

Caring for our Carers – the next five years



Bracknell-Forest All Age Integrated Carers
Strategy 2024-2029

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To be completed

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Foreword (to be completed)

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Executive Summary

The All-Age Integrated Carers Strategy will provide direction on how together, with our partners in health and the voluntary and community sector, we support carers over the next five years.

Our collective vision is to enable all carers in Bracknell Forest, children, young people and adults, to be able to access the support they need and to be recognised and valued in their community.

The care that people provide within our communities is a valuable asset; according to the Social Market Foundation (SMF) on average family carers provide 19.5 hours per week of care and there is an estimated 149 million hours of care a week being provided by family carers in the United Kingdom¹. If these carers were no longer able to provide care, society would need to hire an extra 4 million full time care-givers. Locally 8,770 people in Bracknell-Forest identified themselves as a carer in the 2021 Census (and this is expected to be higher given that many people do not relate to being carers). There are more carers in the 50-59 age category than any other group, these are carers currently of working age and there are more young carers/young adult carers aged 5-29 years than there are carers over 75.

Of the 8,770 residents who identify as carers only 13% are known to or receive support from Bracknell-Forest Council. The Council values the role of carers and acknowledges that if it was not for carers, the impact on the social care would be immeasurable both in terms of staffing and financially. According to a recent report by the Department of Health and ADASS² there is a net saving of almost £5.00 to Local Authority social care budgets for every £1.00 that is spent on carers support. If the numbers from the SMF were applied, this could equate to 171,015 hours being delivered per week by the 8,770 carers in the borough.

There are 2,413 Bracknell-Forest residents aged 5 and over who provide 50 hours or more unpaid care per week. A 2023 survey by Carers Trust found that 51 per cent of young and young adult carers care for 20-49 hours each week³. Therefore we must ensure that carers of all ages have access to the support they need when they need it.

The work Bracknell-Forest Council do for carers is governed by policies and legislation such as The Care Act 2014⁴, Children and Families Act 2014⁵ and the Carers Action Plan 2018-

Key Findings:

- 8,770 people in Bracknell Forest are carers
- There are more carers aged 50-59 than any other group
- There are more carers aged 5-29 than over 75 years
- 18–24-year-olds are not connected to services

¹ [Family carers propping up the care system – and paying the price - Social Market Foundation. \(smf.co.uk\)](https://www.smf.co.uk/family-carers-propping-up-the-care-system-and-paying-the-price)

² Economic Case for Local Investment for Carers Support [Economic case for investment in carer support \(local.gov.uk\)](https://www.local.gov.uk/economic-case-for-investment-in-carer-support)

³ [being-a-young-carer-is-not-a-choice-its-just-what-we-do-final-uk-report-english\).pdf \(carers.org\)](https://www.carers.org/being-a-young-carer-is-not-a-choice-its-just-what-we-do-final-uk-report-english.pdf)

⁴ [Care Act 2014 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2014/26)

⁵ [Children and Families Act 2014 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2014/6)

2020: Supporting carers today⁶. This strategy sets out our vision and strategic priorities for carers and young carers over the next five years. It details our approach to successfully achieving our ambition whilst making sure people realise the desired outcomes that are important and personal to them.

Purpose of the strategy

The Carers Strategy will support us in achieving our key objectives as determined in the Council Plan.

A key objective is to ensure that Bracknell Forest stays prosperous and remains a good place to live, work and play.

We will work with other organisations to deliver good quality local services in a joined-up way, focusing on individuals' needs.

Bracknell Forest is a place where diversity and cultural heritage are recognised as a strength. We will encourage vibrant local groups and work to ensure everyone feels connected and able to actively participate.

The Council priorities reflected in the Carers Strategy are:

- To ensure early help is available for our most vulnerable residents to keep them safe and to help them remain independent, whilst avoiding loneliness and isolation.

The Carers Strategy will support the following BF Place Health and Care Plan 2022-2025 priority areas:

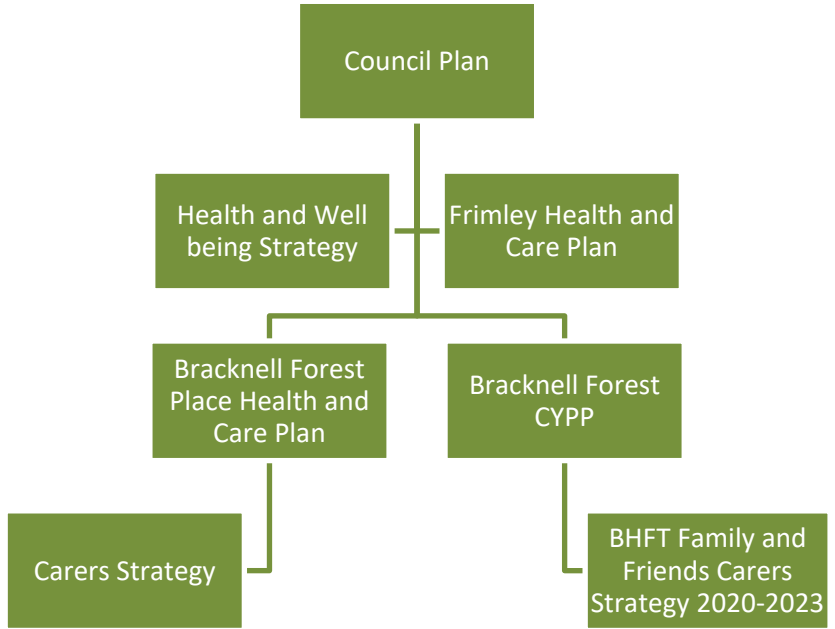
- Thriving communities – People are empowered to stay well and feel connected to their community.
- Strength and Asset-based approaches – People are equal partners in building on their own strengths and those of their own social and support systems.
- Unpaid carers - are supported to achieve their own aspirations as well as help in their caring role.

Our ambition is for Bracknell Forest to be a place which recognises and values carers, supporting them to feel safe and actively able to participate in the community.

This strategy is for all carers, young carers and adult carers living in Bracknell Forest. The strategy is linked to a number of other Bracknell Forest strategies and priorities and should be read in conjunction with our Health & Wellbeing Strategy 2022-2026, Frimley Health and Care Plan 2022-2025, Bracknell Forest Place Health and Care Plan 2022-2025, Bracknell Forest Children and Young People's Partnership Plan 2022-2025 (refresh) and Berkshire Healthcare Family and Friends Carers Strategy. In addition it is also informed by our Joint Strategic Needs Assessment (JSNA).

⁶ [Carers action plan 2018 to 2020 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/681212/carers-action-plan-2018-to-2020.pdf)

JSNA



The strategy builds on our successes in meeting the needs of some of our most vulnerable people in our community and identifying gaps and opportunities to develop services. Delivering our carers strategy will be a collaborative approach which will involve Adults and Children’s Services working together with our carers representatives, Health, VCS and independent care providers to deliver the best outcomes possible for our carers.

Current context

Highlights and Key Successes

There are now almost 200 young carers registered with our young carers service. All young carers are offered an assessment of need and are signposted to support. Bracknell Forest commission a weekly youth group which is facilitated by The Wayz for young carers aged 11+, in addition to this there is a 10-week rolling art programme for up to 20 young carers at South Hill Park.

Bracknell Forest Council commissions SIGNAL4 carers to provide information, advice and support for adult carers living in Bracknell. This can include carers groups, signposting, and welfare calls. As at September 2022, 742 carers were registered with this service.

The Dementia Carers coffee morning has gained such popularity that they have recently had to change venues to be able to accommodate everyone. There are now up to 50 carers and their loved ones who attend this weekly event. It is a great place to socialise as well as find out information from the dementia advisory service who run these sessions.

2022 saw the re-establishment of the Learning Disability Partnership Board (LDPB). The purpose of the board is to bring together people with Learning Disabilities and their representatives who are committed to working together to make the lives of people with a Learning Disability and Autism in Bracknell Forest better.

The Community Mental Health Team (CMHT) initiated a carers group specifically for carers of people with mental health issues. The group agenda is very much led by the carers themselves and there is a structure which includes guest speakers providing information and education around mental health issues. This has been able to happen as a result of a dedicated carers lead in CMHT. The carers also meet outside this group more informally without the CMHT carers lead.

A dedicated carers lead for Berkshire Health Foundation Trust has been instrumental in the working partnership with our colleagues in health to establish an integrated strategy for carers.

Background

Who is a Carer?

A carer is someone who helps another person who needs support due to illness, age, disability, substance misuse or mental health problems. Adults, Children and Young People can be carers. Carers may support someone with personal care, household tasks, finances, or emotional support. This is not the same as someone who is paid to provide care professionally or care from a VCS organisation.



We may all become a carer at any given time, sometimes this is for a short period of time, for example to support a family member recuperate following hospital

discharge or we may be a carer on a long-term basis. The Covid-19 pandemic saw many more people become carers for the first time due to the impact of long Covid, which has seen many people debilitated for months, sometimes years, after catching the virus. Sufferers have reported ongoing extreme fatigue, shortness of breath, muscle ache and difficulty concentrating. The greatest prevalence of long Covid has been in people aged 35-69 years the highest incidence in females. As at July 2022 an estimated 2.0 million people were living with long Covid in the UK. 22% (429,000) had been living with this condition for at least two years.⁷

Some carers will care for more than one person, for example an elderly parent and a child with a disability, this is called 'sandwich' caring. There are also complex situations where carers, particularly older couples, care for each other. This can happen, for example when one person may have a physical disability whilst the other needs emotional support, this is called 'mutual caring'.

Methodology

This strategy and priorities have been co-produced with our partners in health, our providers in the Voluntary and Community Sector (VCS) and carers from:

- Berkshire Health Foundation Trust
- Frimley Integrated Care System/Integrated Care Board
- Primary Care Network
- Signal4 Carers/The Ark
- Parent Carer Forum
- Promise Inclusion
- New Hope
- The Wayz
- The Community and Mental Health Team
- Dementia Service

The strategic group initially met monthly to scope out the plan of work, determine what should be included in the survey questions, share intelligence, and agree roles. When data started to be collected, we met more frequently (fortnightly). All meetings were hybrid to enable access to as many people as possible. Times and days were varied also for this reason. In between meetings documents were circulated for discussion.

We visited a number of carers groups during the day and evening time and spoke to 150 adult and young carers. In addition to this we consulted with carers via a survey, facilitated a young carers workshop in school and a focus group.

The survey was directly sent to 728 adult carers, 275 completed surveys were returned this is a response rate of 37%. The survey was also sent to 242 parent carers and 194 parents of young carers. It was promoted widely via all members of the steering group, provider groups, community engagement team and newsletters. Bracknell Forest's social media platforms and schools advertised it widely in an attempt to reach carers not known to the Council or

⁷ Prevalence of ongoing symptoms following coronavirus (Covid-19) infection in the UK:1 September 2022

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/bulletins/prevalenceofongoingsymptomsfollowingcoronaviruscovid19infectionintheuk/1september2022#:~:text=An%20estimated%202.0%20million%20people,31%20July%202022%3B%20from%20this>

engaged with any of the VCS. The Council also included a question about carers in its' annual staff survey. 37% of employees said they looked after or supported friends, neighbours or family who had long term health conditions, physical/mental disability or due to old age and frailty.

National Context

It is widely recognised that the Covid-19 pandemic had a disproportionately negative impact on the lives of unpaid carers⁸. Carers UK estimate that there are around 10.6 million carers in the UK today, this means 1 in 5 adults are providing care. Carers support was valued at £530 million per day during the pandemic (£193 billion a full year) this exceeds the value of the NHS.

However, there is often high personal cost to the carer. Carers widely report the negative impact that caring has on their relationships as well as experiencing poorer mental and physical health than their peers without caring responsibilities. The cost-of-living crisis has seen carers face unprecedented pressure on their finances. According to Carers UK 77% of carers who responded to their survey stated the rising cost of living is a significant challenge, especially when you are caring for someone who needs to be kept warm. This worry is also contributing to poorer mental and physical health.

Women are still most likely to be providing care, supporting working carers is essential to ensure female carers can live a life free from poverty in older age. It is important that employers recognise the difficulties in juggling work and care⁹. The Carers Leave Bill passed its' second reading in the House of Commons in November 2022, this proposed new legislation would give all working carers an additional week leave per year. Currently this would be unpaid. The next step would be to seek paid leave.

Carers can come from all sections of our communities, which can present additional challenges due to cultural backgrounds or communities or the nature of their relationship:

- Parent carers are parents of children and young people up to the age of 25 who could not manage without their care and support due to having a mental or physical disability, mental health or substance misuse problem
- Sandwich carers when you're caring for elderly relatives as well as young children
- Carers from Gypsy Roma and Traveller communities
- Carers from Black, Asian and Minority Ethnic communities
- Carers from LGBTQ+ community.
- Carers from refugee communities (e.g. our growing Ukrainian community)

Carers look after people with a whole range of conditions such as autism, dementia, mental health issues, substance abuse and alcohol issues as well as those that have additional physical needs or those who are frail and elderly.

⁸ Coronavirus and the Social Impact on Unpaid Carers in Great Britain: April 2022 <https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/socialcare/articles/coronavirusandthesocialimpactsonunpaidcarersingreatbritain/april2021>

⁹ State of Caring 2022. A snapshot of unpaid carer in the UK: November 2022 <https://www.carersuk.org/professionals/policy/policy-library/state-of-caring-2022-report>

Young Carers and Young Adult Carers

According to the Children's Society there are approximately 800,000 young carers in the UK¹⁰. The Children and Families Act 2014 amended the Children Act to make it easier for young carers to get an assessment of their needs and to introduce 'whole family' approaches to assessment and support. Local authorities must offer an assessment where it appears that a child is involved in providing care. A 'young carer' is defined as 'a person under 18 who provides or intends to provide care for another person'.

On a national level, in recent years there has been a significant drive to raise the profile of young carers within our communities. Recognition of the value and importance of the caring role has been reflected in government legislation and policies. The Children's Commissioner launched the Big Ask Children's Survey in 2021¹¹. In March 2022 it reached out to 6000 young carers who were receiving support across the country to ask them about the impact caring had on their childhood lives, 25% reported mental health difficulties, this compared to 20% reported by children without caring responsibilities. This increased as young carers got older with 47% of 16–17-year-olds reporting mental health difficulties. Core20PLUS5 is a national NHS England approach to support the reduction of health inequalities. The approach defines a target population cohort (the most deprived 20% of the population) and identifies '5' focus clinical areas requiring accelerated improvement. This includes improving access rates to children and young people's mental health services for 0–17-year-olds. Young carers are included in the PLUS population groups as warranting specific consideration.

According to the Children's Society 27% of young carers aged 11-17 regularly miss school, yet 39% of young carers are not known to schools. From 2023 there will be a requirement by the Department of Education for schools to include young carers in their annual Census returns¹². This means that local schools will have far more intelligence as to the number of young carers they are working with and will be looking at ways that support can be offered to them.

It is therefore critical that young carers are supported during their transition from childhood to adulthood. The Care Act 2014 and the Children and Families Act 2014 places a statutory responsibility on local authorities to assess young carers before they turn 18. Where a young carer is caring for a child rather than an adult (e.g. sibling) when they approach 18, they will be eligible for assessment and support under section 1(2) of the Carers (Recognition and Services) Act 1995.

All young carers should be offered a transition assessment whether they, or the people they care for, receive services or not. Young Adult Carers (carers aged 18-24) are a section of

¹⁰ Young Carer Facts (2022) The Children's Society <https://www.childrensociety.org.uk/what-we-do/our-work/supporting-young-carers/facts-about-young-carers>

¹¹ The Big Ask (2022) <https://www.childrenscommissioner.gov.uk/2022/03/16/the-big-ask-voices-shining-a-light-on-young-carers/#:~:text=approximately%20800%2C000%20young%20carers%20in%20the%20UK%20Caring, person%E2%80%99s%20ability%20to%20do%20their%20best%20at%20school.>

¹² People at the Heart of Care: Adult Social Care Reform White Paper (2021) https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1061870/people-at-the-heart-of-care-asc-reform-accessible-with-correction-slip.pdf

the community that need specialist help. It can be quite overwhelming trying to navigate your way through college, university, employment whilst transitioning from school and caring.¹³

The Local Picture

Whilst people who have an eligible care need may be receiving formal support, in many cases this will be supplemented and enhanced by an unpaid carer and from the VCS to stop people from deteriorating. It is important to note:

- In 2021/22 1,247 people received care and support provided by Bracknell Forest throughout the year
- Most people (864) received care and support in their own home with around 383 people receiving care via residential and nursing facilities
- 61% of all people were aged 65 and over, and this has been lower than in recent years (64% in 2020/21 and 62% in 2019/20)
- For 18-64 year olds the majority have a learning disability support need and for 65 and over the majority require physical support

Between the last two censuses (held in 2011 and 2021), the population of Bracknell Forest increased by 10.1%, from around 113,200 in 2011 to around 124,600 in 2021. This is higher than the overall increase for England (6.6%), where the population grew by nearly 3.5 million to 56,489,800.

The number of people who identified as an unpaid carer in the Census of 2021 was 8,770 or 7% of the population. This is a decrease from those that identified as an unpaid carer in the Census of 2011.

Carers 2011 9,674 or 8.51% of the population

Carers 2021 8,770 or 7% of the population

According to the Office of National Statistics there could be a number of reasons for this decrease:

- Coronavirus guidance on reducing travel and limiting visits to people from other households
- Unpaid carers who previously shared caring responsibilities may have taken on all aspects of unpaid care because of rules on household mixing during the coronavirus pandemic
- There were a higher number of deaths than expected in the older population at the beginning of 2021 due to coronavirus (COVID-19) and other causes; this could have led to a reduction in the need for unpaid care
- Changes in the question wording between 2011 and 2021 may have had an impact on the number of people who self-reported as unpaid carers

Therefore, it is advised when planning services to ensure that local knowledge is also captured from providers and professionals currently supporting carers as well as listening to the carer communities and their experiences.

Of these 330 were aged 5-17 or under and 245 were aged 18-24. There are 1,795 carers over the age of 65, this is predicted to rise by 30% by 2030 and the number of carers over 80 will rise by 44%¹⁴.

¹³ <https://www.actionforcarers.org.uk/who-we-help/young-adult-carers-18-24/what-you-need-to-know/>

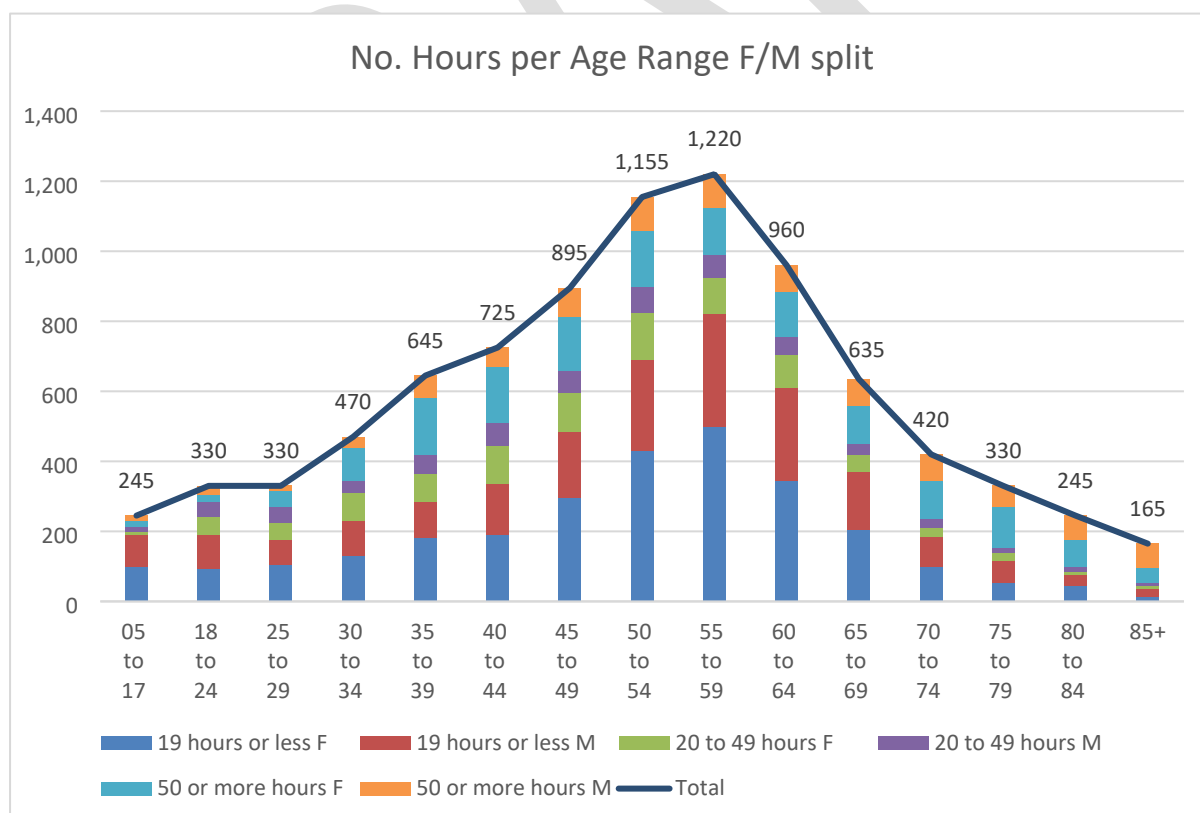
¹⁴ Projecting Older People Population Information System (poppi.org.uk)

In 2021, 4.2% of Bracknell Forest residents (aged five years and over) reported providing up to 19 hours of unpaid care each week. This figure decreased from 6.7% in 2011. These are age-standardised proportions. 1.3% of residents (aged five years and over) reported providing between 20 and 49 hours of unpaid care each week, compared with 1.1% in 2011. The proportion of Bracknell Forest residents (aged five years and over) that provided at least 50 hours of weekly unpaid care increased from 2.0% to 2.2%. The decrease in carers providing up to 19 hours of unpaid care each week was reflected across the South East and also the national picture in England

Number of hours of unpaid care in Bracknell-Forest Census 2021	Residents
Provides 9 hours or less unpaid care a week	3628
Provides 10 to 19 hours of unpaid care a week	1174
Provides 20 to 34 hours unpaid care a week	710
Provides 35 49 hours unpaid care a week	845
Provides 50 or more hours unpaid care a week	2413
Total number of residents 5 years + in Bracknell	8770

The graph below indicates:

- The highest number of carers are in the age category 55-64 and 45-54 respectively (working age).
- Spending 19 hours or less caring is the most common range of hours spent caring.
- The majority of carers are female.
- There are more carers aged 5-29 than there are carers aged 75+.

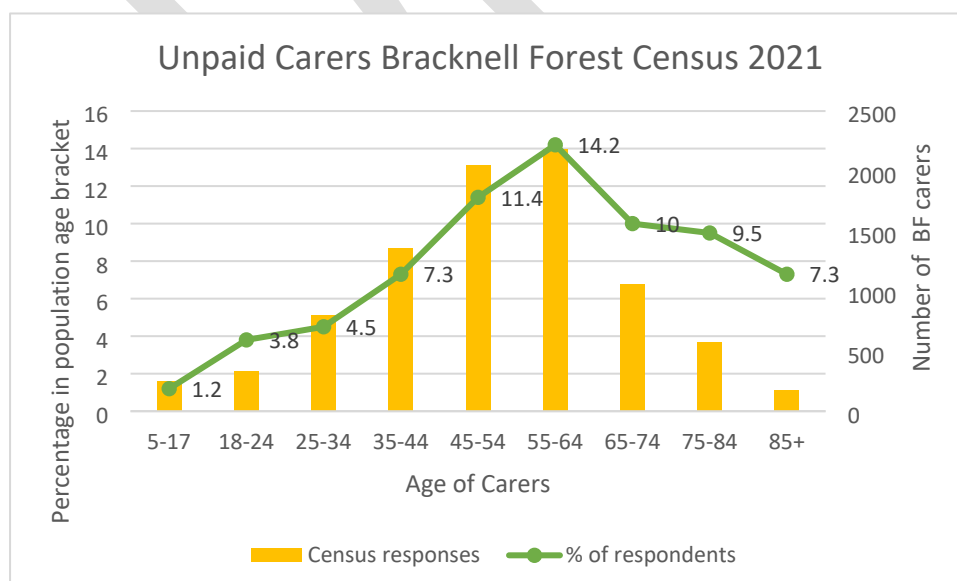
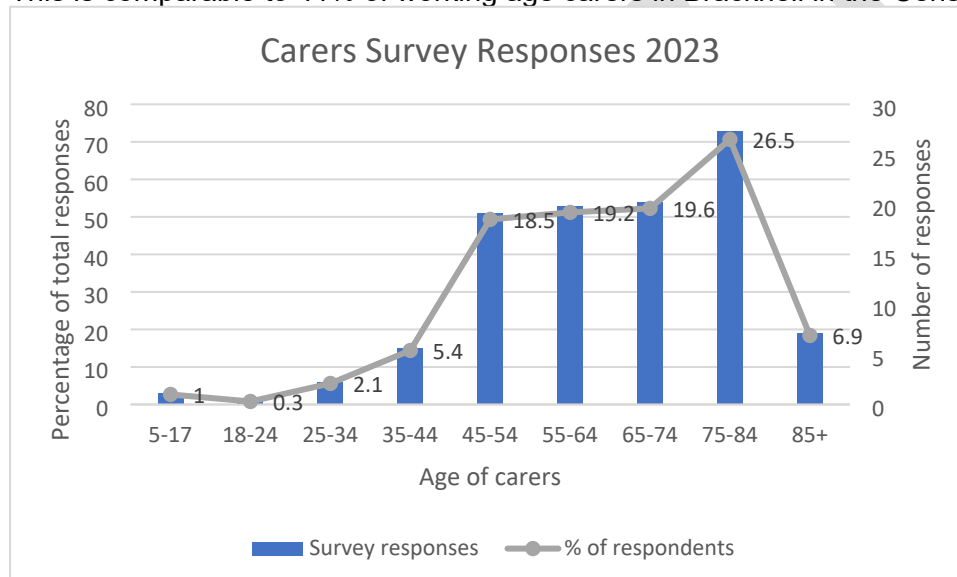


When planning future services, we need to be mindful that the largest cohort of carers are currently of working age and are relatively independent. In 10 years' time this will change as this group ages.

In our survey returns the 65-74 age group and 75-84 age groups are disproportionately represented in comparison to the census data. This could be because older people and elderly carers have higher needs so tend to receive most support therefore this age group has a higher prevalence on our databases and mailing lists as they are known to adult social care and our care providers.

Young carers are underrepresented in our survey, 18-24 representation is absent, and 25-34 and 35-44 representation is lower than anticipated.

37% of staff in our recent staff survey reported having a caring role. This is comparable to 41% of working age carers in Bracknell in the Census data.



The future design of carer services must take into account the likely needs of the residents that will be cared for and supported by carers. The Bracknell Forest Joint Strategic Needs Assessment (JSNA) highlights the main indicators of health needs amongst Bracknell Forest's population.

Of the 8,770 unpaid carers in Bracknell Forest there are currently as many as 7,355 who are of working age. The evidence suggests that whilst many of these carers are currently self-supporting, they have difficulty in accessing help for themselves. We must look at different ways of addressing their support needs including the use of technology. It is crucial that carers are supported to be able to provide appropriate care and support, whilst at the same time ensuring that their own health does not suffer.

The Survey of Adult Carers in England (SACE) is sent out by local authorities every other year to all adult carers aged 18 years and over, who are looking after someone with an eligible need or they themselves have an eligible need as determined by the Care Act 2014 and are in receipt of services. The survey seeks the opinions of carers aged 18 or over, caring for a person aged 18 or over, on a number of topics that are considered to be indicative of a balanced life alongside their unpaid caring role.

In 2021-2022, 43% of known carers in Bracknell Forest responded to this survey, 67% were female and 33% were male.

Each respondent is assigned a score based on their answers to six questions. The higher the overall score the better the average social care related Quality of Life (QoL). The maximum score is 12.

	21-22UK	21-22SE	21-22BFC
Quality of life	7.3	7.3	7.5

The overall QoL score for Bracknell Forest was 7.5, this is slightly higher than the overall score for the South East and for England. However, of those carers who received services 36.6% were extremely satisfied or very satisfied, this compares less favourably with the England average of 38.2% but higher than the average for the South East.

	21-22UK	21-22SE	21-22BFC
Satisfaction with services	38.2	33.7	36.6

Stress because of caring	63.6	59.4	59.4
Negative financial impact	42.9	44	45.2

A detailed analysis of our carers needs can be found in Appendix 1. Bracknell Forest Council Carers Population Profile and through the Bracknell-Forest JSNA.

Funding and Current Carer Support

There are a number of initiatives that support carers within Bracknell Forest, some are funded through the Better Care Fund, the shared resource between health and the local authority, or are collaborative projects with our partners in health:

- A carers support service for adult carers over the age of 18, providing carers with information and advice, access to local carers groups and signposting to services.
- Adult Social Care can provide a range of support to carers if they or the person they look after have been identified as having an eligible need.
- Specialist carers support available from our Dementia Services Advisers, who offer a directory of services and run a carers support group.
- The Community and Mental Health Team provide support for carers and facilitate a carers support group.
- Bracknell Forest's Drug and Alcohol Action Team (DAAT) offer a carers programme through their service, New Hope.

Berkshire Healthcare NHS Foundation Trust has a Friends, Family and Carers Charter which sets out their pledge to promote a culture of supporting and working in partnership with carers. The Trust identifies carers working with services and engages with carers to make them feel supported, valued and informed. Involving carers enables the Trust to learn from their experiences; ensure carers understand their rights; help carers maintain their own personal health and wellbeing and connect them to local support across health and social care services or voluntary sector partners.

Frimley Health Foundation Trust are working with the local carers support providers in the South to train up hospital volunteers and staff to provide hospital carers support across the FHFT sites. This, together with the Frimley Health Foundation Trust Carers Information booklet and badge for carers, will make it easier to access hospital services, be signposted to other services and help staff to identify people who are carers within the hospital environment. This will ensure any carers coming to the hospital will be signposted to local support regardless of post code.

All carers can request a Carers Assessment, and all carers over the age of 18 who may care for another adult may receive a one-off annual carers payment (if it has been determined that either they or their loved one has an eligible need) to help them with their own personal

health and well-being. Carers (including parents who look after children under the age of 18) may also be able to get respite, a short break from their caring duties. This could be in the form of day services for their loved one or residential care for their loved one. Support is also provided by our specialist Stroke Support Service which we jointly commission with our partners in East Berkshire.

2021/2022:

Direct payments to carers	£80,990.00
Carers Support Service	£80,000.00
Stroke Support Service	£41,200.00

1247 people received long term care and support from Bracknell Forest Council for a range of conditions both physical and mental. This support can take place in a variety of ways and locations and includes nursing and residential placements as well as community care which can include day services. Some of this care may provide short term or long-term respite for carers.

There is a 28 hour per week post which is split between two specialist support workers who work with our young carers, assessing their needs, ensuring the level of care that they undertake is appropriate to their age and signposting to young carers youth support. Promise Inclusion run a young carers group for siblings of children who have a learning disability. This is available for any young carer under the age of 13. In addition to this we have a service level agreement with Berkshire Youth who run a young carers support group which delivered by The Wayz from our Youth Centre. A rolling arts programme from South Hill Park for young carers aged 11-17 is also available for up to 20 young carers.

What our research told us

A survey was sent to all carers that are known to Bracknell Forest Council, this included adult carers, parent carers and young carers. 275 carers responded to this survey. The highest response rate was from the 75-84 age group, 26.55% whilst the 45-74 age group averaged a 19% response rate. The lowest response rate was from 5–24-year-olds. We recognised that a survey for this age group was not the best approach therefore we also arranged a focus group in school for this age group. Young carers are not always able to articulate their needs. There is an unfamiliarity in being asked to think about themselves first.

The ethnicity of the majority of those who responded to our survey was 'White'. 7% of carers who responded described their ethnicity as anything other than white compared to 9% in the Census 2021. There was only one response from a carer in the 18-24 age group, although we are aware there are many more than this. According to the Census 2021 there were 133 young carers aged 15 years and younger living in Bracknell Forest. This is probably a conservative estimate as the Census will be completed by the parents of young carers. The Census also revealed that there were 259 young adult carers aged between 16-24 years of age.

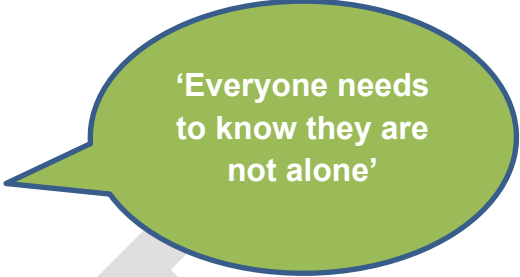
Young Carers do not transition to adult services in a planned or supported way, when young carers reach 18 they often find themselves without any support and we lose contact with them. Young carers are not being offered a transition assessment. There are currently no services in place to support this age group. Adult carers services are not equipped to work with this age group, although efforts have been made, the offer needs to be appropriate for

this cohort. The Community Mental Health Team and the NHS both recognise this and run programmes for 18-35 and 18–24-year-olds respectively which have been successful.

The data was analysed and compared with the information that we held from the SACE, the Census 2021 data, and what carers and professionals had shared with us in the numerous carers groups we had engaged with.

We asked: What is your most valuable support as a carer?

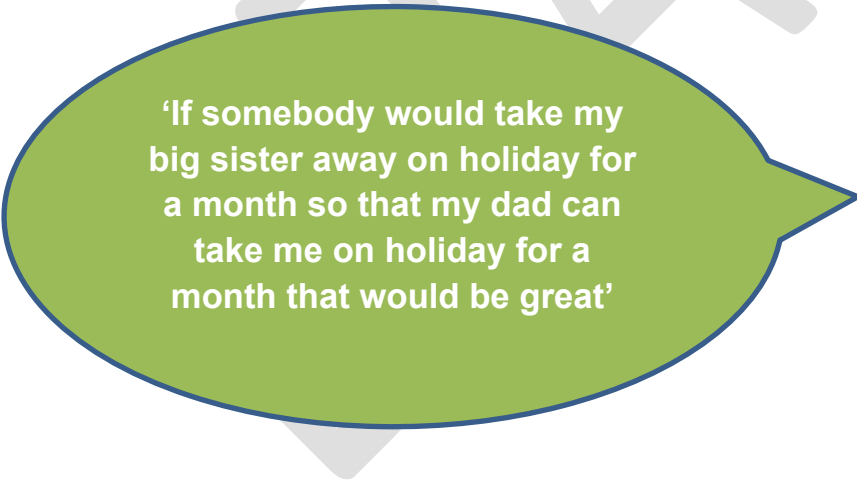
Carers said: Support groups and having someone to talk to was particularly valuable. This feeling was shared by all carers, both young and elderly. Carers said they liked being able to engage with activities, whether by themselves or with their loved ones but felt that they would like to see more physical or sporting activities. Young carers felt they missed out on opportunities to socialise, current activities being prohibitive due to either cost or location. Many young carers are from families on low incomes who do not drive. Young carers said they would value having support groups ('check-in's) at school. They noted that there was far more support for them at primary school than at secondary school.



'Everyone needs to know they are not alone'

Assistive Technology was also cited as being of support to carers, this term covers such a wide range of things from alarm pendants to phone apps and so much more in-between that this is something we will be exploring more deeply in our new Assistive Technology Strategy.

Respite was also noted as being of great support, however carers can struggle to be able to use this as they can only book respite for their loved one 2 weeks before they go away, this



'If somebody would take my big sister away on holiday for a month so that my dad can take me on holiday for a month that would be great'

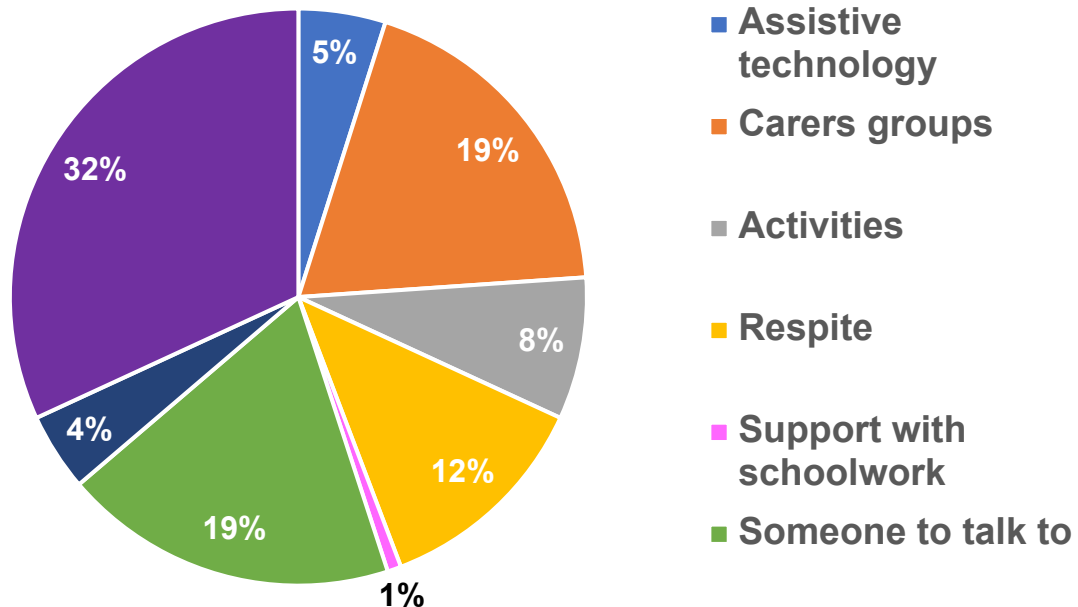
limits any holiday options. They also have to book a 2-week period of respite when they may just want to go away for a few days. Families are often prevented from going on holiday/doing activities with their child/children due to the needs of other people/children they care for in their families

32% of carers who responded stated 'other', this was predominantly the NHS, Dementia Care Advisors and Bracknell Forest Council.

Top 2 suggestions for groups:

1. Sport, physical activity (low to high impact).
2. Timings group activities at the weekends and in the evenings for working carers. (Appendix 1: p8, Q10)

Most valuable support as a carer



We asked: What are the main challenges as a carer?

Carers said: One of the biggest challenges carers reported was being able to know where to go to find out information. Whether this was general information around support for carers or information to help carers understand more about the condition that their loved one may be experiencing. 75% of our carers responded to our survey on-line and 35.7% gave email as their preferred method of communication, however even carers who are IT literate have difficulty navigating their way round some of the websites citing that they are not user friendly. 15.8% said their preferred medium to receive information was by post. (Appendix 1: p9, Q11)

Transport was an issue for both those who drove and those who didn't, increasing fuel costs, lack of appropriate parking and own health issues (e.g. sight deterioration) impacted drivers whilst non-drivers found themselves isolated, not being able to access carers groups, activities or recreation and becoming house bound themselves. Many young carers live in households where there is no driver.

All adult carers, parent carers, reported mental and physical fatigue caused by caring responsibilities whilst working or looking after the home by themselves, lack of sleep and their own health needs which worsened as they got older themselves. Young carers also reported fatigue due to having disrupted sleep and having to juggle school and caring responsibilities.

'Sometimes I can't focus in school, you forget you have to do things like homework!'

Young carers reported being distracted from homework due to having to help with siblings. Those who had a sibling with a learning disability reported feeling lonely as they couldn't play in any way that was meaningful or fulfilling to them with their sibling. They also felt more isolated as having a profoundly disabled sibling meant that they were unable to go out to certain places as their sibling

couldn't go to and needed constant care. There was also an element of sadness that they didn't feel their sibling liked them and they were sometimes fearful as their sibling was violent towards them. Unlike adult carers, young carers wanted to remain anonymous to other school friends who weren't young carers as they felt a sense of embarrassment and did not want to be seen as different.

Worry about lack of income and what would happen to their loved ones if they were no longer able to care were key detrimental factors in carers' mental well-being. Young carers reported feeling alone with no support. More young carers than their peers without caring responsibilities struggle with mental health issues.

We asked about wellbeing

Top things stated as being most important for wellbeing:

Respite, this included just having some timeout during the day to take a break or rest as well as having a more substantial break from caring. One young carer shared that they enjoyed the half hour walk each day to school as it was the only time they got some space to themselves to think.

Being able to socialise with friends, family, Church, was extremely important to carers for their emotional wellbeing.

Having support such as someone to talk to or offload to was rated just as important as having someone to help with the physical tasks often required from carers.

Carers told us that having their own hobbies and interests were highly important for their physical and emotional wellbeing, they needed to feel more than just someone else's carer and be able to pursue activities and recreation for themselves both inside and outside of the home such as fitness. Carers were also concerned with healthy eating and were aware that the impact of caring had on this, additional responsibilities meaning less time to plan, shop, cook and ultimately eat a healthy diet.

And finally, we asked carers to tell us anything else that they felt was relevant to our new carers strategy

Carers said: Communication is key, they need clear facts about what is available to them as a carer. They needed to know what was on offer as when you are new to caring you do not know what to ask for. Information advice and guidance needed to be easily accessible, websites should be tested by end users and a carers booklet needs to be produced and made available to all carers as not everyone has access to the Internet.

Carers also suggested that there might be more help to navigate the systems, someone to work alongside them to show them the places they needed to look for information, the processes that they needed to undertake.

Adult carers felt they wanted to be recognised for what they did and the impact it can have on them. Working carers reported that attending health appointments for the person you cared for was extremely difficult as it meant them having to take time off of work, which wasn't always possible given the various jobs that they did, as most health appointments happen between 9-5pm. In contrast young carers did not wish to be recognised as young carers by their peers at school, there was a degree of embarrassment about being a young carer, they did not want to be seen as 'different'.

We had lots of positive feedback both from our survey and from the carers we spoke to, they thanked us for listening to them and both young and old emphasised the importance that we keep listening to them.

Guiding principles

Our Vision

Partners across Bracknell Forest value the vital contribution that carers make to their local communities and is committed to supporting those who need help to fulfil their caring role. Bracknell Forest Place want carers to have the support they need. This includes having the right information available at the right time, access to a life outside caring, full access to education and/or employment, leisure activities and being able to keep in touch with friends and family. This strategy sets out our vision and strategic priorities to support carers and identifies the actions we and our partner organisations will take to realise this, whilst acknowledging the context of a challenging budgetary position and growing demographic pressures.

Our vision is for all carers living in Bracknell Forest to be recognised and valued in their community, supported in achieving their own aspirations and helped in their caring role.

Our Priorities

A number of priorities were agreed after consulting widely with carers, VCS organisations and health and social care professionals. These priorities will form the key tenets on which our 'Carers Offer' will be developed and reflect some of the key themes inherent in the Carers Action Plan 2018-2020: Supporting carers today¹⁵ and People at the Heart of Care¹⁶ The Independent Review of Children's Social Care¹⁷ and The NHS Long Term Plan¹⁸

- 1. Recognising and Supporting Carers in the Wider Community**
- 2. Services and Support that work for Carers**
- 3. Employment and Financial Wellbeing**
- 4. Supporting Young Carers**
- 5. Young Adult Carers**

¹⁵ [Carers action plan 2018 to 2020 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/672222/carsers-action-plan-2018-to-2020.pdf)

¹⁶ [People at the Heart of Care: adult social care reform white paper - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/672222/people-at-the-heart-of-care-adult-social-care-reform-white-paper.pdf)

¹⁷ [Independent review of children's social care - final report \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/672222/independent-review-of-childrens-social-care-final-report.pdf)

¹⁸ [NHS Long Term Plan » Online version of the NHS Long Term Plan](https://www.nhs.uk/longtermplan)

Our aim is to work in partnership to develop services and systems that work for carers. Working in partnership with Voluntary and Community Sector organisations, and key health and social care professionals will ensure the success of this strategy. We will continue to listen to carers and work with them to make sure our systems (organisations and processes) work for them.

The strategic priorities are the values that will guide us to achieve our goals.



They are high level objectives



Each priority will address a number of areas of development



There will be a working group for each of the 5 priority areas



Although they are numbered, they are of equal importance and work will take place concurrently



An action plan will be developed to determine tasks needed to achieve our objectives



The progress of the strategy will be reported to the Health & Wellbeing Board and Place Committee

Our specific actions

Priorities and actions

Priority 1: Recognising and supporting carers in the wider community.

Why this is a priority: We recognise the value of what carers do in our community and want to support them. We know carers report difficulty in accessing information and advice, especially if they do not have access to the Internet. There is no comprehensive list, which details all carers support, held in one place that is up to date and accessible to all carers. Some carers are not able to access support groups due to transport issues or mobility issues. There are 8,775 people who identify as a carer in Bracknell Forest (Census 2021)

yet BFC currently works with 1,164, ethnic minorities are underrepresented. Many people who are in a caring role do not recognise themselves as such. They have no contact with services until they are in crisis. By making this a priority we will ensure that carers can access the information and advice that they need that will help them in their caring role

Actions:

- To undertake an audit of current services and a review of what information is currently available on the BFC website
- To refresh BFC Carers page on our website which will include a directory of carers services
- To develop an offer for carers, which is available in print as well as online
- To ensure Equality of Opportunity is considered within the services we deliver and commission
- To explore solutions to transport/mobility issues which prevent carers accessing support.
- To work collaboratively with the VCS in developing their substantial volunteer resources that could potentially provide befriending, disseminate information directly to carers
- To consider different approaches to reaching out to minority groups
- To explore options to increase our reach into the community

Priority 2: Services and Support that works for Carers

Why this is a priority: Recreation and being able to socialise with friends and family is important for carers. Carers value short breaks/sitting services or assistive technology which enable them to socialise, pursue their own interests, this isn't universally available. Carers groups are valued but a gap is physical activities/sport that carers can do with/without cared for. Respite needs to be easier to source to give carers and their families a break. 50% of carers have own health needs, yet they have no contingency plans, and GP appointments are difficult to access when you have caring responsibilities. Carers can feel overwhelmed, there are expectations that people possess the skills set necessary to care for someone. Many carers reported that they do not feel listened to, when the cared for is in crisis the needs of the carer are often ignored, there is no crisis team for carers. Carers do not feel included in decision making that will impact them. There is no support for parent/carers when the child transitions. Working collaboratively with partners we know we can improve the lives of our carers by ensuring the right support is available at the right time.

Actions:

- To ensure leisure/recreation opportunities are available for all carers
- To explore how volunteers can help carers reduce barriers so that carers have more access to social activities
- To develop an assistive technology strategy which includes how AT can be used to support carers

- To undertake a review of respite/short breaks
- To work with G.P.'s/ PCN leads in the recognition and providing pathways to carers support, including access to appointments
- To ensure carers have appropriate contingency plans in place
- To review education/training available for carers
- To work in partnership with the VCS to develop learning and training opportunities for carers
- To make sure the carers voice is heard and considered when looking at the new target operating model for social care
- To raise awareness that parent/carers are entitled to an assessment of their needs
- To focus on the challenges highlighted by the carer when undertaking a needs assessment e.g. carers that look after more than one individual have this reflected in any needs assessment

Priority 3: Employment and Financial Wellbeing

Why this is a priority: There are over 7,700 working age carers in Bracknell Forest. The 50-59 age ranges have the highest number of carers overall. 37% of staff at BFC identify as a carer. The majority of carers in Bracknell Forest are female, caring can have an impact on their career as well as the amount of pension that they receive when they retire as caring often means women have to work part time, therefore their NI contributions may not entitle them to a full state pension. Working carers struggle to take time off work to take their cared for to health appointments, they juggle working and caring. The Carers Leave Act 2023 which entitles all carers to 1-week additional unpaid leave, may support carers to stay in work. General support groups for carers operate during daytime (working) hours, and even some specialist support only offer online support groups in the evenings, which excludes those without access to the Internet. Working carers who must leave employment to care, face low-income levels. The cost-of-living crisis has had a significant impact on carers who have to run specialist electrical equipment, keep the heating on etc. in order to maintain the health and wellbeing of the person they care for. We want to promote financial equality and ensure nobody is disenfranchised because of being a carer, and support carers who wish to stay in work.

Actions:

- To work collaboratively with carers and our partners in the VCS to explore how carers can be supported to remain in employment
- To work with our partners in the VCS to ensure there is the right support at the right time for working carers
- To work with the VCS to help carers maximise their income through benefits/ grants that may be available to them
- To work with SE ADASS carers network and the VCS in supporting campaigns on paid leave for carers and promoting carers rights
- To work with G. P's/PCN leads and the ICB Carers Steering group to explore how the NHS can more effectively accommodate working carers to look after

their own health and wellbeing as established by the NHS Memorandum for carers ¹⁹

Priority 4: Supporting Young Carers

Why this is a priority: There are more carers in Bracknell Forest aged between 5 and 29 years old than there are carers aged 75+, yet there is very little on offer. Local authorities are required to undertake a young carers assessment on any child which is identified in a caring role. For the assessment to be meaningful there must be an offer of support. Young carers are often not identified until the family is in crisis. There are minimal referrals from Adult and Children's Social Care and the VCS. Schools identify young carers but do not consistently follow up with an assessment. Young carers workers are not able to access MOSIAC so are unaware if young carers referred to them are on a CPP or CIN (which some are).

Young carers feel alone with no support, they often find it difficult to articulate their needs or access information and advice. Many are from low-income families, some from families with no driver, and can be excluded from activities during school holidays (or outside school) due to prohibitive logistic and financial costs. Young carers often have their own health and wellbeing needs e.g. mental health issues. Some young carers reported not having breakfast before school as the focus is primarily on the needs of the people/children being cared for in the family.

There is a statutory duty on all local authorities to undertake a transition assessment prior to a young carers 18th birthday. There is no transition pathway for young carers in Bracknell Forest and there are no appropriate services for them to transition to. We want all young carers to be able to live safe and well and achieve their full potential.

Actions:

- To develop an offer for young carers
- To make information and advice accessible
- Mandatory training on recognising and assessing young carers across BFC social care teams (including recognition of siblings of children with a Learning Disability)
- To create a pathway between children's social care and early help to ensure young carer workers have access to relevant information
- To explore offering training on recognising and assessing young carers to schools, colleges and the VCS (needs to be seen as part of safeguarding)
- To ensure safeguarding is at the heart of our work with young carers and no young carer will provide inappropriate care. BFC will always provide care to prevent that from happening
- To identify methods of best practice for proactively engaging with young carers
- To review how current resources are best deployed
- To explore options with schools for drop-in sessions/space to talk, that support education & learning

¹⁹ NHS (2016) Commitment to Carers -improving health and wellbeing [NHS England » Commitment to Carers – improving carer health and wellbeing](#)

- To ensure young carers can access education and are not compromised because of caring responsibilities
- To reduce barriers to engaging in holiday activities
- To work with our partners in health to improve young carers mental health and wellbeing
- To develop a robust transitions pathway
- To develop a transitions assessment ensuring safeguarding is at the heart and it reflects the child's wishes and aspirations

Priority 5: Supporting Young Adult Carers

Why this is a priority:

In the absence of a robust transition pathway, we have negligible contact with young carers after their 18th birthday. 30 young carers turned 18 in 2022, we heard from one young adult carer in the 18-24 age range in our survey. When young carers are approaching adulthood, their details are passed to Elevate (who work with young people who are NEET) and our adult carers service.

There are no age-appropriate support groups for young adult carers in Bracknell Forest. Whilst in comparison any carer aged between 18-29 is identified as a 'young adult carer' by our partners in health and offered support which is accessible and appropriate for this age group. By making this a priority we will ensure that young adult carers receive the support they need to make informed decisions about their future and their caring role.

Actions:

- To develop provision for young adult carers aged between 18-29
- To explore examples of best practice how we can engage this group
- To ensure young carers who transition are recorded and keep records of young carers that turn 18

How we will measure success

This strategy has been co-produced with our partners in health, the voluntary and community sector and carers who have actively been a part of the Carers Strategy Steering Group. Going forward this group will be reformed into the Carers Partnership Group.

The information we have received from carers and other stakeholders will help inform the type of services we commission so that they reflect the current and future need that carers have within the community.

Just as this strategy has been co-produced, delivering the strategy will also require joint working, Adults and Children's Services working together with our Health, VCS and independent care providers to deliver the best outcomes possible for our carers.

To effectively monitor the strategy a detailed action plan will be developed which will run alongside it. This action plan will reflect the priorities which have been identified and determine how these will be met, and agreed timescales and responsibilities for ensuring actions have been achieved.

The 5 workstreams arising from the priorities will be driven forward by a Carers Partnership Group. They will monitor progress and provide quarterly reports to the Place Committee and the Health and Well Being Board who will have overall governance of this strategy.

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