



Working to make the role and contribution of unpaid family carers and young carers recognised and give them access to the quality support and services they need to live their own lives



Trustees' Report and Accounts

for the year ended
31st March 2014



LEGAL AND ADMINISTRATIVE INFORMATION

Charity & Company Name	West Anglia Crossroads Caring for Carers
Working names	Carers Trust Cambridgeshire
	Carers Trust Peterborough
	Crossroads Care Cambridgeshire
and	Young Carers in Huntingdonshire
	Young Carers in Fenland

Trustees		Year appointed
All of the Trustees of the charity are also Directors of the limited company	Ann Braithwaite (Company Secretary)	2010
	Linda Collumbell (Vice Chair) [†]	2004
	Anne Davis (Treasurer)	2012
	Peter Menczer [†] (resigned 31.03.2014)	2005
	Margaret Pearce Higgins (Chair)	1998
	Maryan Pye [†]	2011
	Roger Rhodes (appointed 26.03.2014)	2014
	Adam Rowles (Vice Chair)	2012
	Richard van der Hart	2012
	Wayne Weedon (appointed 25.06.2014)	2014
	Gillian West (appointed 25.06.2014)	2014

Chief Executive Officer	Helen Brown [†]
Charity Number	1091522
Company Number	4379948
Registered Office	4 The Meadow, Meadow Lane, St Ives, Cambridgeshire, PE27 4LG

Auditors	Prentis & Co LLP Chartered Accountants and Statutory Auditors 115c Milton Road, Cambridge, CB4 1XE
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Bankers	Lloyds Bank plc PO Box 1000, BX1 1LT CAF Bank Ltd 25 Kings Hill Avenue, West Malling, Kent, ME19 4JQ
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Legal Advisers	Copleys LLP 8-10 Market Hill, St Ives, Cambridgeshire, PE27 5AW
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[†] **Directors of Axiom Crossroads Care**, a joint venture charity with Axiom Housing Association



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References throughout this report can be found on our website:

<http://carerstrustcambridgeshire.org/refs>.

If you wish to access the online content of this report via hyperlinks, please view the Annual Report on our website at www.carerstrustcambridgeshire.org.

Throughout this report, names marked with an * have been changed to protect the identities of those involved.

Key



Met target



Partially Met target



Did not meet target



Chief Executive's Introduction

Welcome to our Annual Report 2013-14. Compiling reports in previous years, we're often challenged about what to include and what to leave out. This was the case again, in what was one of the busiest and most challenging years in the health and social care sector for so many reasons. We hope we've made the right choices - but please visit our website or look at our social media platforms for a flavour of other great activities which didn't make it!

Our strategy has been to evolve our organisation to cope with the increasing numbers and changing needs of family carers. We have progressed a long way from the five small Crossroads Care schemes providing only respite care, into the multiple support services Carers Trust Cambridgeshire and Carers Trust Peterborough now offer. Change has become normal for us as we try to do more, whilst managing risk for our organisation, clients and staff. One thing remains unchanged: we are a local organisation, with roots firmly in our communities. Local people who want to make a difference locally, backed by the strengths from our affiliation to a national Carers Trust network.

2013-14 was a year of further progress for us. Against a national background of almost weekly horror stories about care quality (remember the Francis Report and Winterbourne View?), the national response was to restructure the regulator, the Care Quality Commission, and make changes. We focussed on remaining fully compliant and you can see the CQC Inspector's comment in our [Quality Assurance](#) section. We always post full reports on our website, which are also available via CQC. We understand that carers need to be confident about people who are stepping into their shoes and there's no room for poor standards.

Our objective to be a leading employer and to recruit and retain more excellent staff was harder to achieve. Perhaps because of the media coverage, "norm" of low wages in the sector, and high levels of employment locally, we didn't recruit as many staff as we wanted to and this affected our ability to grow our care services and income. To help with recruitment, we improved our Terms and Conditions for staff, committed to paying the living wage to all and joined an apprenticeship scheme. We also remain committed to extensive, high quality training, not just mandatory or minimum levels. Consequently, our financial position was impacted: it was better than budgeted, but we plan to do more in 2014-16.

Changes in our local NHS, through a huge tender for Older People's services, also had an impact on us and much of the not for profit sector in Cambridgeshire and Peterborough. You can read more about that and why we formed Better Health Network in this report on [page 20](#).

The changes to our NHS came about from the implementation of the requirements in the Health and Social Care Act 2012, which have overlapped with consultations and planning for the introduction of the Care Act 2014 and Children and Families Act 2014 in 2015-16. These laws will fundamentally change care and carers rights, which have been increased to be on a par with those receiving care. We have been very engaged with this and adapting our plans, services and processes accordingly. Winning the Peterborough Carers Services contract was an important step towards providing more integrated and innovative support for carers; establishing Carers Connect increased carers' voice and several grant awards further increased our reach and range. Highlights follow on the next 2 pages, with more details about strategic aims and progress later.

None of this would be possible without the support of our commissioners and Cambridgeshire County Council in particular; the belief by directors in our strategy and need to re-invest in growth; plus the commitment of our talented management and staff teams. They all know how valued they are and I hope this report reflects their efforts well.



Dr Helen Brown, Chief Executive



Carers Trust Cambridgeshire - highlights in brief

There are 78,000 carers in Cambridgeshire and Peterborough¹ and every week, around 500 people assume caring roles and a similar number lose them. Most² go unrecognised and receive little or no support until a crisis point. Even then, the type and level of support they may receive is usually related to the condition of the person for whom they care and an assessment of their ability to pay. People and families who self fund frequently miss out, even on information.

Caring is associated with poor physical and mental health and financial hardship. Later, we explain our vision, mission and progress against our four strategic aims in detail. Here's a snapshot of how we're trying to improve outcomes for carers, young carers, young adult carers and those for whom they care.

Here's the progress we made against Strategic Aims 1-4



Strategic Aim 1

Raise the profile of family carers and the caring role - more on [page 12](#)

Carers included in Cambridgeshire's Older People's Joint Strategic Needs Assessment.

GPs and Primary Care identified more carers - year on year increase.

