

# The City Bridge Trust

## Bridging Divides: Application for a grant



### About your organisation

#### Organisation Details

Name of your organisation: <b>Hillingdon Carers</b>	
If your organisation is part of a larger organisation, what is its name? <b>n/a</b>	
In which London Borough is your organisation based? <b>Hillingdon</b>	
Contact person: <b>Mrs Sally Chandler</b>	Position: <b>Executive Officer (H4All) and Chief Executive (Hillingdon Carers)</b>
Website: <b>http://www.hillingdoncarers.org.uk</b>	Social Media Accounts: <b>Twitter: @hillingdoncarers LinkedIn: www.linkedin.com/hillingdoncarers Facebook: Hillingdon Carers</b>
What Quality Marks does your organisation currently hold? <b>AQS with casework, level 1 (re-awarded Dec 2017)</b> <b>PQASSO level 2 (awarded December 2015)</b> <b>London Youth Gold award for Youth Work (awarded April 2016)</b>	

#### Legal Status

Legal status of organisation: <b>First Contact</b>			
Charity Number: <b>1082297</b>	Company Number: <b>4041290</b>	CIC Number:	Bencom Number:
When was your organisation established? <b>01/06/1996</b>			
<b>Aims of your organisation:</b> Our Articles of Association state:  Hillingdon Carers was established in 1996 for the relief of poverty and mental or physical suffering amongst unpaid family carers of all ages through the provision of advice, information, advocacy, health, wellbeing, therapeutic and educational services.			
<b>Main activities of your organisation:</b> We provide:  1) A Carers' Information and Advice Service: a High Street drop-in Advice Centre; an extensive outreach programme; monthly specialist advice sessions (covering mental health, dementia, social care and health watch); a range of carer fact sheets; help to claim carer-related welfare benefits; appeals; and; representation at tribunal.			

2) Wellbeing services: seven borough-wide Carer Cafes offering peer support, speakers, emotional support and therapeutic care; talking therapies, including a free counselling service; exercise programmes; health and wellbeing activities; arts and crafts; adult learning and carer-specific training, and; a series of wellbeing and mindfulness workshops.

3) Young Carers services: a small Family Support Service; specialist help for young carers affected by parental mental ill health or substance misuse; four weekly youth clubs; school holiday activity programmes; supported transition from school to employment or further education; schools outreach; trips and residencies; creative arts and drama programmes; sports and physical activities; and; a programme of personal development and life skills workshops.

### **Your Staff & Volunteers**

Full-time:	Part-time:	Trustee/Board members:	Active volunteers:
<b>9</b>	<b>6</b>	<b>9</b>	<b>27</b>
Do you have a Safeguarding policy? <b>Yes</b>			
<b>Are the following people in your organisation subject to DBS checks?</b>			
Paid Staff <b>Yes</b>	Volunteers <b>Yes</b>	Trustees / Management Committee Members <b>No</b>	

### **Property occupied by your organisation**

Is the main property owned, leased or rented by your organisation?	If leased/rented, how long is the outstanding agreement?
<b>Leased</b>	<b>December 2019</b>

### **Environmental Impact**

**What action have you taken in the past year to progress environmentally sustainability principles and practice?**

Minimising environmental impact:

We have introduced a simple but effective Environmental Management System (EMS), based on the principle of the 3 Rs:

- ? Reducing use of resources
- ? Re-using resources wherever possible
- ? Recycling resources that are of no further use

In accordance with the EMS:

- ? Our Environmental Policy has clear targets for the recycling of consumables (e.g. paper, printer cartridges).
- ? We actively encourage the use of public transport and car sharing wherever possible.
- ? We renegotiate our energy contracts on a three-yearly basis. We monitor our use of energy and set targets for year on year reduction in use
- ? We use digital technology to reduce the requirement for paper documents and materials and the associated environmental impact of production and delivery.

