# OVERVIEW AND SCRUTINY BOARD

# SOCIAL CARE AND ADULT SERVICES SCRUTINY PANEL

## 30 MAY 2006

## FINAL REPORT –

## WHO CARES FOR CARERS?
## SERVICES FOR ADULT CARERS IN MIDDLESBROUGH

### PURPOSE OF THE REPORT

1. To present the findings of the Social Care and Adult Services Scrutiny Panel's review of Services for Adult Carers.

### AIM OF THE SCRUTINY INVESTIGATION

2. The overall aim of the Scrutiny investigation was to assess how the Council is helping to support adult carers in Middlesbrough.

### TERMS OF REFERENCE OF THE SCRUTINY INVESTIGATION

3. The terms of reference for the Scrutiny investigation were as outlined below:

(a) To gain an understanding of the local picture and the issues facing carers in Middlesbrough.

(b) To identity how many Carers' Assessments are currently being undertaken and whether there is a need to increase the Council's performance in this area?

(c) To gain an understanding of how the Council involves carers in the recruitment and training of staff and to establish the benefits of doing this.

(d) To identify the Council's responsibility to its employees who are carers and what are the implications of this responsibility for the Council?

(e) To gain an understanding of the current range of support offered to carers in Middlesbrough.

(f) To identify if that support is meeting carers' needs.

(g) To meet with carers to discuss their experiences of the services they receive.

## METHODS OF INVESTIGATION

4. Members of the Panel met formally between 7 February 2006 and 11 April 2006 to discuss/receive evidence relating to this investigation and a detailed record of the topics discussed at those meetings are available from the Committee Management System (COMMIS), accessible via the Council's website.

5. A brief summary of the methods of investigation are outlined below:

   (a) Detailed officer presentations supplemented by verbal evidence.

   (b) Discussion with a carer support worker

   (c) Meeting with a selection of carers from Middlesbrough

   (d) Visit to the Middlesbrough Carers' Centre and discussions with the Carers' Centre Manager

   (e) There are 2 carers who are co-opted members of the panel (including 1 who was especially co-opted for the review) and their experiences and expertise was taken into account throughout the review.

6. The report has been compiled on the basis of their evidence and other background information listed at the end of the report.

## MEMBERSHIP OF THE PANEL

7. The membership of the Panel was as detailed below:

   Councillors C Rooney (Chair), Councillor A E Ward (Vice-Chair), Councillors Davison, Ferrier, Hubbard, J Jones and JA Jones

   Co-opted Members – E Briggs, L Hebb, J Holt and J McCowat

## BACKGROUND INFORMATION

### Why the panel chose to consider services to carers in Middlesbrough?

8. Currently our society depends on the support that unpaid carers provide to sick and disabled people. Carers are people from all walks of life and backgrounds – in fact over

3 in 5 people in the UK will become carers at some time in their lives. Caring can be a rewarding experience, yet many carers can face isolation, poverty and ill health. [1]

9. To put this into context here are ten facts about carers (See Appendix 1 for further statistics).

| | |
|---|---|
| 1 | Carers save the economy £57 billion per year, that's an average of £10,000 per carer |
| 2 | One in eight (1 in 8) adults are carers... around six million people |
| 3 | Every year over 2 million people become carers |
| 4 | 1.25 million people provide over 50 hours of care per week |
| 5 | Where carers receive benefits, the main carer's benefit is £45 for a minimum of 35 hours, equivalent to £1.26 per hour |
| 6 | People providing high levels of care are twice as likely to be permanently sick or disabled |
| 7 | Over 3 million people juggle care with work |
| 8 | Over 1 million people care for more than one person |
| 9 | 58% of carers are women and 42% are men |
| 10 | By 2037 the number of carers could have increased to 9 million |

*Source – Carers UK*

10. Carers do much more than care, in terms of the savings that are made nationally by the health service and social care services sector. From these few statistics it can be seen just how many people in the UK are carers and how the country and the economy relies on the good will of those people who care on a daily basis for their loved ones.

11. According to the Carers UK website, every day, another six thousand people take on a caring responsibility. A carer is defined as someone, who, without payment, provides help and support to a partner, child, relative, friend or neighbour, who could not manage without their help. This could be due to age, physical or mental illness, addiction or disability. Equally, there are many carers who do not consider themselves to even be a carer, they are just looking after their mother, son, or best friend, just getting on with it and doing what anyone else would in the same situation[2].

12. There is a range of problems that are commonly associated with caring for someone else. Emotional health problems including fatigue, physical health problems, coping with working and caring and money worries which could be as a result of having to give up work. Carers UK, the charity that represents carers' interests, says that 6 out of 10

[1] Carers UK
[2] Princess Royal Trust

carers believe that their responsibilities damage their health and 7 out of 10 worry about money.

13. The panel, therefore, wanted to examine the issues that adult carers deal with and consider how the Council supports those carers and whether there could be any improvements to the support that carers receive.

## THE PANEL'S FINDINGS

### TO GAIN AN UNDERSTANDING OF THE LOCAL PICTURE AND THE ISSUES FACING CARERS IN MIDDLESBROUGH

### National Support for Carers

14. The panel began by examining the legislation that governs the support to carers nationally. The Carers (Recognition and Services) Act 1995 defines a carer as an adult, young person or a parent whom: *'provides or intends to provide a substantial amount of care on a regular basis'.*

15. The 1995 Act gives carers the right to an assessment of **their** needs regardless of whether the person being cared for has been assessed. The Carers (Equal Opportunities) Act 2004, which came into force on 1 April 2004, builds on the 1995 act by ensuring that Care Assessments also now consider the carers right to work, take up education and pursue leisure activities. Social Services departments have to consider how carers can be supported to enable them to be involved in those activities outside of their caring responsibilities.

16. In 1999 the Government published the National Carers Strategy 'Caring about Carers' which described the needs of carers, which included:
    - time off from caring
    - relief from isolation
    - receipt of reliable and satisfactory services
    - recognition of their role
    - the need for health and social services to identify carers support services in their area and that priority should be given to funding these services.

17. Prior to the 2004 Act, carers had the right to an assessment that took into account their needs as a carer. The legislation offered carers support 'in their caring role' and carers' assessments did not necessarily take wider issues such as training, employment and leisure needs into consideration. Carers have a right to a life of their own and the 2004 Act will ensure that a carer's lifelong learning, work and leisure needs are considered when that carer is assessed and that carers are also informed of their rights. In order to assist social services departments in implementing the Act, the legislation will also give local authorities new powers to enlist the assistance and involvement of housing, health, education and other local authorities in providing the necessary level of support to carers. Primary Care Trusts (PCT), any NHS Trust or NHS foundation Trust or Local Health Board are stated as authorities that must give due consideration to a request by a local authority for assistance in planning or the provision of services for carers and cared for persons.

**Carers in Middlesbrough**

18. The panel learnt that in Middlesbrough there are an estimated 21,000 carers of which 14,000 are known to Middlesbrough Council's Social Care Department. A common issue facing those people who are trying to offer support to carers is that many people just don't see themselves as carers. Of the estimated 7,000 carers in Middlesbrough that are not in touch with social services these are probably people who have previously been identified in paragraph 11, ie those people who don't see themselves as carers. They also may not be aware of the services that are available to assist them or are perhaps, through lack of information, are wary of involvement with Social Services.

19. In examining the issues facing carers in Middlesbrough, the panel heard that anyone of us could face the possibility of becoming a carer at some point in our lives, having to provide emotional, practical or physical support to a family member or friend. One of the first hurdles that people face is to actually recognise themselves as a carer, and once they do, to know where to turn for support.

**Issues facing carers**

20. Carers can have a range of different support needs which include the following

    - carers need a break from caring, which includes adequate respite care
    - access to information and advocacy
    - greater involvement in decision making in relation to the service user

21. It became clear throughout the review that the responsibilities placed on carers can prove very demanding, for many this could include a lack of social contact outside of the caring role. In many cases it can be one person who is responsible for providing all the care to their friend or loved one and there can be a lack of support for them in that caring role. Research shows that the lack of information is still a main concern of carers and initially knowing where to go to get help can be an issue for carers including a lack of understanding of their eligibility for financial assistance and support

22. In addition to that for many carers, maintaining their own way of life and undertaking what many of us take for granted such as work, education, training and leisure opportunities can be difficult to fit in around their caring role. Many carers may feel that they do not at present, have the support that could enable them to do that. The panel was encouraged to hear that the new government legislation would help Councils to address this through the use of, amongst other things, carers' assessments.

23. For working carers, juggling both a career and their caring responsibility can be difficult. Over three million carers in the UK are in paid employment, this means 1 in 8 people in the workforce is a carer. A recent Equal Opportunities Commission survey showed that 1 in 5 carers have to give up work to care.

24. Carers are forced to give up work for a number of reasons, including the unsuitability or inflexibility of care services, in that often care services are available between 9am and 5pm which doesn't always fit in with people's needs. There may be inflexibility in the workplace which means that people's caring responsibilities don't always fit with their employment responsibilities. Caring and working too can also bring their own health problems for the carer due to the physical and emotional demands that they have to cope with. How the Council is addressing the needs of its own employees who are carers is addressed later in the report.

25. Following the panel's recent review of the improvement in the take up of Direct Payments, the panel were encouraged to hear that more and more carers were taking up Direct Payments in order to help them find a more flexible care package.

**Issues for Carers supporting people with Mental Health Problems**

26. The panel received an additional perspective from a Carer Support and Development Worker who works for Middlesbrough MIND's Carer Support Service (a support group for people with mental health problems).

27. It was noted that often carers can feel marginalised from society and for people who care for someone with a mental health problem they can feel even more isolated. The main support that carers would like is access to information. That is information about the medication and diagnosis for the person in their care and how mental health sector operates for example.

28. The service can provide practical support, such as contacting social workers or attending meetings with carers and health care professionals, which can sometimes be intimidating for some people. The service also encourages people to have a carers' assessment.

29. The panel heard how the Mental Health Carers' Forum works to influence services, helps carers to get involved in training staff and in developing services. The forum also tries to respond to the needs of carers, for example helping to establish a drop-in centre and setting up support groups.

**TO IDENTIFY HOW MANY CARERS' ASSESSMENTS ARE CURRENTLY BEING UNDERTAKEN AND WHETHER THERE IS A NEED TO INCREASE THE COUNCIL'S PERFORMANCE IN THIS AREA**

**What is a Carers' Assessment?**

30. A carers' assessment is the opportunity for a carer to discuss, with social services, the help they may need with caring, plus help to maintain their own health and to balance this with their life, work and family commitments.

31. The aim of the assessment is to give carers the right to have a life of their own, the Act ensures that carers' assessments include a consideration of whether the carer works, or wishes to work, are undertaking or wishing to undertake education, training and/or leisure activities. The panel learned that carers are entitled, by law, to the right to an assessment if they look after a friend or relative who can not manage without their help. For carers who are aged 16 and over, their right to an assessment is not affected, even if the person they care for does not want to receive any help from social services.

**Co-operation between Authorities**

32. In order to support carers a multi agency approach is necessary. It requires the local authorities, education, housing and the health authority to work together in the planning of services to carers. A local authority can request any of the above agencies to provide services and this request must be given due consideration. These services could be provided to the carer or the disabled person if this service supports the carers wish to do other things.

**How Do Carers Know They Are Entitled to a Carers Assessment?**

33. When a Local Authority is assessing a disabled child or adult, they have a duty to inform the carer of their right to a carers' assessment. However the panel considered that the very term 'assessment' could lead to confusion as carers may think it is about either assessing their financial situation or assessing their abilities as a carer.

34. The panel was encouraged to hear that, away from Social Services, the Carers' Centre and other support groups for carers also informed people about their right to an assessment and encouraged them to participate. This may encourage more people to undertake an assessment because an independent organisation rather than Social Services bring it to their attention.

**Middlesbrough's Performance in undertaking Carers' Assessments**

35. The panel learnt that historically Middlesbrough's performance in offering carers assessments to all carers who provide substantial care for a service user on a regular basis has been poor (as measured by the Commission for Social Care Inspection (CSCI) performance indicator C52). In order to address this issue, the panel learned that the Council's Social Care Department had taken a number of steps to address the relatively poor performance. As part of the national Improvement and Development Agency (IdeA) Service Advisor Project the Assistant Director of Social Services in Manchester undertook an independent assessment and identified a number of issues for action.

36. In order to address those issues the Department involved staff in a workshop to discuss the recommendations and an action plan was developed with a Steering Group chaired by the Head of Service for Mental Health and Learning Disabilities.

37. Officers noted that progress to date on the number of carers assessments recorded was encouraging. There are 1,528 carers registered with the Department of Social Care. In October 2005 170 (3.1%) had received a carers' assessment. In February 2006 that figure had increased to 323 (5.9%).

38. However, the performance indicator by which Carers' Support is now monitored by the CSCI has now changed and starts in March 2006. This figure now measures services for carers rather than carers' assessments.

39. The performance indicator for support for carers is as follows: the number of carers receiving a specific carers' service as a percentage of clients receiving community based services. So it is the number of carers receiving 'carers breaks' or 'specific carers services' during the year following an assessment, divided by the number of service users receiving a community based service.

40. In effect this means that in order to reach the target of 18% the Social Care Department have to provide services to approximately 1,000 carers, which the panel agreed was a challenging target.

41. Following negotiations with the Department of Health a Local Public Service Agreement (LPSA) target was set for 2006-08 to commit the Council to ensuring that 18% of carers receiving a specific carers service as a percentage of service users receiving community based services by 31 March 2008. Without the LPSA target the figure would be expected to be 10%.

42. In order to meet this challenging target the service area were to undertake the following work:

    - Undertake partnership working with the Middlesbrough Carers Centre and other carer support services
    - Improve processes and procedures for undertaking and recording carers support assessments and services
    - Improve engagement with carers across all services
    - Maximise the value of Direct Payment provision
    - Improve the range and flexibility of the carer support services available

43. The panel was encouraged that further work was being undertaken as part of the stretch targets in order to highlight to carers the positive benefits of having a carers' assessment. The service area have begun work to increase the number of assessments and the panel was satisfied that this action plan would provide the necessary improvements in the numbers of people taking up a carers' assessments.

44. When speaking to carers, Middlesbrough Council's Social Care Department received feedback on the form which they used to undertake the assessment. It was agreed by the carers and officers that the assessment form was 'too over-complicated for many carers to fill in'. As a result of this the assessment form is undergoing re-development to make it more appropriate to carers needs.

45. The panel had the opportunity to view the old carers' assessment form and also the new version of the form that was in the process of being developed. The panel considered that the new form was more appropriate for carers' needs.

46. The new form was being developed to focus on the carer's needs and to identify how the Council could support the carer to access employment, education and leisure activities. The panel considered that it was essential that the assessments were based on individual needs and that they were realistic. It was also seen as important that the support packages were adequately resourced and it was hoped that the increasing use of Direct Payments would support carers' assessments as a more flexible level of provision could be developed.

**TO GAIN AN UNDERSTANDING OF HOW THE COUNCIL INVOLVES CARERS IN THE RECRUITMENT AND TRAINING OF STAFF AND TO ESTABLISH THE BENEFITS OF DOING THIS**

47. Selecting the wrong staff can be costly and time consuming and in some cases, for example personal care, one size doesn't always fit all. In order to remedy this the Council involves carers in the recruitment and selection of some of its staff. There is a list of people who are willing to help on interview panels for Social Care staff and organisations we contract with, such as the Citizens Advice Bureau, Alzheimer's Society and the Carers Centre.

48. The department recognises the benefit of using carers' expertise and has developed a checklist for staff who intend to have a carer or service user on an interview panel.

49. Involving representatives from both groups in the staff selection process ensures that
    - the council gets the right people for the job

- that the prospective staff have the right skills and qualities that cares and service users are looking for
- less likelihood of complaints against staff members
- better staff retention
- increase in self esteem and confidence amongst staff

50. The Department of Health has issued a good practice guide for the implementation of payments for carers who provide advice to councils. The Council is currently working on a policy that will enable the council to reimburse carers for their time and expenses. It should be noted that this would of course have budget implications.