Regular news items in the media.

Involvement at a national level by Young Carers and Young Adult Carers.

Active social media following.

Strategic Aim 2

Influence society to improve family carers' lives - more on [page 16](#)

Carer Ambassadors visited London to engage with Standing Commission on Carers/Department of Health advisers drafting the Care Act and Children and Families Act.

Influenced local carer and young carer strategies.

Fundraising Officer appointed and more locally funded services secured.



Strategic Aim 3

Work with family carers and local partners to develop strong networks - more on [page 19](#)

Better Health Network pilot to provide holistic support.

Carers Connect launched with voluntary sector partners and carers.

Partnership with Centre 33 to support Young Carers in Cambridgeshire.

Parent Carer groups with Pinpoint.



Here's the progress we made against Strategic Aims 1-4

Strategic Aim 4

Support the growth and development of solutions for family carers, especially preventative and early intervention services - more on [page 22](#)

Family Carers Prescription (formerly GP Carers Prescription Service) extended throughout Cambridgeshire and Peterborough NHS Clinical Commissioning Group area.

Carer support in Addenbrooke's Hospital identified 450 carers.

A record number of 127 people were supported during carer emergencies (ICER).

My Challenge! opportunities for children with disabilities and their families (BBC Children in Need grant).

Preparation into Employment (PIE) started for carers and homeless people.

STRIVE application for Young Adult Carers was voted one of the best 20 applications nationally... by other Young Adult Carers.

Adult Short Breaks offered flexibility without the responsibility.



How did we do against our Financial plan?

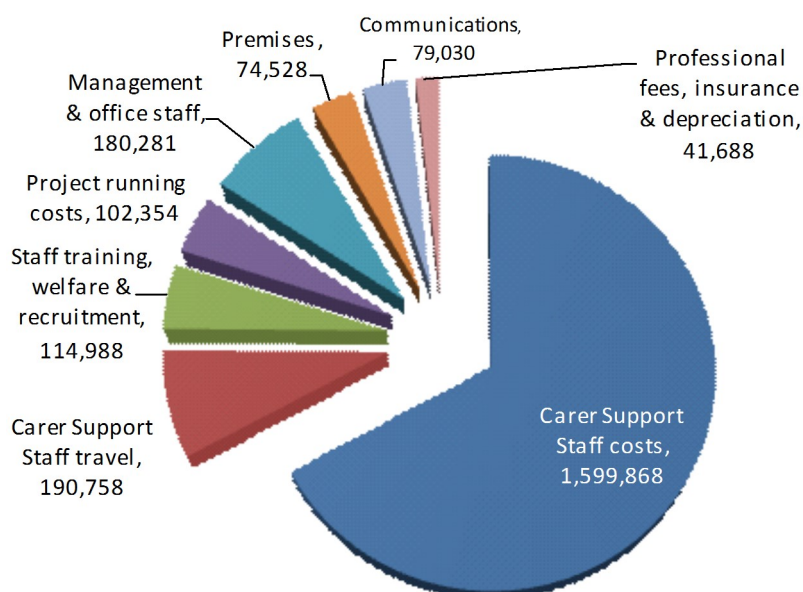
We made a large improvement over the previous year. We had budgeted for an income of £2,440k and a net £55k loss, to reflect continued staff investment in developing new services. Our income of £2,610k was significantly higher than budget, as was gross profit.

Costs also increased as we did not make anticipated progress with efficiency savings.

Overall, we made a surplus on our general reserve of £16.7k.

We realised some exceptional income and wrote off a £67k capital loan made to our joint venture, Axiom Crossroads Care, before it's transfer to Axiom Housing Association.

This is how we spent our resources of £2,660k



Chair's Report

This year has been a very busy one for our charity, set against a changing landscape in the fields of Health and Social Care. We began the year with rebranding as Carers Trust Cambridgeshire. Operating under the banner of Carers Trust was seen as an integral part of bringing the message of family carers and their contribution to a greater audience. In conjunction with this was the introduction of our new Family Carers Network ([Carers Connect](#)) and we are grateful for the engagement of family carers, therapists and facilitators who will help drive the direction of the charity in coming years. I have enjoyed meeting our Carer Ambassadors across the county and look forward to their continued support in putting the needs of family carers at the heart of what we do at all times.



We are grateful for the able leadership shown by Dr Helen Brown in driving forward our initiatives and managing the development of Carers Trust Cambridgeshire. As a member of the Carers Trust UK Partnership Forum, England Committee and Policy Group, as well as acting as Chair of the Eastern Region Network Partners, she has enabled our voice to be heard at a national level. Such representation has enabled Carers Trust Cambridgeshire to be at the forefront in discussions regarding legislation concerning carers.

The Better Health Network pilot, which aims to provide an holistic family-based approach for the frail and elderly and for those suffering from long term conditions, has been extended until September 2014. We are confident that this provides a constructive model for the way forward and that this partnership-based approach amongst not for profit sector providers will continue with the support of local commissioning groups. Carers Trust Cambridgeshire would like to thank our Trustees Peter Menczer and Linda Collumbell for their unstinting efforts in driving this initiative forward to such a successful conclusion.

Towards the end of the financial year, Helen and her Senior Management Team (SMT) spent many hours preparing for the tender for the provision of carers' services in Peterborough. I am delighted to say that we have subsequently been awarded the contract and Carers Trust Peterborough Carers Centre services began in July 2014. This is a major strategic commitment to the provision of carers' services in the area. My thanks and those of the Board go to all those involved in the process including our partners in the venture: Sun Network; Age UK Peterborough and Peterborough and Fenland MIND. The Peterborough Carers Conference on 16th October will give everyone a chance to reflect on progress thus far and have a say in the future direction of services.

The Board of Trustees has continued to evolve to reflect the challenges of the current environment. Sadly, we have said goodbye to Peter Menczer as a Trustee. Carers Trust Cambridgeshire would like to thank him for his exceptional contribution during his two spells on the Board. Peter was the instigator and driving force behind the Better Health Network, in addition to being a most conscientious and dedicated member of the Board. We all wish him well. On a happier note, we have welcomed three new Trustees to the Board - Roger Rhodes, Gillian West and Wayne Weedon. We hope that the diverse skills they bring to the Board will further strengthen our delivery of services to family carers throughout Cambridgeshire in the coming years.