## Finance Details

### Organisation Finances

	Year of most recent audited / examined accounts	Current financial year forecast	Next financial year budget
End of financial year date	31/03/2017	31/03/2018	31/03/2019
Grants & donations:	£407,647	£359,188	£304,317
Earned income:	£0	£0	£0
Other income:	£527,441	£659,322	£631,132
<b>Total income:</b>	<b>935,088</b>	<b>£1,018,510</b>	<b>£935,449</b>
Charitable activity costs:	£959,894	£1,000,078	£918,839
Cost of raising funds:	£18,160	£20,820	£16,475
Other costs:	£0	£0	£0
<b>Total expenditure:</b>	<b>£978,054</b>	<b>£1,020,898</b>	<b>£935,314</b>
Free unrestricted reserves held at year end:	£180,820	£209,366	£207,566
<b>What is your organisation's reserves policy?</b> Hillingdon Carers has a target of Reserves agreed by trustees as: <ul style="list-style-type: none"> <li>- 4 months running costs i.e. salaries, rent and contractual commitments</li> <li>- £20k contingency</li> </ul>			
For your most recent financial year, what % of your income was from statutory sources? <b>71-80%</b>			

### Organisational changes

Describe any significant organisational changes to your structure, financial position or core activities since the date of your most recent accounts.

**Please note: Hillingdon Carers is the lead contractor for the Combined Carers Services contract with the London Borough of Hillingdon. As we sub-contract four organisations to deliver specialist elements of the contract, this gives an inflated picture of our financial situation. Annually, we pay out £280,000 to partners inflating our income and expenditure by this amount.**

## Grant Request

Under which of City Bridge Trust's programmes are you applying?

**Advice and Support**

Which of the programme outcome(s) does your application aim to achieve?

**Advice & Support \ More Londoners have improved economic circumstances**

Please describe the purpose of your funding request in one sentence.

**A new Dementia Advice Service for families living with dementia.**

When will the funding be required? **01/09/2018**

Is this request to continue work that is currently funded or has been funded in the last year by:

City Bridge Trust?

**No**

Another funder? (If so which)

How much funding are you requesting?

Year 1:

**£34,540**

Year 2:

**£34,436**

Year 3:

**£35,134**

Year 4:

**£35,273**

Year 5:

**£35,978**

**Total Requested: £175,361**

### You and your grant request

**What, specifically, are you applying for (your project)?**

**A new Dementia Advice Service for families living with dementia.**

From the point of diagnosis families living with dementia need a whole range of information, advice and support and all consume information differently, at differing rates. We would like to develop a specialist, needs-responsive Dementia Advice Service that can deliver timely advice and support, as led by the carer and care recipient.

As well as needing help initially to navigate the complex health, care and welfare benefits systems, carers have told us that they struggle to understand the impact dementia has on their loved ones. A specialist Dementia Advisor would be able to combine early help for the carer (i.e. maximising household income and developing care and support networks) with the provision of specialist dementia knowledge, such as: understanding dementia; managing challenging behaviour; coping in emergency situations; planning for the future, and; coping with their own needs, including stress-relieving techniques.

**What are the changes you hope to achieve?**

Whilst caring can be a rewarding experience, the negative impacts of caring are well-documented. Research shows that carers are more likely to:

- Be financially disadvantaged
- Ignore their own health problems
- Be prone to social isolation and loneliness
- Develop low level mental health issues
- Lose confidence and develop low self-esteem
- Experience relationship breakdown
- Lack positivity and lose their sense of 'self' as the needs of the person they care for take priority.

Our proposed programme will:

- Maximise household income through help to claim entitlements and other resources such as Blue Badges or Taxi Vouchers
- Give carers the skills, knowledge and strategies they need to care effectively
- Prevent crises and avoid the breakdown of fragile caring relationships
- Support carers to (re-)connect socially with others in similar situations
- Provide joint social opportunities for themselves alongside the person they care for.

**How do you know there's a need for this work?**

Our experience, the data we collect and the carers we work with all tell us that an increase in specialist support for families living with dementia is becoming essential. Over the past two years, we have seen a sharp increase in:

- a) 'Mutual' caring situations i.e. where two older people are often co-dependent and the caring situation is fragile and subject to break down very quickly, and
- b) Sons and daughters of working age giving up work to care for someone with dementia.

We currently sub-contract a small Carers' Support service from the Alzheimer's Society under our Local Authority contract. Our colleagues at the Society also have a growing body of evidence that, after fighting for a diagnosis, many families are then left to fend for themselves without onward referral to sources of support; this means many of them do not access help until they are hitting crisis-point.

