

Letter to Deputy Le Hegarat

22nd September 2020

Dear Deputy Le Hegarat,

Thank you for your letter of 8th September regarding the Jersey Care Model.

1. I am unaware of the out of hours social care service established in response to Covid-19.
2. Any shift of care into the community will require more community workers such as social workers.
3. Care homes and Carers do not work together unless residential respite is planned. As there do not seem to be any designated respite beds this cannot be booked for more than 1 or 2 weeks in advance and short breaks of a few days may be charged at a weekly rate. During the recent lockdown many Carers did not see their loved one for about 12 weeks, causing anxiety and distress.
4. Care at home is preferred by many patients and Carers but Carers must feel supported with information, training and flexible respite. Emergency help must also be available if the Carer is unwell.
5. There must be more Primary and community care provided.
6. The JCM has many ideas but no firm suggestions re Carers except increased support, but no details. If more restrictions are necessary due to Covid-19 there should be plans to help Carers who have turned to charities and volunteers for support until now. Carers' mental health is at risk.

I have read the JCM and some of the proposals are very interesting and make sense. I am not sure of the financial implications. I have attached a copy of The Carers Strategy written by Carers. The Carers Partnership Group is planning to meet next month.

I hope this reply is of some help.

Yours sincerely

Margaret Bayes

Dr Margaret Bayes MBE

Chairman Jersey Association of Carers Inc.

The views expressed in this letter reflect the personal opinions of Dr Margaret Bayes MBE

Appendix



Jersey Carers Strategy

‘Getting things right so Carers thrive not just survive’

Jersey Association of Carers Incorporated and the Carers’ Partnership Group

June 2017

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1.0

Carers' strategy preface – Chief Minister

A 'carer' can be anyone, a child, a parent, a friend or a relative. A carer can also be any age, from the very young to the more mature in our community.

One of the challenges we face is getting people to acknowledge that they are, themselves, carers. People will often say "I'm not a carer, she's my mum. I just pop in to see her a few times a week, do a bit of cleaning and bring her dinner." As our population ages we will see more and more people who say they are "just" looking after their wives, husbands or parents.

Jersey's 2016 Health & Life Opportunities Survey found that one in ten households include a self-identified 'carer' and that 1% of households have a young carer who is under the age of 19.

This new Carers' Strategy has seen politicians and government representatives working alongside the voluntary and community sector and carers themselves. Looking after a loved one touches on every aspect of the lives of carers and of the person being cared for. It can affect relationships, finances, family life, career and education opportunities.

50% of carers say they get satisfaction from their caring role, however 51% say it increases their stress levels and 39% say caring can make them feel worn out or exhausted.

This is a comprehensive strategy for our island which has involved all sections of our community in its development. I hope it plays its part in improving the lives of both carers and of those they are caring for.

June 2017

2.0

Introduction

Our society owes a great deal to the thousands of people who provide unpaid care and support to a family member or friend. The pressure on many Carers is often high and the impact on their lives is significant. Offering the right type and amount of support is crucial, in order to meet the needs of Carers who want to continue to care for their loved one - and who want to 'thrive and not just to survive'.

- Jersey's population is ageing and there has been a sharp increase in the numbers of Carers over the age of 75.
- The numbers of people dependent on another in Jersey is growing and this will escalate significantly in the years ahead.
- The numbers of Carers in Jersey are growing and it is estimated that one in seven people are currently fulfilling an unpaid caring role.
- Without the right support caring can take its toll, many Carers say that caring has pushed them into the financial hardship and nearly three quarters said they have suffered mental health problems because of the pressure.

Undertaking Caring roles can have a wide-ranging impact on individuals in a number of areas of their lives, including physical health, education, training, employment, financial, emotional health and relationships with family and friends. Carers are people of all ages and cultural backgrounds and the pressures are even more intense for Carers who are very young, in their later years or have an additional vulnerability themselves.

Work has already been undertaken to improve and develop support services and training for Carers in Jersey. However, addressing the impact of undertaking an unpaid caring role and recognising the contribution individuals make for local people and for the economy of the island, continues to be a priority.

This strategy sets out our vision and new model for meeting the needs of Carers. It highlights a growing a culture of inclusion and empowerment that will most effectively meet the needs of Carers and the people they support and care for. It identifies the areas for change needed in Jersey, so we can ensure that local Carers thrive in their roles and their lives.