Finally, after four years I shall be standing down as Chairman and Trustee at the Annual General Meeting in October. I have been a family carer all my life and look forward to contributing to Carers Trust Cambridgeshire in a voluntary capacity in the future. I would like to thank Helen and her SMT as well as my fellow Trustees and all our dedicated staff who have supported me so willingly and cheerfully over the last four years. Wherever I am, I shall never miss the opportunity to raise the profile of family carers and to champion the aims of Carers Trust Cambridgeshire.

Margaret



Why we're here - our purpose and aims

Vision

Our vision is of a world where the role and contribution of unpaid family carers and young carers is recognised and they have access to the quality support and services they need to live their own lives.

Mission

What we do to make this happen

Provide services that respond to the needs of family carers, young carers and the people they support, offering them peace of mind and understanding; **and** work with them and other stakeholders to influence service innovation and growth.



Values - our shared beliefs

- **Continuously improving**

The best we can be – high standards in all that we do.

- **Aspirational and Innovative**

Together we can change lives for the better for all family carers in the UK.

- **Caring**

All family carers, young carers and people with care needs feel recognised, valued and supported.

Passionate about changing lives because people are at the centre of everything we do.

- **Listening**

Together we work with all family carers and enable them to find their voice, exercise their choice and regain control.

- **Collaborative**

We actively seek collaboration and partnership with other organisations. We work with local organisations, which have unique expertise, connections and experience. Doing so increases our effectiveness and efficiency, enabling us to better support all family carers.

- **Integrity**

We trust, respect and value each other.

We are good people to do business with.

"I've had a really good day, it's been good to speak to people who know about these things. Sometimes, when I'm not coping I'm not sure who are the best people to ask, but after speaking to you it has helped."
Mr Richards* speaking about the Family Carer Prescription



The Need

Why do carers need support?

Unpaid carers - those looking after family or friends - rarely identify themselves as 'carers' and why would any of us want to be limited to one description? Caring, though a significant part of the daily lives of many of us, does not - and should not - define us. When we have significant caring responsibilities, we are very likely to have interests and aspirations pre-dating our current situation - and quite possibly put on hold, or even abandoned, because of it³.

Yet the Government continues to support and legislate for "carers", meaning unpaid and informal or family carers, whilst the media confuse and use the term interchangeably with paid care workers. Raising awareness of caring and carers, to help people and families understand the significance, is a key need if they are to access information and support intended for them.

Carers provide an incredibly valuable contribution not only to the people they support, but also to our health and social economy. The economic value of the contribution made by carers in the UK has been estimated as £119 billion each year. However, a high proportion of carers indicate that caring has a negative impact on their own life: 83% report a negative impact on mental and physical health⁴; 61% have faced depression⁵, 49% are struggling financially⁶ and one in five carers give up work to care. Poverty is an issue that disproportionately affects carers and people with disabilities.

In the 2011 Census, approximately 5.8 million or one in ten people were identified as providing unpaid care in England and Wales. In Cambridgeshire, over 60,000 people identified themselves as unpaid carers; 70% of these carers do 19 hours or less per week, a fifth do 50 hours or more. Most carers are aged between 50 to 64, however, over 4,000 young people under the age of 25 years were also identified as carers, although this is considered to be an under estimation.

In Peterborough, 17,690 people identified themselves as unpaid carers, a rise of 20% since 2001 and the second highest in the Eastern region. The largest growth - 63% - was in the 20-49 hours per week of unpaid care. According to the 2011 Census, there are 1,506 Young Carers in Peterborough⁷.

These numbers are likely to increase, as the population ages and more people live longer with ill health. The proportion living with Dementia, in particular, is projected to double.

People benefitting from our 'wrap around' services of information, guidance and flexible breaks are carers and those with care needs, whatever their age, living in Cambridgeshire, Peterborough and the surrounding area.



*"It's great that the Sunshine Club seems to be broadening its horizons and taking the children out further afield. I'm sure I'm not alone in being appreciative of the ambition that you have; may it be the start of other agencies looking to doing this too." Mrs Dix**



Strategic Plan

VISION

Our vision is of a world where the role and contribution of unpaid family carers and young carers is

MISSION

Provide services that respond to the needs of family carers, young carers and the people they support, influence service innovation

STRATEGY

Raise the profile of family carers and the caring role:

- Create and develop an organisational identity which is for, with and about carers. A 'Carers World'.
- Raise the profile of carers and the caring role and grow our profile and reputation in the region as a leading partner, provider and carers' specialist.
- Improve the lives of carers by promoting carers' issues and interests, enabling more people to be recognised and helped as carers; and working with them and other stakeholders to influence service innovation and growth.

Influence society to improve family carers' lives:

- Provide a public benefit through improving the lives of carers, young carers and people with care needs; working with them and other stakeholders to influence service innovation and availability, raising awareness and the positive profile of all carers.

KEY OBJECTIVES

Meet financial and operational service targets for all services [to reduce organisational risk]. Children with disabilities' Clubs, Adult Day Care,

Maintain Care Quality Commission, Investors in People, Information Standard, QA and

Develop Carers Connect in partnership with other organisations

Increase our fundraising activities to provide

Expand Family Carers Prescription

Better Health Network: Develop partnerships cost effective holistic support

recognised and they have access to the quality support and services they need to live their own lives.

offering them peace of mind and understanding; and work with them and other stakeholders to and growth.

Work with family carers and local partners to develop strong networks:

- Carers Trust Cambridgeshire wants every carer to have choice and control. We will use technology and develop more means of reaching and supporting carers.
- We will seek to offer more services ourselves, more as part of a Joint Venture care charity and more in partnerships with other statutory and Third Sector partners.

