ABOUT CARERS NI

Carers NI is Northern Ireland’s membership body for unpaid carers. We work to represent and support the over 220,000 people who provide unpaid care for ill, older or disabled family members or friends – fighting for increased recognition and support for all carers and to ensure they have a voice in policymaking.

SUMMARY OF KEY POINTS

- Carers NI is deeply concerned at the Department’s budget for 2023/24. While it is to be cautiously welcomed that funding for community care has not, at this stage, been cut to help close the Department’s funding gap, the flat budget settlement means that Health Trusts cannot meet the unmet community care need that already exists – nor respond to the ever-growing demand that is driven by Northern Ireland’s demographic and health trends.

- This care demand will not disappear, but likely move onto the shoulders of family members and friends to meet care gaps on an unpaid basis. Our unpaid carer population is already propping up the Health and Social Care (HSC) system and many carers are suffering severe costs to their own health, wellbeing and quality of life as a result.

- The prospect of cuts to nursing, residential and domiciliary care packages, in the event that existing savings and efficiency efforts do not have a sufficient impact, would be catastrophic for patients and their unpaid carers. A reduction in spending on community aids and home adaptations would be similarly detrimental. Carers NI would oppose these cuts in the strongest possible terms.

- It is welcomed that some HSC transformation projects can continue in some capacity under the Department’s budget settlement, however this is likely to mean that the unpaid carer-specific initiatives under the adult social care reform agenda remain unimplemented. Carers have seen next-to-no progress on these initiatives in the 5+ years since the Power to People review was published and the likelihood of further delays is deeply frustrating.

- With the Department acknowledging that it may have to consider further saving options that have a negative impact on people with dependents – a Section 75 group which includes unpaid carers – it is essential that another EIA and wider consultation take place before any such decisions are progressed.
COMMUNITY CARE

1. The Department of Health’s flat funding settlement will have significant negative consequences for community care provision in Northern Ireland. While it is to be cautiously welcomed that spending on these services has not been cut, at this stage, to help close the Department’s funding gap, the lack of additional resource means Trusts will be unable to make any headway with the severe unmet need that already exists, and which will only grow in the months ahead.

2. The findings from Carers NI’s 2022 State of Caring survey \(^1\) illustrate the levels of unmet community care need that already exist in Northern Ireland, with:
   - 26% of unpaid carers having never had access to services from paid care workers.
   - 27% having never had access to residential care.
   - 16% having no care and support services available in their area.
   - 16% unable to access care because a shortage of staff means care agencies have no capacity to support them.

3. This situation will only worsen if the local Health and Social Care system is operating on a stand-still basis while an ageing population, with growing levels of ill-health, requires more and more community care capacity – particularly with winter pressures on the near horizon.

4. In this scenario, demand for care does not disappear but merely moves elsewhere, very likely onto the shoulders of family members and friends to meet care gaps on an unpaid basis. This has consistently been the implicit and explicit ‘solution’ when the HSC system does not have the staff, resources or capacity it needs, and the extent to which unpaid carers have been playing a growing role in propping up local Health Trusts is evidenced clearly through Census data, which shows an over 20% increase in the number of people performing the most intense unpaid caring roles, of 50+ hours per week, between 2011 and 2021. \(^2\)

5. While attention often focuses on the necessity of such an approach for the sake of the health service, little attention is paid to the consequences for unpaid carers – who are going months or years without a proper break and being pushed to near total collapse, exhaustion and loneliness by their intensifying caring roles. One in five carers in Northern Ireland already describe their physical health as bad or very bad, with more than one in four saying the same about their mental wellbeing. \(^3\) This inevitably translates to extra pressure and costs to the health service when carers themselves need treatment.

6. Closely linked to this, we are gravely concerned at the prospect of cutting the number of nursing, residential and domiciliary care places if current saving and efficiency measures have an insufficient impact on the Department’s funding gap. We must be absolutely clear that such action – when so many households are already missing out on the community care they need – would result in significantly more pressure falling onto unpaid carers, many of whom are already at breaking point.

7. In the context of a cost of living crisis, it must also be acknowledged that having to take on even greater unpaid caring responsibilities will leave people with less time to go to work and earn an income, when tens of thousands of local workers are already reducing their hours or leaving the labour market entirely because they don’t have time to juggle work and caring.

\(^2\) NISRA. Census 2021.
together. [3] Poverty is a major driver of ill-health and this potential impact must therefore be part of the Department’s analysis when it is considering future cuts.

8. It is essential that the Department commits to undertake another EIA, and wider consultation with relevant groups, in the event that these more drastic saving measures are deemed necessary in the future.

COMMUNITY AIDS AND HOME ADAPTATIONS

9. The risk of a 10% cut in spending on community aids and home adaptations would be seriously detrimental to the independence and quality of life of many disabled people and their unpaid carers across Northern Ireland. Research has shown that, with statutory support schemes like the Disabled Facilities Grant (DFG) too-often inaccessible, local carers are putting their health in jeopardy as they perform physical caring roles in housing environments that aren’t properly adapted/without the correct equipment. Others are getting into debt as they try to pay for adaptations themselves. [4]

10. Average waiting times for adaptations through the DFG system are already standing at over three years in some parts of Northern Ireland, [5] meaning any further spending cuts in this area would make a bad situation worse and only increase the type of negative consequences for carers that are set out above.

UNPAID CARER-RELATED INITIATIVES IN THE REFORM OF ADULT SOCIAL CARE

11. It will be a source of deep frustration to unpaid carers that the Department’s 2023/24 budget settlement will not allow for greater progress to be made in the reform of adult social care.

12. The Department has put forward a number of key policies that would make a significant difference to the lives of unpaid carers – particularly a new Carers’ Register, independent Carers’ Champion and review of the NI Carers Strategy – but which have yet to be progressed. It is a matter of public record that, prior to the publication of 2023/24 budget allocations, the Department did not have sufficient resources to begin implementing some of these recommendations, [6] and it now seems likely that carers will be waiting until 2024/25 at the earliest for this situation to change.

13. Northern Ireland’s last Carers Strategy is nearly two decades old – lagging far behind other jurisdictions of the UK – and the lack of a robust register of carers is a major barrier to providing them with greater support. There is an irrefutable case for progressing the carer-related recommendations in the adult social care reform process, and we would call for these initiatives to be prioritised should sufficient additional funding be made available to the Department in this year’s monitoring rounds.

CONCLUSION

14. Carers NI recognises that officials in the Department of Health are operating under the worst possible circumstances – with an entirely inadequate budget and no Minister in place to advocate for the required funding levels. The consequences for unpaid carers will be severe, but with a budget bill soon being passed in Westminster by the Northern Ireland Office, there seems little scope to change the Department’s budget settlement at this time.

15. Within this context, we would urge all Permanent Secretaries across Stormont departments to recognise the pressure facing DoH and prioritise it for as much additional funding as possible in future in-year monitoring rounds.

16. With the Department acknowledging that it may need to consider further budget decisions with additional negative consequences for unpaid carers, it is also vital that another Equality Impact Assessment be carried out – along with wider engagement with unpaid carers and the organisations representing them – before any such decisions are progressed.

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