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3.0

Strategy Development

A whole system event was held on the 23rd March 2017 and over 70 local people attended from all walks of life. In attendance were a high proportion of people with caring responsibilities, as well as staff from Charities, Voluntary Organisations, the Parishes and many Statutory Departments.

The day was chaired by an independent facilitator - Amy Hobson from The Wellbeing Collective - and focused on the strengths locally as well as the gaps. During the event people were able to describe the things that worked well for Carers currently and the things that they would like to see changed, improved or enhanced in some way. The day enabled the identification of key themes and ideas that would improve the future for Carers. A final part of the day involved voting using coloured stickers, to give a sense of where the priorities were and what would have the biggest impact.



The Now

- What we want to keep and change



The Future

- What ideas we have about a better future



The priorities

- what we think are the most important areas for change

June 2017

4.0

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4.1. Key strengths in the current system

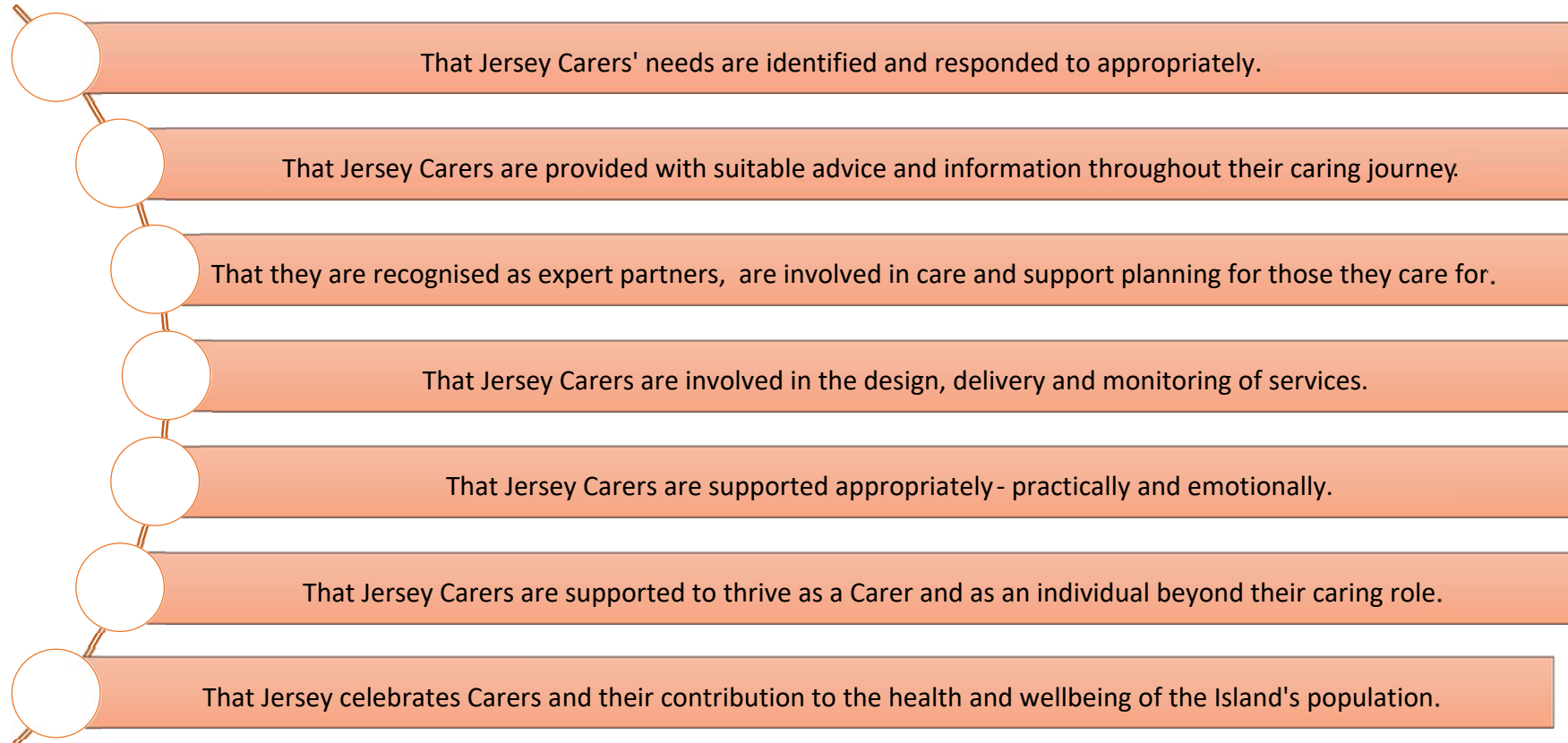
1. The **charity and voluntary sector** are considered valuable to the system and to individual Carers. The range of charity and voluntary provision is good, however there are ongoing resourcing and co-ordination issues that limit the reach and impact.
2. **The Disability Strategy** is welcomed by local people; however, it does not cover all Carers or those being cared for. It also doesn't go far enough to meet the holistic needs of Carers in order to help them thrive in their role and lives.
3. **Collaborative work** between professionals, Carers, Charities and Voluntary Services was cited as a real local strength and one of the biggest opportunities for development. This collaborative work needs further embedding, as it is not currently universal or totally consistent.
4. The **level and quality of local expertise** is seen as a fantastic resource. Ensuring consistent access for Carers to people with expertise and knowledge, was considered of high importance.
5. The implementation of the **Triangle of Care** as a philosophy and practical model is a local strength. There was a strong desire to see this adapted and offered to individuals and Carers in all situations.

4.2. Key gaps in the system

1. The lack of **Carers and Care Legislation** is seen as a real weakness in the current system and one of the opportunities to make the biggest impact.
2. The level and range of **practical and emotional support** was seen as one of the biggest gaps locally. Many detailed examples were cited from Carers across all scenarios and age groups
3. The need for enough appropriate and **high quality respite** is considered a significant issue currently and there is a very powerful message from Carers that flexibility and personalisation are key to bridging this gap.
4. With regards to **communication and navigating the system** - although there were examples of good practice in this area - the gaps and inconsistencies mean that overall this is a deficit currently. The need for joined up communication and a simple system to navigate was described by local Carers as a recurring need.
5. The **Triangle of Care** is considered a strength in the Adult Mental Health Sector. The gap is around other groups in the population who also would welcome this model to be developed, in order to support collaboration and good practice.
6. Many people described the **cultural stigma and perception of Carers** as a long-standing weakness. The need to promote a positive culture being identified as an overarching issue worthy of prioritisation.

5.0 The underpinning principles

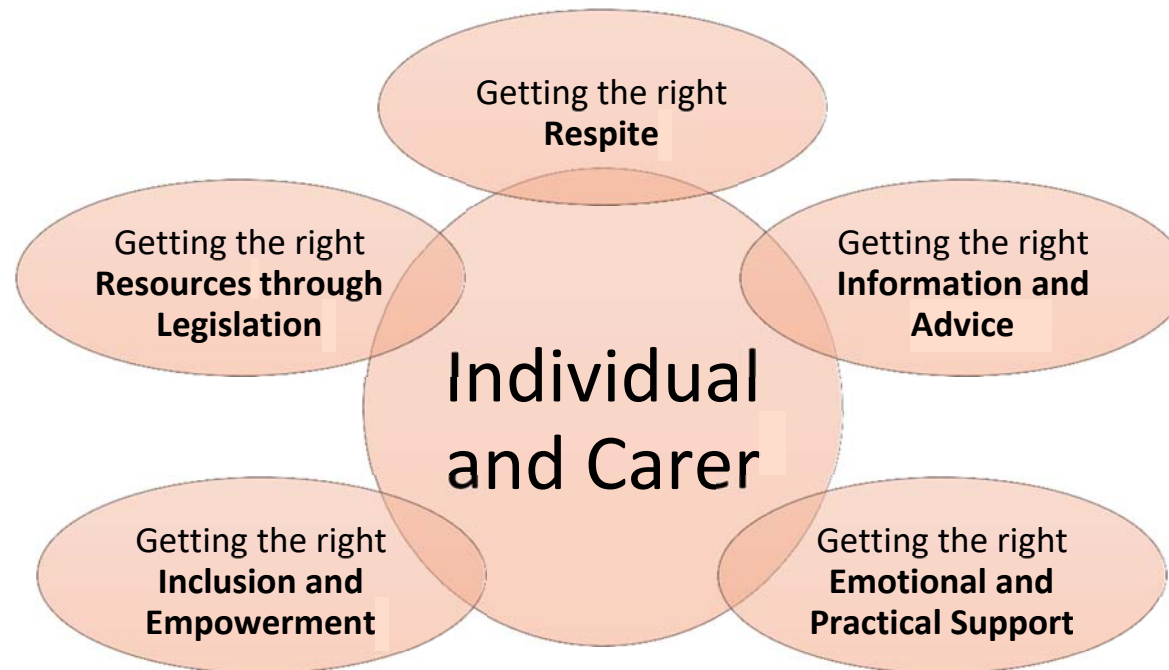
The following principles are based on the information gathered from people with lived experience of caring roles - before, during and after the Whole System Event. These principles underpin the strategy and support the development of the key actions required to achieve the future state.



6.0

Supporting Jersey Carers to thrive by 'Getting it Right'

Our vision for Jersey is to ensure that all unpaid carers are valued, recognised and supported to care and to thrive within and beyond their caring role. Through collaboration as a community, we will raise the profile of Carers and the caring role to influence Society, with the goal of improving the lives of carers. We will work with Carers and local partners to develop stronger networks and to reduce the impact of caring on Carers' wellbeing, by providing access to quality information, support and care when needed. We will purposefully challenge inequality and ensure that Carers of all ages and backgrounds have the opportunity to 'have their voice heard'. We have linked the principles and the vision together to create a holistic model of support for Carers, whatever their circumstances



6.1 Priority Area 1 - Getting the right Respite

The current criteria to be reviewed and for it to be more accessible for all who need it.

Provide responsive, flexible respite including emergency care availability at short notice, for all ages.

Offer an enhanced choice of respite, including activity breaks and social group respite.

Block booking of respite beds in Residential Care Homes.

Offer personalised budgeting for respite and short care.

Introduction of new ways to complete Long Term Care Benefit application and support to do so.

Priority Area 2 - Getting the right Emotional and Practical Support

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6.2

Secure a physical drop in hub for Carers within the new hospital development.

Offer access to emergency help, with transport and short break support.

Give Carers meaningful opportunities to promote their own health and wellbeing through activities.

Parish Volunteers to help with driving, picking up emergency supplies and practical support.

Offer places for social events where Carers and Patients can be supported together.

6.3 Priority Area 3 - Getting the right Resources through Legislation

Define caring and the caring role including part-time, shared care and extended families.

Design flexible legislation that recognises changes in requirements and circumstances.

Implement legislation that gives Carers the right to an assessment of needs.

Introduce the option of personalisation of packages of care and support routinely.

Design support for the specific needs of Carers who are vulnerable or have additional needs.

Include employment rights for Carers and outline the potential responsibility of employers in the legislation.

Cross reference the Carers legislation with Mental Health & Capacity Law, Disability Strategy and Disability Discrimination.

6.4

Priority 4 - Getting the right Information and Advice

Implement the Triangle of Care as a framework for everyone, not just Adult Mental Health.

Routinely seek feedback and engage Users and Carers in designing and reviewing services.

Make the most of Jersey Online Directory for help, support and services.

Offer advice and information at key times in life, such as transition into adulthood or discharge from hospital.

Ensure that information is culturally sensitive and available in a range of languages and forms.

Introduce Carers' Champions as a key point of contact and positive role model.

Build on and extend Carer training offering to maximise uptake.

Grow a peer support model through a Carers network.

6.5 Priority Area 5 - Getting the right Inclusion and listening to Carers

Actively celebrate the role of the Carer in the media and across all sectors.

All Services to routinely engage with and consult Carers.

Provide training for Carers about what they can expect and how to navigate the system successfully.

Undertake direct work with employers to support employment opportunities and sustainability.

7.1 Key deliverables we want to achieve

Carers legislation to be enacted.

Carers feeling included, listened to and heard.

Carers have access to the right information and are given advice that is relevant to their needs.

Carers describe getting the right type and level of practical and emotional support.

Carers describe having time for themselves and a break from their caring role.

Carers are actively supported to access or remain in education, employment or training where possible.

Carers are tangibly supported to maintain their health and wellbeing, alongside that of the person they care for.

Young Carers are encouraged to engage with community activities of their choice, to pursue their interests.

Young Carers are appropriately supported to achieve full attendance and engagement in education.

Carers' voices are heard during the assessment of the person for whom they care and the Carer's own needs are assessed

7.2 Measuring the deliverables

Detailed measurements and targets will be designed with Carers and other key stakeholders and we will measure these outcomes using a variety of methods including;

Routine Carer

Contact

- Carer Assessments to determine need and support.
- Carer Reviews to measure impact and outcomes.

Specific Carer

- Carer Surveys and questionnaires.

Consultation

- Carer Focus Groups and collation of 'Carer Stories'.

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