



BIRMINGHAM CARERS VISION AND COMMISSIONING STRATEGY 2018+

Adult Carer

Consultation Document

Easy Read Version



**“ENABLING A
LIFE ALONGSIDE
CARING.”**



Birmingham
City Council



BIRMINGHAM
CHILDREN'S TRUST

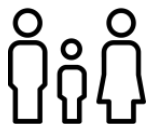


Adult Carer Consultation Document

Are you a carer?



A carer is someone who looks after a family member or friend who is ill, has a physical, sensory or mental impairment, is older and frail or is affected by substance misuse.



A carer may be a parent, spouse or partner, son or daughter, another relative or a friend or neighbour.



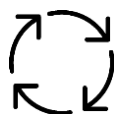
A carer may be providing care, emotional support and encouragement. They may be giving all of these things.



Carers make a vital contribution to those they care for and also to the sustainability of the health and social care system.



We know that most people are likely to be affected by, or have caring responsibilities at some stage in their lives.



This strategy will take a whole life approach to reduce the impact of the changes between different ages and stages of life.



We want to make sure that people get the right type and level of support at the right time.



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The strategy is designed to show the importance of promoting positive health and wellbeing with and for carers.



This includes self-care and self-management in everyday life.



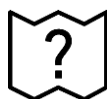
Until now, the commissioning of services for carers in Birmingham has sometimes been delivered separately by both The Council and NHS.



This strategy gives us the chance to set out a joined up approach for the future.



We want to meet the needs of carers and provide carers with better outcomes for their own health and wellbeing.



We want to know what you think we need to put in our strategy.

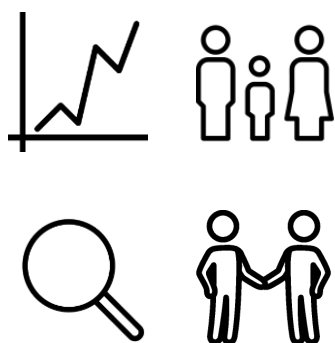


This is the first step in seeking the views of carers across Birmingham.



Question 1 – Vision.

Our vision is:



“Birmingham is a place recognised as first choice for carers and families that supports and values the role of carers in society”.

Do you agree with the vision?

YES

NO

If you disagree with the vision, please tell us what you think we should put in or take out:





Question 2 – Carers Commitment

In Birmingham, our commitments to carers are:



1. Recognising & respecting carers as partners in giving care & support.



2. Building a carer friendly city.



3. Supporting carers to be physically and mentally well.



4. Supporting carers to financially plan for today and tomorrow.



5. Promoting carer friendly employers.



6. Supporting young carers through childhood and education.

Do you agree with the commitments listed above?

YES

NO

If you disagree with any of the commitments what do you think we should put in or take out?



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To help us decide what activities and support are important for carers we want to know what you think.



The next questions are about what you would want and like to get.



The questions are based upon the Carers Commitments (See Question 2).



The questions are focused on outcomes that are most important to you.

For each question please tick the top 3 most important outcomes to you:



Question 3 - Recognising and Respecting Carers

I know I am a carer.

Other people know and see that I am a carer.

People appreciate what I do as a carer

I am asked & involved in the support & care of the person I care for

I can have or have had a Carers Assessment if I choose to.

I have choices about the support I receive.

I am able to recognise my own needs.

It is not assumed my family will take on the caring role



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Question 4 - Building a carer friendly city.

Please tick the top 3 most important outcomes to you.

- I am able to fulfil my role as a carer
- I am able to share what I know with others
- I know where to go for advice, information, help and support
- I feel part of my local community
- I have the chance to do things for myself
- I know other carers to share experiences and get support
- I can have flexible appointments to fit round my caring role
- I can access benefits such as lower leisure or travel costs and free access to attractions
- I have accessible places to go and things to do with the person I support



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Question 5 - Supporting carers to be physically and mentally well.

Please tick the top 3 most important outcomes to you.

- I have a life outside of caring
- I can have a break if I need it
- The person I care for is looked after when I'm not there
- My emotional needs are met
- My GP knows I am a carer
- I can access wellbeing and health checks if I need to
- I am in control of the care I give
- My physical health needs are met



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Question 6 - Supporting carers to financially plan for today and tomorrow

Please tick the top 3 most important outcomes to you.

- I know where to go for jobs
- I have received information about Direct Payments or know where to get it
- I am aware of personalised budgets
- I know what benefit support I and the person I care for can get
- I can continue to work whilst fulfilling my caring responsibilities
- My working life has been affected by my caring responsibilities
- I can have a carer's assessment if I need to
- I can access support to help me manage my bills and finances



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Question 7 – Promoting carer friendly employers.

Please tick the top 3 most important outcomes to you.

- My employer recognises and respects carers
- My employer acknowledges and understands my caring role
- I can work flexible hours to fit around my caring role
- I am able to fulfil my role as a carer
- I can access advice and information on what my employer does to help carers
- I can work part time to fit around my caring role
- Employers advertise and promote their carer commitment policies



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Question 8 - Supporting young carers through childhood and education

Please tick the top 3 most important outcomes to you.

- I know where to go for education and training opportunities
- The care I give is appropriate to my age and abilities
- I know where to go for advice, information, help and support
- I am able to join in with residential type activities
- I have a life outside of caring
- I can have a break if I need it
- My school acknowledges and understands my caring responsibilities
- I am supported during and after the transition from young to adult carer

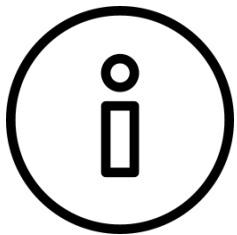


Please let us know if there is anything else you would like to tell us.





About you:



We would like you to tell us some things about you.

You do not have to tell us if you do not want to.

If you do, it will help us to plan our strategy.

Data Protection Act 1998

The personal information on this form will be kept safe.

Your information is protected by law.

You can see more information about data protection on our website at:



www.birmingham.gov.uk/privacy



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Are you?

Please tick the box that best describes your interest in the consultation:

- A member of the general public
- A carer
- Someone who is cared for
- Health or care professional
- Carer specialist service provider

Other (please state)



.....



Which age group applies to you? (Please tick one box only)

- | | | |
|-----------------------------------|----------------------------------|--|
| <input type="checkbox"/> Under 16 | <input type="checkbox"/> 45 – 49 | <input type="checkbox"/> 80 – 84 |
| <input type="checkbox"/> 16 - 19 | <input type="checkbox"/> 50 – 54 | <input type="checkbox"/> 85+ |
| <input type="checkbox"/> 20 – 24 | <input type="checkbox"/> 55 – 59 | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> 25 – 29 | <input type="checkbox"/> 60 - 64 | |
| <input type="checkbox"/> 30 – 34 | <input type="checkbox"/> 65 - 69 | |
| <input type="checkbox"/> 35 – 39 | <input type="checkbox"/> 70 - 74 | |
| <input type="checkbox"/> 40 – 44 | <input type="checkbox"/> 75 - 79 | |



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? What is your sex? (Please tick one box only)

Male

Female

Intersex

Prefer not to say

? Is your gender identity the same as you were assigned at birth?

Yes

No

Prefer not to say

? If not, do you identify as:

Trans woman

Trans man

Genderqueer

Prefer not to say

Other (Please state)



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? Do you have any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more? (Please tick one box only)

Yes

No

Prefer not to say

? If yes, do any of these conditions or illnesses affect you in any of the following areas? (Please tick all that apply)

Vision (e.g. blindness or partial sight)

Hearing (e.g. deafness or partial hearing)

Mobility (e.g. walking short distances or climbing stairs)

Dexterity (e.g. lifting and carrying objects, using a keyboard)

Learning or understanding or concentrating

Memory

Mental Health

Stamina or breathing or fatigue

Socially or behaviourally (e.g. associated with

Autism, attention deficit disorder or Asperger's Syndrome)

Other (please state) 



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? What is your ethnic group? (Please tick one box only)

- White
- English/ Welsh/ Scottish/ Northern Irish/ British
- Irish
- Gypsy or Irish Traveller
- Polish
- Baltic States
- Jewish
- Other white European (including mixed European)

Any other White background (Please state)



- Mixed/ multiple ethnic groups
- White and Black Caribbean/African
- White and Asian

Any other Mixed background (Please state)



Asian/ Asian British

- Afghani
- Bangladeshi
- British Asian
- Chinese
- Filipino
- Indian Sikh



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- Indian Other
- Kashmiri
- Pakistani
- Sri Lankan
- Vietnamese

Any other Asian background (Please state)



Black African/ Caribbean/ Black British

- African
- Black British
- Caribbean
- Somali

Any other Black/African/Caribbean background (Please state)



Other ethnic group

- Arab
- Iranian
- Kurdish
- Yemeni
- Prefer not to say

Any other ethnic group (Please state)





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? What is your sexual orientation (Please tick one box only)

- Bisexual
- Gay
- Lesbian
- Heterosexual or Straight
- Prefer not to say
- Other (Please state)



? What is your religion or belief? (Please tick one box only)

- No religion
- Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
- Buddhist
- Hindu
- Jewish
- Muslim
- Sikh
- Prefer not to say

Any other religion (please state)





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Thank you for taking the time to complete this questionnaire.



Please return this questionnaire to the **FREE** postal address below – you do not need to use a stamp.



If you have any further comments or views on the new Carers vision and commissioning please contact:



Website: www.birminghambeheard.org.uk



Email: jill.crowe@birmingham.gov.uk

gordon.strachan@birmingham.gov.uk



Write to and return address for questionnaire:

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