



**LEICESTERSHIRE HEALTH AND WELLBEING BOARD -**  
**05 DECEMBER 2024**

**REPORT OF THE DIRECTOR OF PUBLIC HEALTH**

**CARERS - DRAFT JOINT STRATEGIC NEED ASSESSMENT**

**Purpose of Report**

1. The purpose of this report is to present to the Health and Wellbeing Board the findings of the needs assessment for carers in Leicestershire and ask the board to approve the current draft Joint Strategic Needs Assessment (JSNA), as a basis for updating the Carers Strategy.

**Recommendation**

2. The Board is asked to:
  - a. Note the findings of the needs assessment for Leicestershire carers.
  - b. Approve the current draft of the JSNA.
  - c. Agree to the full commissioner-led recommendations being added to the report once the Carers Strategy working group has developed the new strategy in due course.

**Policy Framework and Previous Decision**

3. The County Council and Integrated Care Board (ICB) (previously Clinical Commissioning Groups) have an equal and joint statutory responsibility to prepare a JSNA for Leicestershire, through the Health and Wellbeing Board. The Health and Social Care Act 2012 amended the Local Government and Public Involvement in Health Act 2007 to introduce duties and powers for Health and Wellbeing Boards in relation to JSNAs.
4. The Health and Wellbeing Board considered a report on plans for the development of the JSNA in 2022, which proposed that the JSNA would be published in subject-specific chapters throughout a three-year time-period on an iterative basis, in line with Integrated Care System (ICS) and local authority commissioning cycles. A separate report on the agenda sets out a proposed new approach to the delivery of the JSNA from 2025 onwards.

## **JSNA Chapter – Carers**

5. Copies of the draft JSNA Chapter and its Appendix are included in the link attached (Appendix 45). The summary below provides the key findings and recommendations.

## **Policy Context**

6. Carers play an essential role in local communities, providing care, unpaid, for a people living with a disability, long term illness, substance misuse or a mental health need, who would not manage without their help. They provide a form of effective early intervention, supporting the most vulnerable citizens and preventing the people they care for from requiring greater degrees of health and social care support. The 2021 Census identified that nationally 4.7 million people in England were providing unpaid care, representing 9% of the population. Because many carers do not self-identify, the true figure is likely to be much higher.
7. A number of national strategy documents were published underpinning the need for services including Carers Strategy of 2008 (reviewed in 2010), 'Reforming Care and Support' White Paper of 2012. The Care Act of 2014 reformed the law relating to adult social care with significant provisions for unpaid carers including the entitlement to carers assessment and support, becoming a duty on local authorities. The Care Act 2014 represents a shift towards recognizing and supporting carers, rather than just as adjuncts to the person they care for. The Children and Families Act 2014 introduced assessment for young carers and parent of carers of young people. Additional provisions were provided by the NHS Long-Term Plans 2019, White Paper 2021 and Health and Care Act of 2022. In 2024, Carer's Leave Act added a statutory right to take five days of unpaid leave from work, each year to fulfil caring responsibilities.
8. Several NICE guidance and quality standards provide further advice, such as 'Supporting Adult Carers' (NG150 and QS200), published in 2020 and 2021.
9. Local strategies include the LLR Joint Carers Strategy, refreshed for 2022-2025. Other include the Leicestershire Health and Wellbeing Board Strategy 2022-2032 setting as outcome improved quality of life for carers and Public Health Strategy 2022-2027, or LLR Living with Dementia Strategy for 2024-2028, as examples.
10. Current policy aims to prevent mental ill-health, provide early intervention and improve the mental wellbeing of the population while managing increasing need for services.

## Who is at Risk

11. The population of Leicestershire is older than the national average (21% aged 65 or over, compared to 18.5% across England) and shows faster growth in older age groups, indicating potentially higher than average need for care. Current trends and forecasts point toward a significant rise in the numbers of people with several chronic conditions, with an additional 20 thousand more people suffering from three or more conditions by the year 2032 across the county.
12. Despite lower levels of socio-economic deprivation across Leicestershire, there are pockets of rural deprivation with problems of loneliness and social isolation, as well as poor access to services, all of which can have substantial impact of the quality of life and wellbeing of carers.
13. Caring impacts on individual's health and wellbeing. The general health of carers deteriorates incrementally with the increasing hours of care provided (Census 2021, England). Health inequalities experienced by carers include higher rates long-term conditions, mental ill-health and social isolation. Many carers experience significant financial difficulties through impact on their employment and bearing additional costs of caring.
14. Several carer groups have additional needs or vulnerabilities. Groups include ethnic minority, LGBTQ+, young carers, carers of younger adults, carers of people with learning difficulties, cares of people with dementia or cares of people with substance misuse.

## Local Needs

15. The **total number of carers** in Leicestershire is not known but is likely to be higher than the published Census 2021 figures (61,300; 9%). Carers UK charity estimates that 26% adults in the UK provide some level of unpaid care; this would translate into 156,000 of Leicestershire residents. The numbers of carers **registered** on GP registers is only around 1-2%; total number in 2024 registered locally with VASL Support for Carers is just over 6,790.
16. **Census 2021** reported a total of 61.3 thousand of Leicestershire respondents (age 5 and above), declaring that they provided unpaid care; 9% of population. At a district level this varied between 9.8% for Oadby and Wigston and 8.3% for Harborough (crude rates). The highest rate of caring population was among those aged 45 to 64 (15%), followed by those 65 to 84 (11.3%), with women predominating in all but the eldest (aged 85 and above) group of carers.

17. Similarly to the national figures, the highest rate of unpaid care for ethnic groups was for white Gypsy or Irish Travellers (13.2%, compared to 9.4% for white English, Welsh, Scottish and Northern Irish).
18. The rate of employment among carers were slightly higher in Leicestershire compared to the national average, with slightly lower unemployment rate (2% vs 3%).
19. More than a quarter (28% or 17,100) of carers provided 50 or more hours of care per week. For the majority of carers in this group (93% or 15,800) their households comprised of at least one disabled person and 6,200 carers declared their own health being poor.
20. Broad **indicators of social isolation and quality of life** of unpaid carers by the Office for Health Improvement and Disparities (OHID), show no significant departure from national average, except for social isolation among the older population (65 and above) being lower (better than average) and rate of self-directed support and direct payments higher (better).
21. The **Leicestershire Carers Survey for 2023/24** (1,064 sampled carers with 40% response rate), showed a lower level of dissatisfaction with services (4.8%, compared to the national average of 8%). It also identified that one in four (25%) of respondents cared for more than 20 years.
22. The proportion of those caring for more than 100 hours per week increased from 30% in 2021/22 Survey to 36% in 2023/24. Less than half (nearly 46%) of respondents reported they could look after themselves, while over 17% felt they were neglecting themselves, compared to 20% nationally. Carers' ability to look after themselves has been declining at the national level as well as locally.
23. Almost one in ten (9% vs 10% nationally) of Leicestershire carers report having substantial financial difficulties as a result of their caring role. This finding also shows a negative trend.

### Impacts

24. Caring has significant impact on personal finances, employment and health of carers. Rates of disability are high among unpaid carers, particularly in older age groups (65 and above), with 40% of carers providing over 20 hours of care per week who are disabled themselves. In Leicestershire, age-specific rates of ill-health or disability among carers are similar or lower than the national average.

25. Twenty-eight percent of people with caring responsibilities were in poverty in 2021/22 (Rowntree Foundation); those in paid employment experience an average £5,000 pay penalty per year. In 2024, 1.4 million people claimed Carers Allowance, a 4% increase on the previous year.
26. The estimated contribution of unpaid care for the national economy is estimated to be equivalent to the total NHS budget – circa £162 billion per year.

## Services

27. Under the Care Act 2014, carers are entitled to support from their local authority, with eligibility assessed through Carers Assessment. In Leicestershire, it can be completed through the customer service portal, by calling the **Adult Social Care (ASC) Customer Service Centre** or VASL Support for Carers. Carers may be entitled to a personal budget to support their health and wellbeing and provide respite from their caring responsibilities.
28. Carers can receive a Direct Payment from ASC to support in their caring role. The number of carers in receipt of a weekly Direct Payment on any given day has been increasing over the last 3 years (by 32%). A Parent Carer Assessment can be requested for those families where the parent or carer is the main carer for a child or young person up to the age of 18 that has either a physical or learning disability and/or has a mental disorder.
29. Voluntary Action South Leicestershire (VASL) **Support for Carers** is a free service commissioned by Leicestershire County Council. Support for Carers offers carers a variety of different services to support unpaid carers including issuing a Carers Passport, providing information and advice, financial and emotional support, befriending service, and local support groups to give carers the opportunity to connect with other carers.
30. Under the Children and Families Act of 2014 and Health and Care Act of 2022, the Local Authority has a statutory responsibility to identify young carers across the county who have the right to an assessment. The dedicated **Young Carers Team** which comprises of one Young Carers Co-ordinator and one Young Carers Youth Worker (two full-time equivalent). Young Carers Passport has been introduced to support children in working with their schools, GP's, and other professionals. Only 288 young carers were so far identified in secondary schools in Leicestershire: 0.6% of school population. As a reference, Census 2021 reports 1.1% of 5-17 year olds as carers.
31. The **University Hospitals of Leicester (UHL)** are undertaking a variety of projects in support of carers, including development of a new Carers Strategy, with a focus on carers identification, involving carers and keeping carers

informed. UHL developed their Carers Passport, which is being rolled out throughout the Trust. UHL is also reviewing the Family, Carers and Friends Feedback Form.

32. There has been a number of initiatives in **primary care** including the development of a GP Carer Registration Form, establishing the LLR GP Carer Registration Dataset, ongoing work to improve carer identification, developing support pack, carer awareness training and carer awareness raising with ICB staff involved in service transformation.
33. **Leicestershire Partnership NHS Trust (LPT)** developed a National Carers Trust Triangle of Care (TOC) programme, including introduction of a Carers Pack, SystemOne Carers dashboard, carer awareness training.
34. There are many independent **voluntary sector** organisations, such as Age UK or Carers UK, providing a variety of help, information and advice to carers. The support may include home respite, benefits checks and advice, support with domestic tasks and personal care, domestic help, friendship and support and dementia and memory services.
35. The service section of the report is not a comprehensive service directory, rather a summary of services provided by different sectors.

## Findings

36. A good proportion of carers in Leicestershire remain unidentified or do not identify themselves as formal carers.
37. With proportionately more older people in Leicestershire, significant past and projected growth in this demographic, there are significant implications for the future need for care in the county. The local demographic trends indicate significant rise in rates of multimorbidity.
38. Rural deprivation, linked to social isolation, poor access to housing and services, is an added dimension to risks faced by Leicestershire carers. However, social isolation measures published by OHID did not find high rates in the county as a whole.
39. There were over 22.7 thousand Leicestershire residents providing 35 or more hour of care per week in 2021 (Census). However, weekly rates are overall lower when compared to the national average.

40. One in twenty of carers surveyed recently in Leicestershire were dissatisfied with services, but this rate much lower than national average (4.8% vs 8%). One in ten local carers report having financial difficulties linked their caring role; this rate has been increasing recently.
41. The proportion of carers caring for someone long-term (over 20 years) have been increasing.
42. The number of Leicestershire carers receiving weekly direct payments has increased by almost a third between 2021 and 2024 (to 1,256).

**PLEASE NOTE:** All information contained in the report is up to date as of end of September 2024.

### **Consultation and Patient/Public Involvement**

43. The JSNA Chapters draw on a wide range of research and consultation evidence in forming their conclusions. Further details are set out in the detailed chapters attached in the links to the report. A bi-annual carers survey also underpins some of the analysis in the report.

### **Resource Implications**

44. The recommendations in the report and JSNA Chapters are aimed at informing commissioning plans and associated budgeting processes for relevant health and care agencies. Particular recommendations may well have implications for the prioritisation of budgets across services. The Carers Strategy work is now commencing and will consider more detailed recommendations including resourcing.

### **Circulation Under Local Issues Procedure**

None

### **Appendix**

45. Leicestershire JSNA 2024: Carers (Draft)  
<https://www.lsr-online.org/uploads/carers.pdf?v=1732290248>

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### **Relevant Impact Assessments**

#### Equality and Human Rights Implications

46. The JSNA chapters take due regard to the equality and human rights of different population groups. In particular, the Chapters examine sources of health inequalities and recommendations are designed to help alleviate issues created through identified inequalities.

#### Partnership Working and Associated Issues

47. A number of partners and stakeholders are involved in supporting the carers agenda in Leicestershire. The stakeholders have been consulted and contributed to this JSNA chapter throughout the Carers JSNA Working Group and will support delivery of the new Carers Strategy.