



Reviewing and Developing Halton Carers Strategy

**Report of the
Consultation Event**

**Monday 3rd March 2008
Halton Stadium**

Get Heard

Introduction

The Consultation Event took place on Monday 3rd March 2008 at Halton Stadium and was designed to seek the views of local carers on Halton's Carers Strategy.

The main aims of the day were a) to review the current Carers Strategy document, running from 2006-8, and b) to propose ideas for incorporation into the new Carers Strategy for 2008-10.

The Carers Strategy defines a carer as follows:

“A carer is someone who cares, unpaid, for a relative or friend who is unable to manage on their own because of illness, disability or frailty. The majority are unpaid family carers. Carers can be any age and come from all walks of life and backgrounds.”

172 carers attended the Consultation Event. There were in addition 2 cared for people and 16 staff working closely with carers in the borough. Participants were allocated to tables and each table was asked to look at one of the aims of the Strategy:

- **Recognition** – to identify carers and encourage them to identify themselves.
- **Information** – to ensure that carers are provided with the information they need, in an appropriate and accessible form, to enable them to function as carers.

- **Emotional support and support services** – to ensure a full range of co-ordinated and flexible services and support are provided for, and planned, with carers in Halton.
- **Assessment and assessing carers' needs** – to ensure that carers are fully involved as partners in the assessment of the person for whom they care and are always offered their own assessment where appropriate.
- **Having a voice** – to ensure that carers are actively involved in the planning, development and evaluation of services.
- **Provide a break** – develop services that offer a break to local carers.
- **Support that helps carers care and maintain their own health** – support carers to care and to maintain their own health and well being by offering training, health promotion and personal development opportunities and is responsive to individual needs.
- **Young Carers** – develop ways of identifying and meeting the needs of young carers.
- **Parents of children with a disability** – to ensure parents of children with a disability are aware of their rights as carers and are receiving appropriate services.
- **Financial support/carers in employment** – provide welfare benefit advice to carers that request it. Employees who are carers will have access to support to help them at times of crisis/emergency.

During the morning session carers were asked to review the Carers Strategy 2006-8 and to consider the following questions:

- What has been achieved?
- What has worked well?
- What could have been done better?

During the afternoon session carers were asked to look ahead at developing the new Carers Strategy 2008-10 bearing in mind the following questions:

- What do carers want from the new Strategy?
- What more could be done to support carers?
- What might stand in the way?

The event was introduced by Audrey Williamson, Operational Director for Adults of Working Age, and Paul Boyce, Operational Director for Children and Young People, both of Halton Borough Council. The day was facilitated by an independent consultant, Dr Gary Kitchen, of Get Heard Consultancy.

The following report is based on transcription of comments from the flipchart sheets for each table supplemented by a digital recording of the feedback sessions throughout the day. The findings are presented in relevant sections below. In some cases, tables did not always use the framework of questions provided and this is reflected in the write-up.

Each carer attending the day received a £20 supermarket voucher as a small “thank you” for taking part. Halton Borough Council also organised a special bus service from Runcorn to ensure that carers travelling from south of the River Mersey were better able to participate in the event.

1. Recognition

Morning Session

- Carers need to be INVOLVED in plans made by professionals for the cared for person
- Doctors need to be persuaded to point carers in the right direction
- Should be put on people's medical records at their GP
- Work on raising carers' needs with health and social care staff and the community
- Look for hidden carers
- Needs communication with groups and regular meetings
- Ensure carers' needs are assessed and appropriate action taken quickly
- Receiving help and information from the Carers Centre
- When trips are organised for carers, if there is no provision for the person being cared for the CARER CANNOT GO
- Yet respite for carers is apparently closing
- Agencies need to communicate with each other and the carer
- Young carers – provide information at school, recognition for teachers and other staff. Use assemblies and inset days. Why not have a play about being a young carer?
- Elderly carers, aged over 65 – perhaps a separate Focus Group is required to discuss older carers and how their needs could be met?
- There could be a national publicity campaign.
- Other ideas for identifying carers through:
 - GP surgeries

“If there is no provision for the person being cared for the carer cannot go on trips.”

