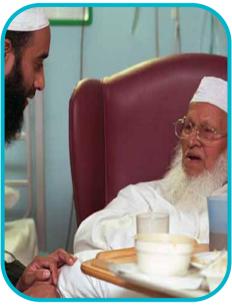
Bury Adult Carers Strategy

Caring for Carers

2013 - 2018













This Strategy acknowledges the huge amount of work undertaken by carers in Bury. Through consultation you have given us an understanding of your caring role and have worked tirelessly to ensure we recognise the value of this. You offer incredible support to the people you care for and for that we are truly grateful and we thank you.



Contents and quick read guide

We want to make this strategy easy to read. By explaining below what each of the main sections contains, you can go straight to the part you want.

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Welcome to the adult Carers Strategy for Bury

Foreword

We are delighted to publish the Adult Carers Strategy for Bury 2013-2018 as part of our commitment to carers within Bury.

The number of unpaid carers is increasing steadily throughout the UK. In Bury alone, we currently know of 3,320 adult carers but we acknowledge that there may be many more who do not receive any support to undertake their caring role.

The Government recognises and values the contribution of carers and has pledged to personalise support on key areas such as employment, information and respite. Bury Council and Bury's Clinical Commissioning Group have written this strategy in response to these priorities whilst ensuring it aligns with the needs of carers within Bury.

We acknowledge that caring for another person can be a rewarding, as well as a difficult, time. Supporting carers through the difficult times is one of the main priorities within this strategy.

This strategy has been written using the expertise of carers and service providers and we are very grateful to them for their valuable contributions.

Councillor Rishi Shori

Executive Member, Adult Care and Wellbeing, Bury Council

Dr Audrey Gibson

Clinical lead, Bury Clinical Commissioning Group

April 2013





Introduction

Our vision

This strategy is an important document and will be used by Bury Council and Bury CCG to understand how to work with and support local carers. It will also support us to define priorities and responsibilities for the future, identify potential gaps in services and illustrate how we will work towards them. This strategy will enable us to coordinate the vast range of partner organisations required to achieve these priorities.

Our vision for this strategy is 'to recognise, enable and support carers of all ages from the whole community to have a quality life of their own'. This vision has been agreed by Bury Carers Strategy Group and illustrates our commitment going forward.

Our aims for this strategy

The current Government has paid tribute to carers and has promised to support them within their caring role. This support is defined within the national carers strategy: 'Recognised, Valued and Supported, the next steps for the Carers Strategy'. This strategy aims to ensure that carers are respected, that they have access to good quality information, that they access the services and support they need to care for their relative or friend and that they have a life of their own. The Government's strategy sets out four main priorities agreed as part of its consultation:

- 1. Identification and recognition;
- 2. Realising and releasing potential;
- 3. A life outside of caring;
- 4. Supporting carers to stay healthy.

The priorities of Bury Council and Bury CCG are aligned with the four national priorities and include a clear description of how we will know these priorities have been achieved.

There are other pieces of local and national strategy, policy and legislation which will affect this strategy. These include²:

Living well in Bury: Making it happen together, our vision for health and wellbeing. The DRAFT Bury Health and Wellbeing Strategy (2013-2018)



Introduction

This joint draft strategy is Bury's overarching plan to deliver its vision for the health and wellbeing of the people who live and work in Bury. The draft strategy focuses on improving health and wellbeing across a person's whole life cycle. This includes increasing support for carers.

Carers (Recognition and Services) Act (1995)

Under this Act, individuals who provide or intend to provide a substantial amount of care on a regular basis are entitled to request an assessment of their ability to care and to continue caring (at the time the person they care for is being assessed for community care services). This assessment looks at the carers ability to provide care and the sustainability of this. This Act applies to carers of all ages.

The Carers and Disabled Children Act (2000)

The Carers and Disabled Children Act (2000) made four principal changes to the law, with the objective of enabling local authorities to offer support to carers to help them maintain their own health and wellbeing. It gives carers the right to an assessment independent of the community care assessment for the person they care for. The Act applies to carers aged 16 and over and people with parental responsibility for disabled children.

Carers Equal Opportunities Act (2004)

This act legislates that local authorities have a duty to inform carers of their right to an assessment of their needs. It also promotes better joint working between local authorities and the health service to ensure support for carers is delivered in a more joined up way.

Caring for our Future White Paper (2012)

This white paper sets out how people will be supported to stay independent for as long as possible. This includes improving support for carers, providing better information so people can make informed decisions about their care and improving the quality of that care.





Part 1: Where we are now?

Where are we now?

This Carers Strategy for Bury replaces *Caring Together: the Carers Strategy for Bury 2009-2012* (a joint strategy between Bury Council and Bury CCG) and builds on the achievements already made. These include:

- 1. Bury Council continue to fund a Carers Services Team. This team provides strategic and operational support to carers, carer groups and local providers. The team also commissions services for carers to support them to maintain their caring role within the community;
- 2. Bury Council and Bury CCG continue to fund the Gaddum Centre to provide a Carers Centre on its behalf. This centre opened in 2008 and offers a wide range of information and support to carers;
- 3. 567 people in receipt of a Carers Personal Budget (a pilot scheme in place since April 2011). This pilot not only meets the national requirement of *Putting People First*³ but means that carers have the flexibility to choose their own support services;
- 4. All 33 GP practices in Bury have an identified lead for carers;
- 5. Bury Council including the caring role in its protected characteristics under the Equalities Act 2010⁴ (this was a local decision to illustrate the value of carers);
- 6. Since the implementation of Carers Personal Budgets, Bury Council has held a range of workshops with local care providers, day centres and residential care homes to ensure closer partnership working to support carers receiving a service.

Who are Bury's carers?

The Carers Trust defines a carer as 'someone of any age who provides unpaid support to family or friends who could not manage without this help. This could be caring for a relative, partner or friend who is ill, frail, disabled or has mental health or substance misuse problems'5. In response to this, this strategy does not identify someone who provides care as part of a contract of employment as a carer. The role of carer is rarely chosen and is often an expression of love, respect and affection for another person⁶ (although this is not always the case). It will frequently come as a result of an illness or someone becoming older and needing more support.

According to the 2011 census, there are 185,100 people living in Bury, making it the 16th largest borough within the North West⁷. There is an almost even split between males (49%) and females (51%) and 85.3% of the population is recorded as White British⁸.

The census also tells us that the number of people who state they provide unpaid care in Bury is 19,954 (11% of our population). This is an increase of 723 individuals in the last 10 years. On a national level, the Carers Trust states that there are almost six million carers in the UK⁹. This equates to approximately one in ten people, which illustrates that the numbers in Bury are comparable with the national average.

The best source of information about carers in Bury is a register of 3,320 carers held by the Carers Services Team and the Carers Centre. Considering we have a population of 19,954 people currently providing unpaid care in Bury, it is clear that more work needs to be undertaken to identify carers.

The register of 3,320 known carers tells us the following information:

66% (2,208) of unpaid carers, of whom we are aware, are female. The Carers Trust states that 58% of carers in the UK are women¹⁰ so this female majority is something we would expect to see.

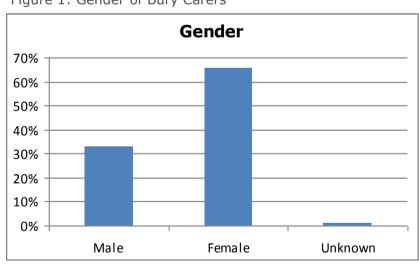


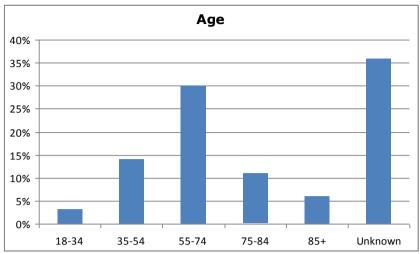
Figure 1: Gender of Bury Carers

Source: Carers register 2012

We know the ages of 64% (2,114) of known carers. Of this, 30% (1,009) are aged between 55 years and 74 years.

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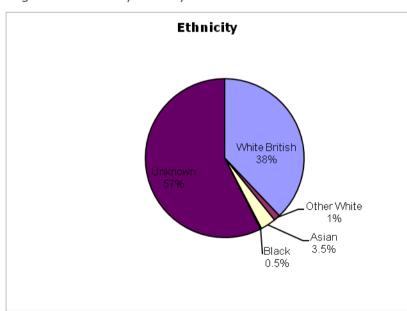
Figure 2: Age of Bury Carers



Source: Carers register 2012

The majority of unpaid carers (1,259) in Bury are White British. (57% have not given this information.)

Figure 3: Ethnicity of Bury Carers



Source: Carers register 2012

It is clear from the data provided that important demographic details are missing or incomplete. For Bury Council and partners to have a full understanding of the carers in this Borough we need to have access to more detailed information, including age, gender and ethnicity. This will

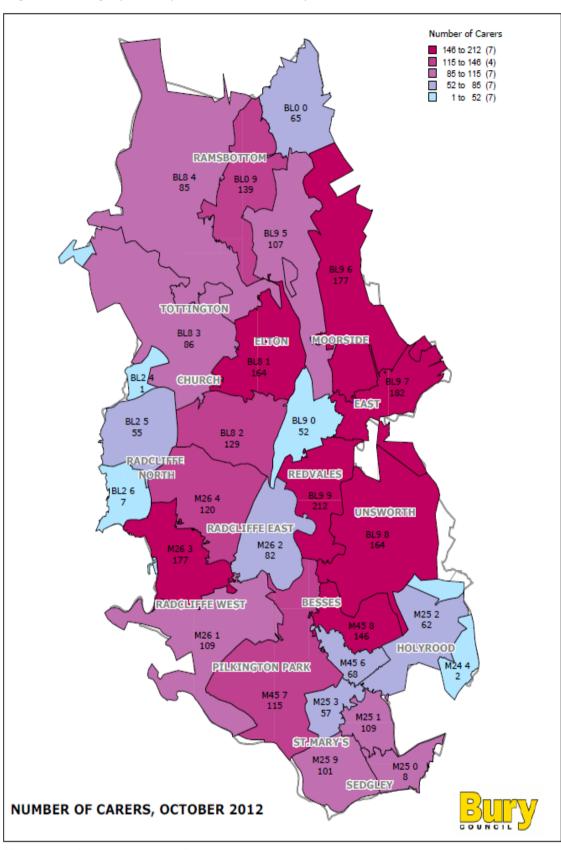
enable us to identify packages of care and services to suit their individual needs. The Carers Centre and Bury Council's Carers Services Team do collect demographic information but acknowledge that historic information was not always complete. The database will be updated to ensure we have the best possible information on Bury carers.

Figure 4 (geographical spread of Bury carers) details where our known carers live. It clearly illustrates that a higher concentration of carers live in Bury East, Bury West, Whitefield, Unsworth and Radcliffe. It is vital that commissioners in Bury Council, Bury CCG and Public Health understand the geographical spread of carers to know if services are being targeted in the right locations.

Comparing the number of carers cited in the census with the register, it is clear that there are many carers in Bury who are yet to be identified. Reasons for this could include individuals taking on a caring role without realising it (for example, caring for a spouse during an illness or being a parent to child with a disability), not being identified by a health and social care professional or being unable to attend services which are specific to carers (for example, the Carers Centre).



Figure 4: Geographical spread of known Bury Carers



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Source: Bury Council Carers Register 2012

Culture and Ethnicity

This Strategy recognises and respects the full diversity of Bury's population. Although carers from diverse backgrounds face the same challenges as all carers, they also encounter additional barriers (for example stereotypes and cultural barriers) which can increase ill health and social isolation. The following quotes from Bury carers reinforce this:

"As a daughter-in-law, there is a cultural expectation that you will care for your mother-in-law or father-in-law." (Bury Carer)

"Being an Asian carer can feel even lonelier when you have a different language and culture to work with." (Bury Carer)

To ensure we are offering services specific to the needs of all carers in Bury, it is vital we have a clear understanding of the ethnicity and religion of known carers. This highlights the need for complete demographic data to be collected.

Working Carers

The Carers Trust states that there 'are currently over three million working carers in the UK'¹¹. For many carers, sustaining their working role is a vital way of maintaining income and sustaining social contact. Carers now have the right to request flexible work patterns and leave entitlements. Employers are encouraged to offer flexibility to support carers to balance their working life with their caring role.

The right to request flexible working was introduced in 2003 for parents of young and disabled children. Since April 2007, the Work and Families Act 2006 has given carers, as well as parents, the right to request flexible working. The request can cover changing hours, times or place of work. A flexible working pattern might make the difference between a carer continuing to work or having to resign; flexible working opportunities benefit everyone – employers, employees and their families.

Evidence has shown that a flexible working approach attracts and retains staff, reduces stress and sick leave, increases productivity, improves service delivery, produces cost savings and improves people management.

Young Carers

Bury Council Children's Services department offers a service specifically for young carers aged between 7 years and 18 years. The team consists of a Lead Family Intervention Practitioner and two part time workers. Currently they are working with 80 children and young people, providing initial visits following referrals, a weekly drop-in and a holiday activities



programme (all held outside school hours).

From the age of 16, the Young Carers Team develops a transition plan to introduce them to adult services (see appendix 1 for the Transition Pathway). A Local Memorandum of Understanding between Statutory Directors for Children's Services and Adult Care Services is also being developed in Bury. This is a practioners support tool which aims to ensure an effective response to young carers and their families during transition to adulthood.

Unidentified Carers

Bury Council's Carers Services Team, the Carers Centre and partners (including the private and voluntary sector) continue to identify unknown carers by working on an outreach basis with carers support groups, GPs, health centres, libraries and supermarkets. This ensures that as many carers as possible are identified and represented at strategic meetings, service reviews and consultation events.





Part 2: Our priorities

Each of the following four sections have been aligned with the national carers strategy: 'Recognised, Valued and Supported, the next steps for the Carers Strategy'. Within each section we will detail what services are available for carers in Bury (at the time of publishing), what carers in Bury have told us about them¹² and how we will develop these over the term of this strategy. The agreed priorities at the end of each section will form the basis of an overarching Commissioning Intentions document.

Identification and Recognition

Within *Recognised, Valued and Supported, the next steps for the Carers Strategy,* the Government has acknowledged that carers do not always identify with the term 'carer' and that health and social care professionals are not always recognising the carer's role in relation to the person being cared for. As a result, many carers currently miss out on the support, including emotional support and financial assistance, to which they may be entitled.

What is available in Bury?

Carers Assessments

In line with the *Carers Equal Opportunities Act (2004)*, each local authority has the duty to inform all carers that they have the right to have their needs assessed in line with their caring role. The needs assessment is carried out by health and social care professionals and looks at the emotional, physical and practical impact of caring. The following teams can undertake a Carers Assessment:

Hospital Social Work Team

Assessment and Reintegration Team

Federation of Jewish Services

Learning Disability Team

Older Peoples Mental Health Team

Community Mental Health Team

Vulnerable Adults Team



Carers Centre

The Carers Centre provides a hub for all carers over the age of 18 years who live in Bury (even if the person they care for lives elsewhere). It provides many opportunities for carers, including the following:

- 1. General advice and information including signposting and advocacy;
- 2. Emotional support;
- 3. Focused workshops on a range of issues including pensions;
- 4. A place for carers to meet new people;
- 5. An allotment space for growing vegetables;
- 6. A space for complementary therapy treatments.

A Carers Forum is also held which provides carers with an opportunity to raise their concerns, issues or recommendations about services in Bury. This forum includes a number of support groups which focus on the specific conditions of the person being cared for, for example, substance misuse carers support group, stroke carers support group and cerebral palsy carers support group. A male carers group and a group for Black and Asian and Minority Ethnic communities also run to ensure that their needs are voiced and considered.

Federation of Jewish Services

There are specialist carers support officers who work within the Jewish community, offering individual emotional support and practical advice. They can assist carers to complete an assessment of their needs to enable them to access financial and emotional support if necessary. A number of social activities are also offered, including:

- An annual pampering day;
- 2. An annual Chanukah celebration;
- 3. Monthly 'coffee and chat' sessions.

These activities are held during the daytime and in the evening to fit in with work and caring schedules. Bury Council provides part funding to the Federation of Jewish Services for a volunteer carers break service (called 'Time for You') for Jewish carers. It enables carers to have a few hours break from their caring role.



The Dementia Café

Making Space currently runs five Dementia Cafés in Bury. Each Café provides a unique support group for both the carer and the cared for and provides information and signposting to both specialised dementia services and community activities. The Dementia Cafés have a vibrant set of volunteers who offer a befriending scheme, ensuring that both carers and the cared for can access social opportunities. At the time of publishing, there were 30 volunteers befriending 84 individuals.

NHS Quality Outcome Framework

The Quality Outcome Framework (QOF) states that each GP practice 'has a protocol for the identification of carers and a mechanism for the referral of carers for a social services assessment'¹³. We will continue our focus on raising awareness of carers issues with GPs and will support them as necessary.

Joint Working

Bury CCG and Bury Council work in partnership with the voluntary, private and independent sectors to develop further the carers agenda. To facilitate this, Bury CCG has identified a lead member who will ensure that GPs identify new carers and signpost them to support as necessary.

Future Developments

We acknowledge that there are a number of agencies within Bury which offer bespoke services or support to carers in Bury. This includes projects already in existence and those which are currently being developed. Examples of these include market place events, supermarket initiatives, events throughout Carers Week and a new project called 'Musical Memories' which will be run by Crossroads¹⁴.



What have carers told us?

"I am a carer now, not a wife. I struggle with this." (Bury Carer)

"Dad doesn't have to go into a home. He has a home with me." (Bury Carer)

"The Carers Centre is a lifeline." (Bury Carer)

"It means a great amount getting love back from my wife for all the things I do for her, mainly keeping her well with medication." (Bury Carer)

Figure 5 (Recognition) illustrates that only 48% (184) of the carers who responded during the consultation felt recognised as a carer and only 27% (101) believed that other people understood what this meant to them. It is interesting to note that carers do not always tell family and friends of the activities they undertake within their caring role, preferring to keep some aspects confidential between themselves and the person they care for.

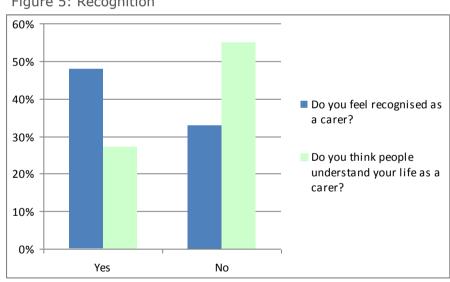


Figure 5: Recognition

Source: Carers Consultation 2012

59% (221) of respondents felt that it was easy to get the information they needed to support them. 56% (208) stated that the information they received was either excellent or good. There were some respondents, however, who told us that information on Bury Council's website and in GP surgeries was difficult to access and they preferred to talk to other carers or go to the Carers Centre.

Throughout the consultation, carers were asked what they valued in their caring role and what worked well for them. The main response we received throughout the consultation was that carers were satisfied that, for the most part, they cared for the person they love and managed to keep them in their own home for longer.

The following table identifies further comments raised by carers within this first priority: identification and recognition.

Subject	What have carers told us?
Understanding	Professionals do not always understand the caring role and what it means. Some carers felt they were not acknowledged by health and social care professionals and that they were not consulted on the care of the person they cared for.
Identification	Professionals do not always identify carers. A number of the carers we spoke to told us that signposting to carers services was not routinely done.
Information and support	GP surgeries were cited as a vital source of information but we were told that this information was not always available. Where information was available, it was often out of date.
	Although the Carers Centre is a much valued resource, we were told that carers do not always know about it. Carers have also told us that they were not always able to travel to the centre of Bury to access it.
	Some carers and professionals felt that the activities offered at the Carers Centre were not appealing to the young carers or male carers who needed advice and support. In addition to this, current opening hours do not always support carers who work or who are in full-time education.
	Information on the services available is needed by all carers. Some self funders do not receive good quality information and are left to research options themselves.



Our priorities

Looking at the comments received during the consultation, a number of priority areas to be developed have emerged. The priorities below illustrate how we will identify and recognise carers in Bury:

Our priority	How will we know this has been achieved?
Collect essential demographic information about carers in Bury and analyse effectively.	We will understand the demographic trends of known carers in Bury. This will support the commissioning process by identifying a particular need.
Carers are identified and supported appropriately.	There is improved access to information. This is to include information for carers on the condition of the person being cared for. Self funders have access to good quality information and can make informed decisions about the support
	Increased awareness of health and social care staff (to include GPs) on the role of a carer.
	Carers are identified and an assessment is undertaken.
	We will review the accessibility of existing services and consider options to ensure that resources have the greatest impact.
	Health professionals will identify a carer on diagnosis of the cared for and signpost effectively.



Realising and Releasing Potential

In the national strategy, the Government states that individuals with a caring responsibility need to be supported to continue with their career and/or educational attainment. Too many carers stop working as they believe there is no other option available to them. In April 2003, the Employment Act (2002) introduced the right to request flexible working patterns for all working parents and this was extended, in 2007, to include employees who care for an adult. Despite this, the Carers Trust states that 'one in five carers gives up employment to care'¹⁵.

What is available in Bury?

Jobcentre Plus

Work Preparation Support for Carers provides help and support to carers to make a successful move into work, including access to training and advice on job hunting and applications. Carers might be able to get help with the cost of replacement care while they take part in training or attend interviews.

Citizens Advice Drop-in

The Citizens Advice Bureau provides information to carers on a range of subjects. It holds a number of satellite clinics across Bury, including a fortnightly drop-in at Bury's Carers Centre.

Universal Offer

Bury has a wealth of education establishments including Bury's Adult Learning Centre and local colleges which support further education for carers. The Carers Centre also offers courses from its premises.

To support working carers further, the Carers Centre opens late one evening per month and additional flexible support arrangements can be agreed. In addition to this, staff can support employers to develop carer friendly policies and procedures.



What have carers told us?

"I cannot work as my partner needs full time care." (Bury Carer)

"I am unable to do any educational courses as I am at home looking after my partner's needs." (Bury Carer)

We asked carers if they felt restricted either in the work place or in an educational setting. Figure 6 (restrictions in work/education) illustrates that 39% (115) felt they were restricted at work and 24% (70) felt they were restricted within education. At first look, you may have expected to see a higher percentage (particularly within work) but we need to remember that the majority (207) of respondents were aged between 55-74 years¹⁶ and therefore are of retirement age.

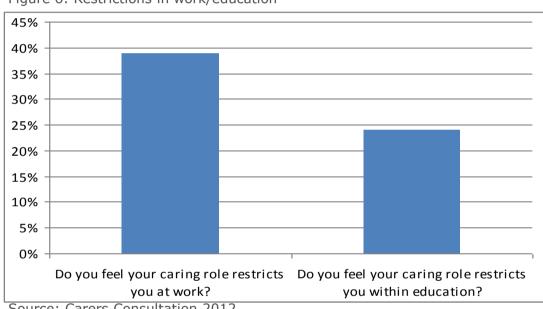


Figure 6: Restrictions in work/education

Source: Carers Consultation 2012

Of those carers who answered the question, some did not tell their employer they were caring for someone because they feared repercussions. Those who did inform their employers felt their employers were not as understanding as they could be regarding time off for medical appointments and being called home at a moments notice. Some carers thought employment was not a realistic option for them.

Finance was discussed at length throughout the consultation period and many people felt that this was one of biggest strains of being a carer. Although some financial support is available to carers, some felt it was not enough. For the carers who work, the need for day opportunities for the person being cared for became more apparent. Daytime respite care, enabling carers to work, was paramount to sustaining their role.

The following table identifies the themes raised by carers within this second priority: realising and releasing potential.

Subject	What have carers told us?
Education	Employers (particularly the private sector) do not always understand the dual role of the working carer.
	Carers told us that they valued the opportunity to learn new skills (e.g. computer skills) but could not always find the time to access courses available.
Legal rights	Carers do not always know their legal rights regarding employment and are not aware that there is legislation in place to support them.
Information	Carers are not always aware of the financial assistance to which they may be entitled.



Our priorities

Looking at the comments received during the consultation, a number of priority areas to be developed have emerged. The priorities on the next page illustrate how we will realise and release carers potential:

Our priority	How will we know this has been achieved?
Raise awareness of the role of the caring role with employers and education providers to ensure they understand the need to support carers.	Carers feel they are supported to balance their work/education with their caring role.
We need a greater understanding of the issues faced by carers currently in the education system and how agencies can support them.	A focus group on balancing caring with education will be held to understand issues experienced by carers in education.
Promote the Personal Advisors at Jobcentre Plus in preparation for a carer finding work.	Carers will be informed of the Personal Advisors and access them as appropriate. Carers will feel supported at work.
Carers are offered financial advice and support as appropriate through signposting.	Carers will be aware of financial support to which they may be entitled.
There will be a better link to universal services to support carers with the opportunity to learn new skills for their own personal development.	Carers will be satisfied that their learning needs are supported.



A Life Outside of Caring

The Government tells us that we must offer personalised support both for carers and those they care for to enable them to continue their family and community life. A break from caring was an issue that was discussed at length during the consultation and one that carers identified as important to them.

What is available in Bury?

Carers Personal Budgets

Carers Personal Budgets are a new model of social care. If a carer has been assessed as needing a budget, they can use this to manage and direct their own support needs. Bury Council implemented a pilot on Carers Personal Budgets on April 1st 2011. Since this time, 567 Carers have been issued with a Carers Personal Budget¹⁷. Examples of how carers in Bury have spent their personal budget include: 273 carers bought a carers break service, 100 bought a short break/day trip, 51 bought sports membership/healthcare and 50 bought cleaning and gardening services.

Specialised Daytime Opportunities

There are specialised services within Bury that support older people or those with a disability to access a meaningful opportunity during the day; examples of this include Pinfold Lane Day Centre¹⁸ and Wheatfields Day Centre¹⁹. Access to these day activities mean that the carer can continue to have a life outside caring whilst the person they care for is in a safe and secure environment.

Respite and Short Breaks

Numerous organisations provide a service for carers when they need time away from their caring role. This could include a traditional carers break service, organised activities, regular support in the home or local community, or respite care such as short or long term placements within a nursing home.

Bury CCG has invested in Cambeck Close, a short break service for planned overnight short breaks and daytime support to adults and children who have a severe learning disability and an additional health care need. The short break service offers a range of support, from a few hours to several overnight stays.

Assistive Technology

Assistive technology can offer a 24 hour, 365 days per year, emergency



response to keep people safe. This allows them to stay in their own home for longer. Examples of the technology include a personal trigger, a bogus caller alarm, a fall detector button and a smoke detector button. Although, at first glance, this equipment may not seem to support a carer, it can bring peace of mind to them as they know that someone will be alerted if the person they care for needs helps.

What have carers told us?

"I don't see my friends as much." (Bury Carer)

"I would go bananas if I couldn't get out." (Bury Carer)

"The Carers Personal Budget is the best thing that ever happened to me." (Bury Carer)

The carers who responded to the consultation were clear that time away from their caring role was needed for them to maintain it. Many respondents stopped socialising regularly and were prevented from going on a holiday. Being made to feel guilty about wanting this time away was a common theme cited during consultation.

Figure 8 (restrictions in home/social opportunities) illustrates that 78% (227) of the consultation respondents felt restricted by their caring role within the home (an example would be finding the time to clean the house). 81% (236) felt restricted regarding social opportunities.

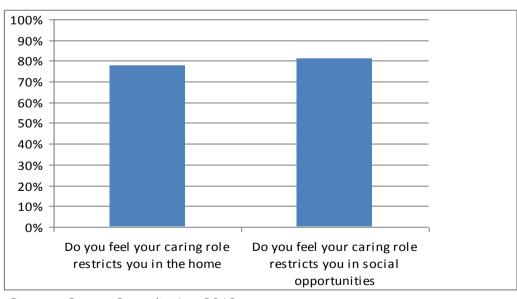


Figure 8: Restrictions in home/social opportunities

Source: Carers Consultation 2012

The following table identifies further comments raised by carers within this third priority: a life outside of caring.

Subject	What have carers told us?
Breaks	Current opportunities within day services and respite are not flexible enough. Evening and weekend sessions would be beneficial to carers.
Carers Personal Budgets	Although carers do value their Carers Personal Budget and believe it has supported them within their caring role, there are some carers who would prefer an alternative offer. Some carers felt the Carers Personal Budget was confusing and difficult to manage.
	Carers do not always know about Carers Personal Budgets and are not aware of the financial assistance that may be available to them.



Our priorities

Looking at the comments received during the consultation, a number of priority areas to be developed have emerged. The priorities below illustrate how we will support carers in Bury to have a life outside of caring:

Our priority	How will we know this has been achieved?
Research innovative ways of offering carers flexible time away from their caring role.	A menu of respite options will be available to all carers. Carers will be more satisfied with the amount of time they have away from their caring role.
Carers will have access to a range of options regarding the way they access support in their caring role.	Carers will have choice and control in their support. There will be an alternative commissioned service (a carers break service) for carers unable or not wishing to access a Personal Budget. Carers will have access to either a commissioned service or a Carers Personal Budget, but not both.
Carers have an understanding of the range of agencies available to offer a sitting service.	A list of approved agencies is available.



Supporting Carers to Stay Healthy

The Government acknowledges that carers often sacrifice their own mental and physical health in favour of the health of the person for whom they care. Poor physical health can be a result of excessive lifting and moving, bad diet or weight loss/gain. A carer's mental health often suffers due to the stress of looking after another person, anxiety about financial matters and increased social isolation.

The Carers Trust states that nationally:

- 1. 65% of older carers (aged 60–94) have long-term health problems or a disability themselves;
- 2. 68.8% of older carers say that being a carer has an adverse effect on their mental health;
- 3. One third of older carers say they have cancelled treatment or an operation for themselves because of their caring responsibilities;
- 4. 52% of carers providing substantial care in one study were being treated for stress-related disorders²⁰.

What is available in Bury?

Help in an Emergency

Some services are available that provide emergency care. This includes the Message in a Bottle²¹ scheme and the Red Cross Carers emergency card²² and access to an emergency assessment. These initiatives all identify the individual as a carer and specify people to contact in times of emergency.

Health Improvement Services

There is a range of services which promote the health of residents within Bury. These include (but are not limited to) Self Care for You, Health Trainers, the Active Lifestyle Discount Card, Bury Exercise and Therapy Service (BEATS), Community Action to Promote the Early Detection of Cancer, smoking cessation and flu jabs.

Bury Hospice 24 Hour Advice Line

The Hospice provides a 24 Hour Advice Line which operates every day of the week, including bank holidays. Bury Hospice is the main provider of around the clock palliative care²³ for Bury Borough patients, therefore helping their carers. The advice line offers carers and patients direct



telephone access to a Hospice Nurse, who will be able to provide advice on symptoms. Healthcare professionals may call about more complex issues on patient care.

What have carers told us?

"I cannot book appointments a few weeks in advance." (Bury Carer)

"It is stressful to care for someone you love." (Bury Carer)

"We have a good sense of humour - we try to laugh off our problems."

(Bury Carer)

Figure 10 (physical/mental health) illustrates that 52% (187) of respondents felt their physical health was affected by their caring role and 45% (163) felt their mental health was affected.

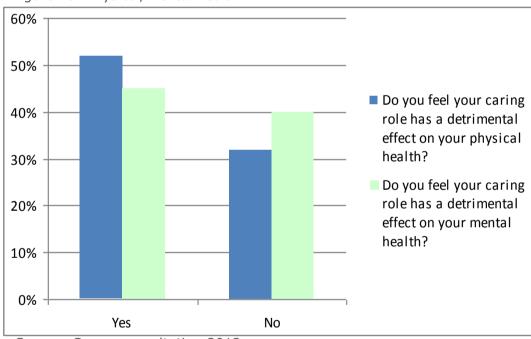


Figure 10: Physical/mental health

Source: Carers consultation 2012

The following table identifies further themes raised by carers within this fourth priority: supporting carers to stay healthy.

Subject	What have carers told us?
Physical health	Carers told us that they had their own physical health problems. Some were conditions which occurred over time, others were as a result of moving and handling the person they cared for.
Mental health	Emotional stress and anxiety was an issue that was discussed at length. The carers who responded felt that their caring role often left them tired, concerned about the future and worried about finance.



Our Priorities

Looking at the comments received during the consultation, a number of priority areas to be developed have emerged. The priorities below illustrate how we will support carers in Bury to stay healthy:

	<u> </u>
Our priority	How will we know this has been achieved?
Health services will continue to address the physical and mental health needs of carers.	A range of practical courses continue to be available (e.g. Self Care for You, moving and handling).
Carers are supported to attend their own health appointments.	The health needs of carers are addressed.
Professionals to identify and refer to specialised services as appropriate (including financial services, Mental Health Practitioners and relaxation therapy).	Universal and specialised services are promoted to carers by health and social care professionals. A robust referral pathway will be developed so GPs direct carers to carers services.
Carers will be satisfied that care will continue in case of emergency.	Services are available to support carers at point of crisis.





Part 3: Finance

This strategy sets out to ensure that we use existing funding efficiently and effectively to support carers from all areas of the community to undertake their caring role. Both Bury Council and Bury CCG fund support for carers.

Bury Council

The specific Carers Grant that Bury Council historically received from Government ended in March 2011, although equivalent funds were transferred into the Council's core funding budget. However, these monies are no longer 'ringfenced', meaning that the Council is no longer legally obliged to spend them on services for carers.

The Council continues to commission a wide range of services on behalf of carers, from what was formerly the carers grant; these will be reviewed over the coming months in light of the feedback received from the consultation on this strategy. Bury Council needs to continually evaluate the effectiveness of services it puts in place on behalf of carers to ensure they are effectual.

The following graph and table illustrate where Bury Council spent its specific carers budget for 2012-13.

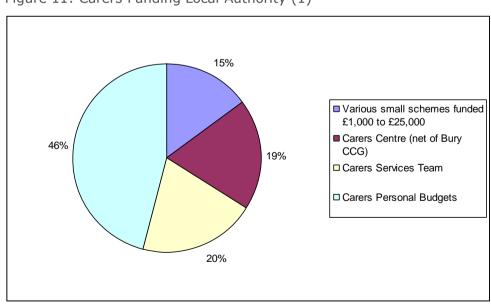


Figure 11: Carers Funding Local Authority (1)

Source: Bury Council 2012

The highlights include:

- 1. 46% of funding directly supporting carers through personal budgets;
- 2. 19% of funding used to purchase the carers centre service;
- 3. A number of smaller schemes targeting specific groups of carers.

The total budget for carers services has remained constant over the past three years, although direct support available to carers - Carers Personal Budget payments – has increased from £311,900 in 2011/12 to £327,100 in 2012/13.

In addition to the specific carers funding highlighted above, the Council also funds a number of services which, whilst not specific to carers, have carers as amongst their main beneficiaries. These include the contract for carers support through Crossroads²⁴, and significant numbers of respite breaks which are built into packages of care for the cared for. This amounts to approximately an additional £1,552,000 of funding. Furthermore, the Council spends £4,784,000 on day care services.



Figure 12: Carers Funding Local Authority (2)

Description	2012 - 2013	
	£	
Carers Specific:		
Carers Services Team	136,400	
Consultation	10,000	
Carers Centre	138,900	
Carers Personal Budgets	327,100	
Red Cross emergency card	14,000	
Breaks for Carers Groups (grant)	10,000	
Carers travel expenses	1,000	
Elderly Mentally Infirm carers (grant)	6,000	
Time for You	10,000	
Mental health (grant)	1,000	
Carelink (grant)	8,000	
Specific services for carers (grant)	13,000	
Services for Jewish carers	23,000	
Where carers are major beneficiaries:		
Crossroads	235,000	
Respite services	1,317,000	
Day care centres	4,784,000	
TOTAL	£7,034,400	

Source: Bury Council January 2013



Bury Clinical Commissioning Group

To support positive outcomes for carers, Bury CCG commissions a range of services which have an element of carers support within them, plus a 22% contribution towards the funding of the carers centre. There are many different ways that carers can get a break from caring, including accessing community groups, planned short breaks and time away whilst the cared for is in respite. It has not always been possible to quantify exact amounts of funding provided for carer support within the NHS due to the link with many other health and social care agendas, where carer support is just one aspect of a wider scheme.

Below is the health contribution in delivering carers agenda within a wider remit:

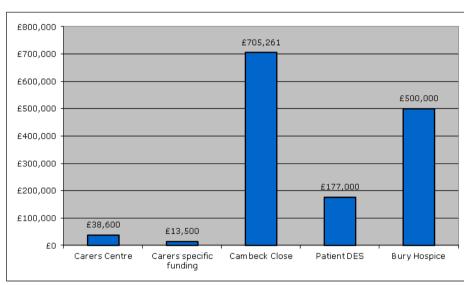


Figure 13: Carers Funding Bury CCG (1)

Source: Bury CCG 2012

The Patient Participation Directed Enhanced Service (DES) is an optional scheme for GP practices. In Bury, 27 have chosen to participate and as such are required to establish a Patient Reference Group which reflects the demographics of the GP practice list. Throughout the promotion of this scheme Bury CCG encourage practices to ensure that the views of carers were represented in their Patient Reference Groups.



Figure 13: Carers Funding Bury CCG (2)

Bury CCG initiatives specific for carers	2011-2012
	£
Carers Centre	38,600
Multi Professional Education and Training - To support the End of Life Agenda, Bury CCG put a bid in for an educational and training programme. As part of this bid, a one off sum of £13,500 was allocated to support carers where the needs of the cared for and the carers were identified as health related and complex.	13,500
Wider Bury CCG initiatives which may include an element of carer support	2011-2012 £
Cambeck Close – a learning disability respite facility	705,261
Bury Hospice - In 2012-2013, Bury CCG provided a grant contribution of £500,000. Whilst this amount is not targeted solely at carers support, it contributes to a valued service, including a 24 hour helpline that carers can benefit from directly.	500,000
TOTAL	£1,257,361

Source: Bury CCG 2012

We will need to work effectively and efficiently to ensure we reach out to carers who are in need of support before they reach crisis point. It is also important to acknowledge that the severe resource restrictions placed on Bury CCG, Bury Council and the Hospital Trust will require a real commitment to collaborative working to limit the impact on future service requirements. A key element of this collaborative work will be to develop the prevention and early intervention opportunities and services that are available.



Future funding for carers services

As all readers of this Strategy will be aware, Public Services, and Local Government in particular, are facing increasingly severe financial pressures. Bury Council has already identified budget savings totalling £40 million since April 2011. A savings target for carers services was agreed in Plan for Change 2. This was met following an internal review of the in-house carers team. However, direct expenditure on services for carers has not been reduced, nor are there any further proposals to do so in the Council's 'Plan for Change', which goes up to April 2015.

However, Government has given no indication as to public sector funding levels – both Local Government and the NHS – for the last 3 years covered by this Strategy (2015-2018). That said, all the indications are that funding will continue to be reduced in real terms beyond 2015. As such, it is not possible at this time for either the Council or Bury CCG to guarantee funding levels for carers services (or for any other service) in the longer term. This therefore makes it all the more imperative that we use existing funds as effectively as possible.



Our priorities

The priorities below illustrate Bury Council's and Bury CCG's intentions concerning budgets:

Our priority	How will we know this has been achieved?
To review the annual spend on carers services to ensure we offer the best service possible.	Enable the reallocation of resources based on the review of annual spend.
To continually seek out best practice in other Councils, and adapt/adopt where this either improves effectiveness and/or better meets carer needs	Impact assessments of any changes are carried out before implemented; post implementation reviews carried out.
To ensure that were funding for carers services reduced post 2015, carers are fully involved and consulted before any decisions are made.	Equality Analysis will be carried out, to minimise any adverse impacts. All affected carers fully involved and consulted in advance.





Part 4: The next steps

Delivering the priorities highlighted in this strategy will have its challenges but there is a clear commitment within Bury to achieve these. Bury Carers Strategy Group will develop an action plan to identify the actions required to meet the priorities identified as well as detailing the lead agency and timescales. This action plan will be monitored regularly to ensure progress and a full report will be provided at the end of the term of this strategy.

To further enhance the work we will undertake within this strategy, a multi-agency Market Position Statement and Commissioning Intentions document will be produced. A Market Position Statement is a tool with information, mainly for providers of services, which will help them to make decisions about if and how to invest and deliver services in Bury and to react to opportunities that arise as a result of the introduction of Carers Personal Budgets. The Commissioning Intentions will support Bury Council and Bury CCG to negotiate future support delivered in line with the consultation feedback.

Following the passing of the Health and Social Care Act (2011) through Parliament, the majority of public health functions and services will transfer, at a local level, to Bury Council. Wider NHS commissioning responsibilities for the provision of most health care services will be the responsibility of the NHS Commissioning Board. It is anticipated that the members of Bury CCG will work alongside the Health and Wellbeing Board and the Director of Public Health to agree joint health and wellbeing strategies and to reflect these in local commissioning plans.



Acknowledgements

This strategy could not have been written without the advice and guidance of:

Black And Asian Minority Carers Support Group

Bury Carers

Bury Carers Centre

Bury Carers Forum

Bury Clinical Commissioning Group

Bury Council

Bury Employment Support And Training

Carers Services Officers

Carers Strategy Group

Crossroads

Early Intervention Services

Federation Of Jewish Services

Housing Strategy & Enablement Team

Jobcentre Plus

Male Carers Support Group

Pinfold Lane Carers Group

Rethink Bury Carers Group

Social Care Professionals

Substance Misuse Carers Support Group



Bibliography

Bury Adult Autism Strategy 2013-2016 (draft)

Bury Mental Health Strategy 2013-2018

Caring for Our Future, 2012

Caring Together: the Carers Strategy for Bury 2009-2012

Joint Commissioning Strategy for People with Dementia and their Carers, 2010-2015

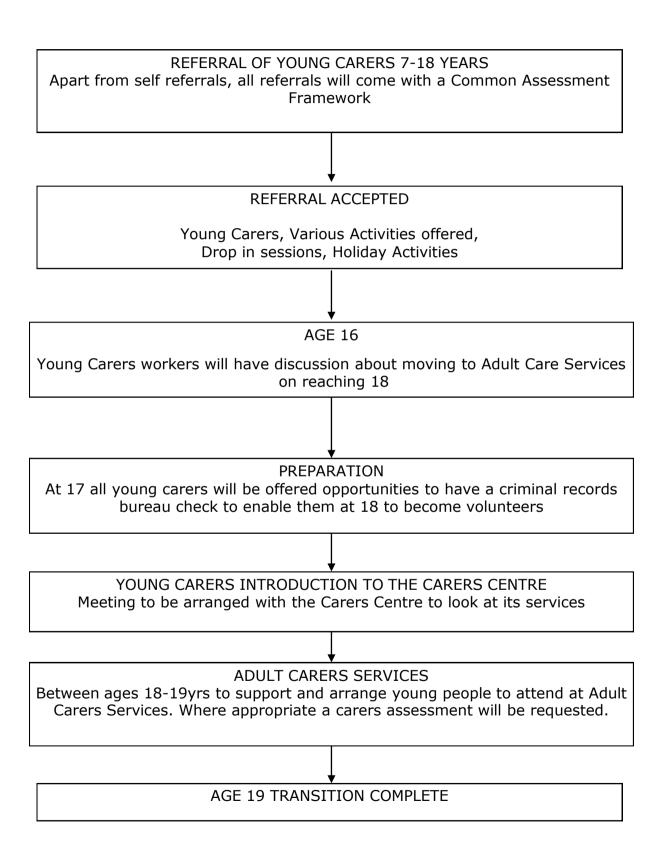
Living Well in Bury: Making it happen together, our vision for health and wellbeing. The Bury Health and Wellbeing Strategy, 2013-2018 (draft)

NHS Quality and Outcomes Framework for 2012-2013

Recognised, valued and supported: the next steps for the Carers Strategy, 2010



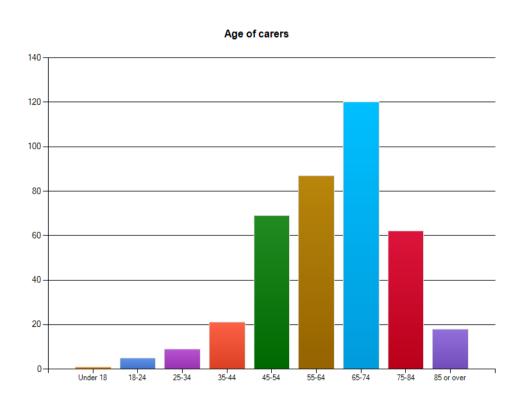
Appendix 1: Young carers transition pathway (2012)



Appendix 2: Details of carer consultation

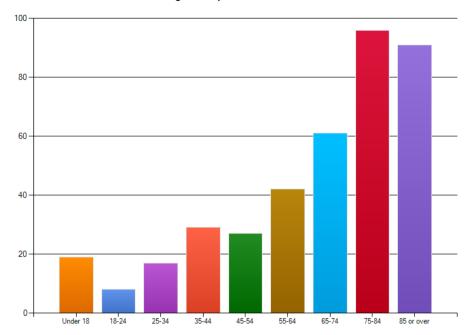
Between June and August 2012, Bury Council and Bury CCG consulted with carers to gain an understanding of their caring roles. Consultation methods included holding a series of workshops across the borough, attending carer support groups (including male carers, Rethink Bury Carers Group and Pinfold Lane Carers Group) and offering one to one support at a venue of the carer's choice. A questionnaire was also posted to the 3,320 identified carers held on a database by Bury's Carers Service Team and the Carers Centre. 397 questionnaires were completed and returned which is a response rate of 12%. It is important to acknowledge that the respondents did not always answer each question, meaning that the percentages used within this strategy are based on the number of people who answered that specific question, not the 397 who responded.

The majority of respondents were aged between 55-64 years (87 individuals) and 65-74 years (120 individuals):



The majority of respondents cared for an individual aged between 75-84 years (96 individuals) and people aged 85 years and over (91 individuals):





The average time per week the respondents spent caring covered a full spectrum with the least being 5 hours per week and the most being 24 hours per day 7 days per week. 69% (262) of the respondents stated that the person they cared for lived with family/others while 21% (79) of the people cared for lived at home on their own.

Throughout this consultation, it became clear that the caring role can differ slightly depending on the condition of the cared for. This can include caring for short periods of time (older people); dipping in and out of the caring role as appropriate (substance misuse and mental health problems) and a lifetime of caring (child with a disability).

This is a challenge that organisations face when providing support to carers. The number of carers per annum is not static and can vary greatly throughout the year.

Also within this, a number of issues may arise which can place extra pressure on the carer. These include:

- 1. prison;
- 2. hospital stays;
- homelessness;
- 4. feelings of guilt when a carer takes a break;
- 5. dual diagnosis (the concurrent needs of a person with mental health problems plus their substance misuse, physical disability or learning disability).

Endnotes

- [1] HM Government 2010.
- [2] This guidance was correct at the time of publication of this strategy. It may be subject to change in line with proposals identified in the Health and Social Care Act 2012.
- [3] HM Government 2007.
- [4] The nine protected characteristics under the Equalities Act 2010 are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
- [5] www.carers.org.
- [6] This was cited by the Bury carers who were involved with the consultation.
- [7] There are 39 Local Authorities in the North West.
- [8] www.ons.gov.uk.
- [9] www.carers.org.
- [10] www.carers.org.
- [11] www.carers.org.
- [12] Detailed information on the consultation can be found in appendix 2.
- [13] QOF Management Guide April 2012.
- [14] 'Musical Memories' is a project being run for people with memory problems, dementia and their carers. The project meets once per week and participants can listen to music and sing together.
- [15] www.carers.org.
- [16] Detailed information on the consultation can be found in appendix 2.
- [17] Correct at March 2012
- [18] Pinfold Lane offers a service to older people who have been diagnosed with dementia.
- [19] Wheatfields Day Centre offers a service to people with a learning disability.
- [20] www.carers.org.

Endnotes

- [21] 'Message in a Bottle' is an emergency information scheme that could save someone's life. The scheme is run by Bury Lions. You place a small plastic bottle in your fridge containing details of any other family, friends or local organisations who can take over your caring role in an emergency. Then you put specially designed stickers on your fridge door and on your front door to let people know it's there. This means that should the emergency services need to come to your house they will know exactly where to look for this important information.
- [22] The Carer's Emergency Card is used as an instant source of identification in case of accidents. The credit-card sized card identifies the holder as the carer so that the cared for person will not be left unattended during an emergency.
- [23] The World Health Organisation defines palliative care as 'an approach that improves the quality of life of patients and their families facing the problem associated with lifethreatening illness.'
- [24] Crossroads deliver high quality services to carers and to people with care needs.

Version control

Version number	Purpose / change	Author	Date
0.1	Draft for consultation	Z. Shuttleworth	13/02/2013
0.2	Draft for Health Scrutiny Committee	Z. Shuttleworth	20/03/2013

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