



Cabinet Member for Adult Services

Time and Date

9.00 am on Monday, 4th December, 2023

Place

Diamond Room 2 - Council House

Public Business

1. **Apologies**
2. **Declarations of Interest**
3. **Minutes**
 - a) To agree the minutes of the meeting held on 11 September 2023
 - b) Matters arising
4. **Quarter Two Performance 2023/24 - Adult Social Care** (Pages 3 - 18)
Report of the Director of Adult Services and Housing
5. **Coventry Carers Action Plan 2024-26** (Pages 19 - 64)
Report of the Director of Adult Services and Housing
6. **Adult Social Care Workforce Strategy 2023-26** (Pages 65 - 94)
Report of the Director of Adult Services and Housing
7. **Outstanding Issues**
There are no outstanding issues
8. **Any other items of public business which the Cabinet Member decides to take as matters of urgency because of the special circumstances involved**

Private business

None

Julie Newman, Chief Legal Officer, Council House, Coventry

Friday, 24 November 2023

Note: The person to contact about the agenda and documents for this meeting is Tom Robinson, Governance Services, Email: tom.robinson@coventry.gov.uk

Membership: Councillors L Bigham (Cabinet Member) and S Nazir (Deputy Cabinet Member)

By invitation Councillor B Mosterman (Shadow Cabinet Member)

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Tom Robinson

Governance Services, Email: tom.robinson@coventry.gov.uk



Cabinet Member for Adult Services:

4th December 2023

Name of Cabinet Member:

Cabinet Member for Adult Services – Councillor L Bigham

Director approving submission of the report:

Director of Adult Services and Housing

Ward(s) affected:

All

Title:

Quarter Two Performance 2023/24 – Adult Social Care

Is this a key decision?

No - although the proposals affect more than two electoral wards, the impact is not expected to be significant.

Executive summary:

Adult Social Care performance is measured in line with the Department of Health and Social Care (DHSC) national Adult Social Care Outcomes Framework (ASCOF) and this performance is reported nationally at year end.

Adult Social Care (ASC) also measures a series of locally defined indicators, which are reported to the Adult Social Care Management Team on a quarterly basis.

This report outlines performance against these key indicators for quarter two 2023/24. Directional arrows are displayed to summarise performance compared to previous years against these indicators.

This report updates the Cabinet Member for Adult Services on the quarter two performance, actions in place to improve performance and proposed next steps. It also provides an opportunity for the Cabinet Member to provide comment.

The Cabinet Member for Adult Services will be provided with a quarterly report on performance which feeds into the Adult Social Care Annual Report and annual performance report received by the Cabinet Member and Scrutiny.

The report also gives an update on our Adult Social Care involvement approach including engagement and user experience work undertaken in the previous quarter. This is important alongside numerical performance as it provides a context for what people with care and support needs and their carers consider important and should be used to inform areas for improvement.

Recommendations:

The Cabinet Member for Adult Services is recommended to:

- 1) Note and endorse the action taken in relation to the Adult Social Care quarter two 2023/24 performance including the next steps as outlined in this report.
- 2) Provide any comments in relation to the report.

List of Appendices included:

The following appendices are attached to the report:

Appendix A - Summary ASCOF 23-24 outlines the Quarter Two ASCOF measures.

Background papers:

None

Other useful documents

None

Has it or will it be considered by Scrutiny?

No

Has it or will it be considered by any other Council Committee, Advisory Panel or other body?

No

Will this report go to Council?

No

Report title: Quarter Two Performance 2023/24 – Adult Social Care

1. Context (or background)

- 1.1 Adult Social Care performance is measured in line with the Department of Health and Social Care (DHSC) national Adult Social Care Outcomes Framework (ASCOF) and this performance is reported nationally at year end.
- 1.2 The Adult Social Care Outcomes Framework also measures a series of locally defined indicators, which are reported to the Directorate Management Team on a quarterly basis.
- 1.3 This report outlines performance against these key indicators for quarter two of 2023/24. Directional arrows are displayed to summarise the direction of movement for these measures. Also outlined is information on how Coventry benchmarks against other local authorities based on most recent benchmarking information from 2021/22 with 2022/23 benchmarking not due until November 2023.
- 1.4 There has been a revision of ASCOF measures for the 2023/24 reporting year, and as such, the year-end performance report for 2023/24 will include these revised measures. This does present some challenges in terms of benchmarking data not being available for these measures until around November 2024.
- 1.5 2022/23 marked a substantial improvement in performance across some areas which is important context for 2023/24 where we will aim to consolidate improved performance in a number of areas as well as progress further in others.
- 1.6 ASCOF Performance is reviewed regularly by the senior management team supported by a live dashboard of performance.

2. Performance

Adult Social Care regularly monitors performance against the indicators at operational and strategic levels. This enables remedial actions to be put in place. For Q1 and Q2 there has been focus on safeguarding activity, reviewing and working across the Council to identify employment alternatives for those adults with a learning disability.

ASCOF National Indicators

In respect of specific performance indicators quarter 2 commentary is as follows: (All comparator data is for 2021/22 as 2022/23 comparator not yet available). Note that between quarters it would be unexpected to see a marked change in any indicator but there will be normal fluctuations in performance over time. What is important to identify is where a marked change has occurred, or an upward or downward trend is developing over time.

2.1 Domain 1 below sets out the section on ‘Enhancing the quality of life for people with care and support needs’.

2.1.1 Proportion of adults receiving self-directed support

99.7% of people are receiving self directed support as at the end of Q2. This is in comparison to the West Midland comparator Figure of 90.7%. (2021-22 figure). This is marginal change that is reflective of normal variation throughout the year.

2.1.2 Proportion of carers receiving self-directed support

100% of carers are receiving self directed support as at the end of Q2. This is in comparison to the West Midland comparator Figure of 86.7 %. This is a sustained performance for the service.

2.1.3 Proportion of adults receiving direct payments

22% of people are receiving direct payments as at the end of Q2. This is in comparison to the West Midland comparator figure of 27%. There has been no change from Q1 2021-2022. Work is underway to review our Direct Payment approach and develop new promotional materials including videos from those receiving a payment which have been produced to support uptake and understanding.

2.1.4 Proportion of carers receiving direct payments for support direct to carer

- 62.4% of carers are receiving direct payments for support direct to them - this is an improvement on Q1 and our outturn in the last 2 years but remains lower than the West Midland comparator figure of 78.6%. Work is underway to review our Direct Payment approach and develop promotional materials to support uptake. Recognising this as an area requiring further improvement, the soon to be completed Carers Action Plan contains a specific priority to promote and increase uptake of carers assessments, of which will explore the use of direct payments to support carers in a tailored way. Our Coventry Carers Survey highlighted that awareness of direct payments amongst carers is low; work is currently underway to create carer-specific direct payment information and leaflets and increase awareness of their use with practitioners to ensure these are fully explored with carers at assessment. Coventry City Council also commission specific carers support via the Carers Trust Heart of England to ensure carers are adequately supported with or without a direct payment.

2.1.5 Proportion of adults with learning disabilities in paid employment

1.9% at Q2 (14 adults) with a learning disability known to Adult Social Care are in paid employment. This is a static position and is lower than the West Midland comparator figure of 3.3%. Work continues to be undertaken by the Commissioning team in partnership with the Adult Education Team. The goal of this is enhancing recruitment prospects for individuals in Coventry with a EHCP (Education, Health and Care Plan) facing learning barriers including learning disabilities, mental ill health, Autism, physical disabilities. In July, a roundtable event was held with Adult Social Care providers to inform on employing a supported intern and the benefits of doing so. Following this session, 4 providers signed on to be employers with some offering multiple internship roles. See section 2.4 on Adult Social Care Involvement Approach. Additionally, a focus group has been established to explore community alternatives for facilitating paid employment of adults with a learning disability or mental ill health.

Equally, the Working in Partnership Learning Disability Partnership Group has identified this as an issue across Coventry and Warwickshire and this now sits on the priority action list agreed with Experts by Experience.

2.1.6 Proportion of adults with learning disabilities who live in their own home or with their family

70.7% of adults with learning disabilities live in their own home or with their families. This compares with the West Midlands comparator of 73.8% in 2021/22 and has reduced from 79% in Q1. The drop in performance appears to be related to data capture rather than performance and is currently being investigated further.

2.2 Domain 2 sets out the section for ‘delaying and reducing the need for care and support’.

2.2.1 Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population.

In the last year we saw a reduction in numbers of working age adults admitted to long term residential and nursing care. Whilst the estimate is 23.6 per 100,000 (a reduction on the previous year (25.9) it remains higher than the West Midlands average of 15.2. There has been significant emphasis on the development of alternative provision for adults with enduring mental ill health and/or learning disability and new models of support planned to reduce admission further. Whilst there was an increase in admissions between periods this is subject to seasonal variation

2.2.2 Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population.

The estimated end of year figure is that of 587 older adults (65+) admitted to residential and nursing homes per 100,000 population. The West Midlands comparator figure is 579.5. In 2022-23 there were 728 residents overall admitted showing an improvement based on the current trajectory. However there has been a slight increase in the end of year estimate from 557 to 587 from Q1 to Q2. Whilst there was an increase in admissions between periods this is subject to seasonal variation

2.2.3 Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation (effectiveness of the service)

At Q2 83.3% of people aged 65+ were still at home 91 days after discharge a small positive increase between quarters which can vary based on seasonal impacts. This compares with the West Midlands figure of 81.2%. In 2022-23 Coventry's figure was 81.1% showing an improvement.

2.2.4 Proportion of those that received a short-term service during the year where the sequel to service was either no ongoing support or support of a lower level

79.5% of people in Q2 received a short-term service with little or no ongoing support a small decrease from Q1 but this is subject to variation throughout the year. In 2021-22 this figure was at 75% showing an improvement. The West Midlands comparator figure is 68.7%. This is due to the Adult Social Care Promoting Independence model and therapeutic front door approach leading to improved independence outcomes. Performance in quarter two this year is impacted positively by the Improving Lives work programme across local NHS organisations and Social Care.

2.3 Adult Social Care Local indicators

In respect of directorate indicators quarter 2 commentary is as follows:

2.3.1 Reviews for people in long term support for 12+ months

In Q2 49.6% of people had received a review who are in long term services. In 2022-23 49.2% had had a review during the year.

1,140 out of 2,540 clients accessing long-term services for more than 12 months had a planned/unplanned review during 2021/2022, this was 10th highest in the WM and 116th nationally, below regional (58%) and national averages (57%) for reviews.

There is an improvement plan in place with an aim of achieving 70% compliance within Adult Social Care. Our performance of 49.6% at quarter 2 gives a good level of assurance that we will achieve 70% reviews by the end of 2023/24

Our review performance has been lower in previous years due to the prioritisation of new requests over and above reviewing activity. Targeting resources in this way has been necessary to ensure that those without care provision are safeguarded, supported and the impact on the NHS is reduced. Equally, and despite the additional contacts in the last 12 months this has enabled the focus on promoting independence and enablement that has ensured our conversion into long term support provision has remained at a static 5%.

Whilst outturn performance is lower than the national average, significantly more people in receipt of services will have been consulted on their support provision either through the annual reviews undertaken by Internally Provided Services or via the DoLS assessment process. This offers greater assurance particularly for those placed out of city.

2.3.2 Completion timescales for comprehensive Care Act Assessment (average of days)

An assessment starts as soon as the local authority begins to gather information about the person. This is essentially at the point the person contacts the local authority; however, many people require a comprehensive assessment to support the determination of whether needs are eligible for care and support from the local authority and understanding how the provision of care and support may assist the adult in achieving their desired outcomes. The initial contacts with the person enables us to consider their immediate needs and associated risks and therefore this discussion starts the assessment process. The timescale from this assessment start to completion of a comprehensive assessment is on average 96 days which is an improvement on the average of 114 days overall during the year 2022-23. There has been a slight increase from Q1 from 92 days to 96 days wait time.

In the period between assessment start and assessment completion the management of risk is a priority, with regular contact taking place to monitor changing circumstances and levels of risk. It is also critically important to appreciate that over this period people are not left without support where it is needed with support often put in place as an interim measure while assessment is ongoing, with the assessment determining whether the support provided is effective and what support would be required, if any, on an ongoing basis.

2.3.3 Completion of comprehensive Care Act Assessment (number of people)

As in paragraph 2.3.2, an assessment starts as soon as the local authority begins to gather information about the person. In Q2 330 people have an uncompleted Care Act Assessment. This is an improvement on the 461 overall during the year 2022-23. The number of people with an uncompleted assessment is reducing.

Our commitment to Promoting independence remains one of our core principles and we make best use of short-term services for new people contacting Adult Social Care to promote independence as well as reduce demand on long term services.

2.4 Safeguarding Performance

Safeguarding concerns can be received by Customer Services, Community Discharge Team (Hospital) or directly by practitioners undertaking casework with each of our teams completing safeguarding work.

Decisions in relation to safeguarding concerns and requirement to undertake enquires are primarily led by Intake and Hospital Teams. A performance report is produced that includes data covering the 'end to end' safeguarding process, enabling the tracking of activity, comparison to previous year's performance and identification of any variance in performance. At the end of Q2 2,700 safeguarding concerns had been received (projection for end of year 6,017 compared to 5,899 in 2022-23. 540 safeguarding enquiries have started (projection for end of year 1296, 1055 in 2022-23. The current conversion rate from concern to enquiry is 20% (West Midlands regional median is 16%). As of end of Q2, 95% of safeguarding enquiries resulted in risk being reduced or removed and 85% of safeguarding enquiries were completed in 3 months.

As safeguarding is undertaken across different teams this whole service information is supplemented by a regular report to Adult Social Care Management Team identifying the numbers of safeguarding concerns received, enquiries concluded, categories of abuse recorded and open safeguarding cases.

2.5 Adult Social Care Involvement and Engagement Approaches

2.5.1 Engagement has continued in quarter two to both obtain the views of carers on the proposed Carers Action Plan, and to promote awareness and uptake of general adult social care support. This included attendance at various stakeholder reference groups, pop up sessions at libraries, engagement with voluntary organisations and attendance at specific carers groups to gather feedback to further form the plan. Such engagement and collaborative working has been extremely valuable in ensuring the Carers Action Plan is meeting the diverse and varied needs of carers in the City.

2.5.2 In July, a bespoke in-person forum for learning disability and mental health residential care providers was held to inform of intended engagement from the Commissioning Team to residents within the services. Providers were informed that this engagement is to be conducted with the intention of obtaining an accurate image of residents' experiences of the services they receive such as what is working well and how the Commissioning Team can support providers to improve further.

2.5.3 Additionally, the session featured a presentation on effective engagement methods to overcome communication barriers. Providers then broke out into workshops to discuss and compare impactful and effective engagement techniques with their residents. Providers were also given resources created by CCC Adult Social Care Teams (The Direct Work Toolkit) in addition to the slides from the session to consider different innovative methods of engagement. Providers fed back in the session that they found this helpful and would dedicate some time to review the engagement methods.

2.5.4 Following the provider session, these in-person visits have been undertaken throughout quarter two and continuing into quarter three, to improve understanding of the lived experiences of adults receiving mental health/ learning disability support in residential care settings. The feedback so far from residents has illustrated that the care being delivered has been good and residents are supported to live independently, and they are empowered to have choice and control.

2.5.5 An initiative to improve employment opportunities was jointly undertaken by the Commissioning Team and Adult Education Team. This project was launched in June 2023, with the goal of enhancing recruitment prospects for individuals in Coventry with an Educational Health and Care Plan (EHCP). This includes people with a learning disability, mental ill health, autism, and physical disabilities. The Commissioning Team aims to improve rates of paid employment for adults with a learning disability or mental ill health by increasing opportunities to support individuals into employment. In quarter three it is expected that at least four interns will begin employment with adult social care providers. Additionally, providers will be encouraged to become 'Disability Confident Employers' and support individuals into employment in their services through the supported internship programme.

2.5.6 Carers Trust continue to provide a monthly programme of activities and support groups for carers in the city, including virtual yoga, MILAN carers support group for South Asian carers and flower arranging, wider community events and a mental health support group. They also maintain a presence at food hubs in the city to promote services to unknown carers. Specific support is also available via a monthly support group facilitated by the Alzheimer's Society for carers supporting individuals with dementia or Alzheimer's. Further to the feedback gathered from internal staff during Carers Week 2023 (5th-11th June), work is also underway to launch an internal Working (Unpaid) Carers Network for Coventry City Council staff managing employment alongside their caring role. This network will launch formally in December 2023 to provide support, feed into HR policy, and share information, whilst also helping to feed ideas into commissioned support services for carers in the City.

2.5.7 Following the success of previous open days in the town centre, hospital and in Spon End, a further event took place in November 2023 in Cheylesmore, with further events to be planned. This will include a range of organisations who will provide information, guidance and support relating to Adult Social Care and health and wellbeing. The engagement team continue to prioritise proactively bringing information into communities and supporting the voluntary sector to make valuable links with other local organisations. Examples of this include attendance from Commissioning, Financial Assessments and Carers Trust at the Wyken Court Housing with Care Summer Fayre to enable individuals to speak to council officers and organisations in an informal setting to learn more about support options available and build up our community links. Following the engagement teams attendance at the Faith Partnership Meeting in September 2023 to brief community and faith leaders of ASC open days and their purpose, we intend to further work with these leaders to inform how we tailor events for that community, reduce barriers of access or misconceptions, and support uptake of adult social care from currently under-represented communities.

2.5.8 In continuation of the recruitment and retention offer delivered by the Commissioning Team to the market in February, the Commissioning team undertook two recruitment events in Quarter two. In August, the Commissioning Team organised an event with JobCentre+ where 6 Adult Social Care providers with vacancies were provided allocated time slots to informally interview each of the Job Centre's pre-screened candidates. A total of 10 attendees reported that they found the event to be 'useful' or 'very useful'. Many attendees also reported that they had learned new information about job opportunities in the care sector. A further 21 individuals attended the event, and all had 1-2-1 sessions with employers. At least three people were offered jobs from the event including a team leader position.

2.5.9 The second event took place in September and was organised by the Job Shop. The Commissioning Team attended and hosted a stall to inform people in Coventry actively looking for jobs on the opportunities available to work in a variety of care roles. The team spoke to 70 individuals and took details for 54 to pass on to employers with vacancies. Many interested individuals had previous experience in care roles. Others were interested in care as a new career

and the Commissioning Team informed them on the career development opportunities within Adult Social Care.

2.5.10 These events re-enforced the commitment made by the Commissioning Team to the ASC provider market to support with workforce recruitment and retention. An additional recruitment event will take place with JobCentre+ in Quarter three with support from the Commissioning Team and will move towards making these events self-sufficient.

2.5.11 Ensuring professionals are fully informed on services and support available, a Voluntary Community and Social Enterprise (VCSE) Event was held in Friargate in July 2023 with 150 health and social care professionals in attendance. The event facilitated opportunities for workers and VCSE organisations to network, understand support available via these organisations and discuss opportunities for partnership working moving forwards. Feedback from attendees was overwhelming positive, with 94% of attendees advising they would attend such an event again in the future, and many advising they will be making use of the connections made through the event to better support individuals. This work has been supplemented by the launch of our Practitioner Hub; a one-stop shop for practitioners to access information on all areas of support in one collective place.

2.5.12 Barriers that might exist to involvement have been considered and as a result we have recently introduced a process for the reimbursement of expenses and fees for participation in activities that support the service area.

2.5.13 Feedback is continuously sought from people accessing support via the Experience Survey which is a real-time survey enabling Adult Social Care to have an ongoing picture of how services are viewed, rather than relying solely on the annual survey which gives a snapshot in time. However, there is a need to increase the number of respondents to the Experience Survey. At the end of Q2 a total of 87 surveys had been completed. To obtain an alternative comparable picture to the annual statutory postal survey the target is to receive 300 completed surveys for 2023/24. People are also asked if they want to receive more information about Adult Social Care and 'get involved', helping to grow the group of people who engage with the service.

2.5.14 Survey responses when compared with postal surveys and ASCOF returns identify more positive responses to a person's quality of life, feeling safe and satisfaction with services.

2.5.15 Stakeholder groups and partnership boards including the Adult Social Care Stakeholder Group, the Coventry and Warwickshire Learning Disability Partnership Board and the Autism Partnership Board continue to be supported.

2.5.16 A Voluntary, Community Social Enterprise Forum has been established with the aim of forming closer working relationships to increase use of community support options for new and existing people to social care.

2.5.17 Moving forward, activities to continue to strengthen the communication and feedback loop are being undertaken:

- Continue to grow the number of people who want to be involved and hear their views. Where ASC have acted on feedback, this will be shared on the ASC webpages via a new 'We asked, you said, we did' page.
- The work of Adult Social Care continues to be supported by the ASC Stakeholder Group, who meet regularly to discuss any updates and influence the improvements of the service. The group is made up of Coventry residents who are experienced in how services work.

