



## Scrutiny Review - Support to Carers

TUESDAY, 19TH JANUARY, 2010 at 10:00 HRS - CIVIC CENTRE, HIGH ROAD, WOOD GREEN, N22 8LE.

MEMBERS: Councillors Adamou (Chair), Alexander, Dodds and Wilson

#### **AGENDA**

#### 1. APOLOGIES FOR ABSENCE

#### 2. URGENT BUSINESS

The Chair will consider the admission of any late items of urgent business. (late items will be considered under the agenda item which they appear. New items will be dealt with at item 8 below).

#### 3. DECLARATIONS OF INTEREST

A member with a personal interest in a matter who attends a meeting of the authority at which the matter is being considered must disclose to that meeting the existence and nature of that interest at the commencement of that consideration, or when the interest becomes apparent.

A member with a personal interest in a matter also has a prejudicial interest in that matter if the interest is one which a member of the public with knowledge of the relevant facts would reasonably regard as so significant that it is likely to prejudice the member's judgement of the public interest and if this interest affects their financial position or the financial position of a person or body as described in paragraph 8 of the Code of Conduct and/or it is related to the determining of any approval, consent, license, permission or registration in relation to them or any person or body described in paragraph 8 of the code of conduct.

#### 4. MINUTES (PAGES 1 - 8)

To approve the minutes of the meeting held on 15<sup>th</sup> December 2009

- 5. ADULT SERVICES (PAGES 9 20)
- 6. CLOSING COMMENTS FROM ATTENDEES
- 7. DATE OF FINAL MEETING

Thursday 21<sup>st</sup> January 2010 Haringey Civic Centre

Purpose: to discuss conclusions and recommendations for the review

#### 8. NEW ITEMS OF URGENT BUSINESS

Ken Pryor
Deputy Head of Local Democracy and Member
Services
River Park House
225 High Road
Wood Green
London N22 8HQ

Melanie Ponomarenko Principal Scrutiny Support Officer

Tel: 020 8489 2933 Fax: 020 8489 2533

Email:

Melanie.Ponomarenko@Haringey.gov.u

<u>k</u>

11<sup>th</sup> January 2010

# Scrutiny Review – Support to Carers Draft Minutes 15<sup>th</sup> December 2009

Present: Councillor Adamou (Chair), Cllr Alexander, Cllr Wilson, Barbara Nicholls, Lisa Redfern, Jeremy Walsh, Duncan Stroud, Anne Daley, Michael Edelstein, Freda Wilson, Nisha Mansood, Ashley Thomas, Eve Featherstone, Nick Bishop, Cenk Orhan, Melanie Ponomarenko (minutes).

| Apologies for absence        | Susan Otiti , Carmel Keeley   |
|------------------------------|---|
| Urgent Business              | None  |
| Declarations of Interest     | Cllr Adamou declared an interest as her daughter is a social worker.  |
| Barnet, Enfield and Haringey | Jeremy Walsh, AD  |
| ואפוומ חפמווו וומאר          | An overview of the Mental Health services in Haringey was given.  |
|                              | BEHMHT has a full time Carers Assessment Post who is active across the MHT services in trying to identify carers. A recent example of this was a Carers Lunch at Tynemouth Road.  |
|                              | The referral forms used by BEHMHT are shared with other organisations to ensure that the information collected across the organisations is consistent.  |
|                              | In May 2009 Home Treatment Teams conducted a survey in order to try and identify carers. This took the form of a questionnaire given to clients they visited. The Mental Health Carers Association is working with BEHMHT to look at the Questionnaire and improve it in order to get more responses in future. |

Discussion around the resourcing of the Home Treatment Teams. The Panel were informed that an extra five members of staff per Home Treatment Team had been recruited this year.

Discussion around what happens once a carer has been identified.

An assessment is offered to the carer, engagement with the network around the carer is undertaken both in a formal and informal sense, available services for the carer are considered. The information is then uploaded onto Framework-I in order to enable services to be commissioned.

For those that do not want an assessment there is a need for continued engagement to ensure that they can access support should they wish or need to in the future.

Acknowledgement that this part could be tighter.

With mental health service users there is generally always someone within their network who is a carer for them.

configuration). This is in preparation for Payment by Results and does not effect the service The BEHMHT is reconfiguring at a senior level from January 2010 (Service Line provision.

The link person for Haringey will be Lee Saunders, Assistant Director at BEHMHT who will be making links with Haringey Council's management.

Discussion around the closure of acute wards and the impact that this has had on being able to identify carers as well as the extra burden taken on by carers in these situations.

about due to the move to treating people in the community. This was another reason BEHMHT acknowledges the increase in pressure and responsibility which has come for the above mentioned survey.

There will always be a need for acute provision of mental health services but it is often advice and support which may help them work through issues and be better prepared better alternatives for people outside of the acute setting where they can be given should there be a next time. Cllr Wilson visited the Mental Health Carers Association approximately a year ago and felt that much support in the community. Noted that there can be a gap and that this is being worked services. Feeling that there are only two options – one of 24hour care and the other not very there was a revolving door for many mental health services users coming in and out of the on currently.

support as needed at home for example in a sitting service to give people the sense of 'containment' that people need and often want in time of crisis. Acknowledgement of A future vision would be developing the Home Treatment Teams to provide as much the resource requirements of this. Acknowledgement that there is more to be done to ensure that carers are fully supported and identified when the cared for person is admitted to St Ann's as seeing a loved one in a psychiatric ward can be very traumatic.

An example of how this is being addressed is through a carers group at St Ann's.

Discussion around what happens when someone is discharged and the physical environment that they may return to which is also a concern for the carer. The point of discharge is critical for both the carer and the cared for person as the carer picks up the burden at this point.

The first seven days after discharge is when a person is most likely to commit suicide.

There are a number of support services to assist the carer and cared for person through this process including links with Housing Officers and a Practical Support Team on each ward. There is a desire to commission more of these kinds of services. Acknowledgement that there s more to be done to provide a continuum of support structure.

The Mental Health Carers Association acknowledges examples of best practice by the

|              | BEHMHT and is working with them to improve services. However:   It is felt that more needs to be done to routinely identify, offer assessment and involve  |
|--------------|--|
|              | carers in care planning.   |
|              | A well-ordered and systematic approach does not exist at present.     Bost Bractice needs to be not of a coherent system.  |
|              | <ul> <li>Destination fleets to be part of a conferent system.</li> <li>A Strategic view and strategic planning by the BEHMHT is not apparent</li> </ul>  |
|              | o Carers are not always able to get crucial information e.g. date of discharge, information  |
|              | on medication, dates of visits etc.<br>BEHMHT acknowledges that there are issues around access to information and that this is   |
|              | something that needs to be looked into as there is inconsistency with who gets what information.   |
|              | The second secon |
|              | worked through. It is often Carers who pick up on this tension and it has an impact on them in their caring role.  |
|              |  |
|              | There is a need to ensure that engagement is robust in the future.   |
|              | Acknowledgement from Adults that there is more work to do to ensure that the partners are working together strategically and in a coordinated way.   |
|              |  |
|              | There is a commitment from all partners to improve services but there is work to be done to reduce fragmentation.  |
|              |  |
|              | Discussion around the lack of anything on the BEHMHT for carers when this was last looked at. BEHMHT have recently revamped their website and in this the Carers information dropped of accidentally. This is worked on to ensure that carers are clearly eigenseted.  |
|              | off accidentally. This is worked off to ensure that cards are crearly significated.  |
| NHS Haringey | Anne Daley and Duncan Stroud presented on behalf of NHS Haringey in Susan Otiti's  |

| absence.   |
|--|
| There is no ring-fenced money for carers services in NHS Haringey's budget. The money identified was part of the general government uplift.  |
| NHS Haringey currently has a number of financial pressures which it is having to juggle, including swine flu.  |
| The Joint Leadership Team is currently trying to improve joint working across the partnership and decrease duplication.  |
| Discussion around whether services would be reviewed and re-commissioned to other providers where necessary. Contracts are reviewed on a regular basis and as part of an ongoing process.  |
| Noted that NHS Haringey's commissioning intentions are laid out every year and that specifications can be included at this time. Query as to whether carers and carers organisations are consulted as part of this.                              |
| NHS Haringey has working relationships with a number of voluntary and community organisations and bodies in Haringey. This includes the Carers Partnership Board, the Older Deople's Partnership Roard and Ana Concern                           |
| Once the Haynes Trust is up and running relationships will also be developed here.  Commissioning Intentions for 2010/2011 are currently being put together. Noted that this is a long process and last year it was not agreed until the summer. |
| Carers Breaks will be considered should the budget allow.  |
| There is no targeted approach relating to BME Carers apart from in relation to long term conditions.   |

| Anne Daley will send further breakdown of ethnicity data to the panel.  |
|---|
| NHS Haringey is currently trying to build more relationships with the voluntary and community sector and look at the potential of linkages with community services.   |
| Increased investment in community services would be the desired way forward, however this has to be balanced with acute funding.  Looking at ways to try and stop people from coming into the acute setting so that money can be freed up and spent elsewhere.  |
| NHS Haringey currently provide space for the Carers Centre at Hornsey Health Centre free of charge.   |
| GP Registers  GPs are expected to know who has caring responsibilities at their practice.  GPs are expected to know who has caring responsibilities at their practice.  GP database has two questions relating to carers on it.  Anne Daley is currently in discussions with Clinical Leads to look at issues raised previously around the information carers have access to with regards to the person they are caring for. Issues of confidentiality and the impact on the carers are being considered as part of this piece of work.  Different GPs have a different approach to this.  NHS Haringey is trying to get a clearer picture of the full situation. |
|   |
|   |
|   |
|   |

| <br> | <br>_ |
|------|-------|
|      |       |
|      |       |
|      |       |
|      |       |
|      |       |
|      |       |
|      |       |
|      |       |
|      |       |
|      |       |
|      |       |
|      |       |
|      |       |
|      |       |
|      |       |

This page is intentionally left blank



| Report for:         | Scrutiny Review – Support to Carers                                    |  |
|---------------------|--|--|
|                     |  |  |
| Title:              | Adult Services & Commissioning - work with informal carers             |  |
|                     |  |  |
| Purpose of report : | To provide summary the of support offered to informal carers           |  |
|                     |  |  |
| Author:             | Barbara Nicholls Head of Commissioning, Adult Services & Commissioning |  |
|                     |  |  |
| Date:               | 19 <sup>th</sup> January 2010  |  |

#### 1. Introduction

This briefing provides a response to a number of key questions posed by the Scrutiny Review – Support to Carers. The questions are split into service overview and value for money

#### 2. Service over review

#### 2.1 Carers Pathway – assessment and service provision

Informal carers are entitled to an assessment and services if eligible and appropriate in their own right, and can choose to have it at the time of the cared for person's assessment/review or separately. In Adult Services carers assessments are completed by either a social worker / care manager, and within a timely manner. Their needs are reviewed at least annually, or more frequently if appropriate and required.

Adult Services contracts with key voluntary sector organisations to complete 'delegated' carers assessments on their behalf. Most of these are completed by the Carers Centre, however BME Carers Support Association, Mental Health Carers Support Association, and Asian Carers Support Group also undertake assessments.

The carer process will need to be reviewed as part of the implementation of personalised support for carers, and will include giving carers the opportunity to complete an assisted self assessment, leading to provision of carer specific services where the carer is eligible.

A diagram of the pathway can be found at appendix 1 of this report.

#### 2.2 Partnership Working

Adult Services work closely with a range of key partners across the statutory and voluntary sector to ensure improved outcomes for carers.

#### 2.2.1 Voluntary Sector Partners

We provide funding to voluntary sector partners to:

- Provide advocacy and support, including facilitating access to service from Adult Services
- Provide information and advice
- Provide activities for carers including provision of pampering and therapy sessions, 'Carers Days Out'
- Identify 'hidden carers' and promote their registration with Adult Services, to for example access discounted leisure passes.
- Provide short breaks for carers without the need to go through Adult Services to access
- Provide carers support groups
- Publish newsletters
- Run events
- Undertake delegated carers assessments

#### 2.2.2 Carers Partnership Baord

The Carers Partnership Board has a key strategic role. It was re-established in September 2009, and includes a range of partners as Board members. Once of the successes of the Carers Partnership Board, has been the high number of carer members. In addition to this within our learning disabilities and mental health services, we support/facilitate six-weekly carers' forums held specifically for carers of these client groups. The groups receive information, discuss concerns and raise issues. The Carers Partnership Board oversaw the development of the Haringey partnership Carers Strategy 2009-2014. which was approved at the Council's cabinet in June 2009. Carers from the partnership board were involved in planning the consultation for the strategy (held in March 2009). Carers have also been actively involved in sub-groups to the Carers

Partnership Board, for example the Information & Advice subgroup, and with the start date confirmed for the Commissioning Manager for Carers as 19<sup>th</sup> January 2010, this and the other subgroups will now be able to create and progress on an agreed work plan, including the priority areas of:

- Information & Advice
- Working and caring
- Access to Education and Employment
- Carers and current services (including transition) developing a framework for carers to evaluate services and contribute to future modelling of services.
- Personalisation / Transforming Social Care.

#### 2.2.3 Carers who are supporting people who use substances

The Haringey Drugs & Alcohol Advisory Team have raised the profile of carers of people who misuse substances (such as drugs and alcohol) since 2008/09, for example commissioning a specific counselling services, reaching out to families and friends of drug users, with successful outcomes for carers in terms of getting the therapeutic support they identified would assist them in their caring role.

Adult Services works with NHS Haringey to ensure improved outcomes for carers. NHS Haringey's financial position in 2009/10 has meant there has been no additional investment available in this financial year from the Trust. Progressing on the specific requirement on NHS bodies to work with the Council around publishing combined plans for improving access to short breaks will begin in the last quarter of 2009/10 for the year beginning 1<sup>st</sup> April 2010. NHS Haringey has continued with their existing funding commitments for services for carers, including funding to Carers Centre, Mental Health Carers Support Association, Young Carers Project & Stroke Club (as per their report to the Scrutiny Review in December 2009). Following the Scrutiny Review meeting on 15<sup>th</sup> December 2009, we will jointly review the information available on both the Council's carers register and registers held by GP surgeries.

The Haynes Centre for Dementia Care opened in October 2009, specialising in providing a day service for people with dementia. This was opened as a partnership between Adult Services, Barnet Enfield and Haringey Mental Health Trust and NHS Haringey (located on the Hornsey Health Centre site). In 2010, we will be expanding the day service into a Resource Centre for people with dementia and their carers, and the service offer will include:

- Outpatients with consultant psychiatry;
- Admiral nursing outpatients clinics;
- Alzheimers Society advice and information; and
- Library of information.

#### 2.3 Equipment aids and adaptations

Aids and adaptations can be provided to people who use services to help them carry out everyday tasks. The Haringey Integrated Community Equipment Service (joint between NHS Haringey and Haringey Council) can prescribe and supply what is required following an assessment. The Adaptations service may recommend equipment or adaptations that will help mobility and minimise risk of injury for the cared for person and the carer. The Adaptations Services has started to review all its processes and procedures it currently works to in light of the personalisation agenda. Early indications from the self-directed care pilots is the identification of an increasing role for early intervention from the Adaptations Service, in working to maximise the independence of the cared for person.

We offer an Occupational Therapy Drop-in Centre where people who use services and their carers, can refer themselves for an assessment, following which some equipment and rails can be provided, and/or information and advice offered.

#### 2.4 Emergency arrangements

Adult Service recognises that having robust plans in place to support the cared for person in the event of a carer emergency is critical to ensuring carer peace of mind as they undertake their caring role. Since 2006 we have had a Carers Emergency Alert Card scheme in place that currently holds details of emergency plans for 64 carers. Registered carers can access an alert carry card which is linked to the cared for person's emergency support plan. In 2009/10 to date there have been six contacts to the service to instigate the emergency planning process for the cared for person.

We recognise that the scheme requires greater promotion amongst carers, as well as professionals across health (including GP's) and social care, and this work has started, with a newsletter to all carers on the Haringey Council's Carers Register in November 2009. One of the immediate priorities for the new commissioning manager starting in January 2010 is to review the current emergency alert card scheme process to eradicate any difficulties that carers might experience with the service; and develop an action plan to promote the service with carers and people who use services, including through voluntary sector partners, GP surgeries, Libraries and local media.

In the event of an emergency, regardless of whether the carer holds an emergency alert card or not, there is access to emergency 24 hour home-based respite where necessary and we have designated emergency respite beds available in the Council's Inhouse care homes. The Integrated Care Team (that works with acute hospitals) will for example access these services to prevent the inappropriate admission to hospital of the cared for person with the carer where the carer requires emergency admission.

Also for older parent carers we recognise it is important to have an emergency plan in place, where the carer themselves is now older and may not be able to continue in their caring role due to increasing frailty or in the event of their death.

In Learning Disabilities Services this is a key priority for 2010, and work has begun in our internal day opportunities services with staff now to work with older carers, in planning for the future care and support needs for their son or daughter.

#### 3. Value for money

#### 3.1 Funding streams

There are a number of funding streams within Adult Social Care that fund services for carers. These are listed in the table below. Much of the funding for services for carers comes from the Area Based Grant, which was created in April 2008, bringing together a number of Council grants . This included what was previously known as the Carers Grant, and the emergency respite funding for carers. The Area Based Grant is managed by the Council on behalf of the Haringey Strategic Partnership, with all performance management arrangements agreed through the Performance Management Group, including agreement for continuation of funding.

#### 3.1.1 Funding arrangements for services to carers

| Funding Source                         | Organisation funded   | Value of<br>funding in<br>2009/10 |
|--|---|-----------------------------------|
| Area Based Grant<br>(was Carers Grant) | Mental Health Carers Support Association – providing breaks, pre- vocational training, and counselling services, as well as advocacy, advice and support groups   | £29,500                           |
| Area Based Grant<br>(was Carers Grant) | Carers Centre - providing information, advice and practical support for carers who live or work in the borough and care for a Haringey resident. Offering a programme of social activities, support groups, training, consultations and carer involvement in the service.   | £60,000                           |
| Area Based Grant<br>(was Carers Grant) | Asian Carers Support Group - providing culturally appropriate support to Asian Carers through advice and information-giving, advocacy, and activities. The service identifies 'hidden' carers, promotes registration with the local authority, undertakes carers' assessments and makes recommendations for carers' services. | £26,900                           |
| Area Based Grant<br>(was Carers Grant) | BME Carers Support Association - provides a culturally appropriate sitting  | £102,400                          |

| Funding Source  | Organisation funded   | Value of<br>funding in<br>2009/10 |
|---|---|-----------------------------------|
|   | service to Black and Minority Ethnic Carers averaging 4 hours per carer per week.   |                                   |
| Area Based Grant (was Carers Grant)                           | Commissioning Service   | £72,900                           |
| Area Based Grant<br>(was Carers Grant)                        | The Grange - weekend opening – providing a dementia day opportunities service on Saturdays and Sundays.                                       | £45,000                           |
| Area Based Grant (was Carers Grant)                           | Flexible carers services (Direct payments for carers)   | £250,000                          |
| Area Based Grant<br>(was Carers Grant)                        | Respite care services (including emergency respite)   | £340,500                          |
| Area Based Grant<br>(was Mental Health<br>Grant)              | Alexandra Road Crisis Unit<br>(emergency respite for people with<br>mental health problems, including<br>carer breakdown)                     | £128,200                          |
| Area Based Grant<br>(was Mental Health<br>Grant)              | Open Door – provides a range of specialist projects to provide emotional and therapeutic support to young people and their parents and carers | £25,000                           |
| Area Based Grant<br>(was Working<br>Neighbourhood<br>Fund)    | BME Carers Support Association – monthly support group for carers   | £19,500                           |
| Area Based Grant<br>(was Working<br>Neighbourhood<br>Fund)    | BME Carers Support Association – benefits advice to people who use services and their carers  | £31,500                           |
| Area Based Grant (was Learning Disabilities Development Fund) | Carers Centre (LD carers support group)   | £2,000                            |
| Older People's<br>Commissioning<br>Budget                     | Alzheimers Society  | £10,000                           |
| Older People's<br>Commissioning<br>Budget                     | Provision of respite for older people and their carers  | £182,435                          |
| Physical Disabilities<br>Commissioning<br>Budget              | Provision of respite for people with physical disabilities and their carers   | £59,100                           |
| Learning Disabilities   | Provision of respite for people with  | £84,480                           |

| Funding Source                                   | Organisation funded   | Value of<br>funding in<br>2009/10 |
|--|---|-----------------------------------|
| Commissioning<br>Budget                          | learning disabilities and their carers  |                                   |
| Mental Health<br>Commissioning<br>Budget         | Provision of respite for people with mental health issues and their carers  | £40,000                           |
| Older people's<br>Commissioning<br>Budget        | Day services – external providers   | £255,600                          |
| Physical Disabilities<br>Commissioning<br>Budget | Day services – external providers   | £74,000                           |
| Learning Disabilities<br>Commissioning<br>Budget | Day services internal and external  | £1,188,230                        |
| Mental Health<br>Commissioning<br>Budget         | Day services  | £46,500                           |
| Older People's<br>Provider Budget                | Provision of day opportunities for older people, providing respite to carers; including day services and drop-ins | £1,748,000                        |

#### 3.2 Value for money

The organisations who are commissioned to provide services to carers are monitored quarterly through ACCS's Governance and Partnerships Team on behalf of the Well-being Partnership Board. This includes robust monitoring of outcomes for users of services, both quantity and quality, as well as reviewing whether the service(s) provide value for money. The Council's internal audit department has also in late 2009, completed a comprehensive audit of a sample of organisations receiving Area Based Grant funding. The outcomes of these audits have yet to be published.

Services are also monitored by Contracts officers, with quarterly monitoring returns required for all organisations where there is a contract in place. The current commissioned services with internal and external organisations have now been in place for a number of years (beginning in 1999/2000). All funding was agreed at Procurement Committee in November 2008 until 31<sup>st</sup> March 2011.

In terms of external organisations (as has been highlighted through this Scrutiny Review process), there are high levels of satisfaction with the main external organisations who provide services to carers, and we have much evidence of positive experiences of our Inhouse provision, such as at The Grange and The

Haven Day Opportunities Centres for Older People. The latter was a finalist in the National WOW awards in September 2009.

In 2009, we were a pilot site for the new style Department of Health Carers' Outcomes Survey – see appendix 2 for summary. A larger survey has recently been completed with the results and analysis expected to be available within the next four weeks.

#### 3.3 Activity information

The key performance indicator for carers is NI 135 – defined as 'Carers receiving needs assessment or review and a specific carer's service, or advice and information'. This indicator came into effect on 1<sup>st</sup> April 2008, and the Haringey Strategic Partnership agreed it as one of our 35 local area agreement targets for the period 2008-2011, indicating our clear commitment to carers in Haringey across the statutory and voluntary sectors.

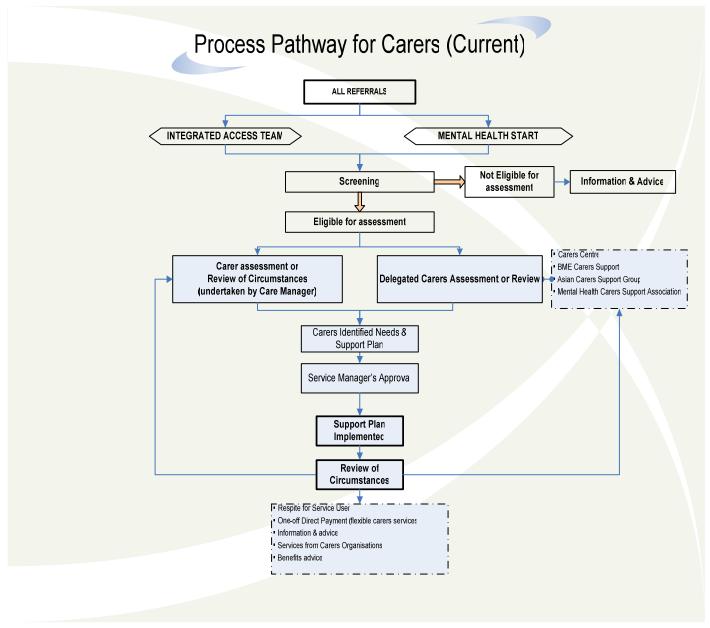
The table below gives an outline of the adult social care activity in regards to carers' assessments and services provided:

| Type of service   | 2009/10 (year to date – 31 <sup>st</sup><br>December 2009) |
|---|--|
| Carers assessments completed  | 897  |
| Outcome of assessments  |  |
| Number of carers who received information and advice only   | 276  |
| Number of carers who received a service   | 793  |
| Services offered *  |  |
| One of direct payments (flexible carers services)   | 604  |
| Other direct payments (respite, homecare, sitting service)  | 72   |
| Respite   | 132  |
| Other services that benefit the carer – care for person receives services eg homecare or day care | 223  |
| Total services received   | 1031   |

\* Services offered will not add up to total number of assessments completed as many carers receive more than one 'service' as a result of their assessment

Prepared by Barbara Nicholls Head of Commissioning

Appendix 1 – Process for carers assessments in Adult Social Care



## Appendix 2 - Department of Health Pilot Carers Survey – Summer 2009

#### What the survey is and how it was carried out?

Adult Services volunteered to take part in a pilot survey for the Department of Health (DH) earlier this year. DH wanted to test and improve a postal survey which it will carry out in 2010 with *all* carers providing unpaid support to vulnerable adults who have received an assessment of their needs from Adult Services. The survey aims to assess the outcomes of carers' service and the impact the Council has in improving carers' well-being through its support. The questions asked were about carers' perception of the services they receive and how these services have contributed to their overall well-being. We saw the pilot as an opportunity to quality check outcomes and quality of assessment for carers.

150 carers who have been assessed since April 2008 were selected using DH techniques for picking random samples. Translated surveys were provided when required, at the carer's request and support was offered in completing the survey if a disability/ language need required it. Out of the 150 surveys sent out, we had 52 responses.

#### Results of the survey

Responses to the survey have been sent to DH. Results have been circulated within ACCS and to partner organisations and are being used to improve our services and response to carers as part of the implementation of the Haringey Carers Strategy.

A summary of some of the questions and responses is outlined below:

#### Overall how satisfied are you with help from Social Services in the past year?

- 27% of carers were very satisfied
- 27% of carers were fairly satisfied

Has it been easy or difficult to get the services or support the person you care for needs in the past year? The services may be provided by different organisations, such as by a voluntary organisation, private agency or Social Services.

- 16% of carers said it was very easy
- 36% of carers said it was quite easy

In the past year, how do you feel about the level of contact you had with the care manager or social worker that works with the person for whom you care?

- 27% of carers felt the level of contact should be increased a little
- 35% of carers felt the level of contact is about right.

This page is intentionally left blank