- Asda
 - Hospitals
 - Carers' stand during Disability Day
 - Carers' Bus
 - Leaflet drop
 - Advert/information in paper
 - Road shows
 - Library
 - Websites
- Need to increase the availability of counselling services and support for carers
 - Professionals working with carers need to understand how they can work together.

Afternoon Session

What do carers want from the new Strategy?

- More funding right across the board
- More relevant information at the right time
- More facilities with a central drop-in centre
- Consistency in assessment

What more could be done to support carers?

- More money may open up the right to choose what carers need and want
- Complimentary therapies and breaks – services that provide mental, emotional, physical and social uplift
- Awareness events
- Promote carers' groups
- Better awareness at school through video/play and literature

- Use libraries and shops to promote carers and give advice and guidance
- Use local press/TV/ Radio/ Internet
- Questionnaire across the borough

What might stand in the way?

- Lack of funding
- Pride, not wanting to ask
- Not knowing how to tap into what is available through lack of information
- Fear
- Lack of confidence in our own ability – e.g. to fill in forms
- Lack of trust of people in authority
- Dignity/family ties/assumptions
- Not realising “I am a carer”
- Benefits/income impacting on services
- Just want to be left alone
- Resources from agencies are limited

2. Information

Morning Session

- Information is important as many people do not realise they are carers
- Registered carers will receive more information than others
- Some GPs have information about carers, some haven't
- If there was a document with all the services on, coloured sections would designate different services for carers
- Information around discounts for carers
- First information should come from GPs
- Information for carers in surgeries needs to stand out, not leaflets hidden behind other leaflets
- There should be more information broadcasts for carers on television and radio
- Social services should be able to give carers the information they require or put them onto the right people
- Benefits helpline? Carers may not know where the first port of call is, or even know if they are entitled to Carer's Allowance
- Do databases cross reference?
- There needs to be information when you lose a cared for person
- Carers Centres need to be able to point carers towards more specialised services, such as groups for disabled people
- Around Carers Centre their whereabouts, some publicity of the work they do
- The GP is responsible for referring people to where help is really needed – they should have a sheet of all the relevant organisations
- Getting the message across through supermarkets and pharmacies

“If carers don't get the information we don't know what's there! Information is the key.”

- Everyone should have had a copy of the Carers Strategy.
- Only one person had read it, two had heard of it, and others were not aware.
- A lot of carers still not on database.
- Carers feel there is not enough information on benefits such as Carers Allowance.
- There is a need for Citizen Advocacy for carers.
- Widnes and Runcorn need a Carers Centre on both sides of the river which is a 'one stop shop'
- "If we don't get the information we don't know what's there. Information is the key."
- Outreach is needed
- We need to be proactive
- Staff need to be properly trained to help get the message across to carers.
- People should join up to the Carers Forum and try to get the right information.
- Some carers have never had a social worker
- Assessment should be done every 12 months to look at the carer's health needs as well as the person who has the service
- Information on benefits

Afternoon Session

- All information under one roof
- More money invested towards information
- To follow alongside the pathways with carers and their changing roles whatever they may be
- Pharmacists may be important in providing information
- Finding hidden carers so that they can be given the information they need#
- One database only please!

- Carers' Information Packs need to be more widely available in pharmacies and surgeries
- Why not distribute a carers' leaflet in the free newspaper?
- A family scene around the table: mum cooking with a caption above her head saying 'mum' and a child with a caption saying 'carer'...
- To take the age limit off the Carers' Allowance
- Why do carers have to jump through hoops to get their entitlement?
- Carers must be listened to by the council and their officers
- Carers need to get together and be a voice
- Carers' grant money has to be scrutinised in-depth
- Carers should not be made to feel grateful for services
- What information you get depends on what database you're on!

3. Emotional support and support services

Morning Session

What has been achieved?