**How will the work be delivered - specifically, what will you do?**

We will appoint a Dementia Advisor to work across our Advice team and the Alzheimer's Society's Carers Support service. (S)he will actively case manage families affected by dementia from the point of diagnosis until such time as they feel confident to be stepped down to mainstream carer support.

We will secure referrals at points of diagnosis through the local Memory Clinic, Hillingdon GP Confederation and frontline Social Workers. We will also use our H4All seat on the local Accountable Care Partnership to promote the opportunity across Primary care staff.

Intensive support in the first 3-6 months will include:

- A Carers Assessment
- A Financial Health check, including help to claim benefits and to secure other entitlements
- Individualised support planning
- Information, training and emotional support
- Onward referral to relevant services
- Supported progression to one of the 11 peer support groups and other mainstream carer services.

**Why are you the right organisation to do this work?**

Hillingdon Carers enjoys an excellent reputation with carers; trust in our organisation has been developed over many years. We are very proud of:

a) Our excellent track record in partnership working, which offers value for money to funders -

In 2016, we formed the Hillingdon Carers Partnership (HCP) in response to the borough's first aggregated contract. Under our leadership, the HCP was successful and secured a 5+1+1 year contract, giving us a core of financial stability.

We are also a founding member of H4All Community Interest Company, which is recognised nationally as an example of good practice.

b) Our embedded approach to co-design with carers -

Once awarded the contract, in 2016/17 we collectively undertook a 6-month consultation with over 500 carers. The partners work closely together to respond to the priorities set by the carers and we have an ongoing dialogue so carers sense check our plans.

**How does your work complement and not duplicate other services within your area?**

In order to deliver the Combined Carers contract, support for carers in Hillingdon has been simplified through the provision of a single point of access. All partners have worked closely together to ensure that carers only have to tell their story once. Subsequently, and providing data-sharing permissions are secured, all appropriate Hillingdon Carers Partnership services will wrap around carers according to assessed needs. As well as being the lead organisation for this coordinated and combined approach, Hillingdon Carers is the only organisation that is commissioned to provide carer-specific advice and information.

The new service will complement current arrangements, extend opportunities for timely and appropriate dementia support and prevent breakdown of caring situations. Our local partnership arrangements will also allow carers to access replacement (respite) care and enable us to progress them into our mainstream provision as they become more confident in their role, ensuring we have capacity for newly-diagnosed families.

**How will this proposal meet the Programme Outcome(s) under which you are applying?**

Older people can be reluctant to claim benefits. A hybrid advice/support service will optimise the chance of a claim, particularly as part of a package of support. The project will give extra capacity for more intensive support for Attendance Allowance or Carers Allowance claims, which will build on existing work and our excellent track record:

? In 2017/18, our Advice team secured £861,456 for Hillingdon's carers and have increased household incomes by over £2.5 million in the past 3 years.

? Against a backdrop of welfare reform, we have seen a 33% increase of claims going to appeal. We speak four community languages and regularly represent carers at tribunal.

Whilst not identified as a primary outcome, our Advisors can act as intermediary with creditors or will ensure onward referral for debt advice. Additionally, we have a longstanding relationship with Turbervilles Solicitors who provide free monthly Legal Advice Clinics for carers.

**How will you ensure that your project will hear and represent the views and needs of disadvantaged people and/or diverse communities?**

The need for this service has already been identified and driven by the carers we support. There is no easy way to have the multiple conversations that we want to, particularly with carers whom already juggle many competing priorities. We therefore set out to provide as many opportunities as possible, covering the challenging geography of Hillingdon, its diverse communities and also condition/topic specific issues. Carers can feed back to us face-to-face at events and focus groups, via 'armchair' consultation, such as questionnaires or telephone interviews and interactively, through spending Bank of Hillingdon money or dot-voting. There are also carer representatives at every meeting and on every working group.

When mobilising for the new Carers Contract, an estimated 230 carers of people with dementia co-designed current services; doubled the contract investment in dementia support; increased access to advice and information, and; ensured dementia support was a longer-term priority for new funding.

**How does your project engage and empower individuals and/or communities to come together on this issue? Will you be working with people who are particularly excluded?**

In partnership with others, we have twelve public Forums per year - four carer forums, four for people with disabilities and four for older residents. Agendas are set by participants via the steering groups, and events are themed, often with Issue-specific consultations. We take advantage of Forums to talk to a wider audience, additionally we also host stalls at community events in shopping centres and libraries.

Hillingdon Carers started life as an Asian Carers project. We have good reach into all of Hillingdon's diverse communities, particularly newly-settled communities around Heathrow Airport and traveller communities. We have an excellent track record of engaging with BME communities - 48% of the carers we work with are non-white British - and we employ multiple approaches to engaging those who are particularly excluded. Our services are all delivered in the heart of the communities they serve and are designed to prevent exclusion wherever possible.

**Is the focus of your project meeting an already identifiable need (acute or otherwise) or are there elements which are preventative and/or incorporate early action?**

There is an already identifiable need, which is evidenced through our consultation with carers and through the experience of the two main project partners. Demand for this type of support is also borne out by statistical data and changing demography.

However, there is also a significant preventative element to the programme. Unsupported following a dementia diagnosis, many families, especially older couples, can struggle and can quickly become affected by: social isolation and loneliness; low level mental health issues, such as anxiety or depression; loss of confidence and low self-esteem; and; in extreme cases, relationship breakdown.

Additionally, the advent of caring often happens in later life, when someone is becoming more frail or is starting to experience their own health issues; the needs of the care recipient can often become all-consuming and cause them to ignore their own health.

With added capacity we can help to prevent this happening more extensively.

**Who might you need to work closely with in delivering this project - whether before, during or afterwards?**

As the lead for the Hillingdon Carers Partnership (HCP), we selected partners carefully to secure the right mix of skills and experience to deliver contracted outcomes. This included securing the specialist skills and resources of the Alzheimer's Society for carers living with dementia. We consider them to be a key delivery partner and the new post-holder will be supported by both our Advice team and their Dementia Support service.

We will also work with other partners (HCP, H4All CIC and wider third sector) as demand dictates. For example, carers might need rapid access to replacement (respite) care or legal advice or talking therapies? we have well-established partnership arrangements to ensure this happens rapidly.

Finally, we also have firm relationships with statutory services, including GP practices and frontline Social Work staff. We will ensure that, following diagnosis, we smooth a carer's pathway through the complexities of the statutory sector.

**Our aim as a funder is to help people move positively between any of the four stages of Surviving, Coping, Adapting and Thriving. For your project at which of these stages will most people begin their journey?**

Many families with a new diagnosis of dementia will be just 'surviving' as they come to terms with the diagnosis. Obviously this varies and, for some, once they have had time to process things, life might continue as normal for a while. We therefore anticipate that project participants will be either 'surviving' or 'coping'.

We are confident that we can effect movement through these stages, but are also clear that we cannot guarantee continuous improvement and that people might slip back a stage due to the unpredictability of the disease.

The biggest challenge for any dementia service is the timeliness of information? too much too soon can be devastating and, not enough can have equally adverse effects. By working with someone from diagnosis, we can form a relationship from the outset so that families know exactly how to 'draw down' the support they need, when they need it.



**Will there be any elements of this project that will help you or your beneficiaries to reduce your environmental footprint?**

We will deliver the project in accordance with our established Environmental Management System (EMS).

Additionally, by using the office bases of all five Hillingdon Carers Partnership organisations, we can minimise the mileage required to deliver a project borough-wide. The post holder will be able to base themselves in the closest office space to their clients on a day-by-day basis.

**What are the main activities or outputs you want to deliver?**

We will undertake a minimum of 50 Carers Assessments and Financial Health checks per year for carers of someone a diagnosis of dementia within 3 months of diagnosis.

A minimum of 50 families will agree bespoke support plans with personalised goals. Of these, at least 75% will meet goals and be supported to progress to mainstream support within 6 months of diagnosis.

At least 20 carers per year will complete the 7-workshop Caring with Confidence training covering all aspects of caring for someone with dementia.

Training covers: understanding dementias, medication, coping with challenging behaviours, looking after yourself, sources of support, relaxation and personal coping strategies.

**What 3 main differences or outcomes do you hope the activities you have described above will achieve?**

We will increase the household incomes of families living with dementia by at least £250,000 per year - a total of £1.25 million over the life of a five-year project.

Through the provision of intensive active case management following a dementia diagnosis, we will support carers until they are confident to access mainstream support. 75% of project participants will feel confident to step down to our mainstream services within 6 months of diagnosis.

95% of project participants will express feeling better informed and more confident in delivering their caring roles.



## Funding required for the project

### What is the total cost of the proposed activity/project?

Expenditure heading	Year 1	Year 2	Year 3	Year 4	Year 5	Total
Salary	27,000	27,000	27,500	27,500	28,000	137,000
On-costs-12% to 13% (NI 9.5%, 2%-3% pension)	3,240	3,510	3,575	3,575	3,640	17,540
Overhead contribution (stationery, printing, utilities) 5% annual increase	1,500	1,575	1,650	1,740	1,825	8,290
Computer, phone (year 1 only)	500	0	0	0	0	500
Management - 3% annual increase	1,000	1,030	1,066	1,093	1,125	5,314
IT (hosted desktop, email, license) - 3% annual increase	700	721	743	765	788	3,717
Client engagement x 2 workshops p.a. (room hire, refreshments, travel respite care)	600	600	600	600	600	3,000
2 Caring with Confidence courses - up to 20 carers p.a.	2,000	2,000	2,000	2,000	2,000	10,000
Peer support group development	3,500	1,250	1,250	1,250	1,250	8,500
<b>TOTAL:</b>	<b>40,040</b>	<b>37,686</b>	<b>38,384</b>	<b>38,523</b>	<b>39,228</b>	<b>193,861</b>

### What income has already been raised?

Source	Year 1	Year 2	Year 3	Year 4	Year 5	Total
Caring with Confidence courses via Carer contract	2,000	2,000	2,000	2,000	2,000	10,000
Group development - private sector sponsorship	1,250	1,250	1,250	1,250	1,250	6,250
Group development - Carers Trust grant	2,250	0	0	0	0	2,250
<b>TOTAL:</b>	<b>5,500</b>	<b>3,250</b>	<b>3,250</b>	<b>3,250</b>	<b>3,250</b>	<b>18,500</b>

### What other funders are currently considering the proposal?

Source	Year 1	Year 2	Year 3	Year 4	Year 5	Total
n/a	0	0	0	0	0	0
<b>TOTAL:</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

### How much is requested from the Trust?

Expenditure heading	Year 1	Year 2	Year 3	Year 4	Year 5	Total
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Client engagement x 2 workshops p.a. (room hire, refreshments, travel respite care)	600	600	600	600	600	3,000
<b>TOTAL:</b>	<b>34,540</b>	<b>34,436</b>	<b>35,134</b>	<b>35,273</b>	<b>35,978</b>	<b>175,361</b>

## Who will benefit?

How many people will directly benefit from the grant per year?

**50**

In which Greater London borough(s) or areas of London will your beneficiaries live?

**Hillingdon**

Does this project specifically target any groups or communities?

**n/a**

This project will specifically work with the following age groups:

**45-64**

This project will specifically work with the following gender groups:

**Male**

This project will specifically work with the following ethnic groups:

**Asian/ Asian British (Including Indian; Pakistani; Bangladeshi; Chinese; Any other Asian background)**

If Other ethnic group, please give details:

**n/a**

This project will specifically work with Deaf and disabled people:

**No**

This project will specifically work with LGBTQI groups:

**No**

This project will specifically work with other groups or communities:  
**n/a**

How will you target the groups/communities you have identified? What is your expertise in providing services for these groups?

**We have established relationships with Memory Clinics and GPs to secure referrals and also regularly take self-referrals. Our outreach advice and information service travels into the hearts of the communities they serve to improve our reach.**

Are there any groups or communities you think your organisation will find hard to include through this project?

**No**

If yes, please specify which groups or communities? Where possible using the categories listed above.

**The project will target people in mid-later life who are caring for someone with a diagnosis of some form of dementia or Alzheimer's Disease**

If yes, what steps will you take to make your services accessible to and meet the needs of the groups/communities you have identified?

**n/a**

### **Declaration**

I confirm that, to the best of my knowledge, all the information I have provided in this application form is correct. I fully understand that City Bridge Trust has zero tolerance towards fraud and will seek to prosecute and recover funds in every instance.

Please confirm: Yes      Full Name: **Sally Ann Chandler**

Role within                      **Chief Executive**  
Organisation: