

### **Consultation with Professionals around Carers Wellbeing**

We have consulted with a wide range of stakeholders across Wolverhampton, that work with or come into contact with carers. We have discussed what needs they see across the spectrum of carers, how they think needs may change in the future and what they would like to do different to better support carers. The stakeholders spoken to include staff from:

- The Carers Support Team (City of Wolverhampton Council)
- Compton Care
- Zebra Access
- Wolverhampton CCG
- Refugee and Migrant Centre
- Wolverhampton's Adult Education Service
- P3
- Starfish Health and Wellbeing
- Duncan Street Surgery

Following these discussions, a set of themes which appeared in the conversations were developed. Below, I will list and look at these themes in more detail.

#### **Financial Strain (and on Carer)**

A theme that appeared in conversations with every stakeholder was financial strain, whether that be strain on the carer or the person being cared for. Because of their caring role, many carers will not be able to work, or be required to work reduced hours, which can severely affect their income. There may also be extra costs involved with the care they provide. Many carers may be unaware of the grants and financial support available.

Some benefits or support may be means tested, which restricts the number of people that can access the support, putting strain on those that are unable to get means tested support. Another group of the population that would suffer from financial strain are those that have no recourse to public funds. Many of their care needs would not be met due to the lack of finances available.

Stakeholders that support people who provide care for a child said that financial support that may be provided to support the child can sometimes be used in household expenditure when there is a financial strain.

#### **Social Isolation**

Almost all stakeholders spoke about Social Isolation being a major issue for carers. Carers with extensive caring responsibilities can be vulnerable to Social Isolation, this is because they lack the time after their caring responsibilities to have any social contact. This can be due to the fact that some carers may not have time to make or have existing social connections outside of their caring role.

#### **Bereaved Relatives**

Carers who have recently been through the death of the individual they care for is something that many of the stakeholders came across and see some people struggle to cope with not having to care for. Some stakeholders mentioned that this can also bring about social isolation in some cases, where the carers caring responsibilities took up the majority of their time, once the person they are

caring for passes away, they fall into social isolation due to not having many social connections away from their caring role.

### **Hidden Carers**

Some stakeholders spoke about the complex nature of hidden carers, or carers that do not identify as carers themselves. Many services and organisations in Wolverhampton would come into touch with many carers who do not openly disclose that they are carers. An example is the adult education service, who educate people through classes that run throughout the day including evening classes. The adult education service enrol people from a wide range of backgrounds and there is potential for many of their students to have some caring responsibilities.

### **Reducing Breakdown of Care**

Stakeholders suggested that carers often do not have a back-up plan if for any reason they were not able to provide care, resulting in a breakdown of the care. This requires services to take up the caring responsibilities, which puts a strain on the health and social care system.

### **Accessing Respite**

Stakeholders suggested that there is a lack of respite care or access to respite care is restricted, making lives of carers difficult, increasing some other needs. The lack of access to respite care can have a detrimental effect on the emotional and mental wellbeing of the carer, leaving them less time for themselves. The lack of respite, can sometimes mean that carers cannot access services and events aimed at supporting carers because they cannot get the time away from their caring responsibilities. This can also mean that their own health can deteriorate due to the lack of their ability to attend their own appointments.

### **Reluctance to Register as a carer, or think of themselves as a carer**

It was suggested that carers often do not access services or register themselves as carers due to the stigma that may be attached to being identified as a carer. It was suggested by one stakeholder that some people do not like to acknowledge the fact that they are carers, because it make their situation real.

### **Difficulty accessing information**

Many people do not know services exist to support them, because they do not have the information, because information is not readily available.

Some stakeholders made the point that sometime information on services available to carers were difficult to access, or not in the right language for carers to read. Often there may be difficulty in filling out forms due to language barriers.

Two stakeholders made the point that all information about services should also be available in British Sign Language. Services should also look at the possibility of employing or increasing availability of British Sign Language interpreters and relay BSL interpreters.

### **Future Capacity**

A common theme that arose when discussing how carers needs may increase was that caring may become more complex, because people are living longer they could be developing more health conditions, which would make their care much more challenging. Carers may also become carers for much longer as healthcare and medicine improves, as the people they are caring for are living longer

alongside the conditions or disabilities. As well as care becoming more complex with people living longer, there will also be more people to be cared for, therefore more carers. This is likely to put significant strain on existing services if they do not prepare for the increasing capacity.

**Potential Solutions**

To improve the access to respite services, a stakeholder mentioned that there should be some thought to volunteer-led respite services. A structured method of providing information to carers about services and support that is available to them, such as methods used in neighbouring areas. Develop streamlined pathways to referring carers into the carers support team.