- Complementary therapies and pamper sessions – achieved!
- Outreach groups
- Coping with stress sessions
- Carer assessments
- Direct Payments
- Carer Groups
- Carer Trips – achieved!
- Counselling sessions (these need to be publicised/advertised more)
- Carer Newsletter – achieved!
- Carer-designated building – achieved!
- Coordinated assessment package has been achieved
- More recognition of carers' emotional needs
- Continuation of therapies and pamper sessions
- Direct payments from Carer Break Budgets
- Carer Assessors in each team
- Implementation of Community Bridge Builders

“Services need to LISTEN to the carer – at the end of the day they know the person they are caring for better than anybody else”

What has worked well?

- Newsletter
- Day trips for carers
- Pamper sessions and complimentary therapies
- Direct Payments (for those who know about them)

- Therapies and pamper sessions
- Direct Payments for things needed rather than being told what we want
- Carers Assessments

What could have been done better?

- A lot of people don't about them
- Some coping with stress sessions
- Lifting & handling workshops – keeping the carer safe
- Carer assessment – need for lot more information
- Direct payments – need for lot more information
- Taster sessions for complimentary therapies – need to explain what each therapy is in straightforward terms
- More Carers Groups/ support groups around disabilities and health issue
- The new Carers Centre must be wheelchair-friendly, have plenty of disabled access, parking facilities, disabled toilets
- Life planning sessions – e.g. when people with learning disabilities move out of family home – and emotional support especially for older family carers.
- More partnership working between carers and professionals
- Crisis intervention – need to know who to contact
- First aid training is needed for carers – straightforward instructions
- Information on different aspects, should be able to get more information from GP
- Emergency service – if something happens to the person you care for and they need to go to hospital, people need someone to stay with other disabled family member or children
- Need a lot more services for young carers
- Information and how it's given
- Night services
- All carers need to be linked with a carer assessor

- Ongoing therapy and pamper sessions
- Communication
- Referrals to appropriate services
- More support when carers are ill.
- More time for carers breaks – allocated out of carers breaks budget.
- More professional support – carers feel that social workers do not provide enough support
- Lack of information about available support
- Not being kept up to date
- Need to reach hidden carers
- Would like outreach – at GPs and community centres
- More newsletters and presentations to groups
- More involvement in assessment process
- More information about benefits – expert help

Afternoon Session

What do carers want from the new Strategy?

- More understanding – about the physical and mental conditions of the person being cared for and for carer themselves
- Services need to LISTEN to the carer – at the end of the day they know the person they are caring for better than anybody else
- Listen to and act on what the carer actually says and wants
- Continuity of care is essential, it is very stressful to keep repeating the same story to so many different people (professionals should look at the past history file prior to conducting new assessments)
- Log to be kept on each person so information is contained within, any assessments all need to refer to one set of notes

- A correct assessment by a social worker should be open for other healthcare professionals to read and a copy sent to the carer to keep to prevent duplication at any other meeting
- More joint assessments between health and social care teams to avoid duplication
- GP to make more of a stand to identify carers and their needs and treat their needs accordingly
- Health checks for carers (e.g. stress etc) and emotional support should be forthcoming
- Better communication
- We need a 24-hour contact number in case of crisis, even if it is somebody just to listen to the carer's thoughts and fears

What more could be done to support carers?

- INFORMATION INFORMATION INFORMATION the beginning middle and the end!
- Suggest comprehensive DVD about services available
- Tailor-made person-centred approaches to meet the needs of the individual and carer instead of just what is available
- Identified key worker to work with carers and have consistency
- More of what we have already got – information, training and support, more understanding from professionals, better communication
- More choice about the type of service they receive
- Support for former carers

What might stand in the way?

- Main problem is that carers do not always recognise themselves as carers
- What is the definition of a carer? We need a specific definition so that carers recognise themselves as carers

- Carers not feeling able to admit they cannot cope
- Don't feel as if somebody else could care for their relative, partner etc as well as they can themselves
- Lack of funding to offer enhanced support services for carers
- Non-accessible information
- Carers need to keep asking for what they want and if this is not available for this to be logged as a deficit in the service. This will help inform and direct future Carers Strategies

4. Assessment and Assessing Carers' Needs

Morning Session

What has been achieved?

- We have been successful in identifying hidden carers
- We have identified the need for support groups – now we need to support them
- We have achieved 600 carer assessments in 2007/2008

“We have achieved 600 carer assessments in 2007/2008.”

What has worked well?

- Self assessments – but these must be followed up

What could be done better?

- Need to consider the carer when carrying out assessments for the cared for person
- Need more information leaflets at the assessment stage
- Would like assessments to lead onto more training opportunities to help carers cope on a day to day basis.
- Finding hidden carers. Are people afraid to ask?
- Promoting carers' services at GP surgeries, having information tables and having advertisements
- Need for better communication between agencies so all are aware of services, including carer assessments
- Need to overcome carers' fear of being dependent on other people
- Need for good diagnosis by GP of the cared for person – this can be key to accessing assessment and getting services
- One carer present was caring for two people and had no help whatsoever.

Afternoon Session

What do carers want from the new Strategy?

- Better communication between agencies working with carers, so that all relevant information is offered at assessment
- Accountability – carers want to know who is accountable for each service
- A complaints procedure
- Not too much signposting so it does not appear to be ‘passing the buck’
- Full publicity – forums, local TV, radio, papers, internet and chat rooms, GP surgeries, pharmacies, schools, libraries
- Timescale of 4-6 weeks maximum between referral and assessment with assured reviews annually
- For carers to be involved in all stages of the cared for person’s review
- For GPs to be sent copies of reviews and/or care plans to promote carers’ problems and to educate GPs
- For there to be an identified carers’ assessor and a Carers Team of all assessors for consistency of approach and service and quality, trained staff all working together
- Need for out of hours support/ helplines

What more could be done to support carers?

- Stigma/ pride issues tackled in publicity (e.g. £4 billion unclaimed benefits 2006-7)
- More information in newsletters to include practical articles about caring such as:
 - Different guest professionals to write an article once per month
 - New legislation
 - First aid ‘tip of the month’

- Points of safe handling etc
- Not everyone can go on training courses but some points should be included to educate everyone through the newsletter
- Communicate that carers' right to support is not begging!
- Pathway information for older carers – knowing what will happen to the person they care for long term
- Assessor to determine confidentiality preference over the phone before
- Through carer assessments identify training needs for the individual carer such as:
 - Coping strategies
 - To stop feeling guilty when you cannot do things
 - Awareness about carers' mental and physical well-being
 - Schizophrenia etc
 - Stress management
 - Medication and side effects
 - Covert medication within care plan
- Maintain Widnes Carers Centre

What might stand in the way?

- Dispersal of services
- Concerns that lack of finances/ carers' budget/ carers' grant and its effect on all service provision (assessment of needs, but no money to provide services)

5. Having a Voice

Morning Session

What has been achieved?

- There is better representation and access to carers support officers and assessors
- Halton Carers Forum exists for you to pass on complaints and comments and requests
- Having a voice is about full participation and being actively involved in designing policy and services not just being informed of what they are going to be.
- We have more informed choices and we are encouraged to give feedback on the quality of service providers
- Mental health LIT
- Focus groups
- Support groups
- Some training has taken place
- Good involvement and decisions made by carers in support for allocation of carers grant
- Opportunities to express views

“There are barriers to having a voice – for example, there will be people who have not come along today because they have no one to look after the cared for person.”

What has worked well?

- Involvement with links for health service feedback
- Being made aware of standards for services
- Better feedback mechanisms
- Carers Grant Allocation

- HVA newsletter

What could be done better?

- “There are barriers to having a voice – there will be people who have not come along today because they have no one to look after the cared for person.”
- Need for a well-resourced advocacy service for people who don’t know where to go and what their entitlement is
- Would like more surveys/questionnaires for carers – verbal or written
- We would like any help available
- Need for more training
- Need for better financial support
- Not enough carer involvement – it’s alright if you are already in a group
- Need for more focus on transport
- Planners should listen more to carers
- It sometimes feels as if the decision has already been made
- No feedback on performance of services

Afternoon Session

What do carers want from the new Strategy?

- More and better quality information
- Jargon-free, plain English
- More financial support
- Need to cover crisis as well as routine
- Need to be clear about how the Strategy covers out-of-hours and weekends

What more could be done to support carers?

- More clarity and expertise in the assessment of need
- Full resourced advocacy service with specialist knowledge

- Use the experience and expertise of carers and former carers
- Support to allow carers to have a voice and fully participate
- Strong Carers Forum and Carers Centre
- Empowered/ assertive
- Training and support for escorts
- Reduce uncertainty
- Keep promises
- Counselling for carers
- Financial support around areas such as transport – perhaps a Carers’ Bus Pass?
- Clarity about what carers are entitled to
- Support workshops (similar to Making Space 2006)
- Funding to keep support groups going
- GPs more aware of carer’ responsibilities and health
- Carers ‘buddy’ service
- More days like today!
- Carer involvement on assessment and care plan
- More supported housing
- Invest in today’s cares as that will make things better for carers of tomorrow
- More home visits/ support/ counselling
- ‘Can do’ attitude from the Council and PCT

What might stand in the way?

- Barriers such as bureaucracy/ red tape/ procedures used as excuses for poor service
- Criteria level set too high, more common sense/ compassion needed
- Negative attitudes to carers – not listening/acting, not responsive
- Money, money, money
- People can’t be bothered (some)

- Attitude of professionals (some)
- Staff training
- Bureaucracy – departments not talking to each other
- To quote Captain Kirk, the Strategy needs to boldly go where no one has gone before

6. Providing a Break

Morning Session

What has been achieved?

- Carers' breaks such as trips and pampering have been very enjoyable
- Carers are being offered a carer assessment
- Carers are being offered a break
- Someone is able to listen and offer advice and support
- Having your voice heard
- The Carers Information Pack quick guide

“Carers’ breaks such as trips and pampering have been very enjoyable.”

What has worked well?

- Direct payments seem to work well
- Services from the Carers Centres
- The efficiency of carers care team within Halton – GPs, district nurses etc

What could be done better?

- Encourage take-up of carer assessments
- Clarify information and make it simpler
- Make direct payments to family members in the same household (carers feel more confident if a relative is giving care)
- What happens when a carer is tired or ill and no longer able to care? There is a need for specialist care whilst the carer has a break
- Utilise former carers – some are prepared to volunteer, e.g. at the Carers Centre
- Advocacy is needed

- Boundary difficulties need to be clearer – e.g. carer and cared for person living in different areas
- More information for carers in all age groups, for example from hospitals and GPs
- The carer's whole needs should be taken into account, which may involve support to the whole family to allow the carer to have a break
- Some carers are not aware they may be entitled to a carer assessment
- Carers' breaks – more than one allocation of funding should be applied for annually
- More short breaks – for example someone coming in for just one day
- Carers should have more choice and flexibility on how they spend the funding and should be able to use some of the funding to pay family members who the cared for person is familiar with

Afternoon Session

What do carers want from the new Strategy?

- Accessible to ALL carers
- Flexibility
- Social life
- Be aware carers' roles mean they can't always attend meetings
- Drop-in – place to meet and talk and have a cup of tea

What more could be done to support carers?

- Look holistically at the impact of caring (especially in the family)
- Something more for men/ partners/ husbands – the forgotten ones
- Think long term for carers who are concerned that as they get older who will continue to care?
- Consultation before the event/ issue changes

- Consider how carer and cared for might lead a 'normal life' with access to places in the same way as mainstream society
- More information and better publicity about breaks
- Surgeries should give information and guidance following initial visit to GP
- Better communication between all professional bodies – and passed out to carers and third party groups
- Coordinator to gather information, put together and distribute to GPs, hospitals etc
- More information on planning for the future
- It is important to know that someone is there to listen when you need them
- More flexibility of breaks and sitting services

What might stand in the way?

- Money/funding
- Growing population of older carers and limited resources
- Perception of caring (why not shadow a carer for the day?)
- Dysfunctional organisation/ structure – involve corporate businesses to advise/support and develop services
- Continuity of worker involvement – often have several workers involved through assessment and review

7. Support That Helps Carers Maintain Their Own Health

Morning Session

- Information is the key to all this
- GPs and health professionals should be able to provide more information and refer carers once they are identified – it should not be left to the carers to find out what's available
- The present strategy is not being implemented
- Carers should have an independent benefits check, e.g. through CAB
- If carers are not registered how do we give them support?
- Why not send out a letter to every household in Halton asking if there is a carer in the household (this could go out with the council newsletter)
- We need carers and cared for persons to have a chance to go on holiday together, as some carers won't want to leave the person they care for
- Not everyone has access to Crossroads (respite) so they can't go to the therapies on offer – the same goes for carers' support groups
- We need an emergency service to provide cover for carers when they are unwell.

“Carers need to keep asking for what they want and if this is not available for this to be logged as a deficit in the service. This will help inform and direct future Carers Strategies”

Afternoon Session

- Important to relieve stress to maintain carers' health
- A back-up service to aid in emergencies
- A list of volunteers who could come out at short notice
- More courses to train carers

- More alternative therapies
- Listeners who could discuss problems and point carers in the right direction for help
- Holidays with paid carers to take care of the sick person whilst the carer goes out alone
- Sort finances with expert help

8. Young Carers

Morning Session

- More resources for HITS
- Publicise the young carers' pack better, e.g. in schools
- Better awareness amongst professionals of what's available for young carers
- Are there meetings for young carers?
- Have a session with young carers and get their views – we are not qualified to answer on their behalf
- Very important that support is at hand for bereavement (the Butterfly Project is available)
- Identify very young carers and be aware of their situations
- Ask young carers what they want

“Why not have a play about being a young carer?”

Afternoon Session

- Good relationships with schools
- Not having to constantly campaign for publicity
- More information available at schools
- More funds for young carers
- Advertise in public places such as surgeries, baths, etc
- Provide young carers with carers' breaks and activities they want
- Newsletters monthly to schools and highlighted questionnaires asking, are you a carer?
- Stronger links with adult mental health services
- It would have been useful to have had more young carers involved with this consultation process

9. Parents of children with a disability

Morning Session

- There is a lack of information
- Battle for everything
- Carers' assessment – length of time this takes when this involves children, length of forms
- Transition between children and adults relating to benefits payments and services
- Respite breaks – for children with disabilities there are four beds in Runcorn and two in Widnes
- For children with mental health problems you have to go to Chester for an assessment and even that has limited resources
- There is a lack of social workers and continuity with the same worker
- Replace day centres that have been closed?
- Speed to offer a service for both parent and cared for child
- To meet with other carers as a social group at a community centre
- Internet chat room for the children
- Halton information exchange
- Improve profile of the caring side of social services

“The transition at ages 16-18 is often a limbo area, often the child is forgotten about and this needs addressing.”

Afternoon Session

- Must have schools for children with disabilities with expertise and resources under one roof, with health expert on board
- Council agencies to become more involved with schools
- Direct payments – can it be confirmed that these can be paid to a family member who does not live with the cared for person?

