Action for Carers and Employment: Impact of the ACE partnership 2002-7

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CARERS look after family, partners or friends in need of help because they are ill, frail or have a disability. The care they provide is unpaid.

Acknowledgements

We are very grateful to staff at Carers UK and to all ACE partners for their help in compiling this report.

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CES Report No. 5 provides an overview of the ACE partnership 2002-7.

It outlines the main purposes of ACE, which were to raise awareness of the barriers facing carers who want to work, and to test the mechanisms that can support them in combining work and care. ACE was designed to support the mainstreaming of effective support for carers of working age, and the development of services which enable carers to work, with an emphasis on policy changes and reform. The report provides a summary of what the ACE project achieved through its operational, research, policy and transnational partnerships.
Executive Summary

This report, *Action for Carers and Employment: Impact of the ACE partnership 2002-7*, has been compiled as part of the Carers, Employment and Services (CES) study conducted in 2006-7 at the University of Leeds, commissioned by Carers UK. It complements the other reports in the CES Series, which present and discuss the new CES research findings, by highlighting the work of the ACE partnership, in both its phases, 2002-5 and 2005-7.

**Background**

*Action for Carers and Employment: Impact of the ACE partnership 2002-7*, is one of a series of publications relating to the CES study, and should be read in conjunction with the other reports. The CES study was commissioned to strengthen the evidence base available to inform future public policy and service development with regard to carers and employment. It built on previous research, also commissioned through the Action for Carers and Employment partnership, and published separately, which looked mainly at what can be done within the workplace to support carers in combining work and care. This report presents details of the wider partnership context in which the CES study was undertaken, drawing attention to the full range of partnership activities, and to the work of the other ACE partners. These informed the research design and activities, and acted as both a stimulus to and a ‘sounding board’ for many aspects of the research approach.

ACE 1 addressed the barriers faced by carers in entering, re-entering, or remaining in the labour market, with the long-term goal of mainstreaming the support offered to carers. Its specific aims were to:

- Develop a pre-vocational training programme and accreditation framework.
- Promote flexible employment policies and practices.
- Develop more effective local individual support and guidance for carers.
- Improve local alternative care services for the dependants of carers.
- Deliver carer awareness training to support the development of good practice.
- Develop a national partnership of carers, relevant government departments, employers and employers’ organisations, unions and voluntary organisations to influence the development of services and policy at local and national level.
ACE 2 explored the development, design and delivery of alternative care services that enable carers to work, with the long-term goal of influencing policy on development and investment in the health and social care sector. Its specific aims were to:

- Carry out research into the factors that influence why, how and if carers access alternative care services that enable them to work.
- Use delivery partnerships to identify and enhance existing care services, and develop and test new care services, which enable carers to work.
- Support the participation of carers in planning the development and delivery of care service provision.
- Develop a national policy partnership to use the lessons of the research and delivery partnerships to influence long term development and investment in the health and social care sector, including working to establish a National Care Strategy.

The aims of both ACE 1 and ACE 2 were addressed through the ACE Development Partnerships, which comprised:

- A delivery partnership, including local pilot projects
- Policy partnerships
- Employers for Carers
- A research partnership
- A transnational partnership

The Report outlines the main focus and activities of each of the above elements, in both phases of ACE, highlighting key goals and achievements and revealing the scope, contribution and impact made by ACE in terms of policy, practice and research development between 2002 and 2007. It concludes with a brief assessment, confirming the very significant progress made in the five years of ACE’s operation, and the prospect of lasting influence at the local, national and international level – but also notes that much work remains to be done if the goal of fairness for all carers, with carers of working age having the chance to combine caring with a job or career if they choose, is to be attained.
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This report, *Action for Carers and Employment: Impact of the ACE partnership 2002-2007*, is one of a series of publications arising from the CES study. It presents a summary of the work of the ACE partnership, in both its phases, 2002-5 and 2005-7, highlighting the main aims, activities and achievements of the partnership. It is not an evaluation report, but offers instead a succinct outline of the main work undertaken through ACE.

The research findings from the CES study, commissioned through ACE 2, are reported in the complete series (see overleaf). There is also a set of shorter reports relating to Scotland, Wales and the six English localities studied; these were designed to assist local agencies involved in providing support for carers in their policy development and planning.

This report begins by outlining the overall approach of the ACE partnership, 2002-2007, explaining the concept which lay behind it and the design chosen for it (Section 1). After identifying the full range of partners involved in ACE, the report then goes on in Section 2 to identify each of the ACE 1 and ACE 2 delivery partners, briefly summarising their individual project aims, activities and achievements. Section 3 provides an account of the ACE policy partnerships, emphasising their role and impact across the five-year period. This shows what was achieved in relation to the carers and employment agenda in ACE 1, and identifies how in ACE 2 this was extended to include a very active focus on the way services to carers and those they support contribute to the caring and employment agenda. The ACE research partnership is then briefly outlined in Section 4, and presents a summary of the full range of research undertaken in both phases of ACE. Finally, Section 5 presents a very brief account of the two ACE transnational partnerships, indicating the contribution they made to the overall success of ACE, and showing how the engagement with partners in other parts of Europe has contributed to the active development, supported by ACE, of the carers and employment agenda at EU level.

In writing this report we have drawn on the material made available by individual partners; however we would emphasise that it is not possible to cover all aspects of the many different project activities and achievements in one brief report. Where appropriate, we have sign-posted readers to websites and other resources which will provide additional information and further detail, and we hope this is helpful. We are grateful to all project partners for the information they have provided; the details included are accurate to the best of our knowledge, and any omissions are unintentional.
No. 1 Stages and Transitions in the Experience of Caring
Becoming a carer – the impact of caring in the first two years, as experienced by carers of working age; the longer term impact of caring on carers’ lives when a caring role is sustained over two or more years; carers’ views and perspectives as they deal with the different ways in which caring can come to an end.

No. 2 Managing Caring and Employment
Carers who are combining unpaid care with paid work – how they manage and cope and the difficulties which sometimes arise; why some carers have left employment to care, and what this means for them and their families; the perspectives and experiences of carers who want to work but do not have a paid job.

No. 3 Diversity in Caring: towards equality for carers
The different characteristics of Britain’s 4.27 million carers of working age – carers in Britain’s ethnic minority communities; caring and its challenges for carers in rural and urban contexts; caring in different financial circumstances, and the problems faced by those who are ‘caring in poverty’; carers and how caring affects their health; caring in different personal contexts – the relationships between carers and those they support, and the different conditions and needs of those they care for.

No. 4 Carers and Services in their Local Context
Recent developments affecting local service provision for sick and disabled people and their carers; differences in the arrangements made in Scotland, Wales and England under devolved government; carers in 10 local contexts – differences between carers, and in the demand for care support at the local level; local arrangements for supporting working carers; the resources allocated to supporting carers; examples of best practice and innovation in supporting carers.

No. 5 Action for Carers and Employment: Impact of the ACE partnership 2002-7
The objectives, design and outcomes of the ACE projects; the role of research in supporting the ACE strategic aims and summary of the findings of the Carers, Employment and Services (CES) study; the work undertaken by the ACE partners in England, Scotland and Wales, and their main achievements; the role of transnational activities in ACE, and their significance for future policy-making at European level.

No. 6 Carers, Employment and Services: time for a new social contract? Report summary and recommendations
Main findings from the CES study about carers in England, Scotland and Wales; description of the study methodology; the implications of the findings for the future public policy agenda on working carers; the rationale for developing better support for working carers at local and national levels; key challenges and how they can be tackled; recommendations about policy and practice for service providers, employers, central/local government and the voluntary sector.
1. The ACE partnerships 2002-2007

**ACE and EQUAL**

The ACE ‘concept’ – a vision of what might be achieved through a partnership supported by substantial investment secured through the EU EQUAL Community Initiative Programme – was first outlined by Carers UK in its initial application as lead partner in the ACE project in 2001.

All EQUAL programmes made funds available through the European Social Fund and were focused on enabling disadvantaged groups to access additional resources which would assist them in accessing the labour market. ‘Labour market activation programmes’ were already in existence throughout Europe, and were already supporting each member state of the EU in taking forward its ‘National Action Plan for Employment’ which – in the context of the wider European Social Agenda – emphasised the importance of raising employment rates at the national level, and of drawing into paid work those groups and individuals which tended to be excluded from active participation in the labour market. ‘Labour market activation programmes’ were already in existence throughout Europe, and were already supporting each member state of the EU in taking forward its ‘National Action Plan for Employment’ which – in the context of the wider European Social Agenda – emphasised the importance of raising employment rates at the national level, and of drawing into paid work those groups and individuals which tended to be excluded from active participation in the labour market.

In 2001 carers – by which we mean those supporting, unpaid, someone who is ill, frail or disabled – were not identified on the EU agenda, and it required imagination and persistence on the part of Carers UK to gain confirmation that a bid for EQUAL funding on behalf of carers, focused on carers’ desire and right to work, and on mechanisms to support them in accessing or remaining in employment while providing unpaid care, would be eligible. This hurdle identified, tackled and overcome, Carers UK then set about scoping an ambitious project which could only succeed if it secured the active participation and commitment of many other agencies.

**The ACE concept**

Carers UK was convinced, through its previous research, policy work and engagement with carers, that carers and employment was a very important policy issue, which deserved to be high on the agenda at both national and EU level. It knew through its campaigning and policy work how often carers found they were forced to give up work in order to provide the care needed by the person they supported. They were also aware of how often this was a step taken reluctantly, with financial consequences which were frequently very damaging for the families concerned, and that even when care came to an end, many carers found it very difficult to return to work. As awareness of demographic change grew – with Britain’s rapidly ageing population a key factor – and as job growth in the British economy continued amid significant identified labour and skills shortages in many parts of the country, it was clear that enabling carers to work was in the best interests of many different parties. These included carers who wanted to maintain their jobs and careers; employers who needed their labour and wanted to hold on to skilled and experienced employees; and the
country as a whole which needed to secure higher employment rates and to retain more older workers in the formal economy.

The ‘concept’ for ACE thus involved the development of an integrated approach, engaging with individuals and employers, which could take into account, and address, both ‘individual’ and ‘systems’ barriers facing carers who wanted to work. This meant that it would be crucial to involve employers as well as policy-makers in the ACE partnership, and that the knowledge and experience of existing local projects and resources – both in the voluntary sector and in some local authorities – needed to be harnessed from the outset. It was soon decided that there would be four key elements within the initial ACE partnership:

- Demonstration pilots – whose role would be to test approaches to supporting carers who wanted to work, through innovative interventions.
- Effecting policy change – working with central government departments to develop and strengthen the approach to carers taken when the UK government launched its first National Strategy for Carers in 1999.
- Creating an evidence base drawn from independent research, which could identify the scale of the issue and show how carers’ employment was affected by their caring role, and with what consequences for them, their families and their employers.
- Shifting the topic of carers and employment right up the public policy agenda, through debate, discussion and engagement with key agencies, and through a dissemination and public events strategy which would give high profile to the work of the ACE partners and would whet the nation’s appetite for significant change in this field.

Prior work had identified some of the barriers faced by carers wishing to combine work and care as:

- Loss of confidence and/or work skills.
- Limited access to training.
- The invisibility of carers in relation to mainstream employment services.
- The problem of finding flexible, understanding employers.
- Difficulties in bridging the gap between benefits and paid work.
- Inflexible and inadequate alternative care provision.

ACE was designed to identify ways of addressing these barriers, and to carry the key messages about what worked and what did not, and why it was important to get it right, to the right people.

Design of the ACE project

Leadership

ACE was conceived to achieve real and long term change in the systems supporting carers in and into work, and it was critical that its lead partner should be in a position to have a real influence on policy at national level. Carers UK, a national lobbying and campaigning organisation with a membership of carers and professionals working with carers, had a significant track record of achieving change, including legislative change for carers. It had also built a good reputation for partnership working, in the areas of research, policy work and engagement with carers. The organisation already had a good awareness of the barriers to work facing carers; what it did in the design of ACE was to lever in what was needed to make a case for change, demonstrate how it could be achieved, and persuade the ‘right people’ to make it happen. It also developed, managed and sustained the partnership needed to achieve its objectives, identifying key actors at each level of the partnership with the capacity and commitment to lead on the development and delivery of their own roles and responsibilities.

Research (action research and new empirical research)

The demonstration pilots in both ACE 1 and 2 were conceived as ‘action research’ to explore what made the difference to carers who worked or wanted to work, and to test support mechanisms on the ground. Alongside this activity, the new empirical research commissioned and carried out in ACE 1 and 2 provided a methodologically robust evidence base not only for this activity, but for the case for change itself.

Engaging employers

It was understood from the outset that ‘employer
engagement’ with the activities and objectives of ACE would be critical both in developing and promoting good practice to support working carers, and in contributing to research on the business and social benefits of doing so. Employer engagement was also seen as central to achieving the policy outcomes arising from ACE.

**Policy engagement**

A great strength of ACE in both rounds was the identification and involvement of key policy stakeholders from the beginning, and the recognition that policy partnerships had to be supported, sustained and grown throughout the lifetime of ACE. Benefits to policy partners were also identified and promoted; these included an ‘offer’ made by the partnership that it would go well beyond merely identifying blockages in the systems supporting carers, and would endeavour to propose solutions, which, wherever possible, had been carefully thought through and tested.

**ACE 1 aimed to:**

- Address the loss of confidence and work skills experienced by carers out of work for long periods, through developing individual support, and an accredited pre-vocational training framework.
- Embed carers in mainstream employment and information, advice and guidance services.
- Bridge the gap between benefits and work.
- Work with employers to develop ‘carer-friendly’ working policies and practices.
- Improve access to good quality, flexible and affordable alternative care services.
- Use the lessons of the delivery and research partnerships to embed carer awareness and support in mainstream services.

The ACE 1 Development Partnership comprised:

* A **policy partnership** comprising Contact a Family, the Department of Health, the Department of Trade and Industry (now the Department for Industry, Universities and Skills and the Department for Business, Enterprise and Regulatory Reform), the Department for Work and Pensions, the Equal Opportunities Commission (now part of the Equalities and Human Rights Commission), GMB, the Home Farm Trust, the Princess Royal Trust for Carers, Unison and Working Families.

A **national employers’ group**, Employers for Carers, established to promote work-life balance issues and raise the profile of carers in the workplace. This group included: BT, the BBC, Business in the Community, the Confederation of British Industry, Centrica, the Department for Constitutional Affairs, the Department for Trade and Industry, HSBC, Jobcentre Plus, Listawood, the Metropolitan Police, Nestor Healthcare, the NHS, and PricewaterhouseCoopers.

A **delivery partnership** including City & Guilds and local pilot projects in Anglesey, Carmarthenshire, Ealing, Kirklees, Sunderland and Surrey.

A **research partnership** with CRESR (later CSI) at Sheffield Hallam University, tasked with building an evidence base about supporting carers in and into work.

A **transnational partnership** with F&M Power, working in Vorarlberg, Austria, on activities to support parents returning to the labour market. This work was supported by the European Institute for Social Services, University of Kent, which also had responsibility for ACE National implementation, delivery and financial monitoring.

**ACE 2 aimed to:**

- Build an evidence base on the factors that influence why, how and if carers access alternative care services that enable them to work.
- Use delivery partnerships to identify and enhance existing care services, and develop and test new care services, which enable carers to work.
- Support the participation of carers in planning the development and delivery of care service provision.
- Use the lessons of the research and delivery partnerships to influence long term development and investment in the health and social care sector, including working to establish a National Care Strategy (work being incorporated in the Prime Minister’s 2007-8 review of the National Strategy for Carers and the government’s Green Paper on Social Care).

The ACE 2 Development Partnership comprised:

* A **policy partnership**: The Association of Directors
of Social Services (now ADASS), Afiya Trust, the Commission for Social Care Inspection, the Social Care Institute for Excellence, Skills for Care, the Department of Health, the Department for Work and Pensions, the Department for Trade and Industry (now the Department for Industry, Universities and Skills and the Department for Business Enterprise and Regulatory Reform), the Equal Opportunities Commission (now part of the Equalities and Human Rights Commission), Help the Hospices, the Home Farm Trust, and TATE, an EQUAL partnership exploring how assistive technology can support the independence of people with learning disabilities, and enhance employment opportunities for carers.

Employers for Carers, responsible for promoting work-life balance issues and raising the profile of carers in the workplace. The group included: BT, the BBC, Business in the Community, Centrica, the Department for Constitutional Affairs, the Department for Trade and Industry, HSBC, Jobcentre Plus, Listawood, the Metropolitan Police, Nestor Healthcare, the NHS, and PricewaterhouseCoopers.

A delivery partnership comprising local pilot projects in Hertfordshire, Surrey and West Sussex and a number of projects based at sites managed by Crossroads – Caring for Carers and Nestor Healthcare.

A research partnership involving the Centre for International Research on Care, Labour and Equalities (University of Leeds) and Bridge Research and Development, together tasked with building an evidence base relating to support for carers in and into work.

A transnational partnership with partners in Estonia, Italy, Latvia and the Netherlands, on activities to support working carers, to develop care services which enable carers to work, and to address training and support issues in unregulated care markets. This work was again supported by the European Institute for Social Services, University of Kent, which also had responsibility for ACE National implementation, delivery and financial monitoring.
2. ACE Delivery partnerships

The focus of the ACE 1 delivery partnership

The focus of ACE 1 was the development and delivery of support to carers to help engage them and move them towards the labour market, and the development of a more effective infrastructure to support their training and employment activities. The work of the ACE 1 delivery partners was extensive and wide-ranging, and is fully reported in the ACE 1 Evaluation Report. At this stage the individual barriers facing carers were identified as:

- Loss of confidence and work skills for carers out of work for long periods.
- ‘Invisibility’ to mainstream employment and information, advice and guidance services.
- Finding good quality, flexible and affordable alternative care services.
- Finding an understanding and flexible employer.
- Bridging the gap between benefits and work.

The ACE 1 partnership worked with six local and national delivery partners to develop and deliver support directly to carers to help them move towards the labour market, including:

- Developing pre-vocational training to re-engage carers and help develop confidence to move into work-related training.
- Working with employment and information, advice and guidance services, including Jobcentre Plus, to raise awareness of carers and mainstream activities to support them.
- Working with service providers to explore the provision of services that ‘work around work’.
- Working with employers to develop carer-friendly working policies and practices.
- Working with government to explore benefits reform, and with employment and welfare services to provide benefits advice to carers, including ‘in-work’ benefits calculations.

The principal ACE 1 delivery partners were:

- City & Guilds
- Contact a Family
- Kirklees Metropolitan Borough Council
- Sunderland People into Employment and Sunderland Carers Centre
- Surrey County Council

A brief summary of their activities and achievements is presented below. This does not aim to fully capture all of each project’s work and impact, but to indicate its scope and focus. Fuller information is available in the published evaluation report and on relevant websites.

City & Guilds

City & Guilds, through ACE 1, identified carers as the first target group for an innovative e-learning
pre-vocational training programme designed to build confidence, recognise and value the skills gained through caring, and identify ways in which they can be used as a bridge to learning, volunteering and work. **Learning for Living** was designed with carers’ particular needs in mind and drew on City & Guilds’ extensive experience of adult learning. The context for the learning product was flexibility to suit individual carers’ circumstances, with carers able to engage with ‘bite-sized chunks’ of learning, at their own pace. By delivering courses via the Internet as well as in selected centres, **Learning for Living** allowed carers to participate in their own home, or in social/group situations in ACE clubs run in local pilot areas. The presentation of the materials to learners was highly visual, and contained audio resources as well, rather than relying mainly on reading. During the piloting phase, the course was delivered as individual e-learning with on-line tutor support, but also as group learning delivered through adult education, FE or carers centres. This approach was maintained beyond ACE 1 with the course eligible for funding via local authorities’ Carers Grant, as well as through mainstream funding through Learning and Skills Councils, and roll-out of the programme in Scotland supported with funding from the Scottish Executive. **Learning for Living** was endorsed through official National Qualifications Framework approval granted in 2004. This enabled it to become a Level 2 personal development award, the *Certificate in Personal Development and Learning for Unpaid Carers*. The final product went live in September 2004, and is available on the City & Guilds Learning for Living website.

**Staff:** Peter Mathias; Emma Rigby; Sherinne van Rooyen; Alan Vanstone

**Contact details:** www.learning-for-living.co.uk

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**Kirklees Metropolitan Borough Council**

The ACE programme in Kirklees built upon an existing project established via European Social Fund Objective 3 funding and undertaken through Carers Gateway (the Kirklees Metropolitan Council carers centre).

The ACE 1 provision in Kirklees included:

- ACE clubs, providing dedicated re-engagement training and job search skills.
- Individual information, advice and guidance for carers.
- Individual and group ICT training.
- The City & Guilds *Learning for Living* pilot.
- Three-day residential courses at Hillcroft College.

Participants were involved in a transnational study visit to Austria, and produced a diary of their experiences using IT skills gained through the project. A group of Ealing Contact a Family parents who were active in the ACE project established the ACE Training Network for continued support and information relating to training, work, leisure and childcare.

The project actively recruited participants across minority ethnic groups.

**Staff:** Jo Hardy; Heather Matthews; Stefan Wrana

**Contact details:** http://www.cafamily.org.uk/ealing/index.html

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**Contact a Family**

The Ealing ACE pilot was based within the local branch of Contact a Family, a national voluntary organisation providing support for parent carers of disabled children.

The project provided employment-related carer support, including:

- ACE clubs, providing dedicated re-engagement training and job search skills.
- Individual information, advice and guidance for carers.
- Individual and group ICT training.
- The City & Guilds *Learning for Living* pilot.
- Three-day residential courses at Hillcroft College.
- Five-week introductory IT courses.
- Work with Jobcentre Plus to deliver work-focused interviews for carers, through a service level agreement.

Continuation funding for the project from Jobcentre Plus (ACE Plus, from October 2004) allowed staff to provide a 26-week training programme for
carers involving ACE club modules, job-search skills, and work-experience placements. Kirklees also developed a Carers Training Placement Scheme, funded by central government through the Neighbourhood Renewal Fund, which provided a number of placements for carers entering work.

**Staff:** Julie Allen; Celia Clegg; Janet Edmunds

**Contact details:** [http://www.kirklees.gov.uk/community/health-care/carers/carers-link.html](http://www.kirklees.gov.uk/community/health-care/carers/carers-link.html)

**Sunderland People into Employment and Sunderland Carers Centre**

This project was able to build on earlier developments involving the Carers Centre (which established a Carers in Employment Working Group including employers, carers, trade unions, and the local industrial chaplain, following the launch of the first National Strategy for Carers in 1999. ACE 1 created the opportunity to form a new partnership involving an existing service, People Into Employment (PIE), Sunderland Carers Centre and Sunderland Social Services.

The project provided employment-related carer support, including:

- Offering information, advice and guidance to carers wanting to return to work but needing more confidence and/or training.
- Offering carers workplace ‘refresher’ training.
- Work with employers to promote good practice in supporting carers.
- Helping carers secure packages of care to enable them to work.

The ACE 1 project in Sunderland supported carers with job-search and the personal development skills needed to prepare them for the workplace through PIE, and offered individual advice and support and personal development courses for carers through Sunderland Carers Centre. Their approach included securing guaranteed interviews and work placements for carers; this was helped by a background of earlier contacts with employers and by the project’s commitment to partnership working. PIE also took part in the piloting of Learning for Living. A local Carers Charter scheme was developed by the Carers Centre to provide an incentive for employers to develop support for working carers, and to promote the issue to other employers.

PIE and the Carers Centre worked in close partnership with Sunderland Social Services to identify service provision that could support carers to enter or remain in employment – this work continues with the active participation of agencies involved in local and regional regeneration and economic development, such as:

- Northern Way Worklessness Pilot.
- Development and Regeneration Department.
- New Deal for Communities.

The partnership continues to use the training courses it developed through ACE 1, including Learning for Living, and the information, advice and guidance built up through the ACE project.

The Employers Charter developed by Sunderland Carers Centre has continued to engage local employers, and an Employers Forum has been established to help promote learning and share good practice about supporting carers at work.

**Staff:** Gill Charman; Liz Dabrowski; Ailsa Martin

**Contact details:** [http://www.pie-sunderland.org.uk/info@sunderlandcarers.co.uk](http://www.pie-sunderland.org.uk/info@sunderlandcarers.co.uk)

**Surrey County Council**

Surrey ACE originated as an ESF INTEGRA project and was first set up in 1998. Activities were managed within Action for Carers (Surrey), a voluntary sector carers centre funded by Surrey County Council.

The project offered:

- Carer awareness training for local and health authority staff.
- ACE clubs, providing dedicated re-engagement training and job search skills.
- Individual information, advice and guidance for carers.
- The City & Guilds Learning for Living pilot.
- Carer awareness training for local Jobcentre Plus staff and for employers.
- Specialist workshops covering volunteering, learning / training opportunities, and job skills.
• Three-day residential courses at Hillcroft College.

Surrey ACE gained Matrix accreditation as an IAG provider during ACE 1.

**Staff:** John Bangs; Sandra Bolton; Diane Cotton; Yvonne Hudson-Vaughan; Dreen Legg; Karen O’Malley

**Contact details:** [http://www.carersnet.org.uk/actionforcarers/afc.html](http://www.carersnet.org.uk/actionforcarers/afc.html)

In ACE 1, Carers Wales originally also planned to provide carer support in two localities as part of the ACE project: Anglesey in North Wales, and Carmarthenshire in South Wales. Operational difficulties meant this planned work could not go ahead, as reported in the ACE 1 evaluation report. Carers Wales re-focused its work on the policy agenda in Wales, and continued these activities successfully in ACE 2.

**The focus of the ACE 2 delivery partnership**

ACE 2 focused on the last and most intractable identified barrier facing carers wanting to engage in labour market participation – the provision of alternative care services that enable carers to work. It involved six public, private and not-for-profit care service providers in England, Scotland and Wales, working towards improving the infrastructure of care services that ‘work around work’. As in ACE 1, it also aimed to achieve long term policy impact, involving key stakeholders such as government departments, regulatory bodies and employers, to work towards addressing long term development and investment in the social care sector. The work of the ACE 2 delivery partners was extensive and extremely wide-ranging, and is fully reported in the ACE 2 Evaluation Report. The ACE 2 partnership worked with local and national service providers, and carers’ organisations, to develop and deliver flexible support services to carers, including:

• Identifying and enhancing existing care services, and developing and testing new care services, which enable carers to work.

• Supporting the participation of carers in planning the development and delivery of care service provision.

The ACE 2 delivery partners were:

• **Contact a Family**

• **Crossroads Caring for Carers**

• **Equal Partners**

• **Hertfordshire County Council**

• **Nestor Healthcare**

• **Surrey County Council**

• **West Sussex County Council**

A brief summary of their activities and achievements is presented below. Again, this does not aim to fully capture all of each project’s work and impact, but to indicate the main aspects of its scope and focus. Fuller information is available in the evaluation report of ACE 2 and on relevant websites.

**Contact a Family**

Contact a Family developed ACE activities in Lewisham in partnership with Contact a Family’s Play Inclusion Project, which provides advice and support to families with a child with a disability or special need. The project complemented the activities of the Play Inclusion Project, with new activities including:

• Carrying out an ‘audit’ of childcare, care and play services available to disabled children, including within mainstream provision, which would enable parents to access work and/or learning.

• Providing training for play workers to enable them to support disabled children, including in mainstream services.

• Producing a directory of services accessible to disabled children across the Borough of Lewisham.

As part of its work the ACE Project in Lewisham identified shortfalls in current provision, and advised the Local Authority on unmet need. ACE activities were absorbed into the Play Inclusion Project as a continuing service.

**Staff:** Sharon Ferguson; Tim Moore; Stacy Nichols

**Contact details:** [http://www.cafamily.org.uk/lewisham/index.html](http://www.cafamily.org.uk/lewisham/index.html)

**Crossroads – Caring for Carers**

Within the ACE Partnership, Crossroads piloted alternative models of service delivery to test how its services could best support carers who want or need
to work. Activities took place in Anglesey, Ellesmere Port Neston & Wirral, Epping & Harlow, Gwynedd, Isle of Wight, Milton Keynes, Swansea Neath Port Talbot, and included:

• Developing services for seasonal workers in rural areas to support their needs for replacement care, including farmers and tourism workers in Wales.
• Supporting a major employer to develop a helpline for carers with caring responsibilities.
• Developing ‘wrap around’ services to disabled children – covering the start and end of the school day – to allow parent carers to access employment.
• Developing access to mainstream services, such as holiday play schemes, to disabled children.
• Delivering flexible services to carers of working age to enable them to access work and/or training.
• Delivering rapid response services to families to allow them to continue working during a caring crisis.

The work of ACE has informed the development of services delivered by Crossroads, and influenced its priorities for future service delivery.

Staff: Rosemary Hawkins; Jenny Leitch

Contact details: http://www.crossroads.org.uk/

Equal Partners

Equal Partners developed a national model to support carers at local level to engage in consultation on the design, delivery and access arrangements relating to local services. Activities included:

• Providing practical information about the latest changes affecting carers, including equal opportunities and human rights.
• Giving carers skills to help them in getting their voice heard and in negotiating with local authorities and other influential organisations, through training and networking.
• Giving carers support by enabling them to share ideas and learning about what works through a virtual network of thousands of carers across the UK.

One working carer commented:

_I love the style and the way it works. It’s ideal for working carers, and those who can’t travel long distances because it works largely through email and post. It’s raising the standard of partnership and enables those taking part to be well-informed and to know their rights._

Continuation funding was sought to continue the work of Equal Partners as a mainstream service for carers.

Staff: Gavin McGregor; Pam Sutcliffe; Clare Woodford

Contact details: http://www.carersuk.org/Getinvolved/EqualPartners

Hertfordshire County Council

The Hertfordshire ACE Project provided an integrated assessment, information, support and guidance service for carers entering or remaining in work and/or training. The project’s aims were to:

• Set up and provide an innovative and enabling service to individual carers.
• Develop tools to help make improved practice sustainable.
• Highlight and improve practice, across the county and across agencies, needing to develop in order to support carers wishing to combine caring and study or work.
• Assist professionals in complying with Section 2 of the Carers (Equal Opportunities) Act 2004.
• Gather evidence locally to identify policy issues around the working carers’ agenda and feed them into the ACE national partnership.
• Develop and influence carers’ inclusion in local policies for sustainability beyond the project.
• Assist, share and learn from ACE national and transnational partners.

The project was delivered through:

• A Work and Benefits Advice Service.
• Brokerage (with the local authority and service providers) for carers seeking flexible services to enable them to work.
• A ‘Solutions’ budget to support flexible service delivery.
• Brokerage (with employers) for carers seeking flexible working options.
• Training on Carers Assessments and how they can identify work, learning and leisure issues and outcomes for carers (with full Continuing Professional Development accreditation).
• Promotion of a ‘Flexible Working Agreement’ between local authority line managers and working carers, to ensure flexible working arrangements are honoured following a change in line management.

In addition to its casework service, Hertfordshire ACE provided a free-phone telephone and e-mail service for all carers and professionals in Hertfordshire to discuss referrals or any work-related issues. Hertfordshire ACE worked with a multi-agency Steering Group, and lobbied successfully to include carers in the Eastern Regional Economic Development Strategy. Continuation funding was identified to carry on the work of ACE as a mainstream service.

**Staff:** Jill Akroyd; Tim Anfiligoff; Rachel Carter; Carolyn Gale; Annette Gaunt; Jasmine Jenkins; Helen Potts; Helen Powlesland

**Contact details:** http://www.hertsdirect.org

**Nestor Healthcare**

Nestor Healthcare, the UK’s largest social care provider, dedicated three delivery sites to identifying key issues for the development of services that would enable carers to work. Activities included:

• Identification of a carer or carers where there is a service user.
• Changing Nestor’s culture and language – recognition of ‘paid’ versus ‘unpaid’ care, and the value of the carer input.
• Routine inclusion of carers in assessment and evaluation documentation.
• Evaluation of Nestor’s Rapid Response Service and its impact on carers and work.
• Partnership working with Crossroads to deliver Rapid Response services.
• A small-scale pilot survey on self-funders and how they make decisions about buying services.
• Exchanging experience across the partnership in particular areas of care, including care for disabled children and palliative care.
• Exchanging experience through transnational working and study visits.
• Exchanging training – exploring how existing models of training within Nestor could be used for Personal Assistants delivering Direct Payments and for paid care workers outside the formal system in countries such as Italy.
• Exploring how telecare services can benefit carers.

Nestor, as a major employer, became a member of Employers for Carers in ACE 2, and contributed as a major service provider to national events, such as the New Horizons conference on telecare. Nestor frontline care workers took part in a transnational visit to Italy to exchange experiences about service delivery and training.

**Staff:** Lorraine Light; Sara McPhee; Cheryl Proctor; Karen Rose; Darren Stapelberg; Nicole Thomas; Irene Wenman

**Contact details:** http://www.nestor-healthcare.co.uk

**Surrey County Council**

Surrey ACE activities were managed within Action for Carers (Surrey), a voluntary sector carers centre funded by Surrey County Council. They built on the work ACE Surrey had done in ACE 1, and included:

• Promoting awareness of the need for equal opportunities for carers and their right to a life beyond caring.
• Promoting inter-agency working and co-operation to ensure carers receive support within the provisions of the Carers (Equal Opportunities) Act 2004.
• Developing and delivering training to health and social care professionals to improve access to social care support for carers in relation to training and work.
• Providing advocacy and brokerage services for carers seeking flexible services to enable them to work.
• Promoting and developing flexible alternative care services which enable carers to work and/or learn,
supported by a ‘Solutions’ budget.

• Promoting flexible employment policies and practices, which enable carers to juggle work and care, through a training programme for local employers.

• Promoting individual information, advice and guidance and work-related training for carers who want to work, through training for relevant providers.

ACE Surrey was successful in accessing continuation funding, and is now part of a mainstream service offering free impartial information, advice and guidance to carers or former carers who are considering a return to learning or work. ACE Surrey provides support in identifying skills and interests, planning career choices and exploring training and/or employment options.

**Staff:** Alex Aebisher; John Bangs; Sandra Bolton; Diane Cotton; Dreen Legg; Karen O’Malley

**Contact details:** [http://www.carersnet.org.uk/actionforcarers/afc.html](http://www.carersnet.org.uk/actionforcarers/afc.html)

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**West Sussex Independent Living Association and West Sussex County Council**

The RISE (Respite, Independence and Supporting Employment for Carers) Project in West Sussex aimed to help carers remain in or return to work and/or learning, supported by appropriate, flexible and affordable services. Working together, West Sussex Social and Caring Services and the Independent Living Association explored different ways of accessing and delivering Direct Payments, including:

• An independent Brokerage Service, looking at alternative ways of accessing Direct Payments which are particularly supportive for those unable to manage them themselves.

• Care Alternatives, exploring different models of service provision such as social enterprises and care co-operatives and the possibility of registration through the Commission for Social Care Inspection.

• Independent Living training, working with carers, service users and professionals to ensure awareness of what independent living means to carers, including its impact on their participation in employment.

• Direct Payments/PAs, promoting the use of Direct Payments and increasing the number of carers being supported.

• Advocacy, building on the current service supporting carers in addition to the person being cared for to access information and overcome barriers.

• Play Scheme, raising the profile and accessibility of holiday schemes to assist parents as carers of children with disabilities to work or learn.

• Telecare, using technology in the home to create greater freedom and independence both for carers and the people they care for.

Continuation funding was identified to enable the work of RISE to carry on as a mainstream service.

**Staff:** Michael Boyd; Caroline Cooper; Anna Coss; Nicky Kentell; Roger Lightbown; Inge Reynolds; Mary Sinclair; John Yeats

**Contact details:** [http://www.ilawestsussex.org/contact_us.html](http://www.ilawestsussex.org/contact_us.html)  

To highlight and disseminate the activities of the ACE 2 partnership, ACE Radio was established, within Surrey ACE, to ensure maximum impact and raise awareness of the overall ACE project.

**ACE Radio**

ACE Radio was developed in Surrey, originally as Care Radio, and was a monthly audio resource for ACE partners, carers, employers, and those working with carers across the UK, Europe and internationally. The programmes provided interviews and comment around the key ACE initiatives and policy developments, accessible via the internet from links on the ACE Radio, ACE National and Carers UK websites. The service was developed to offer podcasts of key broadcasts, live ‘streaming’ of major conferences and coverage of ACE national and transnational events. Events from which broadcasts were made included: parliamentary receptions; launch events; and fringe meetings at the major party political conferences. Throughout ACE 2, ACE Radio regularly interviewed ACE partners, beneficiaries, stakeholders and key players across the UK and around the world.
Staff: Mike Atkinson; Jim Coombe; Ron Critcher; Patricia Mitchell

Contact details: http://www.aceradio.org/

Information about the main outputs from the ACE 1 and ACE 2 delivery partnerships and national events held between 2002 and 2007 can be found in Appendix 1 to this report. Further information about local outputs and events can be obtained from the internet addresses indicated.
3. ACE Policy partnerships

The carers and employment agenda
Carers UK had been making the case for bringing carers and employment issues up the policy agenda long before ACE was conceived, and had already achieved significant policy gains. These included the inclusion, in the UK government’s first National Strategy for Carers (launched in 1999) of a dedicated chapter on carers and employment; and in the first baseline Work-Life Balance Survey, published in 2000, of a question on the caring responsibilities of employees. Carers UK’s previous research, policy work and engagement with carers had already identified many of the barriers facing carers who work or want to work; ACE provided a significant opportunity to develop this work, building a powerful case for change for central and local government, and for employers.

The carers, employment and services agenda
In the first phase of ACE, ACE 1 achieved significant policy outcomes in the area of individual support to enable carers to remain in or enter employment. However, it only scratched the surface of what was identified as the greatest – and possibly the most intractable – barrier facing carers, the provision of services to the people they care for that are appropriate, accessible, affordable and flexible. ACE 2 set itself the very considerable challenge of addressing this complex systems barrier, building on the successful relationships developed through ACE 1 and identifying new partners which could be engaged because of the compelling demographic, labour market and labour supply issues facing the whole of society, in the UK and in Europe.

Influencing central government and supporting legislative change
Both of the ACE partnerships included central government departments which were seen as critical to the carers and employment agenda, and other key stakeholders who could inform and drive the process of policy and legislative change. ACE undoubtedly made an important contribution by building the capacity for some of these stakeholders to effect change, and in providing a powerful evidence base, resonant with the voice of carers, to support the change process.

Significant policy gains – with ACE playing a key role in capacity building, informing, or leading – included:

- The Carers (Equal Opportunities) Act 2004, which for the first time placed a duty on local authorities to consider a carer’s aspirations with regard to access to work, learning or leisure when carrying out Carers Assessments:
- ACE resourced Carers UK’s work supporting the passage of this legislation (which began as a Private Member’s Bill) through its parliamentary stages.
• ACE partners, including Employers for Carers, lobbied for the successful passage of the Bill at all stages.

• To support implementation of this new legislation, ACE produced a Resource Pack for local authorities.

• ACE developed and rolled out a training programme for professionals to support implementation of the Act.

• The establishment of the UK All-Party Parliamentary Group on Carers (with parallel groups subsequently developed in the Welsh Assembly, the Scottish Parliament, and the European Parliament):
  • ACE supported Carers UK, Carers Scotland and Carers Wales in establishing and servicing the UK, Scottish and Welsh Groups, and contributed to specific debates on employment, learning, pensions and income related issues.

• The SCIE Practice Guidance on the Carers (Equal Opportunities) Act 2004 (a web-based resource developed to support its implementation):
  • ACE partners contributed to the development of the Practice Guidance and to its roll-out programme (this included reference to the availability of all ACE-related resources supporting implementation of the Act).

• A higher profile for carers in the CSCI State of Social Care reports 2004/5 and 2006/7:
  • Carers UK provided input to both reports, leveraging in the experience of ACE partners.

• New performance indicators on work with carers for local authorities in the new CSCI Performance Assessment Framework:
  • ACE partners led a group which developed the new performance indicators on carers to be used in the Performance Assessment Framework (PAF).

• The Work and Families Act 2006:
  • ACE partners lobbied for the extension of the right to request flexible working to carers, supported the Act’s passage through parliament, and worked with the DTI on the Regulations pertaining to the Act.

• ACE produced an Employers Resource Pack to support implementation of the Act.

• ACE developed and rolled out training to employers to support implementation of the Act.

• The New Deal for Carers, announced in the Government White Paper, *Our Health, Our Care, Our Say*, published in 2006:
  • ACE lobbied through Carers UK for a review of the National Strategy for Carers to be included in the New Deal, to address barriers facing carers who work or want to work.

• The Prime Minister’s review of the National Strategy for Carers:
  • ACE was represented on the Employment Task Force of the National Strategy Review to inform the group, provide an evidence base for change, and make specific recommendations for change.

Carers Scotland and Carers Wales played a crucial role in taking forward the work of ACE in Scotland and Wales, working to influence policy developments in the devolved administrations. To give a flavour of this part of the work on ACE, below we briefly outline some of the work they undertook.

### Carers Scotland

Carers Scotland undertook an extensive range of policy activities in ACE 2, designed to raise awareness of carers and employment issues, to promote employer support for working carers, to influence policy on services which enable carers to work, and to build on ACE 1 through the roll-out in Scotland of *Learning for Living*.

Examples of the activities undertaken include:

• *Flexible Working: the Shape of Future Employment* – a major conference held in February 2006 for employers from the private, statutory and voluntary sectors to promote the benefits of flexibility in both employment policies and care service provision. A major outcome from this event was the formation of a ‘stakeholders group’ involving representatives from all sectors, which formed the basis for the ACE policy partnership developed in Scotland. A success of the partnership was the establishment of an All-Party Group in the Scottish Parliament,
announced in Carers Week 2006. The conference was the catalyst for organisations to begin the process of developing and implementing flexible working policies and flexible social care services, and put the need to support working carers firmly on the agenda of employers and service providers in Scotland, with new networks established and new partnerships developed to share good practice.

- **A National Framework for Carers and Employment**, produced in May 2007, to raise awareness with both employers and service providers. This was informed and developed in discussion with employers and service providers across Scotland, and set out the economic, business and moral case for organisations to introduce flexible working practices and the arguments for social care providers to provide more flexible services, with examples of good practice. The framework was produced to coincide with and support the implementation of the *Work and Families Act 2006*, which introduced the right to request flexible working for carers.

- **DVD Case Study of a carer in receipt of Direct Payments demonstrating the benefits to care recipient, carer and employer of flexible services and flexible working**, produced in 2007.


- In East Ayrshire, Carers Scotland supported a pilot project developing a person-centred approach to Carers Assessments which aims to improve uptake to ensure better outcomes for carers, and to improve the experience of assessment by adopting a more inclusive and holistic approach, through engagement with carers. The model was designed to be adopted by other authorities and rolled out across Scotland with the support of professional organisations and the Scottish Executive.

**Staff:** Pat Begley; Fiona Collie; Margaret Smith; Jacqui Taylor

**Contact details:** http://www.carerscotland.org/Home

**Carers Wales**

Carers Wales’ participation in ACE 2 was designed to influence policy and practice at national and local level across Wales, with the ultimate aim of improving services for carers. To this end, in ACE 2 Carers Wales:

- Developed a Welsh Policy and Public Affairs strategy.
- Prepared a Carers Wales Assembly Election manifesto.
- Established a Welsh Assembly All-Party Group.
- Set up a TV campaign and media work with BBC Wales and S4C.
- Undertook a survey, reported in *Support and Services for carers – a survey of Welsh Local Authorities 2005/6*.
- Held fringe events and took part in panel discussions at Welsh party conferences: Welsh Conservatives; Welsh Liberal Democrats; Welsh Labour; Plaid Cymru.
- Lobbied the Welsh Assembly on free home care for disabled people.
- Worked with the *Carers Strategy Review Panel* on revisions to the Carers Strategy in Wales.
- Established a Wales National Policy Partnership, involving the EOC, employers, trade unions and the National Assembly.
- Convened meetings of the Local Health Board Carer Members’ Network and supported carers involved in service planning and consultation.
- Made a presentation on carers and social inclusion to the Welsh Assembly Social Justice Committee.
- Joined the Reference Group on re-design of Social Care in the Welsh Assembly.
- Engaged with the cabinet level Carers Champion in the Welsh Assembly on carers and employment issues.

**Key staff:** Eleanor Russell; Francesca Montemaggi; Maggie Titterton; Roz Williamson

**Contact details:** www.carerswales.org
Role of research in supporting the ACE strategic aims

Research was a central part of the design of ACE from its inception. It was evident that to support the strategic aims of the partnership, especially in relation to policy impact and the achievement of lasting change, a solid evidence base both about carers of working age, their needs and situation, and about the impact of interventions and developments at the local and national level would be needed. The evaluation of ACE activities, a formal requirement of the EU EQUAL project funding, provided one set of opportunities to achieve research objectives. It was decided, however, that additional research was also needed: here the aims were to explore how carers’ situation with regard to paid employment changed over time; to gain a fuller understanding of the characteristics of working carers at both national and local level (the inclusion of a question about carers in the 2001 Census provided an opportunity significantly to enhance existing knowledge); and to explore two major issues which were central to ACE, but where evidence was under-developed. In ACE 1 the formation of the Employers for Carers group provided an opportunity to explore the ‘business benefits’ of supporting carers in the workplace; while ACE 2 provided the opportunity to explore how well existing local services in health and social care supported carers. Funding was allocated to enable these questions to be addressed in major research projects commissioned from university-based research teams. As it was also important that research was used to communicate key messages to relevant stakeholders, the ACE research output was designed to be accessible to a wide range of audiences, and included innovative formats and products, such as the policy tool developed by Bridge Research and Development, and special products designed by the Employers for Carers Group.

Below we summarise, first, the main research output from ACE 1. The focus of this work was on carers and employment, and two major reports (plus some statistical publications, described later in the report) were produced by a research team led by Sue Yeandle at Sheffield Hallam University. We then present information about the publications based on the Carers, Employment and Services Study carried out in ACE 2 which, under the same leadership, was conducted at the University of Leeds. Finally we list the work conducted by Luke Clements (University of Cardiff) on carers’ rights, the statistical publications (based on data analysis by Lisa Buckner) and a brief account of the research-based policy tools developed under the leadership of Peter Mathias (Bridge Research and Development).
ACE 1: research on carers and employment

Who Cares Wins: the social and business benefits of supporting working carers (2005)
Sue Yeandle, Cinnamon Bennett, Lisa Buckner, Lucy Shipton, and Anu Suokas  London: Carers UK

This study explored how three very different employers, all members of Employers for Carers, created a supportive environment at work for carers. In each organisation, employees were surveyed about their caring responsibilities and those who were carers were interviewed. The report, completed by a research team based at Sheffield Hallam University, was also informed by documentary evidence and interviews with managers in senior strategic positions and line managerial roles, giving insight into organisational cultures and processes. The study also provided an initial opportunity to highlight evidence from the 2001 Census, using specially commissioned data.

The study showed that employers can deliver effective support for carers, and that far from compromising their business objectives, providing the flexible approach which carers need brings impressive business gains. It demonstrated that:

• Many carers want to combine paid work and care.
• Flexible working benefits carers and, when open to all, reduces resentment about ‘preferential treatment’.
• Paid leave can reduce staff turnover and absence, cutting employment costs. It is rarely abused and increases individuals’ loyalty and commitment.
• Implementation of flexible working and carers’ policies depends on the culture of the organisation; managers play a key role and need training and support in responding to carers.
• In large organisations, input from top-level management, human resources professionals and specialist support structures is important.
• In small firms/teams, multi-skilling, good communication and team working provide effective cover if carers have unexpected emergencies.
• Irrespective of organisational size, success depends on trust and on all employees taking responsibility for managing their workloads.

Caring for Sick or Disabled Children: parents’ experiences of combining work and care (2006)
Bernadette Stiell, Lucy Shipton and Sue Yeandle  London: Carers UK

This study, undertaken at Sheffield Hallam University, tracked parent carers of sick or disabled children over a four-year period, giving voice to their experiences, attitudes and aspirations in relation to combining paid work with caring. Drawing on two carers’ surveys (2002 and 2004), and in-depth interviews with 29 parent carers, the study shed new light on the issues faced by this often neglected group. Most were of prime working age, with a lifetime of caring demands ahead, and many needed (and wanted) to work. The study showed that problems with childcare, having to take time off (to care or to attend hospital appointments) and a lack of understanding and flexibility at work, were key problems faced by these parents:

• Most found caring had an adverse impact on their own employment.
• Some had managed to reduce their hours or change their working patterns, but many had felt forced to look for a different type of work or to change their jobs.
• Tiredness and stress were especially difficult aspects of their situation.
• Some had been met with ignorance, disrespect or hostility at work because of their need to work flexibly to meet the needs of their child.
• Some felt a degree of regret about being away from their sick or disabled child.

The report explored parent carers’ orientation to work and their ‘carer identity’; family-friendly policies and the attitudes of managers and colleagues; what happens when work and care conflict; and discussed support services and their impact on employment. It recommended that:

• Steps need to be taken to raise the awareness of employers, teachers and service providers about how caring for a sick or disabled child differs from ordinary parenting.
• In implementing the Childcare Act 2006, local authorities need to ensure that sick or disabled children can access out of school and school holiday provision.
• Service providers supporting sick or disabled children need to plan arrangements for appointments to minimise disruption to the routines of working parent carers.

• The effectiveness of the Work and Families Act 2006 in enabling parents of sick or disabled children to work flexibly needs to be monitored.

• Responding to the Children Act 2004 and the Carers (Equal Opportunities) Act 2004, local authorities should review services in relation to parent carers’ access to paid work.

• Relevant agencies should review the extent to which inflexibility in local care services discriminates against parent carers’ opportunities to work.

• The Equalities and Human Rights Commission should examine discrimination against parent carers.

• Voluntary organisations should review whether working parent carers are excluded from their current support and networks.

• Employers should create opportunities for better quality part-time work so that parents of sick or disabled children do not become confined to low paid work.

• Review of the benefits system as it affects carers should address the situation of parent carers.

• Local Strategic Partnerships should develop services that actively support carers of sick or disabled children.

ACE 2: research on carers, employment and services


Sue Yeandle, Cinnamon Bennett, Lisa Buckner, Gary Fry, Christopher Price, University of Leeds


1 Stages and Transitions in the Experience of Caring
2 Managing Caring and Employment
3 Diversity in Caring: towards equality for carers
4 Carers, Employment and Services in their Local Context

5 Action for Carers and Employment: Impact of the ACE partnership 2002-7
6 Carers, Employment and Services: time for a new social contract?
7 Carers, Employment and Services in Scotland: focus on East Ayrshire, Falkirk and Highland
8 Carers, Employment and Services in Wales: focus on Anglesey and Swansea
9 Carers, Employment and Services in Hertfordshire
10 Carers, Employment and Services in Leeds
11 Carers, Employment and Services in Sandwell
12 Carers, Employment and Services in Sheffield
13 Carers, Employment and Services in Southwark
14 Carers, Employment and Services in West Sussex

The key messages from the CES study are:

• Caring is a normal part of everyday life, which can happen unexpectedly or gradually, and comes to most people at some stage in the lifecourse. At the start of caring, difficulty in obtaining information, advice and support often adds to carers’ problems at a stressful time. ‘New’ carers feel the financial and health impact of caring quickly, and these impacts intensify for those whose caring becomes a ‘longer-term’ commitment. Among ‘new’ carers in the CES study, 46% of full-time employees, and 62% of part-time employees felt they did not have adequate services to enable them to work.

• Caring should not end a carer’s career, damage their education, put their ability to acquire skills and training at risk, or force them to give up work. Most working carers in the study felt they had support from their family and friends in combining work and care, and about half said their employer was ‘carer-friendly’, but only about a quarter believed they had adequate support from formal services. Very few were getting carer’s breaks, and many felt poorly informed about available support. Most were keen to continue in work – yet over a third had considered giving up because of their caring role. The 400 respondents who had already given up work to care were among the most deprived and dissatisfied in the survey; many of them were looking after a sick
or disabled child and had been caring for 5 years or more. Among over 500 respondents currently ‘looking after home and family full-time’, 40% said they would rather be in paid work.

- Caring occurs across all groups in society, in many diverse situations and circumstances. The CES study examined ethnicity, financial position, health status, urban/rural settings, caring relationships and the different conditions and diagnoses of those who are cared for, and highlighted the particular difficulties and special needs of some of these groups, again highlighting the financial and health impacts of caring. It stressed that, across the full spectrum of caring situations and of carers’ lives, almost all carers want: sensitive, tailored support, designed with their own personal and working life, family circumstances, values and beliefs in mind.

- Since 1995 significant policy and legislative progress has been made in recognising and supporting carers, and in the local authorities studied, there were many examples of creative and innovative solutions which were benefiting individual carers and their families. The study nevertheless revealed an urgent need to increase support for working carers and to extend the range of services available to them, with greatly improved support for those for whom they care high on the list of priorities. Very few carers have had their needs reviewed in a Carers Assessment – and not all receive ‘services’ as a result, so this support, while crucial to those receiving it, is a ‘drop in the ocean’ in relation to the scale of carers’ needs, highlighting the need for a step-change in policy on carers and in the design and delivery of the social care system.

- The CES analysis calls for a radical overhaul of the entire infrastructure of support for carers, and for recognition that the social care system needs to focus much more explicitly on the situation of carers of working age. It outlines the range and scope of the changes needed, making the case for a new social contract for care. This, it argues, should retain the care given by family and friends at its centre, but must recognise the shared obligation to put in place an effective and integrated infrastructure of local support, designed to uphold a set of core values, ethics and beliefs, and to ensure the social care system accords to carers dignity and respect, with all agencies recognising and including carers. Underpinning the new social contract for care there needs to be a set of legal and fiscal frameworks, put in place by the state; these need to guarantee carers the right to equal treatment and protect them from discrimination and social exclusion, as well as to create a financially secure environment which enables care to be given without asking carers to pay the unacceptable price of low income or poverty in return.


Luke Clements, Cardiff Law School, University of Wales

**Carers and their Rights** outlines the principal rights of carers to support from the health and social services authorities. It covers:

- Definitions of carers.
- Carers Assessments.
- Services to support carers.
- An overview of disabled people’s rights.
- NHS responsibilities.
- Financial issues.
- Carer/service user conflict.
- Young carers, parent carers, carers of mental health service users and people who have ‘long-term’ conditions.
- Complaining.

The 2nd edition includes many updates including new information relating to carers’ rights to request flexible working under the *Work and Families Act 2006* and the decisions taken in 2006-7 relating to NHS Continuing Care.
Census-based statistical analysis

During the period of the ACE partnerships, extensive new evidence about carers became available with the publication of the 2001 Census. For the first time, the Census – which relates to all UK residents and must be completed by law – asked:

Do you look after or give any help or support to family members, friends or neighbours or others because of long-term physical or mental ill-health or disability, or problems related to old age?

The 2001 Census ‘standard output’ became available in 2003 and in 2004 it became possible to request additional information. More specialised analysis, using the Census Sample of Anonymised Records (SARs) and the Census Small Area Microdata (SAM) was possible from 2005. In partnership with Carers UK, the research team based at the University of Leeds (formerly at Sheffield Hallam University) undertook extensive Census analysis. This produced important new evidence about the situation and circumstances of carers at local level, and about carers in all their diversity. The following statistical publications were produced:

We Care – Do You?
Lisa Buckner and Sue Yeandle, 2005
This report revealed the impact an ageing population will have on those who juggle work and care, and summarised the main evidence from the Census about the UK’s 6m carers.

Older Carers in the UK
Lisa Buckner and Sue Yeandle, 2005
Carers; caring and age; what do we know about older carers?; older carers and their households; older carers and employment; the geographical distribution of older carers; Pension Credit; what do older carers need?

Who Cares Wins: evidence from the 2001 Census
Lisa Buckner and Sue Yeandle, 2006
This publication presented a detailed analysis of the situation of carers of working age, designed to complement the case-study based research presented in the main Who Cares Wins report.

Managing More than Most
Lisa Buckner and Sue Yeandle, 2006
Parents of sick or disabled children face significant challenges in entering or remaining in paid work which are often little understood by employers, service providers and policy makers. This report explored statistics about caring for a sick or disabled child and its impact on parental employment.

More than a Job – working carers: evidence from the 2001 Census
Lisa Buckner and Sue Yeandle, 2006
In the future most people’s lives will include at least one episode of unpaid caring. This report presented the latest statistical information about the millions of people who balance their job with caring for a relative or friend.

Valuing Carers – calculating the value of unpaid care
Lisa Buckner and Sue Yeandle, 2007
This report updated the estimate of the value of unpaid care published by Carers UK in a previous report (2002), showing that to replace all unpaid care with formal support would cost at least £87 billion a year. The report revealed just how crucial carers are to the health and social care system and to the UK’s economy, and calculated the value of carers’ support for each local authority area (or equivalent) throughout the UK.

Research-based policy tools

One of the most important objectives of the ACE partnerships was to produce useful, accessible tools suitable for organisations and individuals to use to help them gain better understanding of issues affecting carers who wish to combine work and care, and, for organisations, how they can best meet their responsibilities towards those carers with whom they come into contact.

Employers self-assessment benchmarking tool

The ‘benchmarking tool’ for employers was produced by the Employers for Carers group who came together through ACE 1 to show leadership on issues relating to caring and employment, and as an expression of their commitment to carers in the
workplace. The tool they produced built on their own experience in the workplace, and was updated after the introduction of the Work and Families Act 2006 to support its implementation.

This test was designed to help organisations assess how well they are supporting carers and think about what else they could be doing. There are four sections, each with 5 questions. Those who complete the self-assessment get a score for each section and useful advice after each question. On completion of all four sections, organisations can get a ‘report’, showing their overall score, along with some helpful advice about how they could improve their support for carers. The test covers:

Carer awareness: Does your organisation understand the needs of carers? Do your staff know you are supportive of carers?

Make carers count: What steps can you take to make carers count in your organisation?

Work and Families Act: Is your organisation ready to deal with its new legal responsibilities to consider flexible working for carers?

Practical steps: This section looks at the practical ways an organisation can adapt policies and procedures to meet the needs of carers.

Care to Take a Look: policy tool

This tool, produced as part of ACE 2 by Bridge Research and Development, was designed to inform policy makers at national, regional and local level to support them in developing appropriate policy for carers. It gives context-setting information on caring and its impact through a system moving from the general (statistical information) to the specific (case studies), focusing on health, employment and social inclusion. It looks at caring across the life course, giving a picture of alternative life outcomes as they are affected by caring, and incorporates a tool based on the employers self-assessment benchmarking tool designed to help local authorities and other organisations assess how well they are supporting carers and think about what else they could be doing to improve their practice. It is web-based, interactive, and user-friendly. It incorporates information drawn from the 2001 Census, accessible through a series of ‘maps’ for easy access.

All resources and research publications produced within ACE 1 and ACE 2 between 2002 and 2007 are available on the website of Carers UK; copies of many of the publications can be ordered on request.
In ACE 1 Carers UK and ACE National established a transnational partnership with F&MPower in Austria, which worked with local agencies in the district of Vorarlberg. F&MPower’s own EU EQUAL project was designed to support parents outside the labour market who wished to access paid work. The partnership provided opportunities to explore and compare approaches to supporting those who were not employed as a result of their family or caring responsibilities.

The objectives of the ACE 1 transnational partnership were:

- To jointly develop and test support mechanisms, using innovative solutions to overcome the labour market disadvantage of parents and carers.
- To disseminate and mainstream results, influencing policy makers in the development of services for target groups.
- To develop methods to assist men, women and carers to reconcile work and family life.
- To develop methods and activities to encourage employers to realise the potential for parents and carers in the workplace.
- To develop a pre-vocational training curriculum for labour market returners.

The outputs and products of the transnational partnership included:

- Pre-vocational training systems for target groups.
- An accreditation framework for pre-vocational training.
- Training on the reconciliation of work and family life for beneficiaries, employers and service providers.
- Toolkits for employers to develop flexible working.
- Methods for empowering target groups, including mentoring schemes.
- Joint analysis of experience of innovative approaches.
- Joint reports on good practice for dissemination.

The transnational partnership added value to the work of the individual partners by:

- Introducing new ideas into the development of tools and processes for the inclusion of target groups in each partner country.
- Influencing policy development and practice in regard to the training and employment of target groups in each partner country.
- Challenging accepted employment practice in each partner country.
- Improving the methods and systems to facilitate the transition of target groups towards work in each partner country.
- Maximising the impact of the innovations produced by the partnerships through the successful process of dissemination and mainstreaming.
• Bringing additional resources to the work of each DP which would otherwise not have been available to them.

The partnership provided opportunities for exchange of ideas about policy and practice. There were a range of joint events, seminars and study visits, and a highly successful final conference was held in the UK to share learning between project partners in June 2005.

In ACE 2 a larger transnational partnership was established, bringing together organisations in five EU Member States. The partnership again provided valuable opportunities for exchange of ideas about policy and practice, and in ACE 2 all partners were working to support carers, as defined in the UK: people who were providing care and support, unpaid, for sick, frail or disabled relatives, friends or partners.

The objectives of the ACE 2 transnational partnership were:

• To create a basis of common understanding and commitment.
• To produce evidence for policy and service development.
• To produce and test common guidelines for mechanisms that support carers’ family and working lives.
• To produce a joint publication identifying the issues for carers and families, care workers, and employers across the transnational partnership.
• To carry the key messages from the partnership to European actors of change, to translate them into mainstream policy and practice.

The outputs and products of the transnational partnerships included:

• A publication identifying the issues for carers and families, care workers and employers across the partnership.
• Training on the reconciliation of care, family and working life for employers and service providers.
• A toolkit for carers to support them to juggle work and care.
• A toolkit for social care providers.
• A toolkit for employers on carer-friendly working policies and practices.
• Exchange of experience on innovative approaches.
• A joint report on good practice for dissemination.

The transnational partnership added value to the work of the individual partners by:

• Exchanging knowledge of policy, systems and structures across the partnership.
• Introducing new ideas into the development of tools and processes for the inclusion of target groups in partner countries.
• Influencing policy development and practice with regard to the training and employment of target groups in partner countries.
• Challenging currently accepted practices in partner countries.
• Improving methods and systems to facilitate the labour market participation of carers in partner countries.
• Maximising the impact of innovation across the partnership through dissemination and mainstreaming.
• Bringing additional resources to the work of each transnational partner which would otherwise not have been available to them.

There were a range of joint events, seminars and study visits, and a very successful final 2-day conference was held in the UK to share learning between all project partners in April 2007. The focus and work of the partners in Estonia, Italy, Latvia and the Netherlands is briefly outlined below:

Estonia: In Estonia the Tartu Board of Disabled People led the work on developing a Multifunctional Care Service to support families with a disabled child or elderly family member to participate in employment through relevant support services. The work of this partner involved developing training modules in the provision of care for disabled or older people, and developing homecare services and respite care provision for children with disabilities. Its activities included promoting the development of human resources policy in relation to care and carers’ needs.

Email melis@hot.ee

Italy: In Italy, ARCO led the ELSA project, focused on the growing demand for care in the EU and in the Emilia Romagna province of Italy in particular. In part, this demand for care is being met by migrant
women coming from Eastern Europe as care workers, often operating within the ‘grey market’ without formally recognised employment arrangements and sometimes without official permission to reside or work in Italy. These care workers are often supporting Italian families where carers are struggling to juggle their own work and care. The project developed much greater knowledge of the care needs of the Emilia Romagna region, developed tools to help match the demand for and supply of care, and developed a programme of training and cultural integration for migrant care workers.

Email arco@arcopolis.it

**Latvia:** In Latvia the Society for Children’s Palliative Care led the project which focused on ‘PMSSS’ – psycho-social, medical and spiritual support system. The Society supported families with children undergoing palliative care to retain links with society and the labour market both during the child’s illness and during the bereavement process. It offered an holistic approach to family support designed to prevent families becoming socially excluded during and following periods of crisis linked to the child’s illness.

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**Netherlands:** Qidos, leading a project entitled *The Road Towards a Care-friendly Organisational Culture*, focused its work on creating carer-friendly organisational cultures and enabling working carers to balance work and care. Working in close partnership with Mezzo, the Dutch national carers organisation, Qidos was able to identify and report on a range of good practice in the creation of a carer-friendly workplace. It also made progress in developing greater awareness of carers’ needs and of the problems carers can face in the labour market.

Web address http://www.qidos.nl/uk

**Eurocarers**

In November 2004, representatives from carers’ organisations – including Carers UK – and from research and development groups from eight countries met in Maastricht in the Netherlands to explore how they could establish an EU-wide organisation – Eurocarers – to represent and provide a voice for carers. Through ACE, Carers UK was able to support the development of Eurocarers at a critical point, providing a secretariat, resourcing a series of events to raise the profile of the issue in Europe, and engaging policy expertise to place carers’ issues on the European policy stage.

Eurocarers set out to ensure that care is valued and that unpaid care is recognised as central to the sustainability of health and long term care systems in Europe. It committed to work to ensure that carers are recognised across Europe as a discrete group at risk of poverty, social exclusion and discrimination and to ensure that their issues and interests are addressed and taken into account in EU and national level policy development.

The aims of Eurocarers are to:

- Contribute to policy development at national as well as European level, supported by evidence-based research.
- Promote mutual learning and an exchange of good practice and innovation throughout the EU.

Eurocarers is the only EU level network specifically working to support carers. Its objectives are to:

- Promote recognition of carers and carers’ interests, irrespective of their age or the particular health needs of the person they are caring for.
- Advocate carers’ interests at EU and national policy level.
- Campaign for EU and national policies which take carers and their issues into account.
- Promote the social inclusion of carers.
- Promote the development of services that can support carers.
- Stimulate and support the development of carers’ organisations in countries and regions where they do not exist.

Eurocarers was launched officially, with Baroness Jill Pitkeathley as its President, in Carers Week 2007, at an event sponsored by ACE in the European Parliament which also saw the launch of a cross-party European Parliamentary Interest Group on Carers. It co-sponsored a policy event in Brussels in October 2007, following the MEP Awards, which ACE supported through its sponsorship of the MEP Campaigning MEP of the Year Award.
Contact details: http://www.eurocarers.org/

ACE 1 and ACE 2 were both identified as good practice Case Studies by the European Commission. ACE was the only Development Partnership in the UK invited to present at the conference held to mark the UK’s Presidency of the EU held in October 2005.
Concluding comments

As can be seen from the information presented in this report, the ACE partnerships created valuable opportunities to achieve the goals of the project at local, national and international level.

At local level: ACE demonstrated some new and better ways of supporting carers, engaged a wide range of agencies and succeeded in changing the way many local agencies think about, plan for and deliver support for individual carers. Crucially, ACE provided opportunities to test and pilot ways of supporting carers who wanted to remain in or return to paid work, and showed that this can be achieved in ways which support carers, those they care for and those for whom they work, with relatively modest additional resources, focused in innovative and imaginative ways.

At national level: ACE made a major impact, influencing legislation, shifting policy agendas at the level of the UK and in the devolved administrations in Scotland and Wales, and changing for the better, perhaps irrevocably, the way caring and employment is understood in relation to employment policy and the operation of organisations and businesses.

At the international level: ACE put carers on to the EU Social Agenda by asking for carers to be accepted as a group eligible for EU-funded support, playing a critical role in setting up an EU-wide lobby and a campaigning group for carers (Eurocarers), and making significant inroads into EU policy-making through effective engagement with MEPs, the European Commission, and transnational partnerships.

As ACE concluded its work in 2007, the policy landscape at all levels had been greatly affected by its activities – demonstrating that in its conceptualisation, ambition and delivery, the partnership had achieved significant and perhaps genuinely lasting impact. The prospect of real policy change, benefiting carers and enabling them to claim their rights – to a life outside caring and to be able to maintain their jobs, careers and education alongside their caring role – seemed possible, even if it was not yet within reach for all. The ACE research showed how far there still is to go for all carers to be treated with respect for the contribution they make, and enabled to live the lives they choose, without paying a penalty for the care they give; the ACE partnership showed how much can be achieved through energetic, focused and committed collaborative working.
Appendix 1 ACE National events

ACE National Round 1 events and conferences

• Launch of ACE National Development Partnership, parliamentary reception, House of Commons, July 2002.
• Launch of ACE transnational partnership, reception at Worshipful Company of Information Technologists, September 2002.
• Carers Rights Day parliamentary reception, House of Commons, December 2003.
• Big Conversation, Carers UK and ACE among the invited guests at 10 Downing Street to debate work-life balance issues with Prime Minister Tony Blair, April 2004.
• DTI round table events, hosted by Carers UK and ACE, to debate the extension of the right to request flexible working with employers and policy-makers, London, Carers Week, June 2004.
• EOC receptions at three main party political conferences to launch A Case for Change, manifesto of the Parents and Carers Coalition, September/October 2004.
• ACE/Carers UK fringe meetings at three main party political conferences, September/October 2004.

ACE National Round 2 events and conferences

• Launch of ACE transnational partnership, reception at Hatfield House, Hertfordshire, September 2005.
• ACE/Carers UK fringe meetings at three main party political conferences, September/October 2005.
• Launch of Making it Happen, ACE Resource Pack to support implementation of the Carers (Equal


- MEP Awards, MEP Achiever of the Year Award sponsored by ACE, Brussels, October 2005.


- ACE Wales seminar on implementation of the Carers (Equal Opportunities) Act 2004, November 2005.

- Employer of the Year Awards 2005, Carers Award sponsored by ACE, December 2005.


- Eurocarers policy seminar, Hamburg, spring 2006.


- ACE Wales national policy partnership seminar, Cardiff, May 2006.


- ACE workshop, European Social Services Conference, Vienna, June 2006.

- ACE/Carers UK fringe meetings, reception and exhibition, main party political conferences, September/ October 2006.

- ACE workshop, ADSS Conference, Brighton, October 2006.

- MEP Awards, MEP Campaigner of the Year Award sponsored by ACE, Brussels, October 2006.


• **Caring – My Life and Yours**, ACE Carers Week conference to launch **Care to Take a Look**, BT Centre, London, June 2007.


• ACE/Carers UK fringe meetings, reception and exhibition, main party political conferences, September/ October 2007.

• MEP Awards, Campaigning MEP of the Year Award sponsored by ACE, Brussels, October 2007.


• **Citizenship and Care in Cities and Settlements of the Future**, ACE/ICCC round table event, UN Age of Connectivity Dialogues, St George’s House, Windsor Castle, October 2007.

• **Achieving Change for Carers**, ACE Wales final conference, Cardiff, October 2007.

• **Carers, Employment and Services**, ACE Scotland research symposium, October 2007.


• Eurocarers policy seminar, Prague, November 2007.

EU EQUAL

EQUAL was an initiative funded through the European Social Fund (ESF). The programme tested and promoted new means of combating all forms of discrimination and inequalities in the labour market, both for those in work and for those seeking work. EQUAL also included action to help the social and vocational integration of asylum seekers. EQUAL operated across identified thematic fields which embraced the four pillars of the European Employment Strategy:

- Employability
- Entrepreneurship
- Adaptability
- Equal opportunities

Across those themes the strategy for EQUAL aimed to:

- Ensure that activities principally benefited those subject to the main forms of discrimination and inequality.
- Ensure that the promotion of equality between women and men was integral to the thematic fields in all four pillars.
- Promote the ideal of improving the supply of and demand for quality jobs with a future.
- Encourage the effective use of existing mechanisms to improve awareness of the factors leading to discrimination, inequality and exclusion in connection with the labour market.

EQUAL funded activities were implemented by strategic partnerships called Development Partnerships (DPs). Each DP addressed one thematic field. The EQUAL GB Community Initiative Programme (CIP) Plan 2000–2006 was approved by the European Commission in 2001. The first round of EQUAL Development Partnerships began in 2002, with 77 Development Partnerships in Great Britain and 8 in Northern Ireland. This first round ended in 2005. A second round, with a further 100 DPs across England, Scotland and Wales, began in 2005. The DPs ran for a period of 2–3 years.

The financial value of the ACE partnerships was approximately £10 million over the five years from 2002 – 2007. Half this sum was new funding from ESF, half match funding, including funding in-kind, provided by the ACE 1 and ACE 2 partnerships.

ACE 1 and 2 were both identified as good practice Case Studies by the European Commission. ACE was the only Development Partnership in the UK invited to present at the conference held to mark the UK’s Presidency of the EU.

ACE Lead Partner Staff Team

- Madeleine Starr, ACE National Strategic Project Manager (2002-2007)
- Mark Murphy, ACE National Administration and Events Officer (2005 – 2007)
- Helen Lear, Eurocarers Administration Officer (2006-7)
- Mair Evans, ACE Wales Development Officer (2002-4)
- Francesca Montemaggi, ACE Wales National Policy Officer (2005-7)
• Eleanor Russell, ACE Wales Administration Officer (2002-2006)
• Margaret Smith, ACE Scotland Policy and Development Officer (2005-2007)
• Louretta Templeton, ACE Scotland Administration Officer (2005-7)

Carers UK also dedicated a significant proportion of its existing staff resources to ACE National activities, which was contributed as match funding.

**Administration**

Financial monitoring and administration, transnational management and whole project reporting was provided by the European Institute for Social Services (EISS), based at the University of Kent:

• Linda Taylor, EQUAL Projects Manager
• Clair Leach, Business Services and Development Manager
• Barbara Battersby, Finance Administrator
• Simona Uberti, Finance Administrator
• Claire Humphreys, Project Support Officer
Notes

1 Evaluation of ACE 1 was undertaken by Sheffield Hallam University. The evaluation report, by Eleanor Formby and Sue Yeandle, was published by Carers UK in autumn 2005. The formal evaluation of the ACE 2 partnership was undertaken by Jane Massy and Jeremy Harrison (abdi ltd). Providing a full account of the aims, activities, outputs and impact of the ACE 2 partnership as a whole, with an assessment of the project’s management, organisation and financial processes, this was contracted separately for submission to Carers UK and the European Social Fund in 2008.

2 See the other reports in the CES Report Series for detailed discussion of these developments.
Finding out more

Carers UK improves carers’ lives through information provision, research and campaigning.

This research was commissioned by Carers UK on behalf of the ACE National partnership, and part-funded under the European Social Fund’s EQUAL Community Initiative Programme. To find out more about Carers UK, contact:

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