- We are currently communicating with the 800+ people who subscribe to our news bulletin to ask if they would like to be more involved and if so how and in what areas of the service they are interested in.
- Continued engagement activity in communities across the city such as ASC Open Day's, pop-up stalls, drop-in sessions and presence at partner events.

3. Options considered and recommended proposal

3.1 There are no specific options associated with this report.

4. Results of consultation undertaken

4.1. Consultation is not specifically required on the content of this report, however the detail included in the Adult Social Care involvement approach above, demonstrates how we are seeking to engage on an ongoing basis with people who require support from Adult Social Care and their carers.

5. Timetable for implementing this decision

5.1. The process of performance management and performance improvement is continual, so no specific timescales are associated with this report. Further quarterly reports will be brought to demonstrate performance as the year progresses.

6. Comments from Chief Operating Officer (Section 151 Officer) and Chief Legal Officer

6.1. Financial Implications

There are no direct financial implications arising from this report.

6.2. Legal Implications

Whilst there are no specific legal implications arising from the contents of this report at this stage, it is of note that the Local Authority's general responsibility in delivering services to local people is to promote individual well-being and ensure a vibrant, diverse and sustainable market in services for meeting care and support needs for people in its area. The Adult Social Care Outcomes Framework measures how well local care and support services achieve the outcomes that matter to most people and assist in setting national and local priorities for care and support.

7. Other implications

7.1. **How will this contribute to the One Coventry Plan?**

7.1.2 The performance information and associated improvements outlined within this paper will contribute towards the following One Coventry Plan priorities:

- Improving outcomes and tackling inequalities within our communities
- Increasing the economic prosperity of the city and region

- Council's role as a partner, enabler and leader
- Continued financial sustainability of the council

7.1.3 Throughout the quarter, the objective of the One Coventry Plan, which aims to prioritise carers, was put into action. This involved facilitating training and support sessions, conducting engagement activities to encourage participation in the Unpaid Carers Survey, and maintaining a presence from the Commissioning Team at various carer events and activities across the city.

7.1.4 Adult Social Care has also continued to expand its reach into communities to support improving outcomes and tackling inequalities through a series of events and initiatives. This has also encompassed collaboration with a range of partner organisations reinforcing the Council's role as a partner, enabler and leader.

7.1.5 Many of the strengths-based approaches used within Adult Social Care practice will help support the continued financial sustainability of the Council and also helping to increase the economic prosperity of the city and region by enabling people to remain independent, access employment and activities within the community whilst reducing the reliance upon services. With approximately 9,600 adult social care jobs within Coventry the workforce is also making a significant contribution towards helping to increase the economic prosperity of the city and region.

7.2. How is risk being managed?

7.2.1 Adult Social Care are working on a small number of Improvement Plans to help support the management of risk specifically relating to waiting times for assessment and delays in the undertaking of Annual Reviews for those in receipt of services.

7.2.2 The use of a risk management tool "Responding to Needs Assessment Requests", introduced in 2022, also supports in mitigation of risk, enabling practitioners to make well informed decisions when managing demand.

7.2.3 The Adult Social Care Management Team continuously monitor risk within services through the use of an Adult Social Care Risk Register and the Corporate Risk Register, with the support of the council Insurance Manager.

7.3. What is the impact on the organisation?

None

7.4. Equalities / EIA

Equalities information and data is continuously monitored within Adult Social Care.

7.4 Implications for (or impact on) climate change and the environment?

None

7.5 Implications for partner organisations?

None

Report author(s):

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Contributor/approver name	Title	Service Area	Date doc sent out	Date response received or approved
Sally Caren	Head of Adult Social Care and Support	Adult Services and Housing	08/11/2023	10/11/2023
Aideen Staunton	Head of Service Partnerships and Social Care Operations	Adult Services and Housing	08/11/2023	13/11/2023
Tracey Denny	Head of Service Localities and Social Care Operations	Adult Services and Housing	08/11/2023	14/11/2023
Andrew Errington	Adults Principal Social Worker	Adult Services and Housing	08/11/2023	09/11/2023
Jon Reading	Head of Commissioning and Quality	Adult Services and Housing	08/11/2023	14/11/2023
Ewan Dewar	Head of Finance	Finance	08/11/2023	13/11/2023
Thomas Robinson	Governance Services Officer	Law and Governance	08/11/2023	08/11/2023
Janice White	Team Leader, Legal Services	Law and Governance	08/11/2023	15/11/2023
Names of approvers for submission: (officers and members)				
Pete Fahy	Director of Adult Services and Housing	Adult Services and Housing	08/11/2023	17/11/2023
Councillor L Bigham	Cabinet Member for Adult Services		14/11/2023	16/11/2023

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Adult Social Care Outcomes Framework (ASCOF) 2021/22 to 2023/24

Indicator	Brief Description					Improvement	Comparator	West Mids	England	Rank - England	Quartile	Improvement
		2021/22	2022-23	2023-24 Q1	2023-24 Q2		2021/22	2021/22	2021/22	2021/22	2021/22	Return to move to next quartile
Domain 1 - Enhancing quality of life for people with care and support needs												
1A	Social care-related quality of life	18.9	18.6	18.6	18.6		18.7	18.8	18.9	70	2	19.2
1B	Proportion of people who use services who have control over their daily life	73.7	73.8%	74%	74%		75.7	76.0	76.9	121	4	74.2
1C1A	Proportion of adults receiving self-directed support	86.8	100%	99.8%	99.7%	↔	93.8	90.7	94.5	132	4	93.1
1C1B	Proportion of carers receiving self-directed support	37.1	100%	100.0%	100.0%	↔	98.1	86.7	89.3	143	4	98.4
1C2A	Proportion of adults receiving direct payments	23.4	23%	22.0%	22.0%	↔	30.7	27	26.7	90	3	37.4
1C2B	Proportion of carers receiving direct payments for support direct to carer	37.1	54%	52.3%	62.4%	↑	90.4	78.6	77.6	128	4	67.7
1D	Carer-reported quality of life	7	7	7	7		7.1	7.2	7.3	94	3	7.2
1E	Proportion of adults with learning disabilities in paid employment	2.6 (19)	1.9 (15)	1.9 (14)	1.9 (14)	↔	3.7	3.3	4.8	111	3	
1G	Proportion of adults with learning disabilities who live in their own home or with their family	77.5	80%	79.0%	70.7%	↓	81	73.8	78.8	99	3	81.3
1I1	Proportion of people using services reporting they had as much social contact as they would like	41.7	45%	45%	45%		40.5	41.6	40.6	55	2	42.2
1I2	Proportion of carers who reported that they had as much social contact as they would like	24.6	24.6%	24.6%	24.6		28.4	29.4	28	103	3	26.7
1J	Adjusted Social Care-related quality of life - impact of Adult Social Care Services	0.439	0.423	0.423	0.423		0.408	0.421	0.407	10	1	=

Domain 2 - Delaying and reducing the need for care and support





2A1	Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population	35.1	25.9	5.1 <small>estimated end of year 17.1</small>	12 <small>estimated end of year 23.6</small>	↓	18.9	15.2	13.9	147	4	17.1
	Number of admissions	87	56	11	26							37
2A2	Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population	810.5	728	159 <small>estimated end of year 557</small>	297 <small>estimated end of year 587</small>	↓	582.7	579.5	538.5	138	4	645.3
	Number of admissions	409	367	80	150							325
2B1	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation (effectiveness of the service)	84	81.1%	82.4%	83.3%	↑	79.5	81.2	81.8	78	3	84.5
2D	Proportion of those that received a short term service during the year where the sequel to service was either no ongoing support or support of a lower level	65.1	75.0%	82.6%	79.5%	↓	68.6	68.7	77.6	110	3	76.6

Domain 3 - Ensuring that people have a positive experience of care and support

3A	Overall satisfaction of people who use services with their care and support	62	60.5%	60.5%	60.5%		63.2	62.2	63.9	103	3	63.9
3B	Overall satisfaction of carers with social services	32	32.0%	32.0%	32		35.9	34.6	36.3	110	3	36
3C	Proportion of carers who report that they have been included or consulted in discussion about the person they care for	66.5	66.5%	66.5%	66.5		64.1	61	64.7	50	2	68.1
3D1	Proportion of people who use services who find it easy to find information about services	66.2	70.5%	70.5%	70.5%		63.1	61.6	64.6	61	2	68.5
3D2	Proportion of carers who find it easy to find information about services	58.7	58.7	58.7%	58.7		54.7	54.8	57.7	60	2	61.8

Domain 4 - Ensuring people are safe and protected from avoidable harm

4A	Proportion of people who use services who feel safe	72.0	69.9%	69.9%	69.9%		67.7	70.5	69.2	36	1	=
4B	Proportion of people who use services who say that those services have made them feel safe and secure	85.3	87.4%	87.4%	87.4%		83.8	86.1	85.6	87	3	86

LOCAL	Reviews for people in long term support for 12+ months	44.9%	49.2%	48.4%	49.6%	
LOCAL	Waiting times for Care Act Assessment (average of days)	146	114	92	96	
LOCAL	Waiting list for Care Act Assessment (number of people)	466	461	284	330	
LOCAL	Safeguarding conversion rate from Concerns to Enquiry (%)	15%	17%	24.80%	20%	



Public report
Cabinet Member

Cabinet Member for Adult Services

4th December 2023

Name of Cabinet Member:

Cabinet Member for Adult Services - Councillor L Bigham

Director Approving Submission of the report:

Director of Adult Services and Housing

Wards Affected:

All

Title:

Coventry Carers Action Plan 2024-26

Is this a key decision?

No - although the proposals affect more than two electoral wards, the impact is not expected to be significant.

Executive summary:

The 2021 Census indicated that 27,391 Coventry residents identified themselves as unpaid carers (8% of all Coventry residents). This was a reduction from 31,900 (10% of residents) in 2011. However, the 2021 census was undertaken during the coronavirus (COVID-19) pandemic. This may have influenced how people perceived being a carer and how individuals accepted unpaid care. It is estimated that around 10% of the Coventry population are unpaid carers. The estimated value of unpaid care in Coventry is £680 million per annum (Valuing Carers 2015).

This report provides an update on carers' needs in Coventry, and the resulting action plan to improve our support to carers in the context of these needs. This understanding of needs has been derived from analysis of the biennial Survey of Adult Carers in England 2021/22, a local 'Let's Talk' Coventry Carers Survey undertaken in 2023 and using national information and data sets.

The Carers Action Plan 2024-26 focuses predominantly on adult carers, with some alignment with young carers where required. The plan is a working document, and we aim to continue to work with local carers and third sector organisations to shape the priorities and actions moving forward.

Delivery is expected to be achieved within existing resources across a partnership of the City Council, NHS and third sector partners, although any opportunities to lever in additional resources will be explored.

Recommendations:

The Cabinet Member for Adult Services is recommended to:

- 1) Note and endorse the action taken in relation to the Carers Action Plan 2024-26 including the next steps as outlined in this report.

List of Appendices included:

The following appendices are attached to the report:

Appendix 1 - Carers Action Plan 2024-26

Appendix 2 - Equality Impact Assessment

Background papers:

None

Other useful documents

None

Has it or will it be considered by scrutiny?

No

Has it or will it be considered by any other council committee, advisory panel, or other body?

No

Will this report go to Council?

No

Report title: Carers Action Plan 2024-26

1. Context (or background)

- 1.1.** The 2021 Census indicated that 27,391 Coventry residents identified themselves as unpaid carers (8% of all Coventry residents). This was a reduction from 31,900 (10% of residents) in 2011. However, the 2021 census was undertaken during the coronavirus (COVID-19) pandemic. This may have influenced how people perceived being a carer and how individuals accepted unpaid care.
- 1.2.** The Council's previous Coventry Carers Strategy covered the period 2016-19 and was informed by the National Carers Strategy (2014-16). In 2019 the Council undertook engagement with carers and key stakeholders to feed into a refreshed strategy for 2020, however, with the emergence of COVID-19 and due to the ever-evolving situation and changing needs that presented during that time for carers, it was decided to postpone publication of the strategy.
- 1.3.** Due to the urgent attention needed to refresh the carers support offer as identified via the analysis of national data, the local survey, and engagement with third sector and carers groups, we have moved from a strategy to an action plan to ensure timely action against priorities and influence change.
- 1.4.** The Carers Action Plan 2024-26 will focus on the following three priorities:
 - Empower carers with flexible respite options, ensuring they can take breaks.
 - Deliver the right support, at the right time, and in the right place.
 - Maximise the reach of carers assessments to benefit more carers.
- 1.5.** The City Council will work with Warwickshire County Council and Integrated Care Board colleagues on areas of commonality or where working is aligned.

2. Improvements under the Carers 2016-2019 Strategy

- 2.1.** The previous Coventry Carers Strategy 2016-2019 outlined our ambitions for delivery against four priority areas in alignment with the National Carers Strategy 2014-2016.
- 2.2.** The four priorities were:
 - identification and recognition
 - realising and releasing potential
 - a life alongside caring
 - supporting carers to stay healthy
- 2.3.** The Council continued to work on the priorities beyond the strategy end date, evolving the carer offer and working with partners to meet emerging needs of carers including the COVID-19 pandemic and cost of living pressures.
- 2.4.** These overarching priority areas remain relevant to the current needs of carers and continue to provide the foundation of our approach, alongside the themes identified from our local engagement, national data and results of the biennial Survey of Adult Carers in England 2021/22 to inform the Carers Action Plan 2024-26.

- 2.5. The Government no longer produce a carer specific strategy but in June 2018 published a Carers Action Plan 2018-20. The plan outlined five actions that were expected to be undertaken by local authorities to improve the lives of carers. There has been progress in the delivery of these actions noted below under the Coventry Carers Strategy 2016-19:

Services and systems that work for carers.

- Admiral Nurses was launched in 2016 to support carers of people with dementia offering 1-2-1 advice, support, and practical solutions. This service continues to support carers.
- The Primary Care Support GP accreditation scheme was launched in June 2019. Twenty-six of the 60 GP surgeries in the city engaged with the process, nine surgeries of which signed up for the award and four surgeries achieved the bronze accreditation as a carer friendly GP. Whilst progress on this was paused during the pandemic, work has recommenced to re-establish a carer presence at four GP practices, with work continuing to develop relations with GP practices across the city.
- Carers were supported to register as a carer with their GP to ensure access to additional services including access to flu jabs, longer appointments, annual health checks and signposting to available community support. This activity supports the carer to maintain their health and wellbeing.
- The Triangle of Care, a six-part accreditation programme designed to empower carers when supporting individuals with a mental health condition by ensuring wards are carer aware, was implemented at wards at in the Caludon Centre. Unfortunately, the expansion and continued use of this suffered due to the emerging priorities of the Coronavirus pandemic. Work has now re-commenced to reintroduce this accreditation programme across hospital wards, including University Hospital Coventry and Warwickshire, to ensure all carers feel supported and involved in decisions regarding arrangements for their cared for.
- A new carers assessment form was launched for practitioners in 2019.

Employment and financial wellbeing

- The monthly Carers Bulletin was launched in 2017. Through this communication over 3000 subscribers are updated with the latest information on carers rights and developments, support groups, training, and services to improve carer awareness. Most recently this has included information on cost-of-living support and carers employment rights information.
- Carers Trust were commissioned to deliver Direct Payments on behalf of the Council to support the needs of carers identified as an outcome of having a statutory carers assessment. This ensures timely access and implementation of practical support, with examples of use including the purchase of a washing machine to support with additional laundry requirements, a bed so the carer can stay overnight when needed and driving lessons to transport the individual more quickly and easily than via public transport.

Supporting young carers

- A Young Carers assessment service has been commissioned via Carers Trust to ensure dedicated support in identifying and supporting young carers.

Recognising and supporting carers in the wider community and society

- The Carers Trust launched the Carers Conference and Carers Awards in 2019 to recognise the role and impact of carers within the city. This has been a key step in acknowledging and appreciating carers and businesses or organisations supporting carers. The most recent awards were in 2023.
- The Carers Response Emergency Support Service (CRESS) was expanded to cover planned medical appointments or significant family events of the carer alongside the

emergency support offer. This service offers carers peace of mind and reassurance that their own health, social or cultural activities can still be undertaken whilst ensuring replacement care is in place, vital to supporting carers own wellbeing.

- Carers online self-assessments were launched in 2018, streamlining the process to allow carers to complete and submit a carers assessment via the Coventry City Council website. This has allowed carers to complete an assessment of their own needs and wellbeing at a time most suitable for them.
- The Coventry Dementia Partnership Hub opened in 2023 and is an example of co-production with individuals and organisations. The Hub aims to support people living well with dementia and their carers. The Carers Trust is also a member of the Coventry Dementia Hub Steering Group, helping to shape the service and also provide regular support to carers who attend the Hub.

Building research and evidence to improve outcomes for carers.

- Internal Carers Assessments and Support Plan Guidance was launched May 2019 for adult social care practitioners. This guidance helps further support practitioners when completing carers assessments.
- The Adult Social Care Community Information Directory launched in 2017 as a one stop shop for people to identify and access support in their area on the Coventry website. The directory was refreshed in 2023 and is a key step in ensuring carers can self-serve and identify support relevant to their own specific circumstances. The Council are currently in the process of developing a carer leaflet outlining carer related support services for carers who prefer a paper copy. This was requested as an option during our recent engagement with carers.
- Carers Trust arrange support sessions and courses throughout the year to support carers, including sessions on Grief and Loss, Sleep, Changing the Experience of Pain, and Emotional Resilience. Wellbeing activities such as yoga and flower arranging also take place regularly during the month.

2.6. Summary of Impact - Coventry Carers Strategy 2016-2019

2.6.1. Actions achieved under the strategy have ensured carers have access to a dedicated and consistent support offer across the health and social care system. These actions remain relevant to the current needs of carers and the Council continues to embed and develop them further. This has included increasing the number of carers who receive the carers bulletin to over 3000, which provides information and support options available to carers, to support carers in their caring role and with their own health and wellbeing.

2.6.2. Coventry City Council continue to commission Carers Trust to provide dedicated support to carers in the city. This offer has been adapted since its original launch to reflect emerging need through COVID (for example, virtual day opportunities through resultant lockdowns) and the administration of carers direct payments. As part of their carers support offer, the Carers Trust also further developed their Carers Response Emergency Support Service (CRESS) offer, supporting carers to attend pre-planned medical appointments and significant family events. The Carers Trust also provide a support service for young carers and currently supports over 400 young carers on an annual basis. The Carers Trust and Admiral Nurses form part of the steering group for the Coventry Dementia Hub, which has further increased support options to people living well with dementia and their carers.

2.6.3. In 2022/23, Carers Trust reported the following outcomes based on direct feedback from carers in Coventry:

Carers Trust Carer Reported Outcomes 2022/23

At least one positive outcome	1317
Helped me to carry on caring	441
Helped me to deal with professionals	114
Helped me to improve my finances	165
Helped me to improve my health and wellbeing	948
Helped me to increase my educational attainment	29
Made me feel less alone	653

- 2.6.4. General feedback obtained from carers supported by the Carers Trust is testament of the positive impact of this support for carers. See below comments from some carers supported:

'Thank you for ongoing support, help and advice which always give me a sense of direction and peace of mind.'

'Thank you for supporting me and my grandma and helping us move forward. Your information and support have been so helpful to me in my caring role.'

'Thank you it feels good to talk.'

'Thank you so much for calling I really appreciate it. I continually worry about my husband falling so the sound advice you've given us today is really appreciated.'

- 2.6.5. Feedback from some carers specifically in respect of courses and training facilitated by Carers Trust has been highly positive, as demonstrated below:

'I personally feel the course has changed my approach to life in many ways. It has helped me to be more at peace and has increased my emotional wellbeing, I feel more resilient and confident in my ability to deal with challenges ahead.'

'We have benefitted from her calm, compassionate and non-judgemental approach. Liz has taught us skills and techniques to control our anxiety and deal with stressful situations.'

3. Priorities for Coventry Carers Action Plan 2024-26

- 3.1.** Producing and publishing a Carers Action Plan sets out with clarity how the Council, working with carers and partners, aims to achieve and improve the support offer for carers. The Carers Action Plan 2024-26 is based on analysis of the biennial Survey of Adult Carers in England 2021/22, a local 'Let's Talk' Coventry Carers Survey undertaken in 2023 and using national information and data sets.
- 3.2.** The Carers Action Plan 2024-26 will focus on the following three priorities:
- a. Empower carers with flexible respite options, ensuring they can take breaks.
 - b. Deliver the right support, at the right time, and in the right place.
 - c. Maximise the reach of carers assessments to benefit more carers.

- 3.3.** The following actions will be the main priorities for year one and year two of the Carers Action Plan, with the aim of supporting carers with their own health, wellbeing and reducing the risk of isolation. The actions are directly linked to the following ASCOF indicators 1C2B (proportion of carers receiving direct payments for support direct to carer) 1I2 (proportion of carers who reported that they had as much social contact as they would like) and 3D2 (proportion of carers who find it easy to find information about services). Whilst we will look to make progress against all indicators and areas of support, we recognise further improvements in these three outcomes can make a difference to improving carers daily life.

Year One Priorities (January – December 2024)

- Re-commissioning of carer support services, co-designed with carers and increasing awareness of informal networks and social contacts for carers, reducing the risk of isolation.
- Work with third sector organisations and community groups to explore the potential for 'community alternative' support models or community delivered carers breaks. One of the aims of this approach will be to 'buy back time for carers' to assist them in their daily life and allow carers to have short periods of time away from their caring role to support wellbeing.

Year Two Priorities (January – December 2025)

- Commission a range of respite and break provision, co-designed with carers, and continue to promote the uptake of 'community alternative' support models to empower carers with flexible respite options, ensuring they can take breaks, increase social contact and reduce the risk of isolation and carer breakdown.
- Review options for assistive technology to enable carers to have time away from their caring role and increase opportunities for socialising.

- 3.3.1. We will be undertaking a review of the results of the ASCOF 2022/23 results once released by central government and the outcome of latest biennial Survey of Adult Carers (due January 2024) to determine further specific priority areas.

3.4. Measuring Impact

- 3.4.1. Coventry City Council and its partners commitment to making a difference for carers requires continuous monitoring and evaluation. To ensure the Carers Action Plan's effectiveness, the Council will:

- Review demand for support from both Coventry City Council and commissioned providers, addressing disparities in access among various communities.
- Engage in regular dialogue with carers, including via the Adult Social Care Stakeholder Reference Group and Dementia Hub Steering Group, seeking feedback on the action plan's implementation and potential areas for improvement.
- We will monitor national surveys and data collections, providing valuable insights into the overall impact of our efforts.

4. Local and national data

- 4.1. A range of both quantitative and qualitative data is collected regularly to gain a holistic understanding of how carers are supported and their views. Key information in respect of this include the Adult Social Care Outcomes Framework (ASCOF) indicators, updated on a quarterly basis, the biennial Survey of Adult Carers in England, and locally collected feedback via the 'Let's Talk' Coventry Carers Survey.

4.2. There is room for improvement in most areas detailed in the 2021/22 Survey of Adult Carers and ASCOF indicators, some of which can be attributed to the impact of the COVID-19 pandemic. The majority of responses also highlighted the fact our carer support offer was not fully meeting the needs of carers. We recognise the need to be more flexible in our approach across health and social care, increase engagement and work more closely with carers and partners to develop support options for carers. The Carers Action Plan 2024-26 outlines how the Council and partners will improve this position going forward.

4.3. Quantitative data – ASCOF indicators

4.3.1. The ASCOF indicators, a measure of a local authority's performance in the delivery of statutory social care services, are a combination of Short- and Long-Term data (SALT), Client Level Data Set (CLD) data and elements of qualitative data from the biennial Survey of Adult Carers in England. Local authorities update ASCOF indicators on a quarterly basis and submit data to central government annually.

4.3.2. The below outlines our current 2023/24 ASCOF position in respect of carers specifically for quarter two 2023/24. The yearly ASCOF benchmarking data for 2022/23 is not yet available to compare against other West Midlands authorities or nationally, however comparison data from 2021/22 is noted for reference.

- ASCOF indicator: 1C1B, proportion of carers receiving self-directed support.
 - Q2 2023/24: Coventry City Council 100% (100% being the highest level of performance)
 - Comparators 2021/22: West Midlands 86.7%, England 89.3%
 - Planned action: The Council will continue to ensure via its practice and interactions with carers that we maintain this high percentage.

- ASCOF indicator: 1C2B, Proportion of carers receiving direct payments for support direct to carer.
 - Q2 2023/24: Coventry City Council 62.4% (The higher the percentage the better the performance)
 - Comparators 2021/22: West Midlands 78.6%, England 77.6%
 - Planned action: This indicator has increased for the past three quarters in 2023/24 and is also not reflective of wider elements of support offered to carers which does not require a direct payment, including digital and online skills training and support groups. The number of direct payments received is directly linked to the number of carers assessments completed. A key aim in the action plan is to increase awareness of the benefits of carers assessments and increase uptake which will in turn naturally explore potential options for the use of direct payments to access support. We will be refreshing practitioner knowledge on how direct payments can support carers, highlighting what carers can expect from an assessment and tracking the outcome and quality of assessments to ensure they result in meaningful outcomes. Feedback within our local 'Let's Talk' Coventry Carers Survey also highlighted a lack of awareness amongst carers of how direct payments can be used to offer flexible support. We will shortly be launching carers specific direct payment leaflets and information with the aim of increasing the numbers of carers receiving a direct payment.

- ASCOF indicator 1D: Carer-reported quality of life
 - Q2 2023/24: Coventry City Council 7 (out of a possible maximum value of 12)
 - Comparators 2021/22: West Midlands 7.2, England 7.3. Across all Councils in England the minimum achieved was a score of 6.1, the highest value achieved being 8.4.
 - Planned action: Indicator 1D is a composite measure which combines individual responses from six questions of the biennial Survey of Adult Carers measuring

different outcomes related to quality of life. These outcomes are mapped against six domains; occupation; control; personal care; safety; social participation and encouragement and support. The Carers Action Plan 2024-26 prioritises three overarching areas (flexible respite and breaks options, delivering support at the right time and right place, and maximising the reach of carers assessments) which in turn will aim to positively impact on all six domains of this indicator, thus improving the overall quality of life experienced by carers. The Council will work with Carers Trust and third sector organisations to update the Council website and to centralise information to support easy navigation of support available. The Council and Carers Trust will work with communities, specifically under-served communities and community leaders, to promote information advice and support available. This work will also be undertaken with GP practices to raise awareness of carers support and identify hidden carers.

- ASCOF indicator: 1I2, Proportion of carers who reported that they had as much social contact as they would like.
 - Q2 2023/24: Coventry City Council 24.6% (The higher the percentage the better the performance)
 - Comparators 2021/22: West Midlands 29.4%, England 28%
 - Planned action: Apparent from our local 'Let's Talk' Coventry Carers Survey was how isolating and all-consuming the caring role can become, and the guilt carers can experience in wanting time to themselves despite it being imperative to their overall wellbeing. We also recognise the link between accessing support groups or taking time to socialise with ensuring alternate care provision is in place to allow the carer time to do so. We will target this area in the action plan through ensuring access to respite and break provision is flexible, available, and accessible, including utilising support from charities, grants and promoting community-based alternative options. We will also aim to improve the range of support options available to enable opportunities for socialising with others, and ensuring support groups are meaningful and work to build friendship networks for carers.

- ASCOF indicator: 3B, Overall satisfaction of carers with social services
 - Q2 2023/24: Coventry City Council 32% (The higher the percentage the better the performance)
 - Comparators 2021/22: West Midlands 34.6%, England 36.3%
 - Planned action: Further to both local feedback and national data, we recognise the need to refresh our carers support offer in its entirety to better reflect the current needs of carers in Coventry. This will include a total re-model of commissioned carers support and respite services, work with the third sector and community groups on alternative support models and a review of wider support services available, alongside how we present this information via Coventry City Council website to current and future carers in an accessible, user-friendly manner. Our Carers Action Plan 2024-26 centres on three key areas to improve this offer, specifically access to flexible respite and break provision, ensuring the right support is delivered at the right time and right place, and maximising the reach of carers assessments. By developing these areas in conjunction with carers themselves we can provide a robust offer, tailored to need, which will in turn make a positive difference in levels of carer satisfaction.

- ASCOF indicator: 3C, Proportion of carers who report that they have been included or consulted in discussion about the person they care for
 - Q2 2023/24: Coventry City Council 66.5% (The higher the percentage the better the performance)
 - Comparator 2021/22: West Midlands 61%, England 64.7%

- Planned action: A key action within our Carers Action Plan 2024-26 is to work with the Integrated Care Board, health professionals, advocates, and Adult Social Care practitioners to ensure carers are involved in decisions and are kept informed through hospital admissions and discharge. It is imperative that carers are involved in such discussions to ensure their expertise and insight on the individuals support needs are considered, to ensure they themselves as carers are willing and able to deliver support, and whether there is any further support either individual requires.
- ASCOF indicator: 3D2, Proportion of carers who find it easy to find information about services.
 - Q2 2023/24: Coventry City Council 58.7% (The higher the percentage the better the performance)
 - Comparator 2021/22: West Midlands 54.8%, England 57.7%
 - Planned action: In undertaking local engagement we have received feedback carers would like information to be easily available, with specific requests for this to be available in paper formats. We will also consider the accessibility of information, including use of social media, ensuring this is available in areas frequented regularly by carers, for example supermarkets, GP practices, pharmacies, food hubs, and schools and colleges (for young carers) and that its contents resonate with individuals who may not identify as or realise they are a carer. We recognise taking on a caring role can often happen gradually over time, overnight, or even without realising; improving carer awareness and access to information prior to taking on the role will ensure people can better recognise themselves as a carer sooner and are therefore aware of where to access support to reduce delay. The Council will work with partners and engage with young and adult carers to promote training for carers and understand any gaps in training, for example condition specific training. The Council will work with Carers Trust to develop a carer mental health and resilience toolkit to support carers with their own mental health and wellbeing.
- SALT data 2021/22: No. of carers supported per 100,000.
 - Related statistics: Coventry City Council outturn 457, West Midlands average 856 (The higher the number the better the performance)
 - Planned action: Coventry City Council and partners aim to improve and increase knowledge of carer support services, carers assessments, and access to respite and break provision as outlined in the Carers Action Plan 2024-26. Ensuring carers have access to appropriate support is essential to carers remaining safe, well, and able to complete their caring role as needed. This number does not however capture services and support accessed through third sector organisations, including Carers Trust, Alzheimer's Society and Age UK, who work to support a significant number of carers with information, advice and practical support. In 2022/23, Carers Trust supported 2327 individual carers (6830 contacts) in the city with information, advice, and support. There is also a significant number of carers who self-serve via assessing information and advice available online. Notably through our local 'Let's Talk' Coventry Carers Survey and evident in national research, carers do not necessarily recognise themselves as carers or relate to carer-specific services or information, thus creating a barrier to accessing support. Through a refresh of our website and literature, reviewing the language used to ensure relatability and recognising the potential societal and cultural barriers to accessing support (for example in some cultures there is no translation for the term 'carer') we can tailor our offer to the diverse needs of carers in the City.

4.4. Qualitative data

- 4.4.1. NHS Digital conduct a biennial Survey of Adult Carers in England on behalf of the Department of Health and Social Care to provide qualitative data on how effective,

suitable and accessible carers view the support available in the city. The results of this survey feed into monitoring, and specific questions are used to populate measures in the NHS Transformation Directorate, formerly Adult Social Care Outcomes Framework (ASCOF) as noted above.

4.4.2. The results from the biennial Survey of Adult Carers in England 2021/22 provided useful context on the demographics and overall caring responsibilities of carers in Coventry, as follows:

- 71% of Carers live with the person they care for
- 41% of Carers spend over 100 hours a week caring.
- 34% of Carers have been performing caring duties for over 10 years.
- 43% of Carers are aged between 18-64
- 73% of people looked after by Carers are aged over 65.

4.4.3. The biennial Survey of Adult Carers 2021/22 results, along with the results of our local 'Let's Talk' Coventry Carers Survey in 2023, have highlighted specific areas that necessitate improvement actions. This includes a focus on improving the isolation carers experience, carers not feeling safe and carers not having enough time for themselves.

4.4.4. Themes of self-neglect, increased isolation and community contact scored at a higher rate than the regional and national averages. The Coventry City Council Insight Team reported that 19% of Coventry neighbourhoods are amongst the 10% most deprived nationally in England (CCC Insight Team, Health and Wellbeing 2019-23 Strategy Data) which likely contributed to the reported levels of self-neglect and limited social contact due to affordability.

4.4.5. The 2023/24 biennial Survey of Adult Carers in England has been circulated to Coventry residents between October – November 2023. The results of this survey are expected to be available in January 2024 and will further inform the Carers Action Plan 2024-26.

4.4.6. Results of the national 2021/22 biennial Survey of Adult Carers are noted below against regional and national comparators, alongside how we will work to improve these areas via the Carers Action Plan 2024-26. The biennial Survey of Adult Carers 2021/22 was sent to 1027 carers who had received an assessment or review within the 12 months prior to the survey, with 314 responses (30.5%) received.

- **Percentage of carers who feel they have no control over their daily life.**
 - Related statistics: Coventry City Council outturn 20.5%, West Midlands average 16.5%, National average 15.7% (The lower the percentage the better the performance)
 - Planned action: Whilst many factors outside of adult social care will affect how carers respond to this question, Coventry City Council and partners aim to address the issue of carers feeling they have no control over their daily life by ensuring access to a variety of tailored, flexible, and reliable break and respite options by commissioning and identifying more creative support options. A new community alternative model of support is currently being designed and will be launched shortly. We also aim to also increase the numbers of carers utilising assistive technology by improved communication and networking, to increase carers 'free' time.
- **Percentage of carers who feel they are neglecting themselves.**
 - Related statistics: Coventry City Council outturn 24.5%, West Midlands average 20.3%, National average 19.5% (The lower the percentage the better the performance)

- Planned action: Coventry City Council and partners aim to increase access to alternative support options for carers to ensure they have time to themselves. The pressure of the cost-of-living crisis, especially within areas of high deprivation, can also contribute to carers neglecting their own needs to support their cared for. Carers who may be at financial risk can be identified using the Low-Income Family Tracker (LIFT) where support can be targeted to at risk households to assist carers manage their finances and be supported to understand benefit entitlement. To date through pilot work, 17 carers have been supported to claim pension credit. We will continue to work closely with and promote support organisations who can offer financial advice or support to carers, and scope work on community alternatives support to ensure communities are equipped to identify individuals who are potentially neglecting themselves and offer support or seek this from services where appropriate.
- **Proportion of carers who are 'extremely worried' about their personal safety.**
 - Related statistics: Coventry City Council outturn 3.6%, West Midlands average 2.1%, National average 2% (The lower the percentage the better the performance)
 - Planned action: Whilst many factors outside of adult social care will affect how carers respond to this question, further engagement is planned with Coventry carers to better understand the cause of this concern in respect their personal safety. We are keen to understand further whether this is due to external factors outside of social care, for example the area they live, environmental concerns or other factors. Following this we will include specific actions to address this in our Carers Action Plan 2024-26 moving forward and feed into wider work with partners on aspirations for the city.
- **Percentage of carers who have safety concerns.**
 - Related statistics: Coventry City Council outturn 19.9%, West Midlands average 19.1%, National average 19.4% (The lower the percentage the better the performance)
 - Planned action: Whilst factors outside of adult social care will impact the levels of safety reported by carers, the Coventry Household Survey 2022 provides further context in relation to feelings of safety by residents in the city, with 77% feeling safe during the day in their local area, but only 45% feel safe after dark. Residents living in Longford, Henley, Lower Stoke and Upper Stoke reported as having a particularly low level of safety. Coventry City Council, Adult Social Care, and Housing teams will work with the Police, the Councils Community Safety Team and other partners to better understand this area including the support required and will target initial work towards those wards reporting a lower sense of safety.
- **Percentage of carers who feel they receive no encouragement or support in their caring role.**
 - Related statistics: Coventry City Council outturn 25%, West Midlands average 26.4%, National average 22.8% (The lower the percentage the better the performance)
 - Planned action: Though Coventry City Council has a lower percentage than the West Midlands average, although higher than the national average, we still aim to work with partners to support carers and ensure they feel valued and encouraged to undertake their caring role. This includes working with local businesses (for example, leisure and hospitality businesses) to develop a carers offer and a Go CV+ discount to promote carers overall health and wellbeing. We will also work to proactively circulate and publicise information on our support offer to enable carers to self-support or access services, ensuring such information is readily available in a range of settings and formats. Through the new community alternative model, we aim to improve the support available to carers in their community to ensure they do not feel alone in their role and that they feel supported.

- **Percentage of carers who feel they never have enough time to carry out their carer responsibilities.**
 - Related statistics: Coventry City Council outturn 8.1%, West Midlands average 6.1%, National average 5.5% (The lower the percentage the better the performance)
 - Planned action: Coventry City Council will further investigate via engagement with carers and a review of best practice and offers of other local authorities how assistive technologies can support carers in their caring role and give carers a break. An important aim of our new community alternative model support offer will be to give time back to carers. The Council will develop a respite FAQs document to support understanding of available options, which include use of direct payments.

5. Local engagement

5.1. The Carers Action Plan 2024-26 has been developed following a series of engagement exercises with both carers and local third sector organisations. This includes targeted work to gain an understanding of how we can better support carers.

5.2. To further understand and respond to carers' needs, the Adult Social Care Commissioning Team created and administrated a localised survey launched via the Let's Talk platform on 7 March 2023. This survey ran until 12 May 2023. There were responses from 163 individuals.

5.3. Results of the local 'Let's Talk' Coventry Carers Survey echoed similar themes to the 2021/22 Survey of Adult Carers in England. These themes are noted below. What is evident is the life changing impact that the COVID-19 pandemic has had upon carers' lives and how many still feel that a return to pre-COVID 'normality' is out of reach. The local 'Let's Talk' survey highlighted the challenges many carers experience, including:

- Theme: Poorer experiences of social care and healthcare provision, particularly hospital discharge and access to Primary Care. This included confusion on roles and responsibilities of each organisation.
 - Planned action: The Council's local 'Let's Talk' survey indicated carers most commonly seek support from their GP in the first instance. GP's and primary care are therefore a key link to identifying hidden carers and a segway for the introduction of support or information to these individuals. To capitalise on these links, Carers Trust have linked with four primary care services in the city to hold drop-in clinics and carers assessments at GP practices, with a view to expanding this further. We will continue to work with the Integrated Care Board, health professionals and Adult Social Care practitioners to ensure carers are involved in decisions and kept informed through hospital admissions and discharge processes.
- Theme: The psychological impact of COVID lockdowns and feelings of abandonment during this time. Caring responsibilities increased or intensified; many carers reported caring until breaking point.
 - Planned action: Counselling, group or peer support and emotional support is available to carers (since a pause from lockdown) and we will continue to promote awareness and uptake of these services to improve this position via our website, communications, carers assessments, monthly carers bulletins and Adult Social Care open days taking place across the city.
- Theme: Lack of consistent or suitable breaks

- Planned action: As noted in the Carers Action Plan 2024-26, respite and breaks are a specific focus and we will work with carers to design an offer that is relevant and fit for purpose, reliable and flexible to individual requirements.
- Theme: Continued anxiety around infection risks from COVID.
 - Planned action: The Council will ensure carers are informed on available vaccinations (flu, COVID etc) and have access to training or information on infection control practices. Our monthly Carers Bulletin and website provide a wealth of information provided from Public Health and other health colleagues to provide an overview of the latest information to support carers.
- Theme: Economic challenges are a significant concern, with some carers depleting savings and struggling to afford essentials like food and heating.
 - Planned action: The Council will utilise our LIFT tracker to identify possible 'hidden carers' who may need some support and information. Carers Trust continue to provide support to carers through carers one-off direct payments on behalf of the Council; these are often used to support or relieve carers with financial pressures related to their caring role, for example, a new washing machine to support additional laundry requirements. A comprehensive cost of living training session was delivered by the Coventry Law Centre to Carers Trust staff to equip them with knowledge of and links to local support available to support individuals struggling with these financial pressures. Ongoing advice in respect of this will continue to be distributed via their general communications and when undertaking carers assessments where workers can support carers in identifying and applying for applicable benefits, grants, and financial support.
- 5.4. To further develop and finalise the Carers Action Plan, ongoing engagement and consultation has taken place with carers, third sector organisations and the Stakeholder Reference Group and Dementia Steering Group.
- 5.5. Views and experiences of carers have been used to form the priorities outlined in the Carers Action Plan 2024-26.

6. Community Alternatives Model of Carers Support

- 6.1. A community alternatives model of support is currently being designed by the Council's Carers Team and partners to identify community support options for carers. One of the aims of the project will be 'buy back time for carers', to assist them in their daily life and allow carers to have short periods of time away from their caring role.
- 6.2. The options being explored consist of free low-level support aiming to provide meaningful, practical aid to carers. This will include shopping and errand running, providing supervision or 'sit in' support to the cared for to allow carers to pop out, or support with household tasks such as cooking or gardening.
- 6.3. In addition, through this work we will grow awareness of unpaid carers in the community, enabling the community to better identify people or themselves as carers, and ensure support can be accessed in a timely manner. Through building relations and community support networks, we aim to increase individuals' sense of safety within their local area.

7. Carers' Rights

- 7.1.** The Carers Leave Act 2023 allows carers to take up to 5 days unpaid 'Carers' Leave' from work to care for older, disabled or seriously ill relatives or friends. In addition, the Employment Relations (Flexible Working) Act 2023 gives carers, from the first day of employment, the legal right to ask their employer for flexible working arrangements including changes to working hours, times, or location. Carers are also able to ask for a different flexible working arrangement more than once a year.
- 7.2.** Both Acts are expected to come into force in 2024 and will support working carers to remain in employment whilst juggling their caring responsibilities. Coventry City Council will ensure promotion of these rights with both unpaid carers and employers in the City, including adult social care providers, via our communications to carers, through carers assessments, via our literature and making links with employers.

8. Young Carers and Young Adult Carers

- 8.1.** A young carer is defined in The Care Act 2014 as a child or young person under 18 and a young adult carer is as aged between 18 and 25 who provide unpaid care for a friend or family member who is disabled, physically or mentally ill, has a long-term serious illness, or has a substance misuse problem. This is a role that many young people are happy and proud to do. However, inappropriate or excessive levels of caring by children and young people can put their education, training or health at risk, and may prevent them from enjoying their childhood.
- 8.2.** Some young carers may be susceptible to poor outcomes because they frequently miss out on normal childhood experiences and lack the social networks experienced by their friends without caring roles. Evidence shows that 30% of Young Carers experience problems at school with attendance, attainment, and social development, rising to 40% where they care within a family affected by substance misuse. In addition, there may be physical problems such as excessive tiredness or injury from lifting and assisting others, and emotional and mental health problems such as stress, anxiety, depression, and a sense of isolation.
- 8.3.** Coventry City Council commissions specific young carers support through the Carers Trust "Young Carers Project" to assist the local authority in identifying and providing information and support to young carers, and complete statutory "Young Carers' Needs Assessments" on behalf of the council through a delegated responsibility under Section 17 of the Children Act 1989. In 2021/22, The Carers Trust completed 157 young carers needs assessments and a further 91 complete in 2022/23. The service maintains contact with approximately 400 young carers on an annual basis.

9. Culturally Sensitive Support

- 9.1.** To ensure our Carers Action Plan 2024-26 best supports individuals from under-served communities, we will be working with a range of third sector organisations supporting such communities to better tailor our carer support offer and breakdown barriers in accessing support by working to provide culturally sensitive services, information and advice, and targeted promotion within underserved communities. This will include the use of translators and translated literature, ensuring staff delivering services or assessments are aware of potential cultural sensitivities, and working with existing contacts and community leaders to help build trust within these communities. We have progressed action in this area through meeting with leaders of the 'Multi-Faith Forum' to request support in our engagement with communities and have also linked with the Migration Team to better understand the needs of Hong-Kong and Cantonese carers to develop specific literature and support to ensure understanding by individuals of this culture.

10. Palliative and End of Life Care Support

- 10.1.** The demand on unpaid carers when providing palliative and end of life support to a loved one can often lead to some of the most physically, emotionally, and mentally challenging times they will experience. Alongside this they may be experiencing their own feelings of shock, worry and grief. It is therefore profoundly important that personalised, sensitive support is in place.
- 10.2.** Coventry City Council will continue to work alongside the Integrated Care Board to ensure carers are a priority in all elements of planning and delivery of the aims of the Palliative and End of Life Strategy. In addition to this via the Compassionate Coventry and Warwickshire: Experience of Care Project working group, we will use carers experiences to inform how services are delivered.

11. Co-dependencies

- 11.1.** The Carers Action Plan 2024-26 will not sit in isolation to other policy documents and will supplement and enhance the following strategies and implementations plans:
- Coventry and Warwickshire's Living Well with Dementia Strategy (2022-2027)
 - Coventry and Warwickshire All Age Autism Strategy (2021-2026)
 - Coventry and Warwickshire - Integrated Care Partnership – Strategy (2022)
 - Palliative and End of Life Care Strategy (2023-2028)
- 11.2.** To ensure efficiency and best use of resources the local authorities, Coventry and Warwickshire will work jointly where actions are aligned across the individual action plans, for example improving the carer offer of GP's and primary care.

12. Options considered and recommended proposal.

12.1. Option One – Endorse the Carers Action Plan 2024-26 (recommended option)

Producing and publishing a Carers Action Plan sets out with clarity how Coventry City Council, collaborating with partners, aims to achieve to improve the support offer for carers in Coventry. The Carers Action Plan 2024-26 is based on carer engagement, local

requirements, and using national information and data sets, focusing on three priority areas to better support carers in the city.

12.2. Option 2 – Maintain existing carers support offer and not endorse the plan (not recommended)

The existing carers support offer is not reflective of current carer needs as reported in both national and local surveys. To continue with this offer could lead to a decline in carers reported satisfaction and possible increased carer breakdowns.

13. Timetable for implementing this decision

Should the Carers Action Plan 2024-26 be endorsed, implementation will commence with immediate effect.

14. Comments from Chief Operating Officer (Section 151 Officer) and Chief Legal Officer

14.1. Financial Implications

14.1.1. The Carers Action Plan 2024-26 has been developed jointly with local carer groups, Stakeholder Reference Group and Dementia Steering Group, NHS partners and the third sector. The aims of the Carers Action Plan will be met from within the existing financial resources available.

14.1.2. By ensuring carers are supported we aim to prevent carer breakdown and deterioration of the mental and physical health of both the individual and carer by ensuring carers are equipped to provide care for the individual. Without this support costly interventions can often be required and cause additional distress to both the carer and cared for.

15. Legal Implications

15.1. The Care Act (2014) is a pivotal piece of legislation which created parity of esteem for carers, meaning that carers have the same legislative rights to an assessment and are considered to have needs in their own right. This means that anyone who identifies as a carer can request a carer's assessment. The general duty of a local authority in exercising its functions under the Care Act 2014 in respect of an individual is *'to promote that individual's well-being'* and in the case of carers, this includes the *'importance of achieving a balance between the individual's well-being and that of any friends or relatives who are involved in caring for the individual'* and when completing a carer's assessment the Authority must specifically consider whether a carer is "willing" and "able" to provide care and to continue to do so. This is a crucial conversation with any carer receiving an assessment of their needs.

15.2. More broadly the Care Act 2014 places a responsibility on local authorities; to "prevent, reduce & delay" the needs of people from arising. Carers form a significant part of this responsibility and are key to prevention. This has meant that locally services have been developed to respond to carers needs at a much earlier point in their journey, even at the point of contemplating taking on caring responsibilities.

15.3. The Care Act 2014 has had an impact on the way services are delivered to carers. The Care Act 2014 is explicit that services such as replacement care and respite are considered services for the cared for person. This then has an impact on the way in which services are

charged for and means tested. However direct support for carers such as Carers Direct Payments are not charged for.

15.4. The Council has a legal obligation under section 149 of the Equality Act 2010 to have due regard to the need to eliminate discrimination, advance equality, and foster good relations between those with a protected characteristic and those who do not share it. These matters have formed an integral part of the decision-making processes in relation to the continuation of the Dementia strategy. The Council continues to engage with service users and representative groups, and use the information and views gathered in its consultation and equality impact in order to achieve accessible and inclusive service provision.

16. Other implications

16.1. How will this contribute to the One Coventry Plan?

16.1.1. The Carers Action Plan 2024-26 will contribute to the One Coventry Plan in a number of ways including:

- Improving outcomes and tackling inequalities within communities
- Continued financial sustainability of the Council.
- Council's role as a partner, enabler and leader

16.2. How is risk being managed?

16.2.1. Without a robust Carers Action Plan in place to improve support for carers, we risk the general health and wellbeing of carers and the individuals which they support.

16.2.2. There is also an increased financial risk where preventative action is not taken to support carers and reduce the risk of carer breakdown, resulting in increased care costs.

16.2.3. Any risks identified as part of delivery of the Carers Action Plan will be managed via Coventry City Council and Integrated Care Board governance mechanisms.

16.3. What is the impact on the organisation?

None

16.4. Equalities / EIA?

16.4.1. An EIA is attached as Appendix 2 to this report and indicates both carers and individuals will benefit positively from the proposed Carers Action Plan, including:

- Promoting services to and encouraging uptake of support from underserved communities. Specifically, we will be working with community leaders and faith groups to improve understanding of support available and how this can be accessed.
- Reduce barriers to accessing support (e.g., digital, financial) by ensuring this is available in a range of settings, communities and locations across the city and is not reliant on technology to deliver training, for example a mix of online and in person training or support.

17. Implications for (or impact on) climate change and the environment?

None.

18. Implications for partner organisations?

18.1. The Carers Action Plan 2024-26 supports the Health and Care system vision that we will do everything in our power to enable people across Coventry to pursue happy, healthy lives and put people at the heart of everything we do. Partner organisations involved in the development of the Carers Action Plan will contribute to the delivery of the priorities outlined.

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This report is published on the council's website: www.coventry.gov.uk/meetings

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Appendix One

Coventry Carers Action Plan 2024-2026

Who are carers?

Carers can be of anyone of any age, ethnicity, or background, with most of us likely to be affected by or have caring responsibilities at some stage in our lives. While this role can be immensely rewarding, it can also significantly impact the carer's life, affecting their own health, well-being, and opportunities.

Identifying carers

The role of a carer might not be immediately apparent, often perceived simply as assisting a loved one. This support can take various forms, such as practical tasks, personal care, emotional support, advocacy, or financial management. Though each carer's experience is unique, their contribution is invaluable, and the person they care for would struggle without their support.

Support for carers

If you are a carer, you may be entitled to a range of support and benefits to assist both you and the person you care for. This includes:

- Carers Assessment: This is a way to discuss your needs as a carer, and the impact this may have on you, with a professional. This can be as a combined assessment with the person you look after, or a separate carers assessment.
- Carers Allowance: You could be entitled to a weekly Carers Allowance benefit if you care for someone at least 35 hours a week and they receive certain benefits.
- Access to support specifically for carers, including respite or replacement care (allowing carers to take a break from the caring role or ensuring the individual receives care in event of an emergency), support groups, information and advice, training and other health and wellbeing support (for example, counselling or group support sessions).
- The individual you are supporting is also entitled to a social care assessment to understand their needs and possible support options.

Further information on carers assessments, support and how to access this are available via the Council website. You can also complete a Carer's Assessment for yourself on our website. Information is also available via the Carers Trust Heart of England, an organisation commissioned by the Council to deliver a range of support (including training, support, information and advice and planned and emergency breaks) to carers in Coventry, with no charge to the carer.

Key objectives

The Carers Action Plan 2024-26 has been developed following analysis of the biennial Survey of Adult Carers in England 2021/22, a local 'Let's Talk' Coventry Carers Survey undertaken in 2023 and using national information and data sets.

The Carers Action Plan 2024-26 therefore focuses on three priority areas to improve the services and support carers experience:

1. Empower carers with flexible respite options, ensuring they can take breaks
2. Deliver the right support, at the right time, and in the right place
3. Maximise the reach of carers assessments to benefit more carers

Measuring impact

Our commitment to making a difference for carers requires continuous monitoring and evaluation. To ensure the Action Plan's effectiveness, we will:

1. Review demand for support from both Coventry City Council and commissioned providers, addressing disparities in access among various communities.
2. Engage in regular dialogue with carers, including via the Adult Social Care Stakeholder Reference Group and Dementia Hub Steering Group, seeking feedback on the plan's implementation and potential areas for improvement.
3. We will monitor national surveys and data collections, providing valuable insights into the overall impact of our efforts.

Definitions:

Adult Carer: 'An adult who provides or intends to provide care for another adult (adult needing care)' Section 10(3) Care Act 2014

Parent Carer: 'A person aged 18 or over who provides or intends to provide care for a disabled child for whom the person has parental responsibilities.' S97 children and Families Act 2014

Young Carer: 'A person under 18 who provides or intends to provide care for another person of any age, except where that care is provided for payment, pursuant to a contract or as voluntary work.' S96 Children and Families Act 2014

Helpful Links:

For carers seeking support or more information, we provide an online Carers Assessment tool on the Coventry City Council website. Additional resources are available on our carers' information pages. For specific support services, you can connect with the Carers Trust Heart of England, an organisation commissioned by the Council to provide assistance without any charge to the carer.

We encourage all carers and those who suspect they may be carers to take advantage of the resources and support available. Together, we can make a positive and lasting impact on the lives of carers in our community.

[Online Carers Assessment – Coventry City Council](#)

[Coventry City Council – carers information pages](#)

[Carers Trust Heart of England](#)

[Carers Allowance \(GOV.UK\)](#)

Coventry Carers Action Plan 2024-2026

The Carers Action Plan is based on carer engagement, local requirements, and using national information and data sets, focusing on three priority areas to better support carers in the City. The action plan is a working document, and we aim to continue to work with local carers and third sector organisations to shape the priorities and actions moving forward.

Priority 1: Empower carers with flexible respite options, ensuring they can take breaks

Carer Outcome: I have access to a flexible break options to enable me to have a break from caring when needed

Ref:	We Will	Priority Year One:	Year One Actions (January -December 2024)	Priority Year Two:	Year Two Actions (January -December 2025)	Related Data / Engagement Source (ASCOF, Survey of Adult Carers in England, Let's Talk Carers Survey, National Carers Action Plan)
1.1	Commission a range of respite and break provision, develop a 'community alternative' support model to empower carers with flexible respite options, co-designed with carers, ensuring they can take breaks, increase social contact and reduce the risk of isolation.	High	Work with third sector organisations and community groups to explore the potential for 'community alternative' support models or community delivered carers breaks.	High	Review and map current respite provision, usage, gaps, barriers, and demand.	<p>•ASCOF indicator: 1C2B, Proportion of carers receiving direct payments for support direct to carer</p> <p>•ASCOF indicator 1D: Carer-reported quality of life</p> <p>•ASCOF indicator: 1I2, Proportion of carers who reported that they had as much social contact as they would like</p> <p>•ASCOF indicator: 3B, Overall satisfaction of carers with social services</p> <p>•Survey of Adult Carers: Percentage of carers who feel they never have enough time to carry out their carer responsibilities</p> <p>•Survey of Adult Carers: Percentage of carers who feel they have no control over their daily life</p>
			Investigate alternative offers or routes to accessing breaks, e.g. charities, grants and alternative holidays.		Scope and confirm commissioning arrangements for respite and carer breaks (market research and best practice, scope and confirm requirements). Decisions and designs to be co-produced with carers.	
			Increase awareness of informal networks and social contact opportunities for carers.		Commence commissioning activity to commission a range of break and respite services, co-produced with carers. To include: -Planned, contingency and emergency breaks -Short, medium and long term options	
					Review success of community alternative / community delivered carers breaks and scale up where successful.	
1.2	Improve information on respite and promote carers breaks to support carer wellbeing and prevent carer breakdown.	Medium	Refresh Coventry City Council website on respite and break information, including information on costs, entitlement, options, purpose and how to access.	Medium	Information on respite and break options available on the Coventry City Council website and Coventry Information Directory.	
			Develop respite / carer break FAQ's document, including information on the use of direct payments to access respite and replacement care.		Promotion of respite and break services at Adult Social Care open days and in Carers Bulletin.	

			Promotion of respite / break information with under served communities (e.g. pop ups / information circulated in temples, community centres etc.) working with community leaders to improve awareness.		Practitioner refresher training to inform of respite / break provision and ensure these are considered when assessments are undertaken.	<ul style="list-style-type: none"> •National Action Plan: Services and systems that work for carers •Local 'Lets Talk' Survey: Lack of consistent or suitable breaks •National Action Plan: Recognising and supporting carers in the wider community •National Action Plan: Building research and evidence to improve outcomes for carers
			Review process for administering carers direct payments and literature to support positive conversations around direct payments by practitioners.			
1.3	Review options for assistive technology to enable carers to have time away from caring role and increase opportunities for socialising.		Utilise existing technology and resources to support carers.	High	Review options for assistive technology to enable carers to have time away from their caring role, including understanding of best practice and the offer of / methods of commissioning assistive technology by other local authorities.	
					Engagement activity with carers as to whether any of the assistive technology options identified are of interest or benefit, and gauge demand.	
					Explore approach to and commence commissioning of assistive technology, dependant on outcome of engagement and market research.	
					Work with carers to ensure confidence in use of technology (training, information, access to equipment etc).	

Coventry Carers Action Plan 2024-2026

The Carers Action Plan is based on carer engagement, local requirements, and using national information and data sets, focusing on three priority areas to better support carers in the City. The action plan is a working document, and we aim to continue to work with local carers and third sector organisations to shape the priorities and actions moving forward.

Priority 2: Deliver the right support, at the right time, and in the right place.

Carer Outcome: I have flexible support options at the right time and right place to support me as a carer to maintain my health and wellbeing

Ref:	We Will	Priority Year One:	Year One Actions (January -December 2024)	Priority Year Two:	Year Two Actions (January -December 2025)	Related Data / Engagement Source (ASCOF, Survey of Adult Carers in England, Let's Talk Carers Survey, National Carers Action Plan)
2.1	Improve information and resources available to carers to help them make informed decisions to support them in their caring role and their own wellbeing.	Medium	Coventry City Council to work in conjunction with Carers Trust and third sector organisations to update Council website to centralise information and identify support options available for carers - information to be easy to navigate, clear, and specific to audience (e.g. adapted for young carers, translated and culturally sensitive).	Medium	Coventry City Council to work with Carers Trust to develop a carer mental health and resilience toolkit.	<ul style="list-style-type: none"> •ASCOF indicator 1D: Carer-reported quality of life
			Coventry City Council and Carers Trust to work with communities, specifically under served communities, and community leaders to promote information and advice services into communities and everyday messaging to reach hidden carers and reduce barriers to identifying as a carer or accessing support.		Coventry City Council to work with Carers Trust to develop carer self support pack.	<ul style="list-style-type: none"> •ASCOF indicator: 3B, Overall satisfaction of carers with social services •ASCOF indicator: 3D2, Proportion of carers who find it easy to find information about services
			Work with GP's, pharmacists and health professionals to raise awareness of how to identify and support carers, knowledge of carers support services and referral mechanisms to Carers Trust and other support services.		Improve awareness and uptake of carers direct payments through clear information sharing and promotion at assessment, open days and literature.	<ul style="list-style-type: none"> •Survey of Adult Carers: Percentage of carers who feel they are neglecting themselves
			Work with schools and colleges to identify young carers and promote young carers support options, advice and assessments.		Increase use of social media promotion and information sharing to target different age groups, as appropriate, including use of promotion by prominent local public figures and campaigns.	<ul style="list-style-type: none"> •Survey of Adult Carers: Proportion of carers who are 'extremely worried' about their personal safety
			Increased visibility and presence of Carers Trust and carers support / information services in communities e.g. GP's, pharmacy, food hubs, library's, community centres, gyms, supermarkets, ASC open days etc.			<ul style="list-style-type: none"> •Survey of Adult Carers: Percentage of carers who have safety concerns

			Work with the Integrated Care Board on Compassionate Communities project to improve carers experience across the health and social care system.			<ul style="list-style-type: none"> •Survey of Adult Carers: Percentage of carers who feel they receive no encouragement or support in their caring role •Local 'Lets Talk' Survey: Poorer experiences of social care and healthcare provision, particularly hospital discharge and access to Primary Care. This included confusion on roles and responsibilities of health and social organisations. •Local 'Lets Talk' Survey: The psychological impact of COVID lockdowns and feelings of abandonment during this time. Caring responsibilities increased or intensified; many carers reported caring until breaking point. •Local 'Lets Talk' Survey: Continued anxiety around infection risks from COVID. •Local 'Lets Talk' Survey: Economic challenges are a significant concern, with some carers depleting savings and struggling to afford essentials like food and heating. •National Action Plan: Employment and financial wellbeing •National Action Plan: Recognising and supporting carers in the wider community •National Action Plan: Supporting young carers
2.2	Ensure carers have access to practical support by way of peer support groups, telephone or face to face support and community networks to increase opportunities for socialising and reduce the risk of isolation.	Medium	Promote training and understand gaps in training needs through consultation with young and adult carers e.g. condition specific training such as dementia, autism, mental health, resilience, bereavement	Medium	In person / online 'induction style' training to assist carers in caring role (informed from yr. 1 engagement).	
			Develop a range of meaningful support groups available to carers, including activity based sessions, informal sessions and friendship building.		Develop a carers resource guide for professionals to summarise support options available.	
2.3	Provide additional support in respect of the cost of living, benefits advice and getting back into work or education, to support carers with managing finances.	Medium	Coventry City Council to engage with all unpaid carers identified via the Low Income Family Tracker (LIFT) to inform of available support services, carers assessments, benefits entitlement, respite and break options and support available via the Carers Trust.	Medium	Create a cost of living support pack in conjunction with third sector organisations.	
			Ensuring carers are aware of their legal rights through clear communications, a strong community presence and working with local businesses and employers.		Work with third sector organisations to support people into voluntary or paid work.	
2.4	Ensure a range of support is available to promote carers overall wellbeing and safety.	High	Re-commission a range of carers support services co-designed with carers	Medium	Work in partnership with Carers Trust and with local businesses to develop 'carer friendly offers' in the city.	
			Work towards a Go CV+ discount for carers (including young carers) to allow a flexible membership to be utilised when time is available.			
			Engage with carers, carers support organisations, housing, community safety team and the police to understand reasons why carers do not feel 'safe' and potential actions we can take to address and improve this.		Further year two actions dependant on year one engagement.	

Coventry Carers Action Plan 2024-2026

The Carers Action Plan is based on carer engagement, local requirements, and using national information and data sets, focusing on three priority areas to better support carers in the City. The action plan is a working document, and we aim to continue to work with local carers and third sector organisations to shape the priorities and actions moving forward.

Priority 3: Maximise the reach of carers assessments to benefit more carers.

Carer Outcome: I am aware of my right to a carers assessment, have access to a choice of a joint or separate assessment, and that this leads to a meaningful outcome(s) to support my caring role

Ref:	We Will	Priority Year One:	Year One Actions (January -December 2024)	Priority Year Two:	Year Two Actions (January -December 2025)	Related Data / Engagement Source (ASCOF, Survey of Adult Carers in England, Let's Talk Carers Survey, National Carers Action Plan)
3.1	Improve carers awareness of carers assessments, the benefits of an assessment, and its intended outcomes to ensure carers have access to all support options available.	Medium	Review and refresh Coventry City Council information on carers assessments available on both the Council and Carers Trust website to include what this is, the benefit of having an assessment and how to access (e.g. online assessment, Carers Trust, joint assessment etc.).	Medium	Work with advocacy organisations to affirm an advocacy offer for carers and raise awareness.	<ul style="list-style-type: none"> •ASCOF indicator: 1C1B, proportion of carers receiving self-directed support •ASCOF indicator: 1C2B, Proportion of carers receiving direct payments for support direct to carer
			Commence re-commissioning activity for delegated carers assessments.			<ul style="list-style-type: none"> •ASCOF indicator 1D: Carer-reported quality of life
			Increase the number of carers assessments completed.			<ul style="list-style-type: none"> •ASCOF indicator: 3B, Overall satisfaction of carers with social services
			Complete carers assessment refresher training for practitioners.			<ul style="list-style-type: none"> •ASCOF indicator: 3C, Proportion of carers who report that they have been included or consulted in discussion about the person they care for
			Promotion of carers assessments via Carers Bulletin, Carers Trust, partner organisations, Adult Social Care Open Days and in particular with under served communities.			<ul style="list-style-type: none"> •Local 'Lets Talk' Survey: Poorer experiences of social care and healthcare provision, particularly hospital discharge and access to Primary Care. This included confusion on roles and responsibilities of each organisation.
			Carers Trust to have a visible presence, promoting carers support and assessments in areas of high carer population in the city (GP's, pharmacies, food banks, library's, community assets).			<ul style="list-style-type: none"> •National Action Plan: Services and systems that work for carers

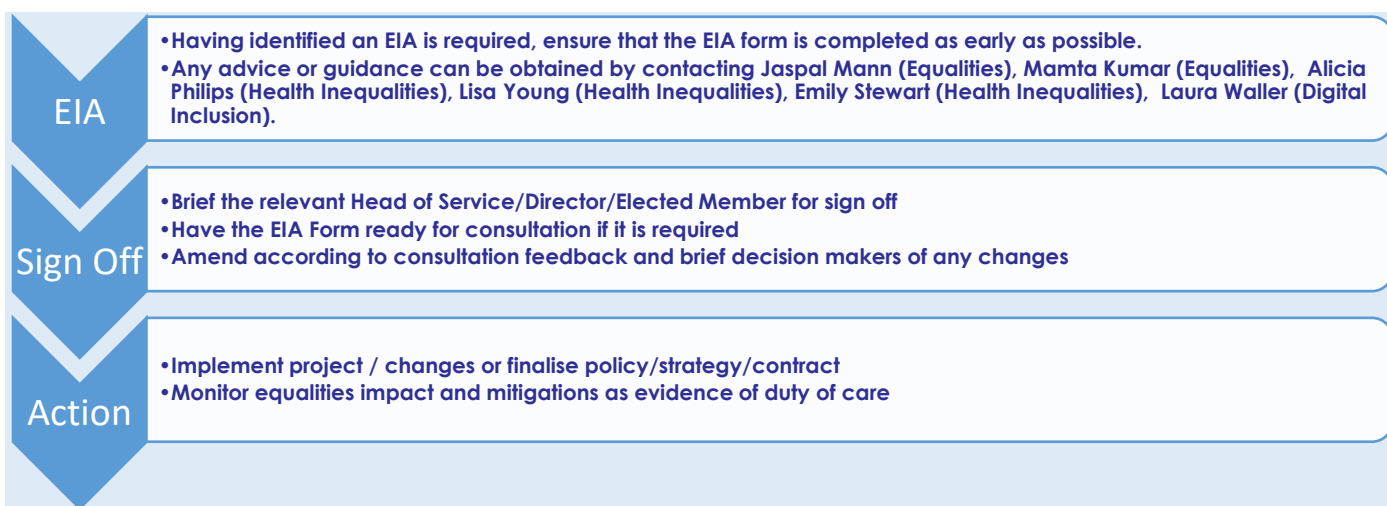
3.2	Improve access to carers assessments, including clear referral routes and pathways by other organisations, to reduce barriers in accessing support.	Medium	Develop process map for referral routes to assessment and for carers assessment process (for use by individuals and professionals).	Medium	Understand any barriers to referrals from GP / healthcare professionals and review potential to streamline referral process, if required.
			Work with Integrated Care Board / health professionals and Adult Social Care practitioners to ensure carers are involved in decisions and kept informed through hospital admissions and discharge.		Inform providers of adult social care of how to identify and support carers, and how to refer for assessment (including use of provider forums and provider bulletins).
3.3	Ensure carers assessments lead to positive, meaningful outcomes for carers	Medium	Outcomes of carers assessments are tracked on a quarterly basis to ensure assessments are resulting in meaningful actions and support for carers.	Medium	Review potential for a carer / expert by experience led audit process to ensure assessments are resulting in better outcomes for carers.
			Ensure practitioners are equipped and aware of support options for carers.		
			Quarterly dip sampling of carers assessments for quality assurance purposes.		

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EQUALITY IMPACT ASSESSMENT (EIA)



Title of EIA		Coventry Carers Action Plan (Appendix Two)
EIA Author	Name	Chloe Elliott
	Position	Commissioning Officer / Carers and Engagement Lead (covering)
	Date of completion	19/09/2023
Head of Service	Name	Jon Reading
	Position	Head of Commissioning and Quality
Cabinet Member	Name	Cllr Linda Bigham
	Portfolio	Adult Social Care



PLEASE REFER TO [EIA GUIDANCE](#) FOR ADVICE ON COMPLETING THIS FORM

SECTION 1 – Context & Background

1.1 Please tick one of the following options:

This EIA is being carried out on:

- New policy / strategy
- New service
- Review of policy / strategy
- Review of service
- Commissioning
- Other project (please give details)



1.2 In summary, what is the background to this EIA?

The Care Act (2014) is a pivotal piece of legislation which created parity of esteem for carers, meaning that carers have the same legislative rights to an assessment and are considered to have needs in their own right. This means that anyone who identifies as a carer can request a carer's assessment. The general duty of a local authority in exercising its functions under the Care Act 2014 in respect of an individual is *'to promote that individual's well-being'* and in the case of carers, this includes the *'importance of achieving a balance between the individual's well-being and that of any friends or relatives who are involved in caring for the individual'* and when completing a carer's assessment the Authority must specifically consider whether a carer is "willing" and "able" to provide care and to continue to do so. This is a crucial conversation with any carer receiving an assessment of their needs.

More broadly the Care Act 2014 places a responsibility on local authorities; to "prevent, reduce & delay" the needs of people from arising. Carers form a significant part of this responsibility and are key to prevention. This has meant that locally services have been developed to respond to carers needs at a much earlier point in their journey, even at the point of contemplating taking on caring responsibilities.

The Care Act 2014 has had an impact on the way services are delivered to carers. The Care Act 2014 is explicit that services such as replacement care and respite are considered services for the cared for person. This then has an impact on the way in which services are charged for and means tested. However direct support for carers such as Carers Direct Payments are not charged for.

The Council has a legal obligation under section 149 of the Equality Act 2010 to have due regard to the need to eliminate discrimination, advance equality, and foster good relations between those with a protected characteristic and those who do not share it. These matters have formed an integral part of the decision-making processes in relation to the continuation of the Dementia strategy. The Council continues to engage with service users and representative groups, and use the information and views gathered in its consultation and equality impact in order to achieve accessible and inclusive service provision.

Coventry City Council remain committed to supporting unpaid carers and work with local providers and third sector organisations to ensure a quality support offer is available. The Coventry Carers Action Plan 2024/26 takes over from the previous Coventry Carers Strategy 2016-2019 and outlines our priorities and actions over the next two years to support carers in the city. The action plan meets both the statutory needs of carers and the support requirements as advised by carers themselves.

There has been delay in producing this document due to the COVID-19 pandemic; the Coventry Carers Strategy 2020 was halted due to the monumental changes in carers needs, demands and responsibilities, some of which have remained long term. The Council continued to work on the priorities beyond the strategy end date, evolving the carer offer and working with partners to meet emerging needs of carers including the COVID-19 pandemic and cost of living pressures. An action plan (as opposed to a strategy) has therefore been developed to address the short, medium and long term priorities of carers post pandemic and demonstrate how we will progress our support offer to carers at pace.

1.3 List organisations and people who are involved in this area of work?

Internal

Adult Social Care Senior Management Team
Practitioners / Community Case Workers



Cabinet Member for Adult Services / Director of Adult Social Care / Adults Commissioning Head of Service
Stakeholder Reference Group
Dementia Hub Steering Group

External

Carers Trust Heart of England
Unpaid Carers
Third sector organisations in the city

SECTION 2 – Consideration of Impact

Refer to guidance note for more detailed advice on completing this section.

In order to ensure that we do not discriminate in the way our activities are designed, developed and delivered, we must look at our duty to:

- Eliminate discrimination, harassment, victimisation and any other conflict that is prohibited by the Equality Act 2010
- Advance equality of opportunity between two persons who share a relevant protected characteristic and those who do not
- Foster good relations between persons who share a relevant protected characteristic and those who do not

2.1 Baseline data and information

- Please include an analysis of the equalities data your service holds. This could include surveys, complaints, compliments, management information and customer profiles. *(Please refer to Diversity Guide)*
- Where possible compare your data to local data using
 - Facts about Coventry
 - Census 2011
 - Census 2021
 - JSNA

A carer is anyone who cares, unpaid, for a friend or family member who due to illness, disability, a mental health problem or an addiction cannot cope without their support. Caring for someone can take up a few hours each week, or a carer may be caring for 24 hours a day, seven days a week. An individual may look after more than one person.

The role of unpaid carers in adult social care is invaluable, with unpaid carers contributing the equivalent of 4 million paid care workers to the social care system nationally. Without them, the system would collapse.

A recent report, 'Caring in a complex world' May 2023 notes carers themselves are not always able to access the support they need, there is limited research and evidence on interventions to support unpaid carers, and

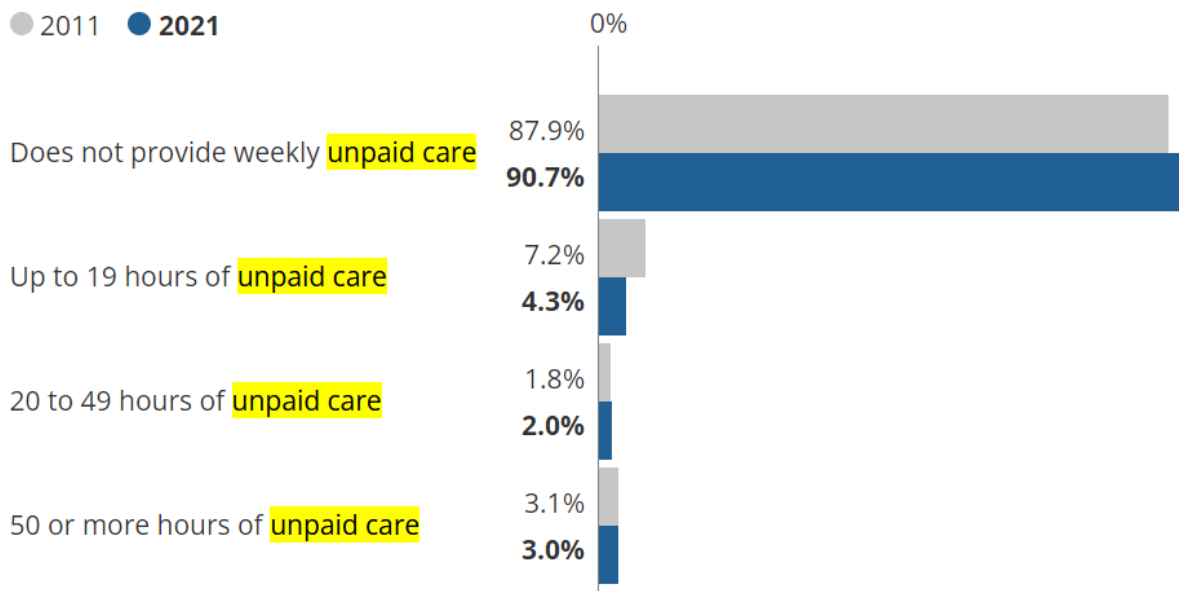


general issues within the adult social care market (for example, workforce shortages or funding issues) have a direct impact to the overall health and wellbeing of carers as they bridge any such shortfalls.

Census 2021 data reported around 27,391 (8%) of Coventry residents provided some unpaid care, however estimates put this figure closer to 55,000 (around 10-15%). Whilst this is a reduction on previous Census data (31,900 carers reported in Census 2011) Census 2021 was undertaken during the coronavirus (COVID-19) pandemic. This may have influenced how people perceived and managed their provision of unpaid care, and therefore may have affected how people chose to respond.

The hours of care delivered by Coventry residents is as follows as reported in Census 2021 data:

Age-standardised proportion of usual residents (aged five years and over) by hours per week of unpaid care provision, Coventry



National data:

Data from the Census data 2021 indicates:

- The percentage of people providing unpaid care was higher in females than males (10.3% of females provided unpaid care compared to 7.6% of males)
- There were approximately 120,000 young unpaid carers (1.4% of 5-17 year olds)
- There was a higher percentage of people providing unpaid care in the most deprived areas of England and Wales

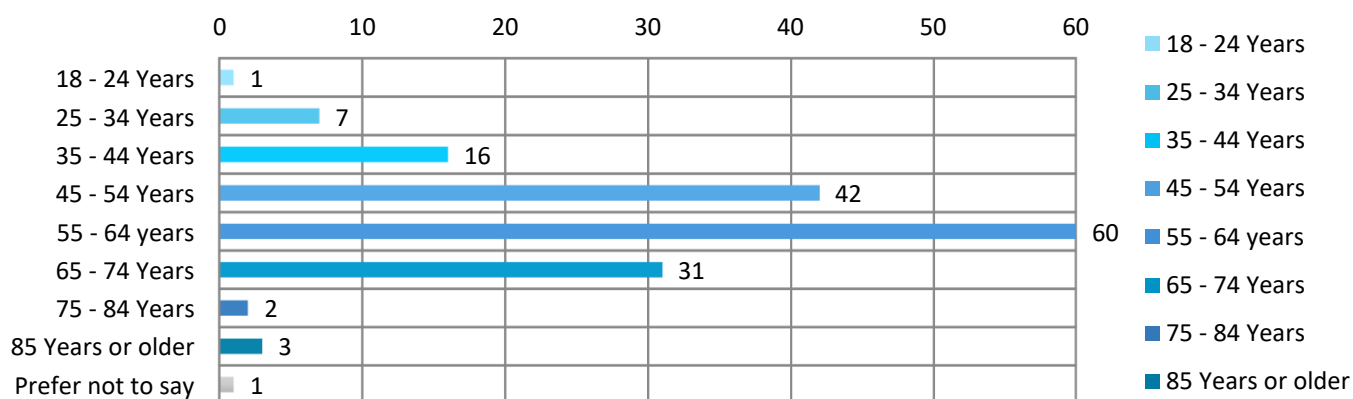
Coventry data:

To shape our Carers Action Plan 2024/26 a 'Lets Talk' Coventry Carers Survey was undertaken by the Council from March-May 2023 to understand current demographics, presenting needs and trends. A total of 163 people responded to the survey, of which demographic related data is as follows:

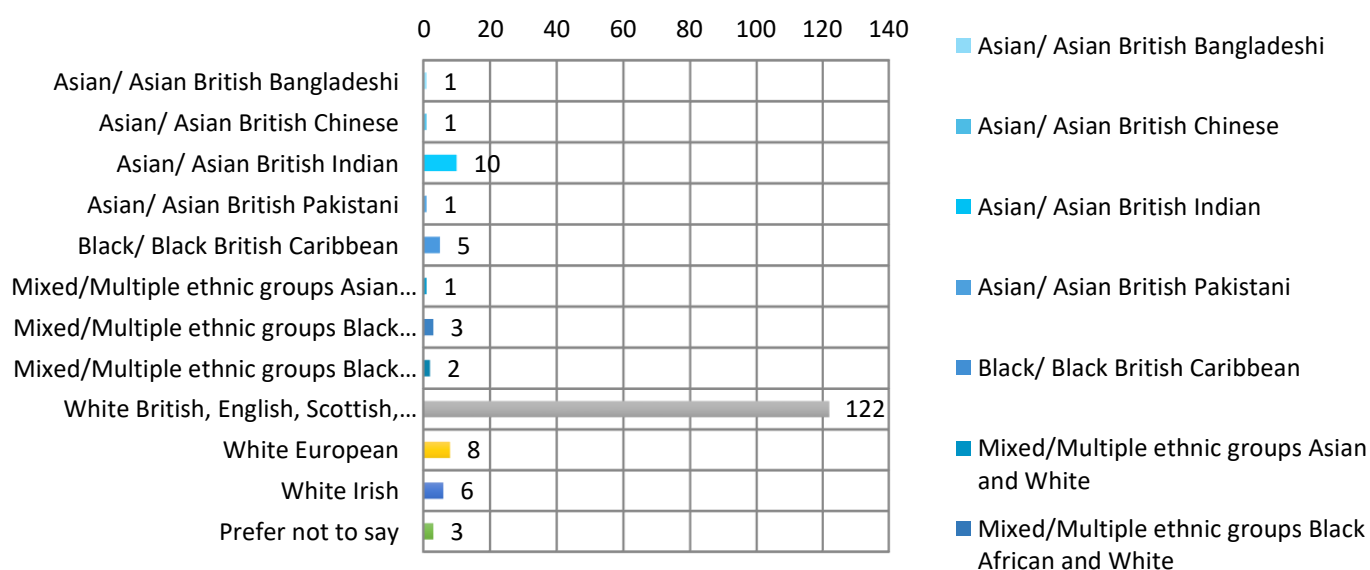
Age range:



Please tell us yo...



Please tell us yo...



- 60% of carers advised their day to day activities were limited in some way because of a health problem or disability which has or is expected to last at least 12 months
- 28% of responders advised their emotional wellbeing was either bad or very bad

The results of the 'Lets Talk' survey further informed us of the following:

- The majority of responders were aged between 45-64 and of White-British ethnicity
- The majority of responders have been caring for over two years, with many supporting individuals for over 10 years
- The majority of responders (60%) were either limited a little or limited a lot due to their own health problem or disability
- 69% of responders are in full or part time work or study
- 53% of responders have or would like to reduce their working hours due to their caring responsibilities

EQUALITY IMPACT ASSESSMENT (EIA)



- Long term physical health conditions, older adult / frailty and physical disability were the most common reasons for responders supporting individuals
- Affordability, lack of suitable provision or choice, feeling unable to leave the person they care for and the cared for not wanting alternative care were the most common barriers to taking a break from the caring role.
- The majority of responders did not know where to go for support, how to access this or what support options were available.
- A large number of responders had concerns in respect of the cost of living crisis and in affording care / future care

The survey results act as a clear baseline to work towards improvements and provide clear direction to set the priorities in the Carers Action Plan 2024/26.

2.2 On the basis of evidence, complete the table below to show what the potential impact is for each of the protected groups.

- Positive impact (P),
- Negative impact (N)
- Both positive and negative impacts (PN)
- No impact (NI)

Any impact on the Council workforce should be included under question 5.0 – **not below*

Protected Characteristic	Impact type P, N, PN, NI	Nature of impact and any mitigations required
Age 0-18	P	<p>As many as 1 in 5 children and young people may be a young carer. Census data 2021 indicates there are around 120,000 young unpaid carers in England, however estimates place this number significantly higher. Alongside worries, stress, and isolation (one in three young carers advising they are stressed in their caring role) being a young carer can negatively impact their experience in education and have can prevent them from making friends or having a social life.</p> <p>Whilst the Carers Action Plan is targeted at adult carers, it contains general actions in improving carer awareness, support and uptake (and outcomes of) carers assessments and some specific actions in respect of young carers. This group should therefore benefit positively from the plan due to increased awareness and support.</p>
Age 19-64	P	<p>This age group will benefit positively. 77% of carers who responded to the Let's Talk Carers Survey were within this age range. This echos national themes from the Census 2021 data where females aged between 55-59 provided the most unpaid care (19.9%). Despite these statistics, recent data from our commissioned carers support provider indicates low uptake of support from this age group.</p>

EQUALITY IMPACT ASSESSMENT (EIA)



		<div data-bbox="751 376 1270 734" style="border: 1px solid black; border-radius: 15px; padding: 10px;"> <p>New carers registering by age range.</p> <table border="1"> <thead> <tr> <th>Age Range</th> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Unknown</td> <td></td> <td></td> <td>14</td> <td>10</td> <td>24</td> </tr> <tr> <td>65+</td> <td>105</td> <td>103</td> <td>79</td> <td>59</td> <td>346</td> </tr> <tr> <td>55-64</td> <td>61</td> <td>57</td> <td>53</td> <td>34</td> <td>205</td> </tr> <tr> <td>45-54</td> <td>50</td> <td>52</td> <td>31</td> <td>44</td> <td>177</td> </tr> <tr> <td>35-44</td> <td>23</td> <td>21</td> <td>24</td> <td>16</td> <td>84</td> </tr> <tr> <td>25-34</td> <td>11</td> <td>8</td> <td>6</td> <td>13</td> <td>38</td> </tr> <tr> <td>19-24</td> <td>6</td> <td>5</td> <td>1</td> <td>2</td> <td>14</td> </tr> <tr> <td>0-18</td> <td>47</td> <td>34</td> <td>58</td> <td>32</td> <td>171</td> </tr> </tbody> </table> </div> <p>Work is therefore required to ensure support delivered matches the demographics of those in unpaid caring roles. The Carers Action Plan 2024/26 therefore specifically looks to improve support in the following areas linked to this age group:</p> <ul style="list-style-type: none"> - Increase awareness of carers identification and rights - Increase reach and uptake of carers assessments (a process which assesses the needs of carers in their caring role and ensure that they have access to information, support and respite or short breaks) - Ensuring access to support at the right time and right place - Increased knowledge of and access to flexible respite and break provision, allowing carers to have a break from their caring responsibilities. 	Age Range	1	2	3	4	Total	Unknown			14	10	24	65+	105	103	79	59	346	55-64	61	57	53	34	205	45-54	50	52	31	44	177	35-44	23	21	24	16	84	25-34	11	8	6	13	38	19-24	6	5	1	2	14	0-18	47	34	58	32	171
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Age 65+	P	<p>This group will benefit positively, both in respect of individuals receiving care and the carer themselves. A total of 20% of carers who responded to the 'Lets Talk' Coventry Carers Survey advised they supported an individual due to 'older adult / frailty' and 22% of carers themselves advised they were aged 65 and over.</p> <p>This age group will therefore benefit positively from increased information and advice (information on carers support will be available in both digital and paper formats to ensure accessibility) training, mental health and general support for the carer. In turn, the individual being cared for should experience increased quality of care and a reduced risk of carer breakdown due to carer burnout.</p>																																																						
Disability		<p>This group will benefit positively, both in respect of individuals receiving care and the carer themselves.</p> <p>60% of carers who responded to the 'Lets Talk' Coventry Carers Survey advised they had a form of disability themselves; 36% of individuals who required support had a physical disability, and 16% had a learning disability.</p> <p>The Carers Action Plan includes work to improve the accessibility and quality of training for carers to better equip them to deliver support, whilst promoting the uptake of carers assessments to ensure carers are considering and prioritising their own needs.</p>																																																						
Gender reassignment	NI																																																							

EQUALITY IMPACT ASSESSMENT (EIA)



Marriage and Civil Partnership	NI	
Pregnancy and maternity	NI	
Race (Including: colour, nationality, citizenship ethnic or national origins)	P	<p>This group will be impacted positively.</p> <p>As noted by Carers UK, many carers from Black, Asian and minority ethnic backgrounds do not often recognise themselves as carers. Likewise, cultural expectations of the roles of family members mean they do not identify as being a carer and are simply fulfilling expected roles. Cultural differences such as this may be a barrier to individuals accepting support for either themselves or the person they care for. Research from Carers UK noted that Black, Asian and minority ethnic carers were:</p> <ul style="list-style-type: none"> - More anxious about their current financial situation - More likely to be impacted by the closure of local services - More likely to state that the services in their area did not meet their needs <p>We are also aware that rates of mental health problems can be higher within some Black, Asian and ethnic minority groups as a result of racism, discrimination and social and economic inequalities. There may also be some practical language barriers in accessing and understand information and support.</p> <p>To ensure our Carers Action Plan best supports individuals from underserved communities, we will be working with a range of third sector organisations and community leaders to better tailor our offer and breakdown barriers in accessing support.</p> <p>We will also ensure:</p> <ul style="list-style-type: none"> - Information is in simple, jargon free language and is translated into a range of languages - Translators are available for in person promotional events wherever possible or where required - Staff delivering services or assessments have awareness of and are sensitive to different cultures - Are using diverse imagery, language and terminology on our websites and publications to promote inclusion - Utilising community contacts and organisations, for example faith and third sector organisations (specifically those delivering targeted support to those from an ethnic minority background) to communicate and promote messaging and services. This will also include holding events and services at trusted or accessible locations to boost attendance and engagement e.g. mosques, temples - Avoiding labels e.g. BAME, carer, hard to reach <p>We will be working with organisations who have expertise in working with diverse or underserved groups to further develop our Carers Action Plan and our year 2 actions, as well as working to understand directly from individuals what they need.</p>
Religion and belief	P	This group will benefit positively.

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		As above with addressing disparities of access associated with race, we will be linking with local faith groups and community leaders to better understand needs and barriers to accessing support from individuals and communities of different faiths to tailor our support offer. In circulating information and holding events, consideration will too be given to language and pictures used, and the timings and locations of events (for example, considering prayer time and religious events or holidays).
Sex	P	Census 2021 data indicates females were statistically significantly more likely to provide unpaid care than males in every age group up to 70 to 74 years. There were no significant differences for those aged 75 to 79 years. However, from the age of 80 years onwards, males were statistically more likely to provide unpaid care. Both sexes will therefore be impacted positively through the three priorities of the Carers Action Plan.
Sexual orientation	P	This group will benefit positively. Although information in respect of this demographic is not routinely collected, data from Carers UK analysis of NHS England GP survey found that 7 in 10 lesbian, gay and bisexual carers reported a long-term health condition or disability compared to 60% of heterosexual carers. Research also found that lesbian, gay and bisexual carers were more anxious regarding their financial situation, more likely to say they were struggling financially, more likely to feel lonely or isolated, with poorer mental health than heterosexual individuals. This may be due to carers feeling an overall loss of aspects of their LGBTQ+ identity (due to a lack of time to explore their identity, meet new people or attend events or explore opportunities for self-expression), experience prejudice, discrimination or harassment, feeling responsible for taking on the caring role over other members of the family due to being unmarried or not having children amongst others. To support individuals of this demographic we will work to better understand the needs and preferences of this population, aim to ensure language and services are as inclusive as possible, and involve individuals and groups from the LGBTQ+ community to shape services to better reflect requirements.

SECTION 3 – HEALTH INEQUALITIES - See the health inequalities pre EIA guidance sheet for this section.

3	Further information on health inequalities is available on the Intranet
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3.1 Please tell us how the proposal you are submitting this EIA form will reduce health inequalities:

Please include which Marmot Principles this work covers.

The Carers Action Plan will focus on three specific priorities:

- Empower carers with flexible respite options, ensuring they can take breaks
- Deliver the right support, at the right time, and in the right place



- Maximise the reach of carers assessments to benefit more carers.

The actions set out in the Coventry Carers Action Plan 2024/26 will therefore support the following Marmot Principles:

- Enable all children, young people and adults to maximise their capabilities and have control over their lives
- Ensure a healthy standard of living for all
- Create and develop healthy and sustainable communities
- Tackle racism, discrimination and their outcomes

We are aware from the 'Lets Talk' Coventry Carers Survey that carers in Coventry are most likely to seek support from their GP in respect of their caring role. We will therefore be utilising GP's as a key identifier of carers to signpost to carer support services and refer for carers assessments. We will also be working with primary care and health colleagues to raise awareness of the physical and mental toll of the caring role to enable them to better understand and support carers.

We will also ensure carers are actively involved and have a voice in the development of carers support services. Development and monitoring of the Carers Action Plan will be undertaken in part by the Adult Social Care Stakeholder Reference Group and Dementia Hub Steering Group, made up of a range of faith groups, community leaders, third sector organisations and local groups, as well as carers from a variety of backgrounds themselves. These groups will help provide guidance on emerging needs of carers, gaps in support, and support us to ensure services are inclusive, representative and tailored to need.

Through increased information and awareness of carers support and assessments, we aim to ensure a higher number of carers access a range of support (for example, training, counselling, respite) to support in maintaining their own physical health and mental wellbeing. From our local 'Lets Talk' Coventry Carers Survey, we are aware that uptake for carers assessments is low in comparison to the number of carers in the city, despite carers assessments being a key way to better understand a carers own needs, support requirements and make referrals to supporting services. Likewise, the 'Lets Talk' local survey highlighted the need for respite and breaks from the caring role to enable carers to have time to themselves, undertake errands and have social contact. Some carers reported a number of barriers to accessing respite / breaks including uncertainty over charges or financial concerns, lack of suitable provision, guilt over taking a break and uncertainty in respect of the quality of support. Some carers also reported that they continued to be contacted by their loved one or the respite provider which prevented them having a break. By ensuring tailored, appropriate support is available and that people are aware of what this would entail we can look to:

- Prevent carer breakdown or burnout
- Improve the mental and physical wellbeing of carers
- Ensure carers can attend their own medical or wellbeing appointments
- Reduce loneliness and isolation (improving mental and physical health)

To strengthen the Coventry Carers Action Plan 2024/26 and ensure we are actively addressing inequalities through its implementation, we will undertake an engagement exercise with the following individuals / groups to gain feedback on the proposals suggested:

- Stakeholder Reference Group
- Dementia Hub Steering Group



- Adult Joint Commissioning Group
- Carers' Trust support groups (face to face, enabling input from a range of individuals of different backgrounds)
- Community and third sector leaders and individuals, e.g. Multi-Faith Forum, Age UK, Carers Trust, Alzheimer's Society etc

The Carers Action Plan will be a working document, with any suggestions or amendments from carers and the above groups implemented as appropriate.

3.2 What information do you have to show you are going to reduce health inequalities:

Data collected from the '[Carers health and experiences of primary care](#)' GP Patient Survey 2021 and referenced by Carers UK notes:

- 60% of carers report a long-term health condition or disability compared to 50% of non-carers
- Carers from some backgrounds were less likely to say the healthcare professional they saw recognised and understood any mental health needs they had. Whilst 86% of white carers said they felt they did, this dropped to 78% of black carers and 76% of Asian carers.
- 36% of lesbian, gay, or bisexual carers have a mental health condition compared with 13% of heterosexual carers – nearly treble the rate

Carers' health is known to be worse than that of non-carers due to the pressures of the role and is compounded by many factors, including providing more than 50 hours of care each week. Caring has been announced as being a social determinant of health recently by Public Health England.

Of the 60% of carers who had a long-term condition, disability, or illness, almost two-thirds (64%) reported that their condition reduces their ability to carry out day-to-day activities. This shows that carers' health and wellbeing is poorer than others and potentially affects their ability to care.

Lesbian, gay, and bisexual carers were most likely to report a long-term health condition or disability; and of this group, three-quarters (75%) stated that it affected their day-to-day life, in contrast to 62% of straight carers.

Half (51%) of carers said they had avoided making a GP appointment in 2021 compared to 40% of non-carers. This rose to 61% of Asian carers and those from mixed ethnic backgrounds.'

'Lets Talk' Coventry Carers Survey

To further understand and respond to local carers' needs, the Council developed and published a local Carers' Survey. This survey was launched via the Let's Talk platform on 7 March 2023, running until 12 May 2023. A total of 163 people responded. The survey has highlighted clear themes where improvement actions are required to better support carers in Coventry. Face to face engagement with local carers at carer support groups and in libraries was also undertaken to support individuals to respond who were unable to access or complete the survey online.

The most common barriers to carers taking breaks included the person they support not wanting other types of care, carers feeling unable to leave the person they care for and a lack of confidence in other people providing the care. There was also a lack of awareness of options, a lack of trust that provision could support people properly and a general lack of suitable provision. There was also a lack of



understanding of what a carers assessment is and the benefit of having one, evident in the low number of responders who had received a carer's assessment.

Carers reported barriers to accessing support as being unsure where to go, not having enough time, being unclear on eligibility or concern about what might happen if they request support. There is also lack of awareness of training available to carers.

The cost-of-living was of significant concern to carers. Some carers noted they have had to use their own savings and some had concerns over keeping warm (necessary for health reasons) and affording food and essentials.

Responses to the 'Lets Talk' Coventry Carers Survey also highlighted the following in respect of health inequalities specifically:

- Carers reported both their own health (physical and mental), and that of their cared for, deteriorated through the pandemic. Some further reported this has not improved.
- Caring roles exacerbated through the pandemic due to lack of outside support and closures of services; some services did not reopen meaning carers have maintained increased caring roles for prolonged periods of time.
- 50% of carers who had responded advised they had been caring for more than 2 years but less than 10 years.
- 36% of carers advised they had been caring for over 10 years.

The themes of the survey are similar to that of the previous biennial Survey of Adult Carers in England 2021/22 which have also further informed the Carers Action Plan 2024/26.

Using the information gathered from our recent 'Lets Talk' Coventry Carers Survey, data from the Adult Social Care Outcomes Framework (ASCOF) and the results of the national biennial Survey of Adult Carers in England 2021/22, we have drafted a two-year Coventry Carers' Action Plan 2024 / 2026. The plan details three overarching key objectives, based on direct feedback from carers.

Key objectives of the Carers Action Plan:

1. Empower carers with flexible respite options, ensuring they can take breaks
2. Deliver the right support, at the right time, and in the right place
3. Maximise the reach of carers assessments to benefit more carers.

Whilst many of the priorities stated in the Carers Action Plan are not new, there is a renewed focus on strengthening and diversifying our current offer and services, and understand different methods of supporting carers to improve delivery and reduce all inequalities experienced by carers. The plan aims to improve awareness and access to support for all carers, ensure provision is available for all carers to have a break from their caring role and to understand and exercise their right to a carers assessment, so as this can lead to a meaningful outcome for them.

Measuring impact

Adult Social Care's commitment to making a difference for carers requires continuous monitoring and evaluation. To ensure the effectiveness of the Carers' Action Plan 2024-26, the Carers Team will:



- Review demand for support from both Coventry City Council and commissioned providers, addressing disparities in access among various communities.
- Engage in regular dialogue with carers, including via the Adult Social Care Stakeholder Reference Group and Dementia Hub Steering Group, seeking feedback on the plan's implementation and potential areas for improvement.
- We will monitor national surveys and data collections, providing valuable insights into the overall impact of our efforts.

3.3 Who/which groups of people might face the biggest health inequalities for your work and why: What can be done to improve health equity for the groups of people you have identified?

Carers of people with life long medical condition may face the biggest health inequalities in respect of this work. We know from the above referenced data that the overall health and wellbeing of a carer can be negatively impacted through the caring role, with this further exacerbated during intense or prolonged periods of caring responsibility. Individuals caring for someone with a life long medical condition may be especially prone to this.

We also note from both the local 'Lets Talk' Coventry Carers Survey and from national data referenced above carers from diverse ethnic communities are not accessing health and social care support as regularly as individuals of a White-British ethnicity.

Delays in accessing support may further exacerbate an individuals poor mental and physical wellbeing, cause unnecessary deterioration of condition to both the carer and cared for, and overall lead to poorer outcomes for both individuals. Risk of carer burnout and breakdown is also increased.

3.4 What can be done to improve health equity for the groups of people you have identified?

To improve the health equity of these groups the Council will:

- Work with health and primary care colleagues to raise awareness of the profile, role and needs of carers, and how they can best support individuals identified as carers including how to refer to carer support services.
- Ensure support is tailored to the needs of the diverse demographics of the city, for example, is culturally appropriate and accessible.
- Work with community leaders and groups to embed carers support and identification into communities where uptake is poor, and understand and address potential cultural barriers to accessing support.
- Utilise resources including the Low Income Family Tracker to proactively identify individuals who are carers, or who may require preventative support, and connect them with relevant support services.
- Better understand and incorporate the voice of carers from underrepresented groups through ongoing engagement with the Dementia Hub Steering Group and Adult Social Care Reference Group. These groups will help advise on the Carers Action Plan, monitor its progress and suggest improvements.



SECTION 4 - DIGITAL EXCLUSION INEQUALITIES

Please consider the digital exclusion information in the supporting document prior to completing this section.

4.1 Starting point:

Thinking of the main aims of your work area that this EIA is for; does your work area impact digital inequalities or exacerbate? Y/N

- Does your work assume service users have digital access and skills?
- Do outcomes vary across groups, for example digitally excluded people benefit the least compared to those who have digital skills and access?
- Consider what the unintended consequences of your work might be.

The work will positively impact digital inequalities

4.2 Reducing digital exclusion inequalities

Where are the opportunities for your area to reduce digital exclusion inequalities and embed supports/interventions as part of your work?

- We will be looking to respond to requests from carers in the 'Lets Talk' Coventry Carers Survey for an increase in paper based information and in person support
- Review use of assistive technologies to support the caring role, and ensuring training is available to support any such use
- Ensure support is available in a range of settings, communities and locations across the city and is not reliant on technology to deliver training (e.g. a mix of online and in person training / support)

5.0 Will there be any potential impacts on Council staff from protected groups?

N/a

EQUALITY IMPACT ASSESSMENT (EIA)



You should only include the following data if this area of work will potentially have an impact on Council staff. This can be obtained from: Nicole.Powell@coventry.gov.uk

Headcount:

Sex:

Female	
Male	

Age:

16-24	
25-34	
35-44	
45-54	
55-64	
65+	

Disability:

Disabled	
Not Disabled	
Prefer not to state	
Unknown	

Ethnicity:

White	
Black, Asian, Minority Ethnic	
Prefer not to state	
Unknown	

Religion:

Any other	
Buddhist	
Christian	
Hindu	
Jewish	
Muslim	
No religion	
Sikh	
Prefer not to state	
Unknown	

Sexual Orientation:

Heterosexual	
LGBT+	
Prefer not to state	
Unknown	

6.0 How will you monitor and evaluate the effect of this work?

Adult Social Care commitment to making a difference for carers requires continuous monitoring and evaluation. To ensure the effectiveness of the Carers' Action Plan 2024-26, the Carers Team will:

1. Review demand for support from both Coventry City Council and commissioned providers, addressing disparities in access among various communities.

EQUALITY IMPACT ASSESSMENT (EIA)



2. Engage in regular dialogue with carers, including via the Adult Social Care Stakeholder Reference Group and Dementia Hub Steering Group, seeking feedback on the plan's implementation and potential areas for improvement.
3. We will monitor national surveys and data collections, providing valuable insights into the overall impact of our efforts.

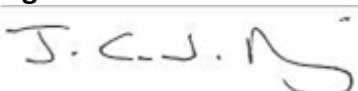
6.1	Action Planning	
Issue Identified	Planned Action	Timeframe

7.0 Completion Statement

As the appropriate Head of Service for this area, I confirm that the potential equality impact is as follows:

- No impact has been identified for one or more protected groups
- Positive impact has been identified for one or more protected groups
- Negative impact has been identified for one or more protected groups
- Both positive and negative impact has been identified for one or more protected groups

8.0 Approval

<p>Signed: Head of Service:</p> 	<p>Date: 8/11/2023</p>
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EQUALITY IMPACT ASSESSMENT (EIA)



Name of Director: Peter Fahy, Director of Adult Services and Housing	Date sent to Director: 10/11/2023
Name of Lead Elected Member: Councillor Linda Bigham	Date sent to Councillor: 14/11/2023

Email completed EIA to equality@coventry.gov.uk

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Public report Cabinet

Cabinet Member for Adult Services:

4th December 2023

Name of Cabinet Member:

Cabinet Member for Adult Services – Councillor L Bigham

Director approving submission of the report:

Director of Adult Services and Housing

Ward(s) affected:

All

Title:

Adult Social Care Workforce Strategy 2023-26

Is this a key decision?

No - although the proposals affect more than two electoral wards, the impact is not expected to be significant.

Executive summary:

A valued and respected workforce is critical to the delivery of Adult Social Care. We will support and develop the workforce, both our own and those of our partners, wherever possible to ensure they have the necessary skills, knowledge, values and attributes to provide effective care and support. We recognise that our workforce is key to the delivery of our Adult Social Care Offer in Coventry.

This Adult Social Care Workforce Strategy focuses on our workforce, both internally within the Council and our external social care providers and the challenges we face together. It is also a statement of our workforce priorities and the action we will take to deliver them. Coventry's Adult Social Care workforce is diverse with people working for the independent sector, local authority and for people in receipt of direct payments.

The Adult Social Care Workforce Board and Adults Joint Commissioning Group will have oversight of our Adult Social Care Workforce Strategy and associated action plans. They will receive reports on progress and take the lead in ensuring the Strategy is reviewed and refreshed and that actions are being delivered.

Recommendations:

The Cabinet Member for Adult Services is recommended to:

- 1) Note and endorse the Adult Social Care Workforce Strategy 2023-26

List of Appendices included:

The following appendices are attached to the report:

Appendix 1 – Adult Social Care Workforce Strategy 2023-26

Appendix 2 – Equality Impact Assessment

Background papers:

None

Other useful documents

None

Has it or will it be considered by Scrutiny?

No

Has it or will it be considered by any other Council Committee, Advisory Panel or other body?

No

Will this report go to Council?

No

Report title: Adult Social Care Workforce Strategy 2023-26

1. Context (or background)

- 1.1. A Workforce Strategy focuses on current employees and a strategy for future staffing needs. The Adult Social Care workforce is significant in its scale and diversity of provision. Around 1.52 million people worked in the adult social care sector in England in 2022/23, more than in the NHS. In recent years, financial pressures, increased life expectancy and the growth in numbers of people living with multiple and complex conditions puts a considerable strain on resources. This creates demand for a workforce that can be responsive to these changes.
- 1.2. The Adult Social Care sector faces several longstanding workforce challenges, which can impact on the availability and quality of care. These include:
 - High vacancy rates
 - Rising demand for social care
 - High turnover
 - Low staff morale
 - Limited opportunities for career progression
 - Low pay and conditions of employment
- 1.3. In December 2021, the Department of Health and Social Care (DHSC) published a White Paper on wider plans for social care reform. In April 2023, the Government published a policy paper outlining progress made in implementing the reforms set out in the White Paper. The Government also confirmed plans to publish a national workforce pathway for Adult Social Care, and a consultation on the proposed pathway was published alongside the policy paper.
- 1.4. Skills for Care published its annual State of the Adult Social Care Sector and Workforce in England report in October 2023 and announced plans to develop a new and comprehensive workforce strategy for adult social care. The report covers the year from April 2022 to March 2023, which saw some improvements in workforce capacity largely driven by an increase in international recruitment, including more posts being filled, fewer vacancies and less turnover. The report also highlights ongoing trends for the sector, including 390,000 people leaving their jobs with around a third of them leaving the sector altogether.
- 1.5. Coventry City Council's 'People Plan' recognises that like most Local Authorities, Coventry has experienced, and is continuing to experience, very challenging times in relation to funding availability which has changed the way services are provided and delivered. This change in thinking has resulted in a greater need for creativity, commercialisation and working with partners to develop shared outcomes.
- 1.6. The Council's 'People Plan' identifies the action we will take as a Council and an employer in order to deliver the workforce vision and crucial workforce objectives, particularly paying close attention to organisational development and leadership. The central theme of the plan is to continue to build and develop a 'One Coventry' culture. One Coventry is the Council's approach to partnership working to enable a citywide public service ethos.
- 1.7. The Plan also details how we intend to improve capacity, capability and processes to deliver the Council's 'One Coventry' priorities, which are:
 - Increasing the economic prosperity of the city and region

- Improving outcomes and tackling inequalities within our communities
 - Tackling the causes and consequences of climate change
 - Continued financial sustainability of the Council
 - Council's role as a partner, enabler and leader
- 1.8. Attracting new people into social care to replace those who have left is just one solution to meet the growing demand for social care services. We also need to make sure we are doing everything possible to retain our existing workforce. This involves a range of approaches including effective recruitment, good learning and development opportunities and a focus on the health and wellbeing of our workforce.
- 1.9. Our Adult Social Care Workforce Strategy needs to acknowledge and build on what is already working. Whilst there are many challenges, there are also many successes. We need to ensure we develop, promote, and celebrate existing good practice as well as look for new ideas. Each year we produce an Annual Report (also known as a Local Account), which seeks to showcase the work of Adult Social Care in Coventry.
- 1.10. The wider Adult Social Care workforce in Coventry is significant and diverse amounting to 9,600 jobs. This includes 6,200 staff employed in direct care. 190 Care Quality Commission regulated establishments operate in Coventry (2022/23).
- 1.11. Within Coventry City Council we employ 920 internal staff. 80.4% are female, with the average age of the workforce being 48.4 years old. Our vacancy rate is 11.5%. 22.2% of the workforce is Minority Ethnic. Our workforce strategy and associated action plans need to recognise and take into account that our strength lies in our diversity, and in order to be able to effectively meet the needs of our communities. Creating a culture that values and promotes diversity and inclusion will ensure we harness different perspectives, experiences, and knowledge. Our People Plan and our One Coventry Plan and its values are clear that a commitment to equality underpins the way that we work and provide services.
- 1.12. For our internal workforce our plan to deliver the Workforce Strategy includes actions which are already underway, or planned along with proposed new areas of work. The activity set out in the plan focusses on five themes which are:
- Recruitment and Retention
 - Workforce and Culture
 - Learning and Development
 - Employee Relations
 - Health and Wellbeing
- 1.13. For our external workforce we recognise a dedicated, experienced, and content workforce is crucial in ensuring good quality provision and continuity of care. As such, our areas of support for our external workforce centre around the following three themes:
- Recruitment
 - Retention
 - Learning and development
- 1.14. Each of our workforce themes and associated outcomes have identified success measures with timescales identified. We will keep these under review within our Workforce, Commissioning Boards and senior management team meetings.

2. Options considered and recommended proposal

2.1. There are no specific options associated with this report.

3. Results of consultation undertaken

3.1. Consultation is not specifically required on the content of this report, however the detail included in the Adult Social Care Workforce Strategy has been developed from ongoing engagement with the care sector and feedback from our own workforce

4. Timetable for implementing this decision

4.1. The Workforce Strategy will be published on the Council's Adult Social Care webpages. The Adult Social Care Workforce Board and Adults Joint Commissioning Group will have oversight of the Strategy and associated plans. They will receive reports on progress and take the lead in ensuring the Strategy is reviewed and refreshed and actions delivered.

5. Comments from Chief Operating Officer (Section 151 Officer) and Chief Legal Officer

5.1. Financial Implications

There are no direct financial implications arising from this report

5.2. Legal Implications

Whilst there are no specific legal implications arising from the report, the Council does have a responsibility under s5 Care Act 2014 to promote diversity and quality in provision of services by promoting '*the efficient and effective operation of a market in services for meeting care and support needs*'. (s5(1)).

This includes having regard to (s5(2)):

(d) the importance of ensuring the sustainability of the market (in circumstances where it is operating effectively as well as in circumstances where it is not);

(e) the importance of fostering continuous improvement in the quality of such services and the efficiency and effectiveness with which such services are provided and of encouraging innovation in their provision;

(f) the importance of fostering a workforce whose members are able to ensure the delivery of high quality services (because, for example, they have relevant skills and appropriate working conditions).

The development of a Workforce Strategy therefore outlines how the Council will meet its responsibility to support the training, development and retention of a skilled care and support workforce in its area.

6. Other implications

6.1. How will this contribute to the One Coventry Plan?

<https://www.coventry.gov.uk/strategies-plans-policies/one-coventry-plan>

The Workforce Strategy will contribute towards the following One Coventry Plan priorities:

- Improving outcomes and tackling inequalities within our communities
- Increasing the economic prosperity of the city and region
- Council's role as a partner, enabler and leader
- Continued financial sustainability of the council

The workforce helps support the continued financial sustainability of the Council and also helps to increase the economic prosperity of the city and region by enabling people to remain independent, access employment and activities within the community whilst reducing the reliance upon services. With approximately 9,600 adult social care jobs within Coventry the workforce is also making a significant contribution towards helping to increase the economic prosperity of the city and region.

6.2. How is risk being managed?

The Adult Social Care Management Team continuously monitor risk within services through the use of an Adult Social Care Risk Register and the Corporate Risk Register, with the support of the Council Insurance Manager. The Adult Social Care Workforce Board has responsibility for managing any risk associated with this strategy.

6.3. What is the impact on the organisation?

The development of a Workforce Strategy outlines how the Council will meet its responsibility to support the training, development and retention of a skilled care and support workforce.

6.4. Equalities / EIA?

The Council must comply with the Public Sector Equality Duty (PSED) (Equality Act 2010) by paying due regard, when carrying out their functions, to the need to eliminate unlawful discrimination, harassment, victimisation and any other conduct prohibited by the Act, to advance equality of opportunity and foster good relations between people who share a 'protected characteristic' and those who do not. In doing so, the Council must consider the possible impact on those who are likely to be affected by the recommendation and their protected characteristics. Protected Characteristics under the Equality Act 2010 are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation. Equalities information and data is continuously monitored within Adult Social Care.

An EIA is attached at Appendix 2 to this report.

6.5. Implications for (or impact on) climate change and the environment?

None

6.6. Implications for partner organisations?

The Workforce Strategy includes support for the external workforce sector. Through the provision of targeted support, specific tools and resources and a range of training, our support offer will look to bolster knowledge and morale of existing staff whilst attracting a new cohort of individuals to care sector.

Report author(s):

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Adults Principal Social Worker

Service Area:

Adult Services and Housing

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Enquiries should be directed to the above person

Contributor/approver name	Title	Service Area	Date doc sent out	Date response received or approved
Sally Caren	Head of Adult Social Care and Support	Adult Services and Housing	15.11.2023	20.11.2023
Aideen Staunton	Head of Service Partnerships and Social Care Operations	Adult Services and Housing	15.11.2023	20.11.2023
Tracey Denny	Head of Service Localities and Social Care Operations	Adult Services and Housing	15.11.2023	20.11.2023
Jon Reading	Head of Commissioning and Quality	Adult Services and Housing	15.11.2023	17.11.2023
Christopher Whiteley	Finance Manager	Finance	15.11.2023	17.11.2023
Thomas Robinson	Governance Services Officer	Law and Governance	14.11.2023	14.11.2023
Names of approvers for submission: (officers and members)				
Janice White	Team Leader, Legal Services	Law and Governance	10.11.2023	13.11.2023
Pete Fahy	Director of Adult Services and Housing	Adult Services and Housing	10.11.2023	17.11.2023
Councillor L Bigham	Cabinet Member for Adult Services		14.11.2023	16.11.2023

This report is published on the council's website: www.coventry.gov.uk/meetings

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Adult Social Care

Workforce Strategy 2023 - 2026



Coventry City Council



Introduction and Scope

A thriving and skilled social care workforce means a better quality of life and positives outcomes for Coventry's adults and their carers. We are proud of our workforce and this Adult Social Care Workforce Strategy is all about ensuring we have the right people in the right place at the right time with the values, skills and experience to deliver the care and support needed both now and in the future. Coventry City Councils 'People Plan' recognises that like most Local Authorities, Coventry has experienced, and is continuing to experience, very challenging times in relation to funding availability which has changed the way services are provided and delivered. This change in thinking has resulted in a greater need for creativity, commercialisation and working with partners to develop shared outcomes. We recognise that our workforce is key to the delivery of our Adult Social Care Offer in Coventry.

www.coventry.gov.uk/ascoffer

www.coventry.gov.uk/peopleplan

The People Plan identifies the action we will take as a Council and an employer in order to deliver a workforce vision and crucial workforce objectives, particularly paying close attention to organisational development and leadership. The central theme of the plan is to continue to build and develop a 'One Coventry' culture. One Coventry is the council's approach to partnership working to enable a citywide public service ethos.

The Plan also details how we intend to improve capacity, capability and processes to deliver the Council's One Coventry priorities, which are;

- Increasing the economic prosperity of the city and region
- Improving outcomes and tackling inequalities within our communities
- Tackling the causes and consequences of climate change
- Continued financial sustainability of the Council
- Councils role as a partner, enabler and leader



The Local and National Context

DEMOGRAPHICS



This Adult Social Care Workforce Strategy focuses on our Adult Social Care workforce, both internally within the Council and our external social care providers and the challenges we face together. It is also a statement of our workforce priorities and the action we will take to deliver those priorities.

Coventry has a growing and diverse population, and our workforce needs to grow and adapt in response to the residents of the City we support.



Coventry's population is growing, changing and increasingly diverse

Coventry is home to



345,300
residents (census 2021)

Recent census information suggests that population growth has been lower than projected but Coventry has a slightly faster rate of population growth than both the West Midlands and England.

6.2%
West Midlands average

6.6%
England average



National data suggests that between 2015-2017 and 2017-2019, life expectancy between the richer and poorer increased further. In particular, there was a decrease in life expectancy for females in poorer areas - resulting in a widening of inequality in the life expectancy gap among females (7.4 years). Although, the gap for males (9.4 years) remains larger

Early mortality (<75 years) *Worse than national*



Cardiovascular	X	X
Cancer	X	X
Liver disease	X	
Respiratory diseases	X	X
Communicable diseases	X	X

Life expectancy in Coventry remains consistently below England, but healthy life expectancy is similar to England

Health outcomes are worse in the most deprived areas, where people not only live shorter lives, but spend a bigger portion of their years in poor health, and are more likely to die of preventable causes

14.6% of the population is 65+

2% of the population are aged 85 or over



Coventry's Adult Social Care workforce is diverse with people working for the independent sector, local authority and for people in receipt of direct payments. Within Coventry City Council we employ over 900 staff and the wider Adult Social Care Workforce in Coventry amounts to 9,700 jobs (2022/23).



OUR WORKFORCE

920
internal staff

80.4% Female staff
19.6% Male staff

Average age of workforce
48.4 YEARS

48.5% workforce aged over 50
72.5% workforce is white

Vacancy rate is
11.5%



22.2% of workforce is Minority Ethnic

Leaver rate is
15.3%
141 people

The wider Adult Social Care workforce in Coventry amounts to

9,700
jobs

which includes staff working in 152 CQC registered establishments

New starter rate is

14.7%
135 people



10,500
total posts

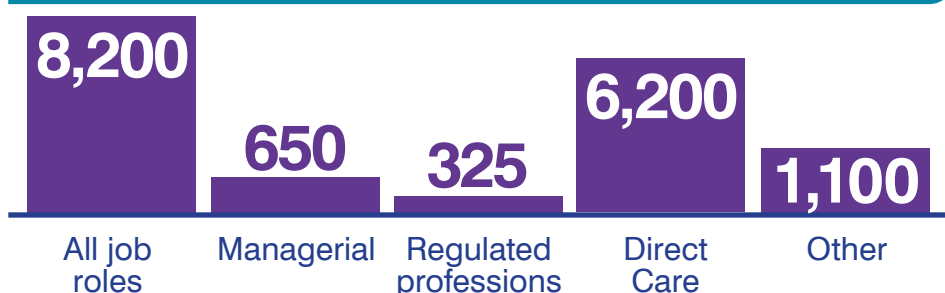
9,600
filled posts

1,100
vacant posts

325
direct payment recipients employing their own staff

Please note that the data below and other pages refer to filled posts in the local authority and independent sectors only

FILLED POSTS BY JOB GROUP

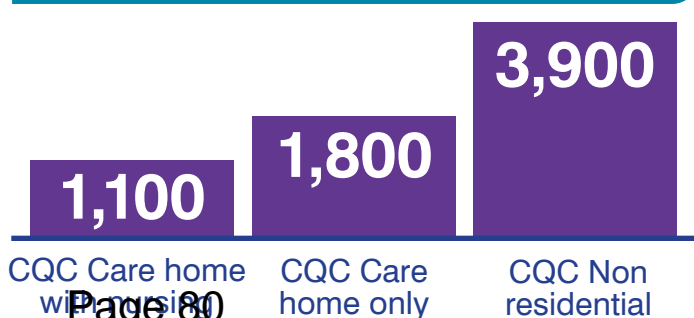


CQC-REGULATED ESTABLISHMENTS

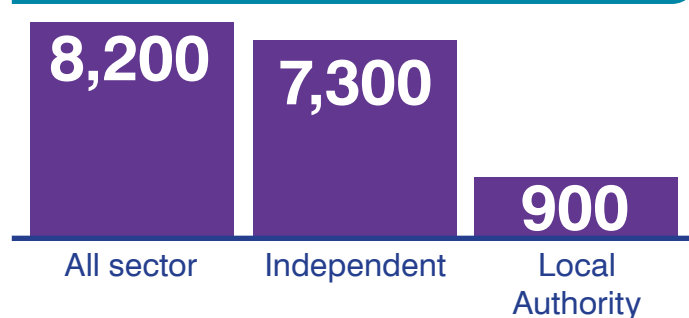
190 CQC-regulated establishments




FILLED POSTS BY SERVICE



FILLED POSTS BY SECTOR





The landscape, opportunities and continued legacy of the pandemic have changed the narrative and context of social care. Our working practices have had to change and continue to do so in ways we are only just beginning to understand. We needed to adapt quickly and made greater use of technology and developed new and constructive relationships with stakeholders and partners. We want to take forward these positive outcomes and build on that momentum. At the same time, we need to recognise the effect the pandemic has had on wellbeing and mental health of the population so that we can take steps to mitigate its impact. We also recognise that locally Adult Social Care continues to be pivotal to the health and wellbeing of Coventry residents, and crucial to the effective operation of the NHS with the role it plays in admission avoidance, hospital discharge and promoting independence.

Nationally the Government White Paper 'People at the Heart of Care: adult social care reform' (published December 2021) recognises the crucial role that social care plays in supporting people to lead a fulfilling life, playing a full role in society www.gov.uk/government/publications/people-at-the-heart-of-care-adult-social-care-reform-white-paper

The White Paper identifies that the number of jobs in adult social care is forecast to grow by almost one-third by 2035. As the population grows, and the way in which care is delivered evolves and diversifies, the Adult Social Care workforce will need to grow and develop with it.

Whatever the direction of government policy the delivery of social care remains a local responsibility and is therefore incumbent on us to develop our workforce to meets the needs and aspirations of people who require support from Adult Social Care within our communities.

● Workforce Diversity and Inclusion

Our workforce strategy and associated action plans need to recognise and take into account that our strength lies in our diversity, and in order to be able to effectively meet the needs of our communities it is vital that we have a workforce that is reflective of the people we serve, and in a dynamic and changing City that is easier said than done. Creating a culture that values and promotes diversity and inclusion will ensure we harness different perspectives, experiences and knowledge and support our workforce to continue to learn about the diverse communities and cultures within the City so that we may support people in a way that is appropriate to them. Our People Plan and our One Coventry Plan and its values are clear that a commitment to equality underpins the way that we work and provide services.

<https://www.coventry.gov.uk/strategies-plans-policies/draft-one-coventry-plan/9>

Key Workforce Challenges and What's Working Well

In recent years, financial pressures, increased life expectancy and the growth in numbers of people living with multiple and complex conditions has put a considerable strain on resources. This creates demand for a workforce that can be responsive to these changes and adapt what they do to respond to this changing environment.

Attracting new people into social care to replace those who have left is just one solution to keep pace with the demand for social care services. We also need to make sure we are doing everything possible to retain our existing workforce. This involves a range of approaches including effective recruitment, good learning and development opportunities and a focus on the health and wellbeing of our workforce.

We also know that we cannot simply keep expanding our workforce in respond to growing demand, and we have not done this so far as demonstrated by a largely static workforce headcount over the last three years despite referrals for support increasing. We do therefore need our workforce to find new ways of supporting people, have the innovation and imagination, combined with the intelligence and compassion to support people in new ways based and less reliant on the provision of regulated care.

Our Adult Social Care Workforce Strategy needs to acknowledge and build on what is already working. Whilst there are many challenges, there are also many successes. We need to ensure we develop, promote, and celebrate existing good practice as well as look for new ideas. Each year we produce an Annual Report (also known as a Local Account), which seeks to showcase the work of Adult Social Care in Coventry.

<https://www.coventry.gov.uk/ascannualreport>

Our Approach - Delivering our Adult Social Care Workforce Strategy

Internal Workforce

For our internal workforce our plan to deliver the Workforce Strategy includes actions which are; already underway, or planned along with proposed new areas of work. The activity set out in the plan focusses on five themes which are:

- Recruitment
- Workforce and Culture
- Learning and Development
- Employee Relations
- Health and Wellbeing

Each of our workforce themes and associated outcomes have identified success measures with timescales identified. We will keep these under review within our Workforce, Commissioning Boards and senior management team meetings. Outlined below are our planned actions for 2023/24.

Internal Workforce Support Overview

Recruitment and Retention

- Recruitment and retention reporting and data analysis to steer recruitment campaigns for hard to recruit posts and identify areas for improvement
- Ensure that the recruitment and selection procedures are undertaken in accordance the Councils Diversity and Inclusion best practice, with recruitment panels reflective of diversity and involving people with lived experience
- Analyse the Diversity and Inclusion recruitment & selection data and make recommendations for improving the diversity of the workforce where applicable
- Implement new Induction programme for Adult Social Care

Workforce and Culture

- Workforce profiling reporting and data analysis
- Establish workforce planning activity within Adult Services, to identify workforce availability, capability and ensure succession planning
- To identify and implement a range of targeted Diversity and Inclusion activities within Adult Services
- To review staff engagement mechanisms, visibility of senior leaders and ensure activity including recognition and celebration to drive our new values and help employees feel valued and appreciated
- To ended Team Planning approaches

Learning & Development

- Monitor non-completion of Corporate Statutory and Mandatory training across the Service
- Ongoing review of training programmes and plans informed by a cycle of Training Needs analysis and an annual training report
- To define Statutory, Mandatory and desirable/role specific training and build compliance/refresh requirements
- To review and establish clear and visible progression and career development pathways for all Adult Services staff
- Development for leaders and managers across Adult's Services, specifically linked to apprenticeship levy

Employee Relations

- Promotion and access to toolkits and training to support colleagues in Adult's Services to understand and effectively use HR policies and procedures. Embed a just culture approach.
- Review of Management of sickness absence process in line with enabling attendance and identify areas for improvement
- Review approach to managing performance and capability
- Investigation training for managers and commissioning managers

Health and Wellbeing

- Managerial awareness of mental health and wellbeing training and toolkits
- To consider specific strategies and activities to support key areas including stress, anxiety and depression
- To develop a range of Wellbeing initiatives with a focus on key areas for the workforce including stress, depression, anxiety and Musculoskeletal health
- Review application and learning from Adult Social Care Organisational Health Checks and any Corporate surveys

External Workforce

For our external workforce we recognise a dedicated, experienced and content workforce is crucial in ensuring good quality provision and continuity of care. As such, our areas of support for our external workforce centre around the following three themes:

- Recruitment
- Retention
- Learning and development

Through the provision of targeted support, specific tools and resources and a range of training, our support offer will look to bolster knowledge and moral of existing staff whilst attracting a new cohort of individuals to the market. The outlined below are our support offer and planned actions for 2023/24.

	Currently in place	Planned
Recruitment	<ul style="list-style-type: none"> ✓ Animated recruitment and retention video - available for all providers to use for free during their own recruitment campaigns ✓ Encouraging providers to advertise via the free DWP 'Find a Job' website ✓ Links with the Coventry Job Shop ✓ Grant funding to assist towards the cost of recruitment and advertisement costs ✓ Survey produced to employers to better understand existing recruitment and retention concerns ✓ Speaking to employment advisors and job coaches to inform on the scope of job opportunities available in the care sector ✓ Recruitment events in partnership with the Job Centre ✓ Facilitated supported internships for people with Learning Disability/ Autism and Mental Health to be supported into employment within the care sector, in partnership with the Adult Education Team ✓ Creation and promotion of the 'Provider Support Pack' with advice and support surrounding recruitment and retention ✓ A dedicated employment event for newly arrived citizens (refugee and migrant citizens) to inform them of the scope of job roles available within the care sector 	<ul style="list-style-type: none"> ▶ Targeted recruitment to a range of groups, including refugees ▶ Further links with the Coventry Job Shop, including the creation of an ASC recruitment poster, job fayre and myth busting session on careers in care. ▶ Community models of employment for people with a learning disability or mental health issues ▶ Engaging with other Local Authorities to compare recruitment strategies of people with a learning disability into paid employment ▶ Recruitment 'bootcamp' in collaboration with Throughcare (leaving care) internal team to introduce care leaver into employment within the care sector ▶ Linking in with the Job Centre's Disability Employment Advisor to support their existing cohort into roles within the care sector

	Currently in place	Planned
Retention	<ul style="list-style-type: none"> ✓ Access to grant funding (Workforce Retention and Recruitment Fund) to use towards the cost of bonus / retention payments ✓ Sharing of wellbeing initiatives, mental health support and support groups / advice lines ✓ Promotion of Skills for Care Registered Managers network and forum ✓ Circulation of Public Health initiatives, e.g. Stoptober, Dry January ✓ Review and monitoring of staff supervision frequency and training ✓ Sharing of good news stories via the Provider Bulletin 'Shine a Light' section ✓ Promotion of the 'Thrive at Work' accredited programme to improve employee wellbeing and boost CQC ratings. 	<ul style="list-style-type: none"> ▶ Targeted performance indicators within new commissioned contracts based on staff satisfaction levels, training and supervision ▶ Continued promotion of Skills for Care Registered Managers network and forum. ▶ Sharing of new initiatives from Skills for Care, Local Government Association and other stakeholders with providers



	Currently in place	Planned
Learning and Development	<ul style="list-style-type: none"> ✓ Training sessions, including bitesize online training, covering a range of topics e.g. catheter care ✓ Free accreditations e.g. React to Red, Say No To Infection, Red Bag scheme ✓ Access to SCILS training system ✓ Provider events, forums and bulletins ✓ 6-8 week introduction to care course facilitated by Coventry City College to prepare people for roles in the care sector, with a guaranteed interview at the end of the course ✓ Links with the internal Apprenticeships Team to gain insight into how Adult Social Care providers can access the Levy Transfer Fund to contribute towards the cost of training for an apprentice 	<ul style="list-style-type: none"> ▶ Market consultation and surveys to understand training gaps for future sessions

● Governance and Oversight

Our Adult Social Care Workforce Board will have oversight of our Adult Social Care Workforce Strategy and associated action plans. They will receive reports on both progress in the delivery of actions and understanding the impact of these actions.

The group will also take the lead in ensuring the Strategy is regularly reviewed and refreshed.



o Contact Adult Social Care Direct

Call **024 7683 3003**

or email ascdirect@coventry.gov.uk

or visit www.coventry.gov.uk/health-social-care

Speech impairment, deaf or hard of hearing? You can call using Next Generation Text (also known as Text Relay and TypeTalk): **18001 024 7683 3003**

If you require this information in another language or format, please email ascdirect@coventry.gov.uk

Jeśli potrzebujesz zawartych informacji w innym języku lub formacie, prosimy o wiadomość e-mail na adres ascdirect@coventry.gov.uk

ਜੇਕਰ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਜਾਂ ਫਾਰਮੈਟ ਵਿੱਚ ਚਾਹੀਦੀ ਹੈ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ

ascdirect@coventry.gov.uk 'ਤੇ ਈਮੇਲ ਕਰੋ

اگر آپ کو یہ معلومات کسی دوسری زبان یا فارمیٹ میں درکار ہوں تو براۓ مہربانی ascdirect@coventry.gov.uk پر ای میل کریں۔

إذا اردت الحصول على هذه المعلومات بلغة أو تنسيق آخر، يرجى إرسال بريد إلكتروني إلى: ascdirect@coventry.gov.uk

Dacă aveți nevoie de aceste informații într-o altă limbă sau format, vă rugăm trimiteți email la:

ascdirect@coventry.gov.uk

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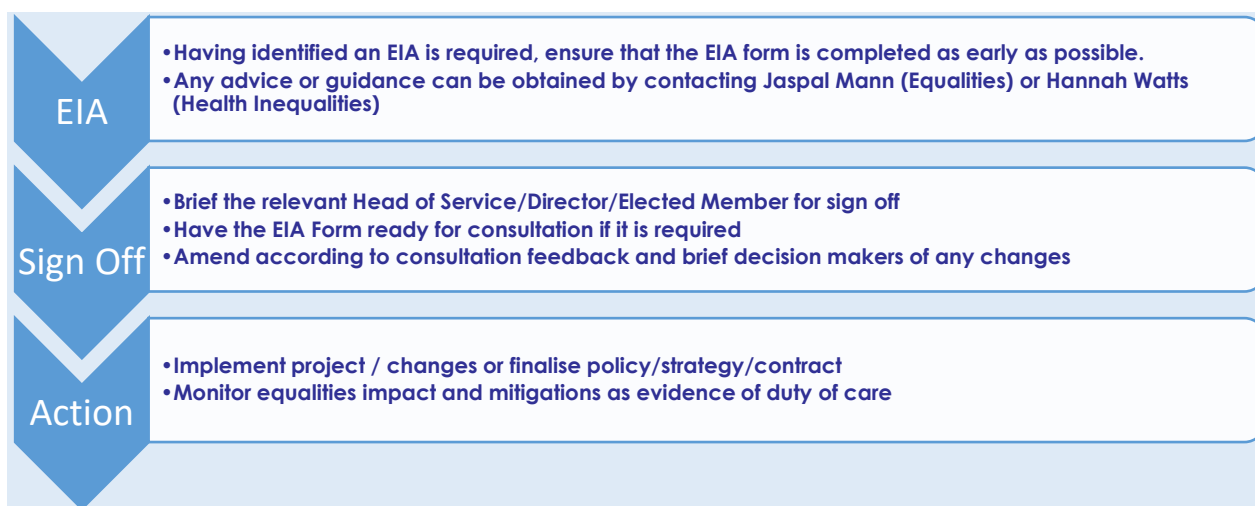
ascdirect@coventry.gov.uk





Equality Impact Assessment (EIA)

Title of EIA		Adult Social Care Workforce Strategy 2023-26
EIA Author	Name	Andrew Errington
	Position	Head of Practice Development & Safeguarding (Adults PSW)
	Date of completion	17/11/2023
Head of Service	Name	Sally Caren
	Position	Head of Adult Social Care and Support
Cabinet Member	Name	Councillor Linda Bigham
	Portfolio	Adult Services



PLEASE REFER TO [EIA GUIDANCE](#) FOR ADVICE ON COMPLETING THIS FORM

SECTION 1 – Context & Background

1.1 Please tick one of the following options:

This EIA is being carried out on:

- New policy / strategy
- New service
- Review of policy / strategy
- Review of service
- Commissioning
- Other project (*please give details*)

1.2 In summary, what is the background to this EIA?

This Adult Social Care Workforce Strategy focuses on our Adult Social Care workforce, both internally within the Council and our external social care providers and the challenges we face together. It is also a statement of our workforce priorities and the action we will take to deliver those priorities

1.3 Who are the main stakeholders involved? Who will be affected?

Adult Social Care Staff

1.4 Who will be responsible for implementing the findings of this EIA?

Strategy author

SECTION 2 – Consideration of Impact

Refer to guidance note for more detailed advice on completing this section.

In order to ensure that we do not discriminate in the way our activities are designed, developed and delivered, we must look at our duty to:

- Eliminate discrimination, harassment, victimisation and any other conflict that is prohibited by the Equality Act 2010
- Advance equality of opportunity between two persons who share a relevant protected characteristic and those who do not
- Foster good relations between persons who share a relevant protected characteristic and those who do not

2.1 Baseline data and information

Please include a summary of data analysis below, using both your own service level management information and also drawing comparisons with local data where necessary (go to <https://www.coventry.gov.uk/factsaboutcoventry>)

Information regarding the profile of staff working for Coventry City Council who will be subject to supervision is identified in this EIA.

Information regarding the wider external workforce is available via Skills for Care which includes demographic data

<https://www.skillsforcare.org.uk/Adult-Social-Care-Workforce-Data/Workforce-intelligence/publications/local-information/My-local-area.aspx>

2.2 On the basis of evidence, complete the table below to show what the potential impact is for each of the protected groups.

- Positive impact (P),
- Negative impact (N)
- Both positive and negative impacts (PN)
- No impact (NI)
- Insufficient data (ID)

**Any impact on the Council workforce should be included under question 2.6 – not below*

Protected Characteristic	Impact type P, N, PN, NI or ID	Nature of impact and any mitigations required
Age 0-18	P	The workforce strategy and associated action plans recognise and take into account that our strength lies in our diversity, and in order to be able to effectively meet the needs of our communities it is vital that we have a workforce that is reflective of the people we serve. Creating a culture that values and promotes diversity and inclusion will ensure we harness different perspectives, experiences and knowledge. the way that we work and provide services. Our People Plan and our One Coventry Plan and its values are clear that a commitment to equality underpins
Age 19-64	P	The workforce strategy and associated action plans recognise and take into account that our strength lies in our diversity, and in order to be able to effectively meet the needs of our communities it is vital that we have a workforce that is reflective of the people we serve. Creating a culture that values and promotes diversity and inclusion will ensure we harness different perspectives, experiences and knowledge. Our People Plan and our One Coventry Plan and its values are clear that a commitment to equality underpins the way that we work and provide services.
Age 65+	P	The workforce strategy and associated action plans recognise and take into account that our strength lies in our diversity, and in order to be able to effectively meet the needs of our communities it is vital that we have a workforce that is reflective of the people we serve. Creating a culture that values and promotes diversity and inclusion will ensure we harness different perspectives, experiences and knowledge. Our People Plan and our

		One Coventry Plan and its values are clear that a commitment to equality underpins the way that we work and provide services.
Disability	P	The workforce strategy and associated action plans recognise and take into account that our strength lies in our diversity, and in order to be able to effectively meet the needs of our communities it is vital that we have a workforce that is reflective of the people we serve. Creating a culture that values and promotes diversity and inclusion will ensure we harness different perspectives, experiences and knowledge. Our People Plan and our One Coventry Plan and its values are clear that a commitment to equality underpins the way that we work and provide services.
Gender reassignment	P	The workforce strategy and associated action plans recognise and take into account that our strength lies in our diversity, and in order to be able to effectively meet the needs of our communities it is vital that we have a workforce that is reflective of the people we serve. Creating a culture that values and promotes diversity and inclusion will ensure we harness different perspectives, experiences and knowledge. Our People Plan and our One Coventry Plan and its values are clear that a commitment to equality underpins the way that we work and provide services.
Marriage and Civil Partnership	P	The workforce strategy and associated action plans recognise and take into account that our strength lies in our diversity, and in order to be able to effectively meet the needs of our communities it is vital that we have a workforce that is reflective of the people we serve. Creating a culture that values and promotes diversity and inclusion will ensure we harness different perspectives, experiences and knowledge. Our People Plan and our One Coventry Plan and its values are clear that a commitment to equality underpins the way that we work and provide services.
Pregnancy and maternity	P	The workforce strategy and associated action plans recognise and take into account that our strength lies in our diversity, and in order to be able to effectively meet the needs of our communities it is vital that we have a workforce that is reflective of the people we serve. Creating a culture that values and promotes diversity and inclusion will ensure we harness different perspectives, experiences and knowledge. Our People Plan and our One Coventry Plan and its values are clear that a

		commitment to equality underpins the way that we work and provide services.
Race (Including: colour, nationality, citizenship ethnic or national origins)	P	The workforce strategy and associated action plans recognise and take into account that our strength lies in our diversity, and in order to be able to effectively meet the needs of our communities it is vital that we have a workforce that is reflective of the people we serve. Creating a culture that values and promotes diversity and inclusion will ensure we harness different perspectives, experiences and knowledge. Our People Plan and our One Coventry Plan and its values are clear that a commitment to equality underpins the way that we work and provide services.
Religion and belief	P	The workforce strategy and associated action plans recognise and take into account that our strength lies in our diversity, and in order to be able to effectively meet the needs of our communities it is vital that we have a workforce that is reflective of the people we serve. Creating a culture that values and promotes diversity and inclusion will ensure we harness different perspectives, experiences and knowledge. Our People Plan and our One Coventry Plan and its values are clear that a commitment to equality underpins the way that we work and provide services.
Sex	P	One of the functions of supervision is support, recognising the sometimes demanding and sometimes distressing nature of working in health and social care. The policy includes standards for delivery, agreements, recognition of individual packages of support and audit
Sexual orientation	P	One of the functions of supervision is support, recognising the sometimes demanding and sometimes distressing nature of working in health and social care. The policy includes standards for delivery, agreements, recognition of individual packages of support and audit

HEALTH INEQUALITIES

2.3	<p>Health inequalities (HI) are unjust differences in health and wellbeing between different groups of people which arise because of the conditions in which we are born, grow, live, work and age. These conditions influence our opportunities for good health, and result in stark differences in how long we live and how many years we live in good health.</p> <p>Many issues can have an impact: income, unemployment, work conditions, education and skills, our living situation, individual characteristics and experiences, such as age, gender, disability and ethnicity</p>
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<p>A wide range of services can make a difference to reducing health inequalities. Whether you work with children and young people, design roads or infrastructure, support people into employment or deal with welfare benefits – policy decisions and strategies can help to reduce health inequalities</p> <p>Please answer the questions below to help identify if the area of work will have any impact on health inequalities, positive or negative.</p> <p>If you need assistance in completing this section please contact: Hannah Watts (hannah.watts@coventry.gov.uk) in Public Health for more information. More details and worked examples can be found at https://coventrycc.sharepoint.com/Info/Pages/What-is-an-Equality-Impact-Assessment-(EIA).aspx</p>		
Question	Issues to consider	
2.3a What HIs exist in relation to your work / plan / strategy	<ul style="list-style-type: none"> • Explore existing data sources on the distribution of health across different population groups (<i>examples of where to find data to be included in support materials</i>) • Consider protected characteristics and different dimensions of HI such as socio-economic status or geographical deprivation 	
	<p>Response:</p> <p>This is a workforce strategy does not include aspects of service delivery. Although the strategy identifies that ensuring we have the right people in the right place at the right time with the values, skills and experience will support the delivery of effective care and support needed both now and in the future</p>	
2.3b How might your work affect HI (positively or negatively). How might your work address the needs of different groups that share protected characteristics	<p>Consider and answer below:</p> <ul style="list-style-type: none"> • Think about whether outcomes vary across groups and who benefits the most and least, for example, the outcome for a woman on a low income may be different to the outcome for a woman a high income • Consider what the unintended consequences of your work might be <p>This is a workforce strategy does not include aspects of service delivery. Although the strategy identifies that ensuring we have the right people in the right place at the right time with the values, skills and experience will support the delivery of effective care and support needed both now and in the future</p>	

Response:

- a. Potential outcomes including impact based on socio-economic status or geographical deprivation

This is a workforce strategy does not include aspects of service delivery. Although the strategy identifies that ensuring we have the right people in the right place at the right time with the values, skills and experience will support the delivery of effective care and support needed both now and in the future

- b. Potential outcomes impact on specific socially excluded or vulnerable groups eg. people experiencing homelessness, prison leavers, young people leaving care, members of the armed forces community.

This is a workforce strategy does not include aspects of service delivery. Although the strategy identifies that ensuring we have the right people in the right place at the right time with the values, skills and experience will support the delivery of effective care and support needed both now and in the future

2.4 Next steps - What specific actions will you take to address the potential equality impacts and health inequalities identified above?

None identified, this is a workforce strategy does not include aspects of service delivery. Although the strategy identifies that ensuring we have the right people in the right place at the right time with the values, skills and experience will support the delivery of effective care and support needed both now and in the future

2.5 How will you monitor and evaluate the effect of this work?

The Strategy will be supported by internal and external annual work plans to support the delivery of the Strategy objectives.

2.6 Will there be any potential impacts on Council staff from protected groups?

No negative impacts identified

You should only include the following data if this area of work will potentially have an impact on Council staff. This can be obtained from: lucille.buckley@coventry.gov.uk

CCC Adult Social Care Headcount:

Sex:

Age:

Female	739
Male	180

Disability:

Disabled	68
Not Disabled	777
Prefer not to state	14
Unknown	60

Ethnicity:

White	636
Black, Asian, Minority Ethnic	251
Prefer not to state	7
Unknown	45

Sexual Orientation:

Heterosexual	640
LGBT+	31
Prefer not to state	56
Unknown	192

16-24	15
25-34	128
35-44	183
45-54	260
55-64	277
65+	56

Religion:

Any other	33
Buddhist	3
Christian	360
Hindu	16
Jewish	1
Muslim	20
No religion	232
Sikh	27
Prefer not to state	55
Unknown	172

3.0 Completion Statement

As the appropriate Head of Service for this area, I confirm that the potential equality impact is as follows:

No impact has been identified for one or more protected groups

Positive impact has been identified for one or more protected groups

Negative impact has been identified for one or more protected groups

Both positive and negative impact has been identified for one or more protected groups

4.0 Approval

Signed: Head of Service: Andrew Errington	Date: 17/11/23
Name of Director: Pete Fahy	Date sent to Director:
Name of Lead Elected Member: Mal Mutton	Date sent to Councillor:

Email completed EIA to equality@coventry.gov.uk

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