- Support carers with specific forms of counselling service
- Council to incorporate educational views from health and work together more
- Parents to be invited to take part in current schools review
- The transition at ages 16-18 is often a limbo area, often the child is forgotten about and this needs addressing.
- Social services should not discharge cases because you may not have had any contact for months
- Promote social care (social services)
- To access individualised help
- All GP practices have generalised information for carers
- Ongoing support
- Finance might stand in the way
- Simplification of information

10. Financial support/carers in employment

Morning Session

- More publicity
- Funding to be less complex
- Halton Borough Council's Direct Link does not link fast enough
- No personal contact appears to be allowed with the Benefits Section, which drives stress levels up
- Carers Allowance is so little, yet carers save the country so much
- Carers want more benefits, not means-tested
- Carers are limited in the number of hours they can work
- Carers shouldn't be taxed – maybe even working carers should be taxed less
- Health professionals need to be informed about carers' benefits
- It is not a choice to care for someone, it is something one must do, and money can be missed out on
- More opportunities for working from home
- The state pension should not interfere with getting Carers Allowance
- Carers in work should be made aware of opportunities for flexible working through promotion and advertising
- Working of the benefit system is confusing and not explained
- More flexible respite helps working carers and can help carers return to work

“Carers Allowance is so little, yet carers save the country so much.”

Afternoon Session

- If you can only work part time you lose benefits
- More access to crisis care (without affecting respite beds etc)
- Short term support – e. g. someone to sit in whilst carer tends to shopping etc

Conclusion

This report represents the views of 190 people, the majority of whom were themselves carers, on the Carers Strategy.

It is clear from the report that much progress has been made for carers in Halton during the past two years, and that there are real achievements to be noted. Nonetheless much remains to be done.

This was acknowledged by Gary Kitchen, independent facilitator, at the conclusion of the day. He remarked that the turnout had been excellent and provided a real opportunity to listen to carers. But it was important to bear in mind that many of the 13,500 carers in the borough had not so far been identified and were not receiving support.

Yet even those who were not able to attend, or who were unknown to services, would still stand to benefit from the input of carers on the day and the effort they had made in coming along.

This is clearly an exciting time for carers in Halton. The development of the new independent Carers Centre was viewed as an exciting and promising prospect by many.

The event provided useful feedback on the Carers Strategy to date and a number of innovative and practical ideas for improving and extending provision in the future.

Appendix

A number of carers who were unable to attend gave their apologies and were sent a short questionnaire to complete together with a freepost envelope for return. The first three questions asked for feedback on the Carers Strategy 2006-8 whilst the remaining four questions sought ideas for the new Carers Strategy 2008-10. Nine responses were received (though not everyone answered every question) and the results are as follows.

Question 1: What has been achieved for carers?

- Helping reduce isolation
- More points of access for help and advice
- More time out activities available
- Better team working to cover carers' needs
- Carers' courses and pamper sessions
- Free trips
- Good information

Question 2: What worked well?

- Taster sessions in computing
- Opening the carers centre
- Day trips
- Help offered at the right time
- Respite
- Support from health care staff
- Contact between staff and carers

Question 3: What could have been done better?

- More challenging courses – we don't all want to make jewellery
- Keeping in touch with carers – information on events is scary
- More information for carers not yet in touch with the centre
- Meetings and information have suited our needs
- Don't know
- More practical help with equipment
- Speedier access to counselling – the waiting list is too long

Question 4: What do carers want from the new Strategy?

- Raising awareness especially with employers
- More outings
- More flexible transport
- More respite care
- I am very happy with what is being done
- Advice about caring
- Support and more respite
- Better financial recognition

Question 5: What more could be done to support carers?

- Increase the carers allowance and remove the age barrier
- More day trips
- Respite so that we can attend events
- Newsletters
- Keep us informed
- Purchase of a new respite care home - perhaps with carers having a financial stake in it

- Holidays and short breaks for the carer and cared for person
- More money
- Advertising the services available to carers as some people may be reluctant to go through social services.

Question 6: What might stand in the way?

- Carers in employment are not always able to go on trips
- Not enough flexible transport
- Need more flexible breaks
- Not enough money to implement everything that carers need
- Not enough respite to attend groups and activities
- Government funding is insufficient

Question 7: Any other comments on the Carers Strategy 2008-10?

- The government needs to value us, not degrade us
- Taking all things into account, I think you are doing a good job
- Thank you for all the help we have received
- Some one to one support for the carer to help with the cared for person when they are going out on trips
- I am very pleased with the help available
- Concerns about means test for day care
- I don't get enough help