51. The panel supported the department's work in this area.

**TO IDENTIFY THE COUNCIL'S RESPONSIBILITIES TO ITS EMPLOYEES WHO ARE CARERS AND WHAT ARE THE IMPLICATIONS OF THIS RESPONSIBILITY FOR THE COUNCIL?**

52. The panel recognises the problems many working carers face. As a major employer in the town, the panel wanted to gain an understanding of how the Council supported its own employees who are known to be carers.

53. The panel learned that the Carers Act 2004 gave a clear direction to Local Authorities and other agencies regarding their roles and their responsibilities to carers. The council is committed to supporting employees who have caring responsibilities away from the workplace.

54. The council's legal requirement is to provide the following support to employees: parental leave; maternity support leave; and adoption and maternity leave. In addition to that the Council also has in place policies for flexible working hours and special leave. The council has also recently set up the Working Carers Group which will provide the group with the opportunity to comment, for example, on the impact of the new/revised HR policies for those with caring responsibilities.

55. In response to the Carers' Act 2004 and also with the need to reflect more accurately the true reasons for employees' absence from work a new Carers' Leave policy has been in development. Following discussions and consultation with Corporate Management Team (CMT), Managers, Trade Unions, Corporate Diversity Group and Employee Focus Groups, the policy has been amended to incorporate as much of the feedback as possible. At the time of writing this report the final draft was in the process of being submitted to CMT and the Trade Unions for final approval.

56. The council recognises that carers may, from time to time, need additional support to help them balance their work and home life. The Carers' Leave policy has been developed to help carers to do this and to ensure that their needs are provided for on a consistent basis across the organisation.

57. In essence, the policy allows employees to take a maximum of 5 days paid leave in any leave year to care for a dependent child or adult (pro rata for employees working less than 37 hours per week). The leave is not an entitlement but may be granted subject to the needs of the service and by approval from the relevant Head of Service. Managers can also consider agreeing temporary variations in working hours or patterns, and in line with legislative provision, unpaid carers' leave can be granted.

58. It is not the intention that an employee will normally take the 5 days carers' leave in a block, although occasionally circumstances may merit it. If there are longer term care arrangements then the employee will be expected to use annual leave or flexi-leave if available. In exceptional circumstances more than 5 days carers' leave per year may be granted with the approval of the appropriate Director with advice from HR.

59. The policy will be piloted for 1 year where it will be discontinued, amended or confirmed.

60. It is generally recognised by the Council that at present employees needing to take leave in order to fulfil their caring duties may account for a proportion of sickness absence. The reassignment of this leave to carers' leave will not have a cost implication for the council since employees would have been paid in accordance with the council's occupational sick pay scheme.

61. With the implementation of the policy, it is also hoped that this will be an important method of employee retention, as many employees may have had to give up their job as a result of their caring responsibilities.

62. The panel was pleased to hear that this good practice was to be shared with the Council's partners, including HBS (Hyder Business Services).

63. The panel considered that it would be useful if the scheme was highlighted as a benefit as part of the council's recruitment process so that it would attract people who are carers, who could ordinarily be discouraged from working and trying to juggle their caring responsibilities.

64. The panel were also conscious that whilst it is a supportive policy that it needed to be implemented effectively and that managers needed to be understanding to employees with caring responsibilities.

**TO GAIN AN UNDERSTANDING OF THE CURRENT RANGE OF SUPPORT OFFERED TO CARERS IN MIDDLESBROUGH AND TO IDENTIFY IF THAT SUPPORT IS MEETING CARERS' NEEDS**

**How do carers receive information about the support that is offered to them?**

65. One of the things that carers say would help them is the provision of information. The panel heard that the Council has a number of methods that help carers find out information on where they can go for advice
    - Through Middlesbrough Council's Social Care Department for example information packs, through social workers, carers co-ordinator
    - Local Media including the Council's website
    - Through adverts on plasma screens in Berwick Hills library, GPs surgeries and the PCT Lifestore
    - Events such as Carers Rights Day, the Cleveland Show and conferences
    - Through carers groups and forums
    - Promotion of Carers' Week and information days for carers

**What the Council is doing now**

66. In addition to the mainstream services the Social Care department are also involved in a wide range of additional initiatives, which the panel found are detailed in the following paragraphs.

67. When a carer becomes known to Middlesbrough Council's Social Care Department they are issued with a Carers' Pack, the pack gives details of the support that carers can receive, useful contact numbers and information about their right to a carers' assessment and the benefits of doing so. The pack is currently being developed to enhance it further.

**Middlesbrough Carer's Centre**

68. A local Carers' Centre is recognised as an important mechanism for improving councils support to carers.

69. The Middlesbrough Carers' Centre opened on 1 February 2006 and is located within Broadcasting House, next to the town centre bus station. The centre is funded by Middlesbrough Council, Middlesbrough Primary Care Trust, North Tees Primary Care Trust, Stockton Health, Social Care and Education, the Learning and Skills Council and donations. It is easily accessible and provides advice and information on such issues as benefits, social care services, respite care. They also provide personal support such as counselling, coping with bereavement, group and one to one support. The centre can also help carers with their personal development and offers a wide range of support to help carers update their skills. The centre also offers complimentary therapies such as reflexology, aromatherapy and holistic healing.

70. The centre maintains a database of all the carers that register with them. This is an ideal way of keeping in touch with carers and assessing the number of carers in Middlesbrough. To date, in two months of the centre opening, 1,000 people have accessed the building and over 200 carers have registered. The centre manager predicts that over 500 carers will register in the centre's first year.

71. The manager at the Carers' Centre recognises just how hard it can be for carers to contact or visit the centre, carers can feel they have failed if they say they cant cope and need help, and as it has been documented, people don't regard themselves as carers. The centre is working with the Council to see how they can help with this. It is recognised that it may help to turn it into a positive for people to say that they are a carer. The centre is helping to develop a card, similar in size to a credit card, which keeps vital information about a carer and also can entitle them to reduced leisure facilities prices, reduced cost adult education opportunities and it is hoped other local businesses could get involved.

72. Middlesbrough has introduced Carers Services Co-ordinator Posts. These are officers who are experts in the field of carers' needs and can provide advice on issues to both other officers and to carers. This initiative is being built upon and Carers Champions are being identified. This is a new concept for social work officers and a Carers Champion will exist in every social work team. Their responsibility will be to work with their colleagues in their team to ensure that although, service users have been a prime concern, that they also have an understanding of their duty of care to carers.

73. Caring can be exhausting and carers can need a break from their caring responsibilities. Carers identify respite care as an important issue. Social services can

offer short breaks for carers in terms of respite care this can be delivered via day care, home support, short term and residential care.

74. Action for Carers is a group of like-minded professionals from other agencies such as the PCT, Benefits Agency, Fire Brigade, Voluntary Sector and the Citizens Advice Bureau come together to discuss carer related issues. This forum works together to develop Carers' Week.

75. In response to the IDeA Service Advisor Project and following a small Government Grant the Council has also established a Carers Grant Panel. The panel will meet quarterly to advise and monitor the use of the Department of Health Carers' Grant (a small ring fenced grant). The grant can be used to provide services to carers support and breaks for carers

**What the Council will be doing in the future**

76. When talking to carers there was a mixed response as to the help offered by GPs in terms of the support and guidance given to carers which can vary from practice to practice. Middlesbrough Council's Social Care Department was in the process of establishing protocols with GP surgeries to identify carers. There is an added incentive for GPs to have a strategy in place for assisting carers. The new GP contract converts points gained to pounds/funding received from the government for introducing services and for documented health improvements in their patients. GPs gain points for introducing a strategy for helping to identify carers and signposting them to appropriate help. This is seen as a positive step by carers who don't often have the time to read leaflets in surgeries.

77. During the period of the review, the Council set up a Working Carers Group for Council employees. The group which will be a regular forum for carers who are employed by the Council and Middlesbrough PCT will meet at the Carers' Centre initially on a monthly basis, starting in April 2006.

78. As detailed in paragraphs 47-50 the Council is engaging more carers in the planning, commissioning, reviewing and monitoring of services for which protocols for the reimbursement of expenses was being drawn up.

79. Following the 2005/06 IDeA Service Advisor Project, engagement with carers was identified as an area for improvement. Several consultation events with carers across all services led to the development of a Carers' Service Improvement Plan. Action to deliver that plan is in place and clear outcome targets have been established in order to improve performance in line with best practice nationally.

**Some best practice from other local authorities**

80. The panel considered an article that had been published in the Local Government Chronicle, 16.02.06. The article details some examples of best practice for Services to Carers, from the three Councils that have achieved beacon status for the way they support carers. Briefly the examples are as follows:

**Tracking down hidden carers**

81. Sunderland Council asked callers to the Council's contact centre in Sunderland if they were aware of carers' week, the carers' centre and if they wanted any information, identified 41 new or 'hidden' carers and identified 60 carers who did not see themselves in that role

82. In order to widen the publicity for services to carers drop-in sessions were also arranged at a range of venues including bingo halls and supermarkets.

83. Rochdale Council have used an initiative called 'opportunity knocks' which involves sending a team of eight people for two days every fortnight to knock on doors throughout 15 areas, to see if they can find carers and offer guidance on support, financial help, opportunities for training, employment and education. To date referrals have been made of around 12%, doubling the rate anticipated by its initial targets.

**Appointing Carers' Champions**

84. Hertfordshire Council have appointed about 50 carers' champions who are a point of contact for people wishing to know more about the issues and for carers themselves. Champions are not paid for this role as they see it as part of their work

**Breaks for carers**

85. In Sefton an emergency respite team has been running for five years. The five strong team is on duty 365 days of the year and a team member can be with a carer within an hour of them asking for help.

**TO MEET WITH CARERS TO DISCUSS THEIR EXPERIENCES OF THE SERVICES THEY RECEIVE**

86. The panel members met with a number of carers at the Carers' Centre. In Middlesbrough. The panel listened to their personal experiences of what it was like to be a carer, some of the issues that carers cope with on a daily basis and how they are supported. (Some of their experiences were documented in a diary which gave a snapshot of their daily lives – extracts of which are included at Appendix 2)

87. The level of support that carers need obviously varies from case to case. Generally carers received very good support from social services and their social workers. Carers noted the importance of emotional support as well as practical support and social workers are on hand to provide that support. Social workers also had a good knowledge of other services which carers were signposted to.

88. The issue of support by carers local GPs was raised and carers felt that GPs should be educated further about how they could support carers.

89. Carers also felt that charities such as the carers centre, are very important in helping to support carers. Carers often feel isolated and Middlesbrough Council's Social Care Department and the carers centre can put people in touch with other people in a similar situation or a support group where people can discuss their problems and feelings. Former carers can also become isolated, they loose the contact they had with social services and other agencies which they get used to dealing with, the carers centre can offer special help to carers facing loss or living with bereavement.

90. Again the issue of lack of information was discussed. Initially when carers become carers, they don't know where to go to ask for help, it is the case that they often ask other carers for advice before contacting Middlesbrough Council's Social Care Department or the carers' centre.

91. It was acknowledged that carers have to become very knowledgeable about a whole range of issues in order to be able to support the person they care for. This could include financial issues such as benefits and medical issues. The carers' centre can provide contact with a CAB worker and a solicitor to help carers access information and advice on these issues.

92. Alongside the additional medical and financial skills carers have to learn, it was also recognised that carers have to learn to be fairly assertive. In that they have to be forceful and know how to ask questions of health professionals and social care workers. The Carers' Centre can offer training in order to help carers with this skill.

93. The panel heard that respite care and breaks from their caring responsibilities were very important to some carers. What was also important was that when the person they cared for was away from them and in respite care for example that they weren't burdened with detailed updates on how their loved one was, they simply wanted to know that they were well and being cared for. This enabled them to have a proper break from their responsibilities.

94. Carers are equally as important as service users however what became clear from the discussions was that carers never stop being carers, even when they are away from there loved one, during periods of respite for example, they never really switch off from their responsibilities. Even when asked how caring impacted on their lives they tended to concentrate on the needs of their loved one as being more important.

**CONCLUSION**

95. Based on evidence given throughout the investigation the Panel concluded:

a) Carers undoubtedly do much more than care, they provide an invaluable service which saves the nation's economy £57billion pounds per year.

b) That carers face a wide range of issues and problems for which they need support both nationally and locally and that legislation such as the 2004 Carers (Equal Opportunities) Act that recognises the role of carers in their own right will help councils to support carers.

c) One of the first hurdles many that carers encounter is to actually recognise themselves as a carer. The panel considered that it was important for the Social Care Department to work towards finding 'hidden carers' and to continue to publicise the support that is available to carers including highlighting the positive aspects of being a carer.

d) That carers' assessments are an important way of ensuring that carers get the support they need to enable them live a life of their own. The panel were satisfied that the Social Care Department has implemented a number of initiatives which would assist in improvements in the numbers carers' assessment undertaken and the panel were supportive of the department's work in this area.

e) Carers build up a great deal of information, knowledge and expertise. This experience is invaluable and therefore the panel was supportive of the department's current initiatives to involve carers in the planning, commissioning

and monitoring of services and that carers could be asked to help make appointments in the Social Care Department.

f) The panel recognised the importance of a supportive employer for those carers who also work. The panel was encouraged to hear about the department's initiative to support carers who work for the council and that this best practice should be shared.

g) That carers find access to information one of their main issues and that the council is working hard to publicise its support for carers

h) The carers' centre is an invaluable source of support and assistance to carers and although it has only been open since February 2006, the centre has attracted over 200 carers.

**RECOMMENDATIONS**

96. That the Social Care and Adult Services Scrutiny Panel recommends to the Executive:

a) That the Social Care department actively seeks new and innovative ways to identify more 'hidden' carers. In order to assess progress with this recommendation the panel would like to receive an update on the comparison between the numbers of carers that are currently known to the Social Care Department with the numbers in March 2008

b) The panel were supportive of the Council's 'Carers' Week' initiative and in addition to that, the panel would like to see a campaign which raises the profile of carers and their achievements

c) That the department continues to promote carers' assessments to ensure an increase in the number of assessments that are undertaken. The panel would like to receive comparative information on the take up of carers' assessments and the progress with the LPSA stretch target in March 2008.

d) The needs of carers can change through time, for example when altering the level of support provided to the service user. With this in mind, carers should be informed that they are entitled to a review of their carers' assessment to ensure that their changing needs are taken into account.

e) The panel thought that the term 'carers' assessment' could be misleading and dissuade people from undertaking one. The panel would therefore like the department to consider an alternative name for the term. As the focus for the assessment is about supporting carers the panel were in favour of the term support plan.

f) Carers have a wealth of knowledge, the panel would like the department to ask carers, as part of their carers' assessment, if they receive any support which may be unknown to the department and to check if other carers would benefit.

g) The panel welcome the new Carers' Leave policy and the panel would like the Council to publicise the scheme to employees as widely as possible, the suggestion to inform all staff via their payslips was welcomed by the panel. The

panel would also like the Council to provide a best practice lead in Middlesbrough and provide advice to other employers, in other sectors such as health and education, where appropriate

h) That the department continues to improve its communication and information sharing and investigates new and innovative methods for distributing information to carers. For example issuing hospitals with the Carer's Pack in order that health professionals can distribute it to people when they leave hospital, where people may perhaps be caring for someone for the first time.

i) That the department considers the merits of establishing a 'buddying' system for newly identified carers and to draw up a list of volunteer carers who would be willing to participate.

## ACKNOWLEDGEMENTS

97. The Panel is grateful to all those who have presented evidence during the course of our investigation. We would like to place on record our appreciation, in particular of the willingness and co-operation we have received from the below named:-

- Ruth Hicks, Head of Mental Health and Learning Disabilities, Middlesbrough Council's Social Care Department
- June Dickinson, Engagement Officer, Middlesbrough Council's Social Care Department
- Dave Gomersall, Middlesbrough Council's Social Care Department
- Jane Booth, Carer Support Worker, Middlesbrough Mind
- Pip Schofield, Senior HR Client Officer
- Andy McMann - Manager Carers' Centre
- Carers from Middlesbrough who attended the panel meeting

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April 2005

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## BACKGROUND PAPERS

The following background papers were consulted or referred to in the preparation of this report:

(a) Supporting the Carers - Local Government Chronicle , 16 February 2006
(b) Support for Carers - Local Strategic Framework
(c) Facts About Carers – Carers UK