have involved older carers, with over a third of those people caring for someone with dementia. Work is ongoing with GPs and other health services to raise awareness about the service

and identify further vulnerable carers who would benefit.

The Council has been working to update its website and provide more readily available information to assist carers and the people they care for, help them put contingency plans into place and access the support they need.

Technology is developing all the time to manage care needs and health conditions at home but carers still report they are not always made aware of options available.

The initial assessment for carers and the person they care for focusses on identifying where preventative and/or short term support can help to maximise independence and prevent or delay the need for ongoing services. This includes using a greater range of equipment, adaptations and technology

such as Telecare which can assist people to live more independently and in turn, support the carer. There is a need to raise awareness across the whole health and social care and voluntary sectors so that information and products are more widely available.

A whole family approach to assessments allows for more flexible and individually tailored support packages to be put in place, ensuring the carers' needs are considered as part of this process including their need to take flexible breaks.

The assessment can also identify needs that fluctuate enabling support to be used when it is needed; for example, to respond to increased needs when a person's mental health

deteriorates Over the last three years there has been an increase in the number of carers' assessments being completed and support/services provided.

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

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We will improve:

- a** information, advice and access to preventative support such as Telecare, other equipment and training
- b** support with planning for difficulties and emergencies, building resilience and making sure they can get the right support in a crisis
- c** how carers' needs are assessed, making sure it happens at the right time and gives access to flexible, personalised support, including opportunities to take a break



- ▶ Carer training
- ▶ Regular health checks
- ▶ Support carers in the community

Priority Area 4

Supporting carers to stay healthy

Background and challenges

While caring can be very rewarding and fulfilling it can also be emotionally and physically draining and have a major impact on a carer's health and wellbeing. Family carers play a major role in maintaining people in their own homes and communities but need the appropriate support in place to be able to achieve this.

In Carers' UK **State of Caring Survey in 2015**, 82% of carers report that caring has had a negative impact on their health. Three quarters (74%) of carers find it difficult to get a goodnight's sleep (5% more than last year) while nearly half (47%) struggle to maintain a balanced diet. Four in ten (41%) have experienced an injury or their physical health has suffered as a result of caring.

The 2011 census showed the greatest impact on general health appeared among young male adult carers up to age 24 caring for over 50 hours a week who are four and a half times more likely to report poor health as their peers with no caring responsibilities. A similar pattern of poor health was also apparent among young carers under 18 years of age.

A recent report from Carers UK called **Caring into Later Life**, looks at the pressure on older carers. There are 1.2 million carers over the age of 65 in the UK, with 6,494 recorded in Coventry in the 2011 Census. In just 10 years, the number of carers aged 85 and over had grown by 128% and over half provided 50 or more hours of care a week. Nearly three in five carers aged 85 and over were male. 60% of older carers who provided 50 or more hours of care a week said their health was not good, rising to 72% of carers aged 85 and over.

These statistics show the importance of helping carers to maintain good health whatever their age, but also highlight particular groups where we need to target our work through this strategy.

What we have done well

The specialist information, advice and support services provide much needed emotional support, helping carers to plan ahead and minimise adverse effects on carers' health and wellbeing. Carer support groups, health and social activities, peer support, access to discounted therapies and the Passport to Leisure and Learning all contribute to helping carers stay healthy and reduce stress.

Carers' training and learning opportunities, such as the VIP training (Carers Trust Heart of England) and the CrISP programme run by the Alzheimer's Society, have been very beneficial in helping carers recognise the impact of caring and learn strategies to reduce stress and look after their own health and wellbeing. The Council's Staff Development Centre and Carers Trust Heart of England training programmes have helped carers gain skills in

moving and handling, to use equipment and provide care safely, avoiding injury. This support is specifically tailored to individual needs and provided in the home.

The **Carer's Assessment** focuses specifically on different areas of health and wellbeing to help carers identify how their caring role may be affecting them and where they can make changes or get support to reduce the impact.

As the Carers Trust Heart of England develops closer ties with GP surgeries this helps carers at an early stage, encouraging use of preventative initiatives, such as carers' annual health checks and access to flu jabs.

Public Health have a range of activities aimed at promoting **healthy living and wellbeing** and Carers Trust Heart of England is able to offer Passport to Leisure and Learning to carers, giving them access to many activities at significantly discounted prices.

As the Council and Clinical Commissioning Group streamline

their resources and pool budgets, and work more closely together through the Better Care Programme, this is an ideal opportunity to co-ordinate the different projects that are in place and ensure that carers' health and wellbeing are a key focus across all organisations and departments.

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Supporting carers to remain mentally and physically well

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We will improve:

- a** access training and other preventative support, information and breaks from caring to help them stay healthy and care safely
- b** support to enable carers to get to their own health appointments and access regular health checks
- c** support to carers in the community to help reduce emergency hospital admissions and the need for urgent care





Improving lives
for Coventry carers

How we will measure the progress of this strategy

A yearly Implementation Plan will be developed and shared with partner organisations, to enable the implementation of the themes of this strategy and achieve the areas of improvement. Organisations will be asked to pledge their yearly commitments to help improve the lives of carers in Coventry.

Coventry Carers' Strategy Steering Group will monitor the implementation of this strategy and identify developments and gaps using a range of information.

Carers' feedback (on an individual level, through surveys, focus groups, engagement sessions, complaints systems etc.) will be an ongoing measure used to demonstrate areas of good practice, positive experience and improvement.

Data will be collated and analysed wherever possible, comparing performance against previous years and other cities/regions where relevant. For example numbers of carers receiving an assessment, referrals and signposting information, use of services and support available, and statutory reporting required across health and social care provision.

An update report will be produced at the end of each year to demonstrate what has been achieved and to help shape subsequent implementation plans.

Governance and review

Coventry Carers' Strategy Steering Group will oversee the implementation of Coventry Carers Strategy and report to Coventry's Joint Commissioning Boards, which in turn, are accountable to Coventry's Health and Wellbeing Board. The full strategy and its achievements will be reviewed by December 2019.

Many thanks

Coventry Carers' Strategy Steering Group

If you need this information in another format (including easy read) or language please contact us



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For more information about support for carers in Coventry go to

www.coventry.gov.uk/carers