Support the growth and development of solutions for family carers, especially preventative and early intervention services:

- Grow and expand our “double value” CARE services and produce positive outcomes for carers and cared-for of all ages, enabling them to remain independent.
- Prioritise high quality and good value for money and increase independently purchased care.
- Increase the range of preventative and early intervention services providing (non-care) support for carers of all ages. These will include Carers Assessments, carers groups, peer support, information, advocacy and training for carers.
 - ◆ Seek to engage with more carers including young carers, “hidden” carers and those from minorities.
 - ◆ Increase volunteer opportunities for carers/ex-carers to help with community events, carers voice, experts by experience and return to employment.

Family Carers Prescription, 24/7/365 ICER, Carers Groups, Young Carers, Young Adult Carers, Adult Care and short breaks.

SORP including ISO or Carers Trust QA accreditation and pass all inspections.

and carers, with funding from Big Lottery Fund Awards for All.

more non-regulated carer support services.

throughout the CCG area.

Support the use of technology to promote independence.

with other organisations, to provide more for older people.

Improve productivity and profitability within adult CARE services.

Develop Homeshare, a project to support people to live independently at home through sharing agreements with people who can support them.

Support Axiom Crossroads Care, who have successfully tendered for two extra-care schemes in Cambridgeshire.

Offer more free opportunities for children with disabilities, with a new £89K award from BBC Children in Need. The main aims of the new grant are to increase independence and to support young people with disabilities to have a voice in their local community, as well as enabling them to spend some time with their brothers and sisters away from home to develop their relationships.

Four Strategic Objectives - How did we do?

Raise the profile of carers and caring






Four year Aims 2012-16

- Create an organisational identity for, with and about carers.
- Raise carers' profile and grow our reputation as a leading partner, provider and carers' specialist.
- Improve the lives of carers by promoting carers' issues and interests.
- Enable more carers to be recognised and helped.
- Work with carers and stakeholders to influence service innovation and growth.

Targets 2013-14

- Explain change to Carers Trust Cambridgeshire and launch new website.
- Expand work in Peterborough and support their carers strategy and Cambridgeshire's Carers, Mental Health and Older People's Joint Strategic Needs Assessments (JSNAs).
- Maintain Care Quality Commission (CQC) and Quality Assurance accreditation to enhance reputation.
- Increase charitable income and explain need.
- Two media items per month to show impact.

Achievements 2013-14

-  First Network partner to adopt Carers Trust as a primary brand and develop a branded website.
-  Peterborough: Family Carers Prescription contract, Carers Strategy, Dementia Strategy supported; Cambridgeshire: JSNAs developed.
-  CQC and Carers Trust QA accreditation retained.
-  Charitable income increased, successful grant applications to Big Lottery Fund Awards for All, Carers Trust (STRIVE), BBC Children in Need.
-  National and local press and radio targets met.



Analysis



Much of our effort in 2013-14 will bear fruit in the following few years.

We believe there are mutual benefits in developing the Carers Trust brand and supporting their strategy and national impact on carers' policy.

Similarly, through evidencing carers' needs and helping map services locally, we will enable better future commissioning of support for all carers.

We resourced additional fundraising this year and succeeded in a Nominet grant application for a new website. The benefits of these on awareness and income are also likely to be realised in 2014-16.

Family Carers Prescription

What did we do?

The Family Carers Prescription (formerly GP Carers Prescription Service) was designed as a response to Government allocations to Primary Care Trusts to provide breaks for carers. It also responded to the National Carers Strategy, where Primary Care and GPs in particular were cited by patients/carers as being key to identification and support as the one place carers already go and are known.

GPs and surgery staff are offered a range of training and support to improve their identification and services for carers. They prescribe support from us and we provide information, guidance, links to sustainable options and an assessment and short break, when both parties agree.

The service was extended in 2013-14 to 102 surgeries in Cambridgeshire & Peterborough NHS Clinical Commissioning Group (CCG). The number of carers recognised and receiving a prescription increased year on year, with 662 prescriptions this year. In total, 1,574 prescriptions have been issued since the pilot started in 2010.

450 family carers at Addenbrooke's Hospital received information and support there and were offered prescriptions before/at discharge, where appropriate.

What difference did we make?

Carers, most unknown or "hidden" from statutory service support, were helped to make their situations more resilient. 81% of people were linked to more sustainable ongoing support and 80% to have a carers assessment and access to a carers emergency plan and service (ICER).

Financial savings will accrue from 5%⁸ of prescriptions avoiding admission to hospital and 14% avoiding early uptake of permanent care, in addition to reduced occurrences of emergencies. There was also evidence of reduced footfall to surgeries, improved mental wellbeing and potential prevention of back injuries.

Professionals within primary care (surgeries) and acute care (hospital), including Case Managers and discharge planning teams, are more aware of carer issues and able to recognise and help more families. Through informing surgeries when ICER plans were put in place, GPs can update their patient 'carer' records and be more pro-active in offering carer support in future.

Our Carer Services Development team provided Caring with Confidence and/or other training courses for family carers.

Impact

The Family Carers Prescription model of 'social prescribing' meets current 2014 Department of Health Better Care Fund objectives for integrated services and addresses carer health inequalities in identifying vulnerability and acting to prevent deterioration.

It is recommended as a good practice example in the Royal College of GPs⁹, and was cited by Jon Rouse, Director General of the Department of Health, who visited us and met carers.

Identifying carers in an acute hospital and linking them to primary care and community support was chosen by NHS England as an example of best practice in June 2014 in their national Evidence Summits.

We have shared information with dozens of other CCGs/Local Authorities and providers to facilitate their service development of carer support involving primary care.



Millie* visited our Carer Support Officer in Addenbrooke's. Millie had been sign-posted from the pain clinic which she attends as she suffers from Addison's disease. Millie has two young children and a nine year old daughter, Maisie*.

Millie became very emotional when explaining her situation. She told us how amazing Maisie was, and how supportive she had been. Millie gave an example of the time when she collapsed at her daughter's school playground, Maisie prepared the injection and called her father. Maisie was able to deal with the emergency situation. Maisie copes with caring for her mother wonderfully, but they knew of no support networks to help Maisie and she knew of no other children in similar situations.

We discussed Young Carers groups with Millie and gave her leaflets and contact numbers for her to call, which she did. Millie was so grateful for the help she had received and relieved when she realised that this type of support was available for her daughter.

Young Adult Carers - STRIVE



What did we do?

We were funded by Cambridgeshire County Council to support a group of Young Adult Carers. When this contract ended in 2012-13, we continued to support a small group from reserves, culminating in a visit to Nottingham University's Young Adult Carers Open Day for four Young Adult Carers. We were able to demonstrate a real need for support for Young Adult Carers during their transition from a Young Carer to adulthood; one of the most difficult times of their lives.

Young Adult Carers helped us to locally support Carers Trust's national fundraising partnership with the Co-operative and the Carers Trust national 'Time to be Heard' Steering Group. This partnership funded five major initiatives to support Young Adult Carers. We were delighted that our grant application to the 'Time for Change' initiative was judged by a trained Young Adult Carers panel to be one of the top 20 nationally.

Time for Change enabled us to launch our new project in March 2014, which aims to link Young Adult Carers with their local communities, offering life skills, access to one-to-one support and respite opportunities. It is called STRIVE: Strong, Together, Real, Individual, Vulnerable, Equal. The acronym came from Young Adult Carers themselves and encompasses how they feel.

What difference will we make?

STRIVE will support up to 50 Young Adult Carers aged 16-21 in Huntingdon and Fenland and has four key themes:

- Health and Wellbeing
- Training, Education and Employment
- Confidence and Aspiration
- Economic Wellbeing.

The first groups started in March 2014.



Impact

"Continuation of support is very important and I am very grateful that it wasn't just dropped. It is also great that we get to acquire extra skills through STRIVE. For example, I attended a session on nutrition. Now I am an adult, I need to think about things like my own diet."

Harvey, Young Adult Carer and Carer's Ambassador



As part of Co-operative Charity of the Year, Carers Trust have developed a new interactive resource for Young Adult Carers where Young Adult Carers are encouraged to share and post about information and advice. Go to <https://matter.carers.org/> for more information.

Find out more about the [Carers Trust Co-operative Charity of the Year projects and watch some video clips](#).

Nationally Carers Trust was The Co-operative Charity of the Year in 2013 and over £5m was raised. Carers Trust Cambridgeshire supported dozens of events across Cambridgeshire and Peterborough.

Ella* had been supported by Carers Trust Cambridgeshire as a Young Carer and through her involvement with this project, helped other Young Adult Carers. Ella agreed to be a Co-operative Carers Ambassador and attended store events, explaining the impact of caring on her life.

She was also given the opportunity to talk about her situation to all of the managers in North Cambridgeshire (16 Co-operatives in total).

Ella told the managers about how she had been a carer since she was eight years old. She told them about her school life and her progress into adulthood and the fact she was now looking for a job. She ended by saying how charitable donations can transform the lives of Young Carers.

When Ella had finished speaking, one of the managers said how inspirational Ella was. He was impressed by her confidence and courage to speak in front of so many strangers and that she had the sort of self-esteem that many adults lacked. He then gave her a standing ovation, which was followed by the other managers.

Confidence, aspiration and self-esteem are key factors addressed within our Young Carers project.

Money received from being the Co-operative charity of the year supported a large national grants programme. Carers Trust Cambridgeshire bid successfully to set up STRIVE. An element of the project is for Young Adult Carers to mentor Young Carers, who we hope in turn, will become Young Adult Carer mentors of the future.



Improving lives through influencing society

Four year Aims 2012-16

- Provide a public benefit through improving the lives of carers, young carers and people with care needs.
- Work with carers and other stakeholders to influence service innovation and availability.
- Raise the awareness and the positive profile of all carers.

Targets 2013-14

- Expand support for carers through primary care.
- Train Health and Social Care professionals about carers.
- Contribute to national and local carers legislation and carer and young carer strategies.
- Raise more unrestricted funds for carers in need.

Achievements 2013-14

- 😊 Commissioned to provide Family Carers Prescriptions in Peterborough and Borderline areas as well as throughout Cambridgeshire.
- 😐 101 carer awareness events held.
- 😊 Developed Carers Connect (see also [Strong Networks](#) objective). Three Carers' Ambassadors visited London to engage with Government advisers drafting the Care Bill.
- 😊 Cambridgeshire Young Carers Strategy Group led the achievement of most Young Carers priorities.
- 😐 Fundraising Officer appointed and more locally funded services secured.

"Please could you pass on my thanks to your staff who attended the event and particularly to the Ambassadors. Having carers there to facilitate the round table discussions as well as share their own experiences was extremely positive and meant that feedback was really from a carers perspective."

Commissioner, Peterborough City Council

Analysis



Caring is frequently a normal part of life and often brings its own personal rewards. Less welcome are the many frustrations and health and financial penalties.

This won't change until society becomes more carer-aware and prepared to care. Involving carers and giving them a role in this is crucial.

We made progress with our work to improve support for carers via GPs and Primary Care, but want to develop this further.

We made a good start with Carers Connect and need to seek longer term funding.



Carers Connect



What did we do?

Carers Connect is a new support network for family carers in Cambridgeshire and Peterborough, aimed at giving them better help and information as well as a voice to help shape the services they need. Originally conceived as Family Carer Network, it was set up by Carers Trust Cambridgeshire thanks to a one-year £10,000 lottery grant from Big Lottery Fund Awards for All.



At the Carers Conference, held in Peterborough, Carers Trust Cambridgeshire's Carers Ambassador team were asked to facilitate workshops on the topic of carer involvement. This was very well received by carers in Peterborough.

What difference did we make?

Significant changes were made at St George's Medical Centre in Littleport as a direct result of the first Carers Connect meeting in Ely.

Having 'real family carers' facilitate events meant that family carers did not feel that events were led by professionals.



Meeting with Jon Rouse, Department of Health, the Carers Ambassadors prepared a statement for him to read on his return to London. The team were enabled to speak with a decision maker who really listened to their concerns. At the meeting and subsequently, Carers Trust Cambridgeshire were congratulated and portrayed as a best practice example in regard to the Family Carers Prescription and ICER emergency services.

Impact

"I am a carer for my husband who is physically disabled. My daughter and close friend both have mental health issues. In both my paid and voluntary work I have worked with the elderly. I currently volunteer at a local supported living home for the elderly. I am also on the patients participation group at my GP surgery and I edit the Carers' Ambassador Newsletter."
Sue Honour and Milburn, the dog



"I chose to become a Carer Ambassador because I want to help all carers get more support, especially young carers aged 18-25, as I feel they are the least supported of all age groups and becoming a young carer can be the hardest point of our lives."
Andrew Butcher-Tiffney



Funded by:



Young Carers

What did we do?

We have taken significantly more referrals this year than in 2012-13. Taking a family based approach helps make a long term difference to young people and their parents.

Three new groups were started this year with external funding received for two of them. Our first new school group in Fenland was started this year thanks to Roddons Housing.



Huntingdon Freeman's Trust

Supporting the residents of Huntingdon since 1993



What difference did we make?



Two accredited Arts Award opportunities linked in with Huntingdon and Ramsey localities, who developed projects specifically for Young Carers. This led to the completion of an Explorer and a bronze arts award.

We now run 19 Young Carers groups per month and have increased our presence in schools. This is thanks to St Ives, Ramsey and St Neots Localities and the Foundation of Hinchingsbrooke School who support St Peters and Hinchingsbrooke School groups.

This enables increased opportunities for Young Carers to have some space and time and to also engage with their peers in a fun way.

Nationally, Young Carers were featured in articles and TV appearances, particularly around the Census results. We featured on Channel 4, BBC Radio local and national and had articles published. Our Young Carers also featured in the [*Hidden from View*](#) report published by the Children's Society. Two of our Young Carers are national Young Carer champions and have contributed to making films and champion's weekends.

Impact

Lorna is 9 years old and lives with her mother, father and a brother who has Autistic Spectrum disorder. Lorna's mother has serious health problems that mean she is in and out of hospital. Dad has also previously had a heart attack.*

Lorna constantly worries about her mother and experiences separation anxiety. Lorna does a lot of emotional caring and helps out at home when mum is ill or in hospital. It is clear that Lorna must feel helpless and may take on her father's worries as well as the effect of her brother's behaviour. Lorna does not like being at home when mum isn't there and has suffered with anxieties and her behaviour. Lorna has had a Common Assessment Framework (CAF) assessment and currently has a counsellor.

Lorna finds the Young Carers group a great support and is coming on the summer trips. She finds this a break from family life and the group has allowed her to be free of worry and to be herself. Her social skills and self-esteem have grown and Lorna feels part of something fun and relaxing. She also knows we are there for her if she needs to talk.

Young Carers is invaluable for young people like Lorna.

[Watch some video clips.](#)



Strong Networks

Four year Aims 2012-16

- Every carer to have choice and control.
- Develop and use technology to reach and support carers more.
- Offer more services ourselves, as a joint venture and in partnership with other statutory and Third Sector partners.

Targets 2013-14

- Develop third sector Better Health Network (BHN) to improve health and wellbeing outcomes in Cambridgeshire.
- Launch Preparation into Employment (PIE) with partners, to help 50 homeless people or carers into work.
- Establish Carers Connect and recruit 10 Carer Ambassadors.
- Support Young Carers in Cambridgeshire in partnership with Centre 33.
- Grow Axiom Crossroads Care (ACC), a joint venture care company with Axiom Housing Association.

Achievements 2013-14

- ☹️ BHN jointly funded for a pilot.
- ☹️ PIE launch, delayed start but soon meeting outcomes.
- 😊 Carers Connect support network in Cambridgeshire and Peterborough developed with 15 meetings and 8 Ambassadors.
- 😊 Close collaboration, joint events and participation activities held by CTC Young Carers and Centre 33.
- ☹️ ACC secured two Extra Care contracts but community care was slow to develop.



Analysis



In innovating and developing new services, such as the Family Carers Prescription and Young Adult Carers 'STRIVE' project, we endeavour to help others to develop their projects and to learn from them too.

This extends to our support of partnership working, of which Better Health Network and Preparation into Employment are good examples.

We are committed to develop and share learning, as part of our public benefit. Here, we learned that competitive tendering is an obstacle to collaboration.

We could not adequately resource both developing carer support and our joint venture care company, ACC.



Better Health Network

What did we do?

Faced with the 'Perfect Storm' of a rapidly increasing population, more older people often living longer in ill health and decreasing NHS and council budgets, new solutions are needed. We led on developing a partnership of Third Sector organisations to take a more focussed role in health and wellbeing, alongside, and ideally, integrated with statutory services.

Better Health Network (BHN) was proposed as a means to co-ordinate support and services, focussed towards maintaining or improving health and wellbeing. It was conceived as a single point of access for the voluntary sector, with two strands: a preventative means of identifying and supporting older people at risk; and helping people already identified as needing support.

A 12 month pilot project to help the latter was funded. 50% by **Cambridgeshire & Peterborough NHS Clinical Commissioning Group** and **Cambridgeshire County Council** and 50% by **Carers Trust National Gardens Schemes Development Fund**. Four posts were created: two Assessors and two Administrators, with the Assessors visiting clients and assessing their needs and the administration staff finding and contacting voluntary organisations to help the clients. All four posts sat with discharge teams; one at Huntingdon and one at Cambridge.

What difference did we make?

The first set of clients were seen in March. By July 2014, in over 50% of cases, the Assessor had identified more issues than was originally acknowledged. 20% of clients were identified as carers who were unaware of support available.

We proved the concept and small community organisations and volunteers were able to help improve outcomes for people. One major outcome involved identifying further problems. In many cases, the original referral seemed simple (e.g. help with shopping) but once the assessor visited, further complex issues were identified and solutions sought.

Impact

We have developed social capital and a toolkit of resources, including legal advice on selecting the partnership vehicle. Partners had an agreed Memorandum of Understanding and almost developed the first BHN consortium of its kind in the country. Work is ongoing to finalise the consortium contract and this may still be the case.

Trust between partners is essential, plus a means of overcoming competition. Some stronger relationships have developed between local third sector organisations.

BHN developed an approach that fits with Cambridgeshire's Transforming Lives programme, aiming to help people to help themselves and access help when it is needed, with fewer people needing to access long term social care.

Partners... so far



"The desire to continue working, though driven partly by economic factors, is also the desire to find fulfilment beyond caring."

**Jon Rouse, Director General,
Department of Health**

Preparation into Employment

PIE
Preparation into Employment



What did we do?

PIE is a partnership project between Carers Trust Cambridgeshire, Axiom Housing Association and Axiom Crossroads Care, funded by Cambridgeshire and Peterborough Local Enterprise Partnership (LEP).

PIE is an employability project focussed on helping family carers, former family carers and homeless people to develop skills and support them back into work.



Sam Barrasso,
Project Manager

What difference did we make?

Current and former carers of all ages may struggle to find employment having either been out of work for some time, have fewer qualifications having missed out on education, or limited career opportunities due to their caring role.

The effects of homelessness on people of all ages rarely occur in isolation and are often associated with poor educational attainment. PIE supports those living in supported hostels and those at risk of becoming homeless.

Both groups tend to be socially isolated, vulnerable and come from a wide variety of backgrounds. The project's goal is to provide the necessary guidance, confidence, training and qualifications to knock down any barriers and prepare people for work. It focusses on creating career/development pathways which reflect the aspirations of individuals.

PIE candidates have access to 1:1 and group information; mentoring with the Project Manager; advice and guidance sessions; an individual learning plan to track progression; functional skills qualifications (Maths, English and IT skills); access to accredited Health and Social Care Courses; employability and interview preparation workshops; sign posting to other vocational courses; work experience opportunities in a range of employment sectors.

Impact

Individual success stories demonstrate how valuable the project has been for PIE candidates on many different levels; individuals are supported to achieve recognised qualifications which match **their** aspirations; individuals are supported to overcome barriers to employment; to feel less isolated; to have reduced psychological and physical stress; to have better self-esteem, health and wellbeing.

Unemployed people become equipped to secure employment and have a variety of job opportunities.

Tom is 24, homeless and lives in supported accommodation in Peterborough.*

PIE tried for weeks to gain Tom's trust and find out about his passions and career aspirations. He was uncommunicative, arrived late for training and never came to PIE drop-ins. Through PIE Tom heard about a YMCA fitness project providing work experience for the project. He asked us if he could join it; he had thought about being a fitness instructor when he was younger and had a Karate black belt.

Tom has now done 100 hours work experience with the gym and is working towards a Level 2 in Fitness. Since finding a realistic career path, he is engaged and motivated. Without PIE, Tom would not be taking the first steps towards a promising career. He feels better about himself and will continue to build his confidence to feel ready for work.



Growth and development of solutions - 1. Regulated Care

Four year Aims 2012-16

- Grow and expand our 'double value' CARE services.
- Produce positive outcome for carers and cared-for of all ages enabling them to remain independent.
- Prioritise high quality and good value for money.
- Increase independently purchased care.

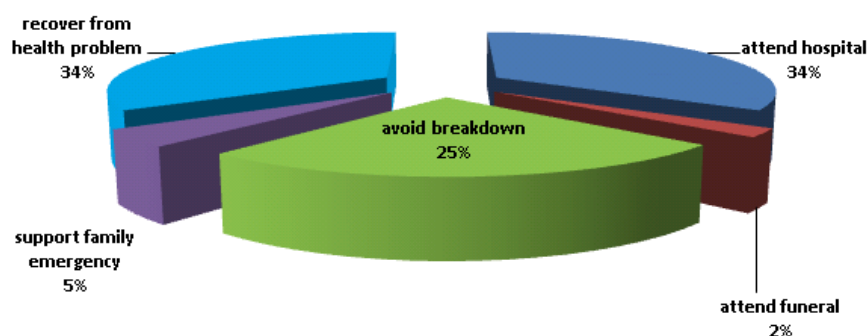
Targets 2013-14

- Increase hours of care for adults and disabled children to 78,256 hours pa.
- Grow privately purchased care.
- Improve efficiency of care co-ordination and delivery.
- Introduce outcome monitoring and reporting.
- CQC and Carers Trust QA compliance.

Achievements 2013-14

- ☹ Hours of care increased by 7.5% to 72,000 hours.
- ☹ Privately purchased care remained the same.
- ☹ Reorganised care staff and began closure of Cambridge City branch office to improve efficiency.
- 😊 Outcome monitoring improved; piloted Carers Outcome Star for 2014-15.
- 😊 CQC and Carers Trust QA inspections passed.

Reasons to activate an ICER



Analysis

We invested in management, HR and training staff in order to grow our carers breaks and care services.

We did grow, but not to the level we had planned. We need to improve marketing of our unique selling points better to private purchasers. We did increase care commissioned by health and social care services, particularly for dementia.

Another reason was difficulty in recruiting and retaining good care staff, particularly people wanting to work with children and challenging behaviours.

We joined Cambridgeshire County Council's care apprenticeship scheme and employed three apprentices. We also changed our Terms and Conditions and rewards.

Children and Young People (CYP)

What did we do?

We supported over 140 parent carers and 12 siblings in the last year. Of the 107 children and young people (CYP) we supported, 54 were aged from 0-19 with a variety of physical and learning disabilities were supported on a 1:1 basis. 53 CYP were supported in groups or group activities, this includes our short break groups and BBC Children in Need activities.

Our groups for Children & Young People (aged 5-19 years) run in St Neots and Cambridge and include visits out in the community and activities to enhance a range of skills and encourage choice, in order to promote independence.

What difference did we make?

We work with CYP and their families to provide the kinds of support **they** want, either in the home or out and about. For example, regularly taking a young man to attend disability football and supporting a child to attend Brownies. We have had individual visits to watch football matches and visits out to try out shopping, using public transport and activities in the open air such as pond dipping. The aim is to support children with disabilities to develop their skills in ways that suit them, having fun and experiencing new things at the same time.

Impact

In 2013-2014 activities across the groups included going to the 'Arts Picturehouse' cinema, visits to Duxford, Thurleigh Farm, Fireworks Display, taking buses into town to a café and using our culinary skills to make our own bread and butter. One child said he had 'always wanted' to make an ice cream sandwich so he adapted the Ice-Cream sundaes we made to make one with wafers and was over the moon with it!

As in all our support, our groups aim to be flexible and responsive to changes and individual circumstances.

Ed swaps his Saturday at St Neots Stars for a night at the fireworks and his parents go out together for a meal. This is his story from the point of view of a staff member:*

"En-route to Ed's we were in two minds as to whether to go due to bad weather making us unsure of how he would respond. However, with our combined experience and knowledge of Ed, and his mum's agreement, we decided that we would never know the outcome unless we tried.

At the display Ed showed no fear or nerves at the lights and loud music; we danced and he needed no encouragement to join in, his face lit up.



When the fireworks started Ed held onto our hands but looked up, smiled and laughed. After a while he pulled our hands over his ears, but this didn't deter him from laughing all the way through. When they finished, the crowd clapped, Ed took his hands from his ears and clapped too. He tackled the experience with bravery and determination."



Children in Need

What did we do?

Our **My Challenge!** project funded by BBC Children in Need over 3 years has got off to a great start this year. We have offered an array of inspiring opportunities to Children and Young people with disabilities and their siblings. These activities are **free to families** and **open to ALL** young people, whether they access our services already or not.



© BBC 2007 Reg. charity England & Wales no. 802052 and Scotland no. SC039557

What difference did we make?

In 2013-2014 we have had a trip out to Spy Missions followed by lunch, a panto and a visit to Mepal Outdoor Centre. In 2014-15 we will be going to the seaside, the Botanic Gardens and on a residential trip, among other things. Through these we have supported children with disabilities and their siblings to spend fun time together, which has also allowed parents and carers to have quality time together to get jobs done or relax (we have supported 5 children from one family on one outing!). Parents have told us how lovely it is to hear from the siblings how they have got on and that it has strengthened their relationship to do things together with other people.

"Ryan and his brother had a great time and spent time doing things together, which is almost unheard of. It was great for them both."*
Ms Gill*

Impact



As part of this project, we also support children and young people fulfil their goals, dreams or aspirations. So far we have supported young people with bird ringing and fashion, but the list is endless... imagination can run wild and we will mentor them to achieve it!

"My wife and I used the time to go to town to do some last minute bits for Christmas." Mr Simons*



Karl* is a member of one of our CYP groups and has always been interested in birds, specifically bird ringing. Karl was taken to a bird ringing show and was shown how to ring birds by one of the experts. After his meeting Karl was inspired to learn more about this particular skill and is looking to be a trainee bird ringer in the future.

Poppy* has always had a passion for fashion and art. My Challenge! introduced Poppy and her mother to Lesley who works for CTC and also has a love of fashion and art. Lesley discussed the type of fashion Poppy was interested in as well as the process of how to pursue her interests and ideas for her future. Poppy is now registered on a Level 2 Fashion and retail course at the Retail Fashion Academy.

"Anwar enjoyed Mepal outdoor centre very much, thank you for giving him the opportunity and some respite for me."*
Mrs Dasani*

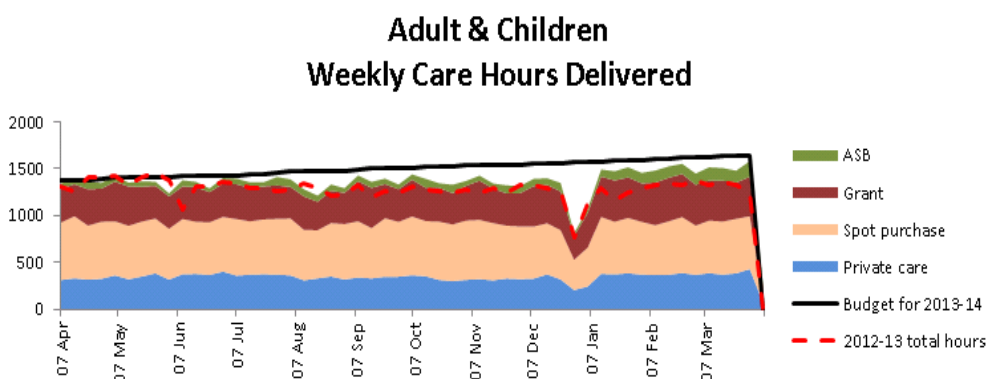


Adult flexible breaks and care

What did we do?

We increased the provision of care and care breaks by 7.5% on the previous year, to deliver nearly 72,000 hours of care for adults and children with disabilities in their homes. Support for children made up 8.5% of care hours. This was our best performance to date, although we had planned to increase by more.

25% of care/carer breaks were purchased privately by individuals, which was about the same as the year before.



In addition, we provided about 30,000 hours of respite through Family Carers Prescription breaks, emergency support and the provision of day groups and children's clubs, encouraging independence and socialisation whilst giving carers and families extended breaks.

What difference did we make?

Carers tell us that trips and groups give them different things to talk about at home - the panto trip to The Cresset for Fenland Day Group clients used community transport and benefitted from concessionary group and charity rates. This was the highlight of the Christmas period, they said.

Impact

Carers Trust Cambridgeshire provides breaks at agreed times, not during time "windows" and aim to provide continuity of Carer Support Workers (CSW) to forge relationships with people. This makes our service particularly suitable for people with dementia and enables us to bring additional outcomes for families. A recent example involved scams. A client with early signs of dementia unfortunately had £450 taken from his bank account. The CSW that supports the client informed the office and a SOVA (Safeguarding of Vulnerable Adults) concern was raised.

The Police were contacted and the family explained that this was an ongoing issue; the daughter told us that no-one seemed interested in trying to help stop scamming. We provided information and contacts and when the CSW noticed that a new front door had been fitted, with the same company coming that day to quote for doubled glazed windows, we contacted both daughters to inform them. The company had charged £2,644 for the new door. We cