Portsmouth Carers Strategy 2025–2029

Health and Care Portsmouth is a partnership between:

HIVE portsmouth
NHS Hampshire and Isle of Wight
Portsmouth City Council
NHS Hampshire and Isle of Wight Healthcare NHS Foundation Trust
Portsmouth Primary Care Alliance Ltd
NHS Portsmouth Hospitals University NHS Trust
healthwatch Portsmouth

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1 Foreword

It is a privilege to be able to introduce the 2025–2029 Portsmouth Carers Strategy.

Our unpaid carers are the foundation of how we care for each other in this country – they are essential, dedicated to their caring role and, without them, our NHS and our social care simply would not be able to function.

We see time and again the impact that the care of another can have on people's lives. The spotlight of publicity is often on the NHS or social care, but carers are the ones who are deeply involved in people's lives, who know them best and understand the things that are important to them. Carers keep a home together and, very frequently, are the reason that our residents who draw on care and support can continue to live in the place they call home.

This shows itself very clearly in a few simple statistics and we are grateful to Carers UK for providing them:

- Unpaid carers in England and Wales contribute a staggering £445 million to the economy every day – that's £162 billion per year, or the equivalent to a second NHS in England and Wales.[1]
- According to the **Kings Fund**[2], the NHS and social care between them employ around 3 million people. The most recent Census (2021) puts the estimated number of unpaid carers at 5 million in England and Wales and 5.7 million across all four nations of the UK. This means that around 9% of people are providing unpaid care and 4.7% of the population in England and Wales are providing 20 hours or more of care a week.
- Over the period 2010–2020, every year 4.3 million people became unpaid carers – 12,000 people a day.[3]
- One in seven people in the workplace in the UK are juggling work and care.[4]
- Caring can have a significant impact on health and wellbeing. 60% of carers report a long-term health condition or disability, compared to 50% of non-carers.[5]
- Over a quarter of carers (29%) feel lonely often or always.[6]

All of these facts are why the community of Portsmouth needs to care for its carers. Without the unpaid and often unacknowledged care provided by family members, friends and communities, our health and care system would simply not be able to function. Carers' contributions extend beyond physical and safety tasks, carers are often advocates for those they care for and are relied upon in all areas of daily life. Carers bring passion, dedication, and a personal touch that enriches the lives of those they care for.

We hope that this strategy and resulting action plan will have a positive impact on carers' lives and will demonstrate the value that we all place on caring in Portsmouth. Thank you to all of our carers for everything they do.

Cllr Matthew Winnington, Cabinet Member for Community Wellbeing, Health and Care, Portsmouth City Council

Andy Biddle, Director of Adult Social Care, Portsmouth City Council

1 Petrillo and Bennett, 2023
2 www.kingsfund.org.uk/insight-and-analysis/data-and-charts/key-facts-figures-adult-social-care#:~:text=Around%201.5%20million%20people%20work,quarters%20in%20direct%20care%20roles
3 Petrillo and Bennett, 2022
4 Carers UK, Juggling Work and Care, 2019
5 Carers UK analysis of GP Patient Survey 2021
6 Carers UK, State of Caring 2022

2 Introduction

Caring for someone is a natural part of life – most of us will care for someone in an unpaid capacity, or need someone to care for us, at some point in our lives. One in eight adults looks after someone, and Census data from 2021 identified more than 15,000 carers living in Portsmouth. We know that caring happens in a range of situations, for example:

- Helping a neighbour with shopping
- Providing emotional support to someone with a substance misuse problem
- Attending appointments with a friend, or
- Looking after a child with additional needs.

The COVID-19 pandemic shone a light on health and care, including the often-invisible support provided by carers. Now that we have emerged from the pandemic, it is more important than ever that Portsmouth is a city where carers are valued. Caring can be extremely challenging, both mentally and physically, over short periods or many years. Carers should be recognised, understood and respected as expert partners in care and able to access the information and support they need.

Portsmouth has a long history of using strategies to work across the health and social care system to improve understanding of how best to identify, support, and work with carers. The 2011 carers strategy was followed by an updated 2015–2020 strategy, the first to be jointly owned by Portsmouth City Council, Portsmouth Hospitals University NHS Trust and Solent NHS Trust. After COVID-19-related delays, an abbreviated plan for carers in Portsmouth was launched in 2022, pending the development of this longer version of the Portsmouth strategy for unpaid carers.

This is the full and longer version of our new strategy for 2025–2029, setting out our goal to broaden that shared responsibility, pushing ownership of this agenda further to a wider range of partners.

It is informed and supported by local and national policy, including:

- **Care Act 2014**[7]
- **Health and Care Act 2022**[8]
- **People at the Heart of Care**[9]
- **Supporting adult carers**[10]

7 www.legislation.gov.uk/ukpga/2014/23/contents
8 www.legislation.gov.uk/ukpga/2022/31/contents
9 www.gov.uk/government/publications/people-at-the-heart-of-care-adult-social-care-reform-white-paper
10 www.nice.org.uk/guidance/qs200

3 Executive summary

The Portsmouth Carers Strategy 2025–2029 aims to recognise, support, and empower unpaid carers within the community. Carers play a vital role in our society, providing unpaid care for family members or friends with disabilities, illnesses, or age-related needs. We know that their contributions can often go unnoticed or unsupported, leading to challenges in their own wellbeing and their ability to continue providing care.

This strategy outlines a comprehensive approach to addressing the needs of carers in Portsmouth, focusing on five priority areas *(see right)*.

By implementing this strategy, we aim to enhance the quality of life for carers, promote their health and wellbeing, and enable them to continue their caring roles while maintaining their own independence and resilience.

1 Improving targeted practical, psychological and emotional support for carers

We will look at the provision of carers breaks (including respite, develop and extend the provision of peer support networks, and improve access to talking therapies).

2 Support carers to live the life they choose

We will provide and promote opportunities for carers to have the social lives they would like and need, and the ability to find and retain employment. In particular this will include encouraging employers to provide a carer-friendly workplace and to support the implementation of the **Carers Leave Act 2023**.[11]

3 Identify, recognise and involve carers in decision making and planning

We will promote the formal identification of carers across the health and social care system and provide carers awareness training for all relevant staff. We will also work to ensure that carers' expertise and knowledge of their loved one, gained via lived experience, is at the heart of decision making and care planning.

4 Engage with, listen to and co-produce with carers

We are committed to including carers in co-production and the quality improvement of health and social care systems in Portsmouth, increasing the digital offering to carers, and providing the information they need at the time they need it and in a format they can understand.

5 Measure and report progress, maintaining flexibility to change plans if needed

We will include carers in the oversight of this strategy, publicise our plans, achievements and impact, and give carers the chance to comment and advise, especially on their areas of expertise.

11 www.legislation.gov.uk/ukpga/2023/18

4 Our shared values

This strategy has been produced by Portsmouth City Council in close collaboration with our key partners: Portsmouth Hospitals University NHS Trust, Hampshire and Isle of Wight Healthcare NHS Foundation Trust, NHS Hampshire and Isle of Wight Integrated Care Board, HIVE Portsmouth and Healthwatch Portsmouth. We all share the below values and are fully committed to the delivery of this plan.

In Portsmouth we recognise that health and social care organisations must align where possible, ensuring those who use our services experience sensible, coherent, collaborative support which can flex to suit individuals. We cannot do this without recognising, valuing and supporting the work of unpaid carers.

As partners to this plan we acknowledge that, although progress has been made, there is still need for further cultural change. This change represents a challenge and is by no means easy, especially for large organisations. The culture change to which we are committed means a shift to embedding the needs and views of carers into all aspects of service development and delivery. We believe this change can only be achieved through co-production, ensuring those who will receive the support are included in deciding and designing what that support might look like.

Our commitment is also to identify need and provide support to all carers, particularly those who are less likely to access services due to not identifying as carers or being members of minority groups – this will include carers from ethnic minority and LGBTQ+ groups.

5 Context

Who is a carer?

In the context of this strategy, we define a carer as: **anyone who provides unpaid care or support to someone who would not manage without that help**.

Carers typically and most often care for family members at home, although not always. Caring might also involve occasional support given to a neighbour or friend. Caring might be for a small number of hours each week or around the clock.

Many carers do not choose or plan to become carers. Caring responsibilities can arise unexpectedly and suddenly, without any training, knowledge, or preparation. It is therefore crucial that carers are identified at the earliest opportunity and offered support with their caring role and their life alongside it, as recognised in the **Care Act 2014**.[12] Many people do not see themselves as carers because they are simply doing what they can for a relative, friend or neighbour who needs them because of their disability or illness. Raising awareness of the caring role is therefore key to ensuring that carers are aware of the information and support that is available to them.

Some carers report positive experiences from caring, finding it rewarding, with improved mental wellbeing. Providing care can make carers feel good about themselves, give new or different meaning and purpose to their lives, enable them to learn new skills, improve resilience and strengthen their relationships with others. However, it is also well established that caring can place a significant burden on a carer over time. There can be negative impacts on physical and mental health and wellbeing, social isolation, and financial pressure.

Legal and policy context

The Care Act 2014

For the first time, the **Care Act 2014**[13] gave carers parity of esteem along with the person they care for. **Section 10 of the Act**[14] requires local authorities to assess: (a) whether the carer has needs for support (or is likely to do so in the future) and (b) if the carer does, what those needs are (or are likely to be in the future). This assessment must include:

- Carer's ability and willingness to continue providing care
- Carer's individual wellbeing
- Impact of the carer's needs for support
- Outcomes the carer wishes to achieve day-to-day and to what extent the provision of support could contribute to the achievement of these outcomes.

The Act also requires a local authority to undertake an assessment of all young carers, to be supported by Children's services. When a young carer approaches 18 they are also entitled to a Transition assessment to prepare for the move to adult services.

Health and Care Act 2022

The **Health and Care Act 2022**[15] built on proposals set out in the **NHS Long Term Plan**,[16] creating Integrated Care Boards and Integrated Care Partnerships which have a responsibility to bring together local NHS services and local authorities to deliver joined-up services for their local communities. This work also includes support for carers.

12 www.legislation.gov.uk/ukpga/2014/23/section/10
13 www.legislation.gov.uk/ukpga/2014/23/section/10
14 www.legislation.gov.uk/ukpga/2014/23/section/10
15 www.legislation.gov.uk/ukpga/2022/31/contents
16 www.england.nhs.uk/publication/the-nhs-long-term-plan

Carer's leave

The **Carer's Leave Act 2023**[17] came into force in April 2024, giving carers the right to take up to a week of unpaid carer's leave a year. There are concerns that some employers may not have been prepared for the new rights and that carers themselves are not aware of the new law. Carers UK recommends employers to recognise the range of skills that carers gain through their caring role, and adopt Carers UK's **Carer Confident**[18] benchmark, run by Employers for Carers, to move towards becoming a carer-friendly employer.

17 www.legislation.gov.uk/ukpga/2023/18
18 www.carersuk.org/for-professionals/support-for-employers/carer-confident/

6 The national picture

Census 2021

Data from the Census of 2021 gave the broad picture around caring across England and Wales. It indicated:

- A 152,000 increase in the number of carers who are providing more than 50 hours of care a week, to just over 1.5 million.
- More than a quarter of a million increase in the number of unpaid carers providing 20–49 hours of care.
- An overall drop in the number of carers, from 5.8 to 5 million unpaid carers.

The increases in numbers of carers providing 'substantial care' are significant because of the impact that substantial unpaid care of over 20 hours per week can have on carers' health, wellbeing and ability to juggle work and care.

The reduction in carer numbers between 2011 and 2021 was mostly through a reduction in the numbers of people providing lower hours of care. The Office for National Statistics suggests a number of reasons for this reduction, including changes in the nature of caring during the pandemic and the high levels of deaths during the pandemic. It also suggests that the change in question framing could have made a difference, possibly ruling out some people who do not recognise themselves as unpaid carers.

Carers UK State of Caring Survey 2023

Over 11,000 carers completed the State of Caring survey 2023. Some of the key findings are below.

The impact of caring on: Employment

Caring responsibilities were found to have a significant impact on people's capacity to work and earn a full-time wage.

40% of carers surveyed said that they had given up work to provide unpaid care, and 22% had reduced their working hours because of their caring role. Over half (57%) of people who had stopped working, or reduced their hours at work to care, said they had done this because of the stress of juggling work and care. Nearly half of carers who had given up work or reduced their working hours had seen their income reduce by more than £1,000 a month.

The impact of caring on: Health

The survey found that a widespread lack of support and recognition from health and care services is severely damaging unpaid carers' mental health. It highlights how people caring round the clock for older, disabled or seriously ill relatives do not have adequate support from statutory services.

More than a quarter of unpaid carers have bad or very bad mental health. 84% of carers whose mental health is bad or very bad have continuous low mood, 82% have feelings of hopelessness, and 71% regularly feel tearful. More than three quarters of all carers feel stressed or anxious, half feel depressed and half feel lonely. Despite feeling they are at breaking point, nearly three quarters of carers with bad or very bad mental health are continuing to provide care.

Not being able to access the support they need is taking its toll on unpaid carers, many of whom are worn out and exhausted. The survey concluded that too many carers are having to wait long periods for health treatment or putting it off because of the demands of their caring role, and are unable to rely on fragmented social care services to support with caring.

The impact of caring on: Finances

The survey found that more carers are struggling with their finances than when the survey was done a year ago (in 2022). A higher proportion of carers said they are struggling to make ends meet, and carers who are already struggling with the high cost of living are being further impoverished by having their ability to earn restricted by Carer's Allowance.

75% of unpaid carers receiving Carer's Allowance were struggling with cost-of-living pressures, while almost half were cutting back on essentials, including food and heating. The survey found that carers receiving Carer's Allowance were more likely to be struggling to afford the cost of food compared to other carers. More than half had cut back on seeing family and friends, compared with less than 40% in 2021.

A significant proportion of all carers who responded to the survey were worried about their ability to manage in the future. Compared to the previous year there was an increase in the proportion of carers struggling to make ends meet and worrying about the impact of caring responsibilities on their finances.

Carers UK believes that the government and policy makers need to have a clear understanding of the risks of financial hardship for unpaid carers, calling for a robust poverty prevention strategy across government which targets and prevents poverty.

7 The local picture

What carers in Portsmouth have told us

We have used, and continue to use, multiple methods and means to hear the voices, experiences and opinions of carers in our city. The critical questions that we believe we need to continue to ask are:

- How accessible is information and support for carers?
- Have your needs as a carer been assessed in a way which has been useful to you?
- What has been your experience of support services aimed at carers?
- What unmet support needs do you have?
- How do you think support services for carers in Portsmouth could be improved?

Prior to the COVID-19 pandemic, some early work began to identify the priorities for this new strategy. Some open face-to-face consultation events, and an online survey, laid the groundwork for this engagement.

This has since been followed by:

- The regular Survey of Adult Carers in Portsmouth
- A day-long event for carers at the end of 2022 (Carers Count), and
- Ongoing feedback to the Carers Service and others.

Some of the headlines from these engagement events are summarised below and they have contributed to the priorities set out in Section 8.

Survey of Adult Carers in Portsmouth (2023)

The Survey of Adult Carers was sent to 1,080 Portsmouth carers of adults. 134 carers responded.

Of those 134:

- Most were female and aged between 45 and 64 (often referred to as the 'sandwich generation' as many are caring for both children and ageing parents)
- Most were caring for people aged 75 and older, who live with dementia, physical impairments or problems with ageing
- Most live with the person they care for
- Most had been assessed separately from the cared for person (63%), however 31% of carers had neither been reviewed or assessed in the past 12 months.

Carers had received a variety of support, including:

- A managed personal budget (33%)
- Information and advice (31%), and
- Direct Payments (20%).

It was found that:

- Carers remain satisfied with services, with satisfaction levels remaining above the England average and a three-point improvement on 2018/19
- Most carers felt involved or consulted (72%) which is significantly better than the England average (65%)
- There was a small decline on reported quality of life since 2018/19
- Most carers found information easy or fairly easy to find (67%), significantly higher than then England average.

Themes identified from written statements:

- Challenges of caring
- The COVID-19 pandemic
- Positive experiences with adult social care
- Negative experiences with adult social care
- Negative experiences with the health system
- Dementia
- Domiciliary care

Feedback from the Portsmouth Carers Count event on 24 November 2022

The event ran for a full day, providing lots of space for conversation. Information received was rich and diverse. There were three main areas of enquiry: breaks and respite, support needs of carers and being heard. The findings are summarised below.

What do you want from breaks and respite?

- Choice, flexibility and personalisation
- Duration – having long and short breaks available
- The quality of replacement care
- The need for emotional respite
- Suitable breaks for young adults

What support do you want as a carer?

- Quality, accessible, funded support
- Practical advice and support
- Communication and information
- Personalised support
- Support for all carers

What are your thoughts on being heard?

- Getting your story and needs heard
- Quick and early support is needed
- Awareness-raising for businesses and employers
- The carer is the expert
- The Carers Centre is a good source of support

8 Our vision and priorities

Priority 1: Support the health and wellbeing of carers

Why this is important

- Carers are often living with high levels of additional stress, both physically and mentally.
- Carers will often put their own wellbeing below that of those they are caring for.
- Carers will typically have limited time or opportunity to look after themselves.

These factors can lead to carers facing health inequalities, which by extension also impacts those they care for.

Outcomes

- Carers have access to a range of peer support, specialist help and activity groups.
- Information and advice will be available to carers via a wide range of means.
- Key services will prioritise carer needs in the way they provide appointments and services.
- There should be no 'wrong door' for carers seeking support.
- We will aim to provide a wider range of break options for carers, available before crisis point is reached.

What we have done and will continue to do

- Promoted and emphasised the importance of carer health and wellbeing, focusing on prevention and early help.
- Improved access to wellbeing activities for carers through increased variety of activities, especially in existing popular locations, and expanded access times to include evenings and weekends.
- Expanded provision of overnight carers respite to include provision for those caring for someone with dementia.
- Worked with schools, community groups and the voluntary and community sector to develop, expand and promote peer support networks.
- Provided advocacy support to carers in Portsmouth around a range of concerns including: safeguarding, staff negligence, complaints regarding funding etc.
- Produced and promoted comprehensive and accessible list of out-of-hours support available to carers.
- Engaged with Talking Therapies services to trial varying therapeutic offer for carers.
- Offered emergency planning sessions to provide peace of mind and practical support for carers.

What else we are planning to put in place

- Provide support and guidance to community organisations to develop and extend peer support projects.
- Further review respite and short breaks offer with view to increase range and availability of personalised respite and short breaks – especially for those with dementia.
- Promote and encourage access to services designed to support good mental health.
- Continue work to support carers who have become socially isolated.
- Support carers to access resources available to improve living conditions and home environment e.g. warmth on prescription, Switched On Portsmouth, especially before those they care for are discharged.
- Continue to improve awareness of carer needs among health and social care staff to improve appropriateness of support offered.
- Continue work with all partners to achieve a 'No Wrong Door' policy for all carer contact, including, for example, the **Memorandum of Understanding for Young Carers**.[19]

19 carers.org/campaigning-for-change/no-wrong-doors-for-young-carers-a-review-and-refresh

Priority 2: Support carers to live the life they choose

Why this is important

- Carers often feel socially isolated because of their caring role, and in many cases have reduced or ceased involvement in paid work, social or other activities.
- Carers have a right to a fulfilling and varied life beyond that of their caring role, including partaking in work and areas of personal interest.
- Long-term carers have often lost confidence in engagement with wider social groups and need support and encouragement to re-engage.

Outcomes

- Carers can take a break from their caring role at a time that is convenient to them, and in a way that suits them.
- Carers can access a variety of activities, groups, and support according to their needs and interests.
- Carers are connected with others – both from their own families and communities and also from their peer group.
- Carers are encouraged to find, and can continue in, employment and to access education opportunities, where possible aligned to skills needed in the local economy.
- Employers are aware of employees who are carers, know their responsibilities to support them and understand the mutual benefit of providing flexible work patterns.

What we have done and will continue to do

- Ensured carer activity groups include range of 'non-caring' options to provide for social interaction and broader areas of interest.
- Staff carer passport completed and implemented across the Solent NHS Trust (now Hampshire and Isle of Wight Healthcare NHS Foundation Trust).
- Worked with local employers and health and social care organisations to promote carers rights in the workplace and access to support for working carers.
- Increased access to services outside of normal working hours.
- Developed the digital offering to provide access to information and advice at a time that is suitable to all carers.
- Co-hosted carers information sessions for staff and unpaid carers on support available across local authority and health trusts.
- Established carers networks within health and social care providers to promote carers' needs

and practical support such as the Carer's Leave Act.

What else we are planning to put in place

- Further develop a carers breaks offering that provides choice and flexibility.
- Promote access to community resources and activities to target social isolation amongst carers.
- Build on **Public Health Outcomes Framework**[20] (Social Connectedness) with the remit to increase the percentage of adult carers who have as much social contact as they would like.
- Portsmouth City Council, Hampshire and Isle of Wight Healthcare NHS Foundation Trust and the Portsmouth Hospitals University NHS Trust to promote use of digital or other support packages for carers.
- Partners commit to reviewing, improving and publicising existing support for employees who are carers – leading by example.
- Establish more active internal carers networks in partner organisations, to keep carers who are employed supported and informed.

- Ensure partner organisations and other employers are meeting requirements of legislation, including the Carer's Leave Act.
- Incorporate requirement for carer support into commissioned contracts.
- Promote management training about carer needs and the need for a dedicated HR policy for carers to employer networks.
- Continue to promote carer needs to Social Prescribers and develop pathway to encourage work with carers.
- Provide volunteering opportunities for carers who wish to return to the workplace.

20 www.gov.uk/government/collections/public-health-outcomes-framework

Priority 3:
Identify and recognise carers, and involve them in decision making and planning their own lives and the lives of those they care for

Why this is important

- Identifying carers earlier ensures they can be offered appropriate information, advice and support and given access to services to help them in their caring role.
- Carers are expert partners who usually know their loved ones best. As such it makes sense that they are actively listened to, involved in decision making and planning.
- Positive and clear systems for carer identification and involvement reduce the need for carers to repeatedly retell their story and explain their loved one's needs.

Outcomes

- Health and social care organisations systems will have simple processes in place to identify and recognise carers. Staff will be familiar with and see the benefit of using these markers.
- Carers' knowledge and views about their loved ones will be seen as important and valuable. Key agencies will be encouraged and supported to develop policy, protocols and training to embed the practice of listening to and including carers in assessment and decision making.
- Carers will be listened to at each key stage of their loved one's health and care journey – including at assessment, review, diagnosis, care planning and discharge.

What we have done and will continue to do

- Worked with adult social care partners to create a more holistic approach to assessments, inclusive of carer views.
- Increased awareness in primary care about the need to identify carers.
- Worked with Hampshire and Isle of Wight Carers leads network to raise general awareness of young carers and their needs.
- Incorporated carers into Portsmouth City Council Impact Assessments.
- Community engagement projects which have led to carer identification and involvement being included in various policy and practice frameworks – including in GP surgeries and palliative care.

What else we are planning to put in place

- Work jointly to develop new assessment and support planning tools which identify carers and indicate any eligible needs for support from adult social care.

- Continue to use the whole family approach to assessment and support, ensuring adult social care looks at the needs of adult and young carers within any family group.
- Sign and implement the 'no wrong door' **Memorandum of Understanding for Young Carers**,[21] to ensure smooth transition of support from children's to adult services.
- Promote and improve existing carer awareness training and make available to all relevant staff. This will include use of updated e-learning packages and development of visual prompts. Staff will develop the confidence to identify a carer even if the carer does not self-identify as one.
- Improve personalised pathways and signposting to support for all carers, prioritising identification at key points on the pathway e.g. at admission, care planning and discharge.
- Make up-to-date information about carer support available to all providers of health and social care.
- Promote and monitor use of new direct e-referrals between agencies to improve referrals for carer support and involvement in care.

- Ensure young carers are identified, coded and supported early and that transition to adult services is clear.
- Work with primary and secondary care to improve promotion of carers' identification and support available both at GP surgeries and Queen Alexandra Hospital.
- Run awareness-raising public campaigns with the aim of increasing self-identification of carers.

21 https://carers.org/campaigning-for-change/no-wrong-doors-for-young-carers-a-review-and-refresh

Priority 4: Engage with, listen to and co-produce with carers

Why this is important

The people who best understand the experience of caring are the carers themselves, who often face challenges in their own lives and in trying to access appropriate support for their loved ones. Service improvement should always include hearing and reflecting on the lived experience and views of carers at all stages in their life journey. Genuine co-production can lead to easy wins and more complex and innovative solutions, to improve the experience of the carer and the lives of those they care for. At the heart of this priority is the need to hear from carers whose voices are less often heard. This will include carers from minority groups, including, for example, from ethnic minorities and LGBTQ+ groups.

Outcomes

- Co-production will be promoted by health and care agencies as the cornerstone of service improvement. The lived experience of carers will be at the heart of development work and training of professionals wherever possible.
- There will be wide and varied opportunities to hear the views of carers, at times, locations and ways which suit them.
- Technology will provide easy and regular communication with carers, though not at the exclusion of face-to-face meetings.
- Communication with carers will be regular, clear, engaging, themed, age appropriate and effective.
- Opportunities will be made available for carers who wish to volunteer their time to support other carers.

What we have done already and will continue to do

- High profile carer consultation events are held annually, attended and supported by all key agencies.
- Ongoing work to improve literature and information relating to health and social care services including feedback from carers.
- Survey, feedback and other consultations conducted by partners increasingly record carer status in data collection and in analysis of results.

What else we are planning to put in place

- Carers Action Plan to be launched early 2025 following publication of Carers Strategy with consultation and input from carers.

- Case studies and short films will be increasingly used to share key messages from carers and encourage others to participate in co-production.
- Increasingly prioritise participation, engagement and co-production rather than consultation opportunities with carers, to establish views and needs. Partner agencies will commit to moving up the **TLAP ladder of co-production**[22] in all carer engagement.
- Promote use of 'carer status' on all wider public consultations, to determine carers' views on all issues. Ensure carers' considerations are included in Equality Impact Statements.
- Find the right spaces and locations to listen to carers, especially from minority groups. This will mean going to places where these groups meet, not waiting for them to come to us. We will offer a range of options for co-production: one-to-one conversations and group events included.
- Continue to push for 'carer' to be locally incorporated as a protected characteristic and as a key worker status.
- Improve the capture and dissemination of information at the adult social care 'front door', to understand what carers are asking of the service and ensure the service is able to respond accordingly.

22 www.thinklocalactpersonal.org.uk/_assets/COPRODUCTION/Ladder-of-coproduction.pdf

Priority 5: Measure and report progress, maintaining flexibility to change plans if needed

Why this is important

We recognise that a strategy and action plan are only worthwhile if there are measures and processes in place to check what has been achieved and how impactful actions have been. Carers typically have limited time to give to strategic and wider thinking, so need to be assured that their input will be valued and incorporated into real action. Improving the lived experience of carers will rely on regular checks being put in place to assure that actions are being taken and impact measured. It is also important that flexibility is built into the process, so that we can respond to local and national changes in need, priorities and resource allocation.

Outcomes

- This strategy will sit above a more detailed action plan which will set out a coherent set of deliverable and impactful targets.
- A structure will be in place to ensure that progress is monitored and reported at regular intervals during the lifetime of this strategy.
- Regular carer involvement will be built into the monitoring of progress against our strategic aims.
- Flexibility will enable priorities to be changed as circumstances require, always to include the agreement of carers in any changes.

What we have done already and what will continue

- A carers strategy oversight group was established in 2020 and has led the creation of this strategy, delayed but not halted by the COVID-19 pandemic.
- Key agencies have continued to promote the carer agenda, exemplified by the achievements in this strategy.
- This strategy has been aligned with linked plans of key partners, ensuring coherence of joint working, including Portsmouth City Council, Portsmouth Hospitals University NHS Trust, NHS Hampshire and Isle of Wight Integrated Care Board and other partners working to support carers.

What else we are planning to put in place

- Operational and oversight group meetings at least quarterly to monitor, plan and coordinate actions coming out of this strategy.

- Include carers in the monitoring framework for the ongoing oversight of the Carers Strategy.
- Establish a pathway to report progress to the Portsmouth Health and Wellbeing Board and other developing forums of influence and interest.
- Create a programme of themed opportunities for carers to comment on progress against actions in which they have particular interest.
- Produce and disseminate regular reports of progress against this strategy and associated action plan.

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