

BIRMINGHAM CARERS VISION AND COMMISSIONING STRATEGY 2018+



BIRMINGHAM
CHILDREN'S TRUST



 **Birmingham**
City Council

ENABLING A LIFE ALONGSIDE CARING

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FOREWORD

Welcome to Birmingham's new carers strategy which has been developed in partnership with carers, the National Health Service (NHS), Birmingham City Council, The Birmingham Children's Trust and voluntary and community sector colleagues. It represents both a vision and commitment to carers alongside a commissioning plan for future services.

Carers make a critical and often under-appreciated contribution, not only to loved ones, neighbours and friends, but to the sustainability of the health and social care system. It has already been well established that most people are likely to be affected by, or have caring responsibilities at some stage in their lives.

Statistics from Forward Carers estimate there are 107,380 carers living in Birmingham. It is predicted nationally that as care needs increase the number of carers is estimated to more than double by 2030. Many people are now balancing work, children and caring for an aging parent and increasing numbers of older people often care for their partner and grandchildren. Parents of children with complex needs know they will be lifetime carers and the positive shift away from institutional care to living independently with care at home will only increase the need for carers.

The strategy will take a whole life approach to reduce the impact of the transition between different ages and stages of life. We want to ensure that people get the right type and level of support at the right time. This approach relates to the Care Act 2014 provisions for carers and to the priorities identified in Think Local Act Personal guidance making it real for carers. It also recognises the importance of promoting positive health and wellbeing approaches including self-care and self-management.

We are confident that together with our experienced and innovative partners, in collaboration with people who are carers, our new strategy will provide a framework to enable changes and improvement to make a positive difference to carers in the City and promote a joined up approach between carers, the council, health and the voluntary sector.

In this time of scarce resources we want to work in partnership to take forward the aims and objectives making the best use of assets and experience. We look forward to working together to drive the systemic change required to deliver this strategy and achieve our collective vision for Birmingham.



Paulette Hamilton
Cabinet Member
Health and Social Care



Kate Booth
Cabinet Member
Children's Wellbeing

OUR COMMITMENT

As a city we want to make a commitment to carers to enable a life alongside caring responsibilities. We want to ensure carers feel valued and are supported in their roles by working in partnership with carers (including adult, parent carers and young carers) and across agencies to ensure the needs of carers are met in the most appropriate and effective way possible.

The goal is that carers will feel supported in their caring role, feel valued in their communities and have their important role recognised and respected by professionals. Support will be tailored to meet the individual's needs enabling carers to maintain a balance between their caring responsibilities and a life outside caring. Our six commitments, co-designed with carers are opposite.

To do this we need to work in partnership and the strategy offers the opportunity to bring together partners and resources to provide the right service, at the right time and in the right place.

Graeme Betts
Corporate Strategic Director
Adult Social Care and Health

Paul Jennings
Chief Executive Birmingham and Solihull CCG (NHS)

Andy Couldrick
Chief Executive Birmingham Children's Trust

Recognise and respect carers (including adult, parent and young Carers) **as partners in delivering care and support**

Support young Carers through childhood and education.

Promote Carer friendly employers.

Build a Carer friendly City.

Support Carers to be physically and mentally well.

Support Carers to financially plan for today and tomorrow.

INTRODUCTION

Care and help is typically provided due to frailty, age, physical illness, mental health condition, or addiction.

Anyone can become a carer, regardless of age, ethnicity or gender and caring may be sudden or unexpected or develop over a period of time. A caring role may be temporary, lasting a few months or years, or be long term lasting for the rest of their lives.

Each caring role is unique, and may encompass a range of tasks and responsibilities. The role of a carer might include, but is not limited to, the following:

- Personal Care – Support with dressing, washing, and toileting
- Domestic Care – Support with cooking, housework, and shopping
- Physical Care – Support with lifting, assisting, and helping when moving around
- Financial Care – Support with any financial affairs
- Health Care – Support with managing illness or a condition, or helping to administer medication
- Emotional Care – Support by being a listening ear, offering moral support, or simply providing company for someone who is feeling isolated
- Communication Care – Supporting or assisting with a listening or communication impairment, including translation, for example, when English is not the family's first language.

**ALL AGES – ALL
CARERS**

This strategy is for everyone and all carers including:

- **Adults who care for other adults** – a significant majority of carers look after another adult, usually a relative or spouse. A person is also defined as a carer when they provide or intend to provide a substantial amount of support on a regular basis to a relative or friend when for example they have been discharged from hospital.
- **Parent carers** – parents (or guardians) of disabled children and young people up to 18 years of age who have additional care needs. When the child reaches 18, the parent or guardian is defined as a carer looking after an adult.
- **Young carers** – children and young people under 18 years of age who look after a family member, friend or neighbour who has a disability. In many cases this may well be a parent, grand parent or brother / sister.

The strategy recognises the diverse range of needs, priorities and interests of carers and families, as well as, the need for inclusiveness and responsiveness when addressing carers support needs and services.

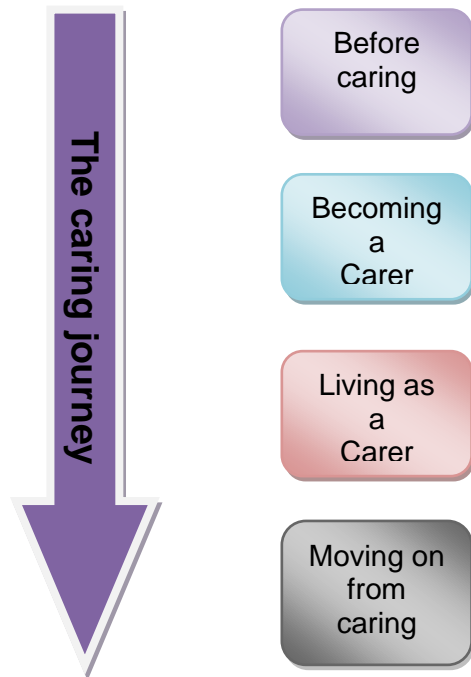
“Carers come from all walks of life, all cultures and can be of any age. Many feel they are doing what anyone else would in the same situation; looking after their mother, son or best friend and just getting on with it”

The Princess Royal Trust for Carers

We want to ensure that people get the right type and level of support at the right time recognising that carers may look after more

than one person. The strategy will take a whole life approach to reduce the impact of the transition between different ages and stages of life and the caring journey as illustrated in the journey below.

The caring journey



The extensive public consultation, co-design workshops and visits to carers groups will ensure that the strategy provides an accurate representation of the future needs and priorities of carers.

OUR VISION

Birmingham's vision for carers over the next few years is that:

"Birmingham is a place recognised as first choice for carers and families that supports and values the role of carers in society".

The aims and objectives of our strategy are taken from Birmingham's commitment to carers:

- Respect, recognise and value carers at all times for their caring role
- Enhance awareness and understanding of the carer role and facilitate their voice in care provision
- Assess carers for their specific needs and provide emotional, psychological and physical support
- Minimise the financial burden and support carers to navigate and access social and financial support
- Create supportive workplaces that recognise caring responsibilities
- Enable young carers to experience and progress through education

**ENABLE A LIFE
ALONGSIDE CARING**

DEFINING A CARER

A carer is defined as:

“A person under 18 who provides or intends to provide for another person (of any age, except where that care is provided for payment, pursuant to a contract or as voluntary work)” *Section 96 Children and Families Act 2014*

“An adult who provides or intends to provide care for another adult (adult needing care)” *Section 10 (3) Care Act 2014*

A “parent carer” means a person aged 18 or over who provides or intends to provide care for a disabled child for whom the person has parental responsibility. *Section 97 Children and Families Act 2014*

This strategy considers a carer to be anyone who helps another person in their day to day life.



IMPACT OF CARING

Carers can face significant challenges in providing good care such as; balancing work or education commitments, managing multiple roles and travel. There are also challenges to their own health and wellbeing as well as having a life of their own alongside the caring responsibilities.

The impact of caring depends on the amount of care provided, their age and the length of time they have been providing care. The needs of the person being cared for and the relationship with their carer can also have an impact on the life of a carer.

Some of the main impacts are:

- **Health and wellbeing** – the most recent GP patient survey found that 60% of carers have a long term health condition compared to 50% of non carers. For young carers the pattern is even more pronounced with 40% of young carers (aged 18-24) having a long term health condition compared to 29% of non carers in the same age group. (*Carers UK state of caring report 2016*). In addition if any health issues are not addressed in young carers they can continue into adulthood.
- **Employment** – the ability to access and stay in employment.
- **Financial** – having a reduced income or getting into debt.
- **Social** – the ability to access social or recreational activities.
- **Relationships** – the ability to maintain relationships with wider family and friends.
- **Educational** – caring responsibilities can have a detrimental effect on young people’s educational achievements and life chances. Young carers are also more likely to be bullied within the school environment.

VALUE OF CARING

It is difficult to estimate the full value of the care and support provided by informal carers and it is often an expression of affection and respect or a sense of duty. But, without it the demands on our health and care services would increase dramatically and we could not cope without the support that they give to friends and family members. It is estimated there are over 6.5 million unpaid carers in the UK with 1.4 million people providing over 50 hours of unpaid care per week. The economic value of their contribution is estimated at £132bn per year.

In recognition of the important role that carers play the Care Act 2014 promotes wellbeing as an overarching principle. The Act includes new rights for carers such as an assessment if a carer appears to have a need for support regardless of the amount of care provided, their financial situation or whether the person cared for has an eligible need. In addition it emphasises:

- Parity of esteem for carers and the person cared for.
- Principles of wellbeing and personalisation.
- Universal rights to information and advice.

**HEALTH AND SOCIAL CARE
SYSTEM
UNSUSTAINABLE WITHOUT
UNPAID CARE**

A PRIORITY FOR BIRMINGHAM

Carers are a priority nationally, regionally and for Birmingham. There is a national commitment to improving support for carers as affirmed in the National Carers Strategy “Recognised, Valued and Supported”. This values carers and prioritises future actions to ensure the best possible outcomes for carers and those they support through the identification of four key areas across health, education, social care and employment. Particular focus was given to increase the identification of carers. Regionally ADASS published a carers commitment following implementation of the Care Act (2015).

There is a range of national Acts, legislation and strategies (see Appendix A) that focus on carers with the two main Acts being:

- **Care Act 2014** – sets out new legal guidelines relating to care and support for adults and the law to support carers. There are provisions to safeguard adults from abuse or neglect and care standards. In addition it places clear legal responsibilities on the Local Authority and creates a single duty to undertake a carers assessment.
- **Children and Families Act 2014** – makes provisions for children, families and people with special needs. It seeks to improve services for vulnerable children and introduces new rights for young or parent carers to an assessment of need.

In Birmingham the 2011 Census estimated there were 107,380 unpaid carers in the city, 10% of the city's population. Of these 11,642 are young carers aged 5 to 24 years old. They contribute care with an equivalent value of £2.1bn a year. A Strategy for carers in Birmingham was published in 2013 with the vision:

“Carers will be universally recognised and valued as being fundamental to strong families and stable communities”.

Support will be tailored to meet individual needs and enable carers to maintain a balance between their caring responsibilities and a life outside caring, whilst enabling the person they support to be a full and equal citizen”.

There are also three local visions and strategies that relate to carers:

- **Vision and Strategy to modernise Adult Social Care** – provides a fundamental and radical shift in the way in which the Council will deliver desired outcomes for adults and older people. The desired outcomes are that they should be resilient, exercise choice and control and live happy healthy and independent lives within communities for as long as possible.
- **Putting Prevention First:**– a prevention first model has been developed which has two integrated components:
 - Community assets and local networks are the natural first point of contact when citizens or carers need support.
 - Where appropriate, effective and integrated pathways are available into targeted or more structured prevention activity through a prevention pathway.

The model will deliver against the following prevention outcomes for citizens:

- Reducing and overcoming isolation.
 - Maximisation of income.
 - Improved health and wellbeing.
 - Good quality housing and housing support.
 - A good quality of life for Carers.
-
- **Strategy for Early Help in Birmingham 2015 – 2017** – focus is on prevention and early help and that it is everyone's responsibility. It advocates a right service right time framework and embeds a whole family approach.

Further relevant legislation can be seen in Appendix A.

WHAT YOU TOLD US

You told us the following was important to you:

- All carers should enjoy the same rights, choices and opportunities
- Support should be appropriate, timely, responsive and flexible
- Clear and consistent communication
- Information on what to do as a back up
- One place to go to for all information, advice and guidance
- Sign posting to services and support groups
- Being able to take time away and know the person being cared for is looked after
- To be actively involved and updated
- Agreeing what carers can or can't do when person being cared for is in hospital
- Support on discharge from hospital and be included in the process, in particular if caring responsibilities have changed
- Support for possible change of role in relationships
- Information and costs of adapting homes
- Specialist and appropriate care, equipment and facilities
- It's all about the person being cared for and not yourselves
- Making friends, developing relationships and socialising
- Listening and understanding

Young Carers told us:

- Schools need to be more supportive
- They couldn't make plans or go out with friends but it brought the family closer together
- It was emotionally challenging and they needed time to think
- They wanted somewhere to socialise and a wider choice of options to stay overnight

- They appreciated having the opportunity to share their experiences and socialise with other young carers.

-

You also told us that:

- People don't always recognise themselves as carers
- People don't always want to be labelled as a carer
- You don't want to ask for help for the fear of being seen as unable to cope and potential ramifications

Carers do not always want to go through assessments with different organisations, we are having to tell our story all over again...

I feel listened to for the first time in a long time

Appendix B provides details of how and when your comments and thoughts were captured.

Tommy Whitelaw works to raise awareness of issues facing people living with dementia and their carers. He cared for his mother who had vascular dementia and they struggled together with the understanding of dementia, the caring and the isolation and loneliness as their world became smaller. For Tommy, to combat his loneliness, he started a blog to talk about his experiences and speak to others who were also living with dementia to see if their struggles were the same as his. This was the start of him raising awareness of dementia through campaigning and engaging with health and social care professionals.

The following represents some of Tommy's experiences and views and gives a picture of what matters and is important to carers.



Care "starts" in
your heart 

PLEASE... BE KIND 

Name... not condition

#hello my name is..

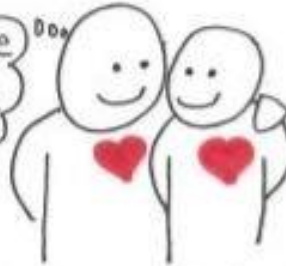
YOU CAN MAKE A DIFFERENCE

As a
CARER, 
Sometimes
I FELT

- helpless
- alone
- scared



People may be
Scared....
What can we
do to help
+ support?



Mums + Dads
make it better
for us. We need
to help, make it
better for them.



Be "The ONE"
Who makes a
DIFFERENCE!



PLEASE
ASK 

Are you OK
that I'm
doing this
with you?

ENSURE DIGNITY
AND RESPECT

People want to
be able to stay
in their own home.
To be 'cared for'
in their own home
for as long as possible.



#letters,
lives +
love stories



"PLEASE DO NOT..
use the word
'challenging'...
.. it's MY MUM, Joan..
NOT 'the wee woman
with dementia'"

ASK what matters
LISTEN to what matters
DO what matters.

People CAN CHANGE lives,
What can YOU do?

"What Matters to you"

FUTURE ENGAGEMENT

The strategy will be a live document and as we move forwards we want to ensure we continue to communicate and engage with you.

We know what works so far but want to commit to getting better, taking an approach where we work together to co-design a model that provides a menu of engagement options. We want carers to have a choice as to how they want to engage and to dip in and out depending on what's needed. The model below illustrates a range of options with which we could engage with carers.

Menu of choice model



GPs



Social media



Telephone

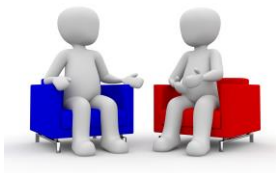


Events

ENGAGEMENT



Email



One to one



Post



Groups



Newsletters

OUR CHALLENGE

Nationally the 2011 Census was the first to ask people to identify whether they were undertaking a caring role and it revealed there were 6.5 million carers in the UK. It is estimated that around 10% of Birmingham's population are caring for someone.

Analysis of population data estimates that for every 100 patients on a GP practice list 10 will be carers providing less than 20 hours care per week, 3 to 4 will be providing more than 20 hours per week and 2 will be caring for at least 50 hours per week (12.5%). In Birmingham 65% of carers registered with our Carers HUB provide more than 50 hours of care per week.

Data from the Carers HUB in Birmingham also tells us:

- The data shows that women are more likely to be carers than men. But, as carers age (75+) over half are men.
- Nationally the peak ages for caring is 50 to 64 years and in Birmingham 30% of carers are this age, but 34% are 65 or older.
- In Birmingham a quarter of carers live with the person they care for.
- For a carer to carry out their caring responsibilities they need to be well yet 21% have their own health needs and 12% have a disability.

Local data from Young Carers project indicates that of the young people supported:

- Around three quarters are vulnerable and designated as children in need.
- Whilst caring 12% have child protection plans in place
- A quarter of young carers are at risk from exclusion from post 16 education, employment and training opportunities.

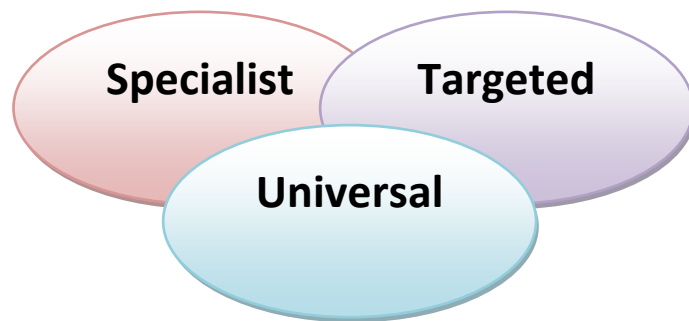
To be successful the strategy cannot be delivered by specialist carers services or statutory services alone. To be successful the challenge is for a range of health, social care, leisure, housing, employment and commissioned services to work together in a carer centred way.

OUR APPROACH – THE POSITIVE PATHWAY

The Positive Pathway is a whole systems approach built on collaboration, best practice and service integration. First developed by St Basils and implemented locally with young people at risk of experiencing homelessness, it has seen much success.

By embedding the positive Pathway at the heart of this strategy we will create a comprehensive and consistent approach for carers. The pathway sets out three key areas that are flexible to ensure that no matter what stage carers enter they will be supported as early and effectively as possible.

The three key areas are:



Universal – for all with a focus on early help and prevention

Targeted – for some, usually short term to support and enable independence

Specialist – for a few, provided following assessment, may be outcome of targeted services and usually long term.

TO ACHIEVE EXCELLANCE THE PATHWAY IS RELIANT ON CONTINUAL FEEDBACK FROM CARERS,
THOSE CARED FOR AND CITIZENS

UNIVERSAL - FOR ALL

- Early help
- Prevention

EXAMPLES OF SERVICES

- Advice/information
- Training
- Signposting
- Support access other services

TARGETED – FOR SOME

- Early help
- Support and enable independence

EXAMPLES OF SERVICES

- Emergency & planned response
- Grant funding
- Family support
- Schools based work

SPECIALIST – FOR A FEW

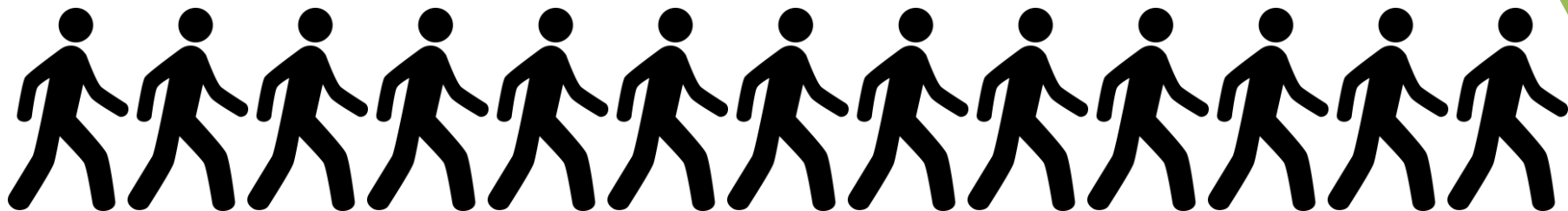
- Specialist provision

EXAMPLES OF SERVICES

- Short breaks disabled children
- Dementia cafes
- Residential activities
- Support transition to adult Carer

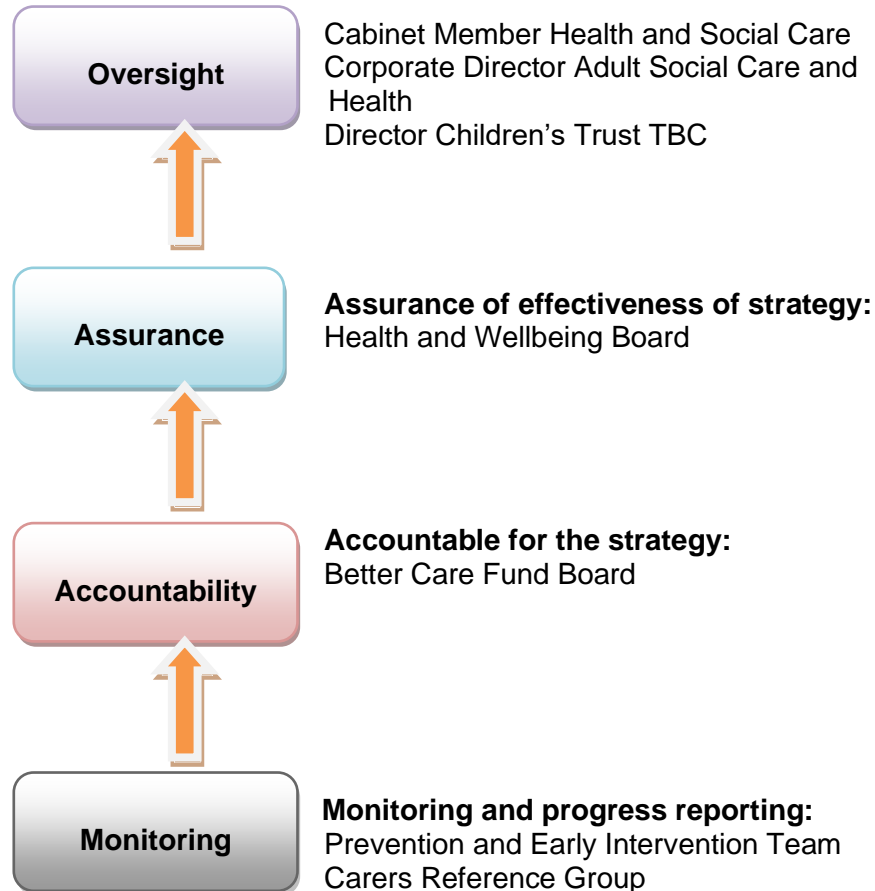
ASSESSMENT

CAN ACCESS MORE THAN ONE SERVICE



DELIVERING OUR VISION

Responsibility for oversight of the strategy:



Equality duty

The Public Sector Equality Duty (Equality Act 2010) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations between different people when carrying out their activities.

As such, our approach has and will continue to be informed by the latest available intelligence when determining key actions associated with the delivery of our strategy vision.

Joint Action and High level Commissioning Plans

Historically commissioning of carers services have sometimes been delivered separately by both the local authority and health partners. The strategy provides an opportunity to set out a future integrated approach.

The joint action plan begins to consider the types of services/interventions that maybe required in the future. It links them to the commitment we made to our carers at the start of the strategy and the high level commissioning plan will turn this into reality providing details of what services we propose to commission. It is imperative that we deliver the right service in the right place at the right time.

RIGHT SERVICE

RIGHT TIME

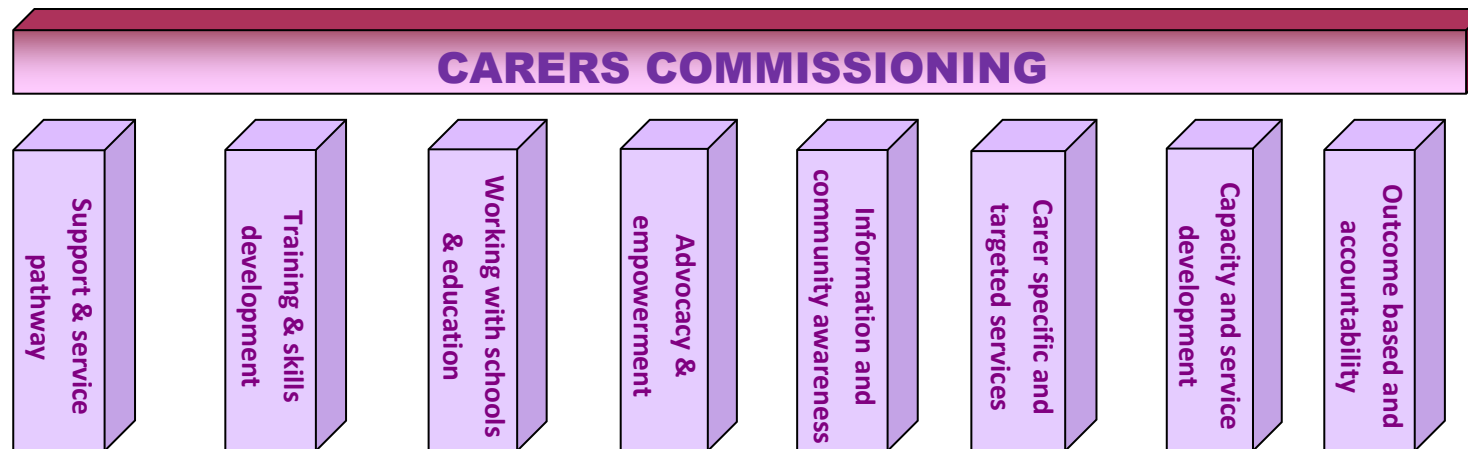
RIGHT PLACE

HIGH LEVEL COMMISSIONING PLAN

The strategy presents an opportunity to develop a new integrated carers support and services model aligning and bringing together commissioning bodies across the city. The aim is to:

- Enable carers to better navigate the system for support and services
- Ensure services are 'joined up' so that carers don't have to provide information and details numerous times
- Have better sharing of information avoiding unnecessary duplication of services
- Provide an improved carers experience
- Have an increased focus on carers priority needs
- Improve health and wellbeing outcomes
- Enable more carers to be supported in the community.

There are eight pillars supporting the commissioning:



Key principles for commissioning include:

- An integrated carer support and service pathway
- A prevention approach with a shift towards early intervention
- Quality and appropriate level and diversity of services
- An outcome approach to measure achievement and effectiveness of support and services.

Commitment	Outcome	Beneficiary	Proposed activity	Detail
Recognise and respect the value of carers	<ul style="list-style-type: none"> Reduced demand on statutory services Carers are identified and acknowledged Carers are involved in care planning 	Adult, parent and young carers	<p>Carers assessment, a statutory duty set out in Care Act 2014</p> <p>Identify and acknowledge carers and enable access to leisure and other facilities.</p> <p>Involve carer in care whilst person cared for is in hospital and in planning care following discharge</p>	<p>It is expected that the activity may include:</p> <ul style="list-style-type: none"> Assess carer Determine eligibility Allocate personal budget/carers Grant if appropriate Develop support plan Identify and support access to appropriate services <p>The activity may include:</p> <ul style="list-style-type: none"> Develop carers passport as a citywide approach that everyone signs up to. <p>The activity may include:</p> <ul style="list-style-type: none"> Providing accurate information about care needs relevant to patients condition Discuss current and future role Sign post to relevant advice/information and services If young carer offer to provide any relevant information to schools

Commitment	Outcome	Beneficiary	Proposed activity	Detail
Build a carer friendly city	<ul style="list-style-type: none"> • People and organisations are aware of what a carer is and the responsibilities and commitments • Carers can access networking opportunities 	Adult, parent and young carers	Promote both awareness of what a carer is and support and network opportunities available.	<p>The activity may include:</p> <ul style="list-style-type: none"> • Development of a local integrated register/directory of services and community networks • Develop and introduce a Carers Charter • Raise awareness with key professionals such as GPs
Support carers to be physically and mentally well	<ul style="list-style-type: none"> • Carers have control over their personal and caring life • Carers can access a short break from caring • Carers access health and wellbeing checks • Older carers able to remain independent and caring • Carers can access emergency plans if required 	Adult, parent and young carers	<p>Provide advice and information on health and wellbeing and support to access health and wellbeing checks. Provide more in-depth service for carers with complex needs. Enable carers to have a short break from caring responsibilities.</p> <p>Provide short breaks for disabled children a duty for local authorities.</p>	<p>The activity may include:</p> <ul style="list-style-type: none"> • Focussed early intervention for those at risk including health checks and MOTs. • Respite for carers to attend appointments e.g. GP. • Develop a Third Sector Carers Forum. • Administer small grants to enable respite breaks. • Develop database of support and services available to carers. • Bereavement service. • Dementia cafes and groups.

Commitment	Outcome	Beneficiary	Proposed activity	Detail
Support young carers through childhood and education	<ul style="list-style-type: none"> • Young carers attend school on a regular basis • Young carers successfully transition to an adult carer • Schools and colleges recognise young carers responsibilities and commitments • Carers of disabled children are able to have a break from caring responsibilities • Reduced dependency on specialist provision 	Young carers aged up to 18 and parent carers	Provide residential activities, one to one interventions, group work, school based work and partnership working.	<p>The activity may include:</p> <ul style="list-style-type: none"> • Develop training programme for schools, colleges and professionals. • Develop pathways in education for young carers. • Provide short breaks for disabled children on a planned or emergency basis. • Promote awareness of young carers. • Provide both one to one and group support. • Provide residential activities to offer respite from caring responsibilities. • Support for families to build relationships and resilience. • Out of school activities during weekends and school holidays for all disabilities and autism.
Support carers to financially plan for today and tomorrow	<ul style="list-style-type: none"> • Carers maximise their income • Carers are aware of Direct Payments 	Adult, parent and young carers aged 16+	Enable carers to maximise their income so they do not experience financial hardship.	<p>The activity may include:</p> <ul style="list-style-type: none"> • Supporting carers to seek or maintain employment. • Ensuring carers are claiming all relevant benefits. • Targeted campaign to ensure access to services for those most at risk.

Commitment	Outcome	Beneficiary	Proposed activity	Detail
Promote carer friendly employers	<ul style="list-style-type: none"> Employers recognise carers responsibilities and commitments Carers are not treated unfairly in the workplace 	Adult, parent and young carers aged 16+	Raise awareness amongst employers of carers responsibilities and commitments. Seek commitment from employers to recognise carers and their responsibility and commitment.	<p>The activity may include:</p> <ul style="list-style-type: none"> Encourage employers to sign up to ADAS Carer Friendly Scheme. Promote awareness of carers in the workplace. Pledge to become Carer Friendly Employer. Establish carers network for staff.

APPENDIX A

National legislation

A new national Carers strategy – expected summer 2018
Care Act 2014
Care Matters Green and White papers 2007
Carers Action Plan 2018 to 2020
Carers and Disabled Children's Act 2000
Children and Young Persons Act 2008
Data Protection Act 1998 amended 2005
Education Act 2002
Equality Act 2010
Gender Recognition Act 2004
Human Rights Act 1998
Health and Safety at Work Act 1974 plus relevant guidance
Independent Living Strategy (2008)
Protection of Freedoms Act 2012
Public sector Equality Act 2010
Putting People First (2007)
Special Educational Needs and Disability Act 2001
Social Value Act 2012 and amendment 2013
The Children and Families Act 2014

Local priorities

Aging Well Programme
Locality agenda
Public Sector Equality Act 2010
Putting prevention First
Strategy for Early Help in Birmingham 2015 to 2017
Vision and Strategy to modernise Adult Social Care

References

ADASS
Care Act 2014
Carers UK
Census 2011
Children and Families Act 2014
Forward Carers
National Carers Strategy
Positive Pathway – St Basils
Princess Royal Trust for Carers
Putting Prevention First
Strategy for Early Help in Birmingham 2015 to 2017
Think Local Act Personal guidance
Tommy Whitelaw (*permission granted to use material*)
Vision and Strategy to modernise Adult Social Care

APPENDIX B

What you told us

Date	Event/Document	Method	Numbers
December 2016	Standards for Working with Carers	Distribution and discussion	100+ staff and volunteers
January-March 2018	Visit 9 Carers Groups	Focus groups	113 carers
23 rd March 2018	Carers Event	Co-design workshop	100+ carers
13 TH June 2018	Recognising the needs of the carer in an acute hospital setting	Individual discussions with carers	5 carers