

1 What's it about?

The SBC Adult Demand Programme continues to address the ongoing challenges around increasing demand from population growth and people living longer, often with long term conditions, and significant financial pressures. The focus is on continuing to provide more preventative care, finding new ways to meet people's needs; and identifying ways that existing services and organisations can work together to do things differently.

We will achieve this by pursuing **three priorities**, which ensure that we focus on prevention; targeted intervention and specialist support for the most vulnerable so that:

- People lead more fulfilling lives by enabling personal choice and independence whilst taking personal responsibility for using their own resources where possible (prevention and personalisation for all)
- We build the capabilities and skills of communities, service users, carers and our workforce so that people are able to live as independently as possible and we make the most out of our shared resources (targeted support/reablement/recovery)
- We ensure we continue to protect the most vulnerable people in Swindon

In order to enable more people to live in their own homes and delay the escalation of care needs that present demand on adult social care, Swindon Borough Council (SBC) are looking to commission a service to support Carers in Swindon

The provision will provide a service that offers support to people who identify as a Carer. With the target cohorts being Adult Carers, Parent Carers, Young Adult Carers and Young Carers.

The new tender will offer Carers a service that is Care Act compliant, providing robust Carers Assessments and reviews that are carried out in a timely fashion. The service will also be a source of up to date information to support carers in their role, and will offer a range of activities, training opportunities and

Who's it for?

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. There is currently no single definition of 'carer'. Building on the working definition proposed by the National Carers' Strategy we use the following for the purposes of this document:

A carer spends a significant proportion of their time providing unpaid support to a family member, partner or friend who has a disability, a physical or long-term mental illness or a substance misuse problem.

The new service will be for the following groups of Carers.

- Adult Carers,
 - Parent Carers,
 - Young Adult Carers (18-25)
 - Young Carers (5- 18)
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What are the barriers to meeting this potential?

There are some challenges in estimating demand on this service, according to The Carers Trust there are around seven million carers in the UK – that is one in ten people. This figure is expected to rise.

At the 2011 census, 19,140 people in Swindon (9.4%) reported they were providing some level of unpaid care. This is a similar percentage of the population to the national average of 10.4%

Not all Carers will request support, many will only need 'one off' support and some will require on-going support from this service.

The service will use a simple registration process in order to ensure the most appropriate level of support is offered and result in the caring role being more manageable. This will, in turn, help to manage demand.

2 Who is using it?

The current situation and provision

The current provision is delivered under two separate contracts through one provider, the Swindon Carer Centre:

- Lot 1 - Adult Carers, including parent carers
- Lot 2 - Young Carers

The demand data from the current Carers Support service is as follows:

Swindon Carers Centre Data – (SCC)

No of carers registered with SCC as of 31st March 2016		
Total Carers	3531	
Adult Carer	2109 (60%)	
Parent carers	623 (18%)	
Young adult carers	97 (3%)	
Young carers	702 (20%)	
Gender splits:	Male 33%	Female 67%
Adult Carers	702 (20%)	1403 (40%)
Parent Carers	107 (3%)	516 (15%)
Young Carers	318 (9%)	318 (11%)
Young Adult Carers	29 (1%)	29 (2%)
No of carers registered as of 31st March 2017		
Total Carers	3950	
Adult Carers	2322 (58%)	
Parent carers	655 (16%)	
Young adult carers	146 (3.6%)	
Young carers	827 (21%)	
Gender splits:	Male 33%	Female 67%
Adult Carers	772 (19%)	1550 (39%)
Parent Carers	114 (2.8%)	541 (13%)
Young Carers	391 (9.8%)	436 (11%)
Young Adult Carers	46 (1%)	100 (2.5%)

With regards to Carers in Swindon, the 2011 Census recorded 19,140 people in Swindon (9.4%) reporting they were providing some level of unpaid care. This is a similar percentage of the population to the national average of 10.4%

In the 2011 Census, an additional 3,724 people reported that they provide unpaid care in Swindon in 2011 compared with 2001 (an increase of 23.7%); the increase in numbers of carers is greater than the general population growth (16.4%). The percentage providing unpaid care was also slightly higher in Swindon in 2011 compared to 2001 (9.7% v 8.8%), in line with the national trend.

Carers UK has produced a series of research reports, which estimates the latest number of carers in the UK. They estimate there were 21,006 carers in Swindon in 2015. The increase in carers in

Swindon of 33.6% since 2001 is the largest percentage increase in the number of carers in the South West, and well above the national average of 17.7%.

Geographical mapping has shown that people are providing unpaid care in all parts of Swindon. In general, it appears more people are providing unpaid care in the rural areas but this could be linked to a more elderly population in these areas.

Age:

Census data tells us that in Swindon the largest percentage increase has been in young people aged under 25 with an additional 610 young carers in 2011 compared to 2001. This compares to a rise of 24% nationally in this age group. The number of adult male carers rose by 23% and females carers by 24%, but there is still a wide gap between the two groups.

Population estimates in Swindon show numbers are increasing and are currently around 220,000 of which 14.9% (32,237 people) are aged 65 or older. Projections indicate that almost half (25,900 people) of the population growth between 2011 and 2031 will be in the 65 plus age group. The increase in population is being driven by people living longer and (net) internal migration.

The Ageing Well JSNA reports that there are about 33,000 people in living in Swindon over 65, this is 15% of the total population of these, 1548 are aged over 90 with double the number of women than men in this age group.

We do not currently collect data on the age of the Cared for person, however, this is something that will be collected from the incumbent provider.

Older Carers caring for a learning disabled adult:

Based on SBC data, 118 carers aged over 65 known to SBC Adult Social Care were caring for an adult with a learning disability. At least an additional 63 are known to SCC. Of the 118 carers only 36 (31%) have a current record for assessment or review at SBC. Whilst no-one can predict when carers will be unable/unavailable to care the age of 46 has been identified as a time by when adults with a learning disability are more likely to live in residential or nursing care. 58 of the people cared for by the 118 carers are aged 46 or older. Of these 58, 35 are cared for by carers over 75 years.

Gender:

The SCC data reports a higher uptake of women (67%) than men (33%) across the whole service. The Carers JSNA reports that in Swindon, in 2011, 43% of carers were male and 57% female, which is similar to the gender difference nationally. The gender split was fairly consistent over the age groups.

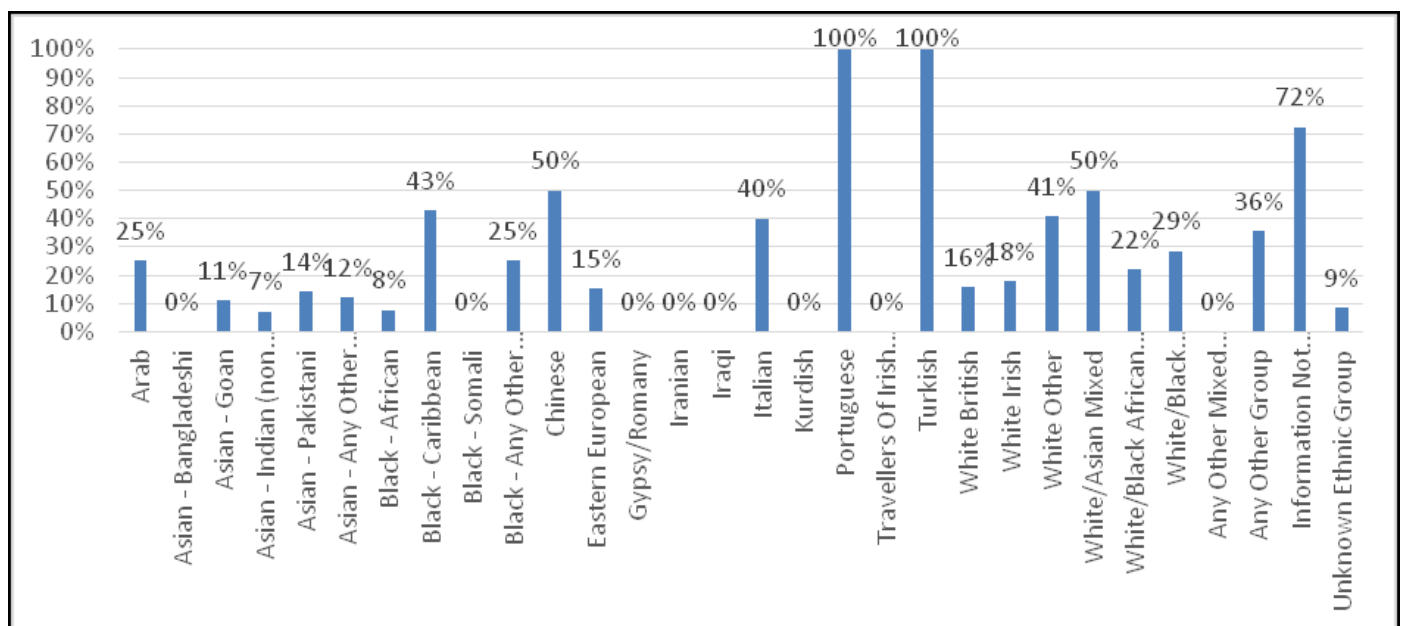
Age	Female	Male	Total
0-9	100	106	206
10-14	211	187	398
15-17	116	93	209
18-19	50	20	70
20-29	110	38	148
30-39	239	65	304
40-49	390	115	505
50-59	435	169	604
60-69	343	149	492
70-79	243	142	385
80-89	143	120	263
90 plus	13	15	28
Total	2,393	1,219	3,612

Ethnicity:

From the SCC data collected on the current provision there is a disproportionately high level of usage of clients from a White British background with 89% of carers registered about whom ethnicity is recorded are White British, whilst representation from BME groups is low with only 11% registered (14 – less than 1% of carers declined to say). However, local analysis of need has identified Swindon has an increasing number of people from minority ethnic communities and backgrounds. The Citizens Advice Bureau reports that 24% of its customers and service users are from BME backgrounds.

To date the Swindon Carers Centre have undertaken an inclusion research project, and have developed a set of objectives and an action plan to support this work. From this work SCC have developed a good practice model for Carer Inclusion. This has resulted in an increase in carers (Sept 16 – March 17) from ethnic backgrounds, religion, and sexual orientation engaging with the service.

Percentage increase in access to the service by ethnicity



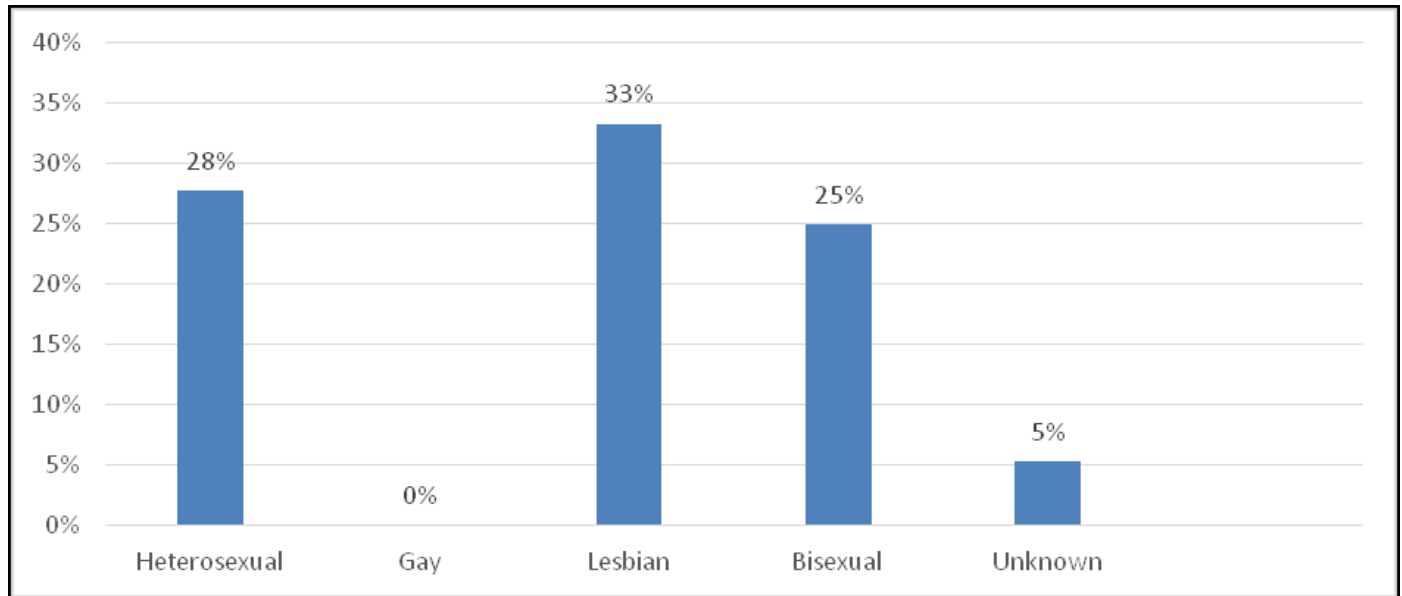
Data from SCC Carers Inclusion report 2016/17

Sexual orientation:

The census does not provide information on the local lesbian, gay and bisexual population (which is estimated by the Government Equality Office to be 6%), or the population of transgendered

people for which there is no national estimate. SCC data below reflects the % increase in carers engaging with the service since Sept 16 – March 17.

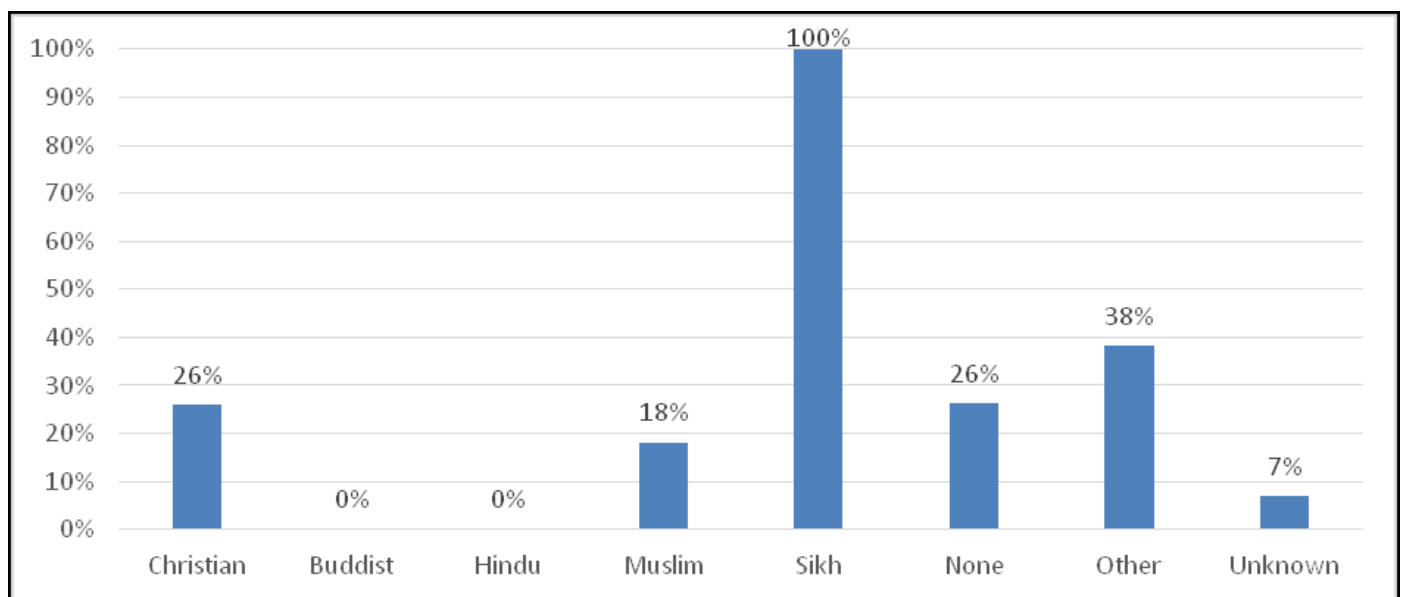
Percentage increase in access to the service by sexual orientation



Religion:

The census does not provide information on the religious profile of carers in Swindon. Data from SCC data below reflects the % increase in carers engaging with the service since Sept 16 – March 17.

Percentage increase in access to the service by religion



There is no current data collected on Carers who have a disability of carers, transgender carers, Marriage/Civil Partnership, or Maternity/Pregnancy.

Future Provision

Evidence from the increase in demand on the current service and data from the census makes it clear there is a need for a provision to support carers in Swindon.

Feedback from Carers and other professionals, reported in quarterly monitoring returns, tells us that the Swindon Carers Centre has provided a quality service that has adapted to change when needed.

The future service will be based on the current contract with the emphasis on providing a service for young adult carers in transition, and older carers aged 65 plus. The new contract will have updated KPIs to reflect national and local outcomes.

The tender will be offered as a single opportunity in order to gain some economies of scale and reduce the fragmentation of services.

How can you involve your customers in developing the proposal?

The current provision has collected feedback from service users on a regular basis, this is reported via the quarterly monitoring and review meetings. A questionnaire was also developed by Swindon Healthwatch, the results of which have been included in the Carers JSNA. Commissioners have met informally with service users at various different events, including Carers Cuppa, Carers Rights day and other group activities. This information is being collated to develop the future service.

Who is missing? Do you need to fill any gaps in your data?

The Adult Demand DIA identifies that SBC has limited data on religion, sexual orientation, and gender identity amongst older people, and there is limited data from the current carers support service on religion, ethnicity and sexual orientation due to this only being collected more recently. There is no data collected currently on disability of carers, transgender carers, Marriage/Civil Partnership, or Maternity/Pregnancy.

Commissioners will be working with the successful service provider and Adult Social care staff to align how we capture this data going forwards with the implementation of the new contract.

The LGBT website, LGBT Foundation, highlights that being a lesbian, gay, bisexual or trans (LGBT) person and a carer can bring about additional issues. One such worry may be that existing services to support LGBT Carers and the person that they care for may not be LGBT friendly, or the Carer may feel uncomfortable about 'coming out' to people who can help.

3 Impact

a) Does the proposal create an adverse impact which may affect some groups or individuals? Is it clear what this is? How can this be mitigated or justified?

It is our intention that the new service will not generate any adverse impact and we will work with the provider to ensure this. However the following issues will need to be taken into account:

- Age – The current commissioned service provision is for:
 - Young carers aged 5 -18
 - Adult Carers, including Parent Carers

It is proposed that the future service will include a Young Adult Carers aged 18 – 25, and will also have a particular focus on older carers aged 65 plus.

- Disability - The current service is open to those who require a service, some of whom may have a disability, either physical, learning or mental health. Data is not currently collected on the Carer, but is focused on the cared for. This information would be required going forward to spot where there may be a risk of carer breakdown or a different approach to how support can be offered to reduce risk.

- Gender - The current data reflects that women are more likely to be registered with the current provider with the proportions being 67% female and 33% male. Whilst there are generally more female carers than male, the proportions should be more equal and therefore the contract will have a targeted focus on supporting all equality groups.
- Transgender – there is currently no data on this area, this will be addressed with the new provider
- Marriage/Civil Partnership - there is currently no data on this area, this will be addressed with the new provider
- Maternity/Pregnancy - there is currently no data on this area, this will be addressed with the new provider, however there is recognition that ‘sandwich carers’ are often caring for young children and elderly relatives at the same time. There is some limited data on this group in Swindon, the successful provider will need to look at ways to capture this data better.
- Race - the figures show a high percentage of contacts from white British backgrounds, the successful new provider will need to work to increase access across all groups of service users and record this data appropriately.
- Religion/Belief – there is limited data from the current provider due to this being only recently collected, therefore further work with the successful provider will be needed to look at ways to increase data in this area. Addressing this is important and will be the subject of on-going discussion with the future provider.
- Sexual orientation – there is limited data from the current provider due to this being only recently collected, therefore further work with the successful provider will be needed to look at ways to increase data in this area. Addressing this is important and will be the subject of on-going discussion with the future provider
- Financial economic status, homelessness, political view – Current Services record post codes. No data is collected on political views or economic status, the current service is not means tested. The successful service provider will continue to report on service users post codes, this will enable a way of measuring how many people are engaged from across Swindon and will highlight any gaps.

There are currently two groups who are underrepresented in receiving this service: people from Black and Minority Ethnic (BME) backgrounds and males from all backgrounds. We would therefore expect the contractor to be able to ensure a good take up from individuals from both these groups. We don't have information regarding service take up from other potentially underrepresented groups but will expect the contractor to provide a service that is appropriate and sensitive to all clients referred and work to develop their monitoring information.

What can be done to change this impact?

Demographic characteristics of people using the service will be collected and evaluated to understand whether particular groups are being disadvantaged in the service provision. This data will be reported on throughout the life of the contract and targets set to ensure the service reaches across all groups, this will be the responsibility of the provider.

b) Does the proposal create benefit for a particular group? Is it clear what this is? Can you maximise the benefits for other groups?

Eligibility and target groups

The service should be offered to any Carer who self identifies or is referred via any other agency. We are aware that there are some gaps in who self identifies and that further work needs to be undertaken to raise the profile of the service to these groups/individuals. We expect the service to therefore target particular cohorts of people, including:

- BME Carers
- LGBT Carers
- Older Carers, particularly male
- Older Carers caring for dependents with a learning disability.

The services will be available to eligible people living within the boundaries of Swindon Borough Council and Swindon Clinical Commissioning Group (CCG). The area covered includes Shrivenham. For those Carers who live outside of Swindon but care for someone within Swindon services will still be offered but on a reduced scale.

Does further consultation need to be done? How will assumptions made in this assessment be tested?

The information from the current Services will be used to inform the service redesign and re commissioning of Carer Support services along with information from reviews and the Annual report.

4 So what?

What changes have you made in the course of this DIA?

The DIA process has forced a look at the representation of Carers across the protected characteristics and how we capture this information. It has also raised the question on what we use the information for, and where we can better promote the service to ensure carers from across the protected characteristics are aware of and have access to the service.

What will you do now and what will be included in future planning?

Review of all customer feedback and data collected from the current service will be used to form the specification. The specification will go out to tender and tenderers will be judged partly on how they will measure impact of activity and contacts. The successful tenderer will be required to provide data across the protective characteristics of service users, and their proposed methodology/strategy for increasing take up.

When will this be reviewed?

Annually

How will success be measured?

- Key performance indicators have been identified and will be reviewed on a quarterly basis
- Customer Feedback

For the record	
Name of person leading this DIA Claire Smith	Date completed 29/08/2017
Names of people involved in consideration of impact Caroline Gaulton/ Nick Stephenson	
Name of manager signing DIA Claire Smith	Date signed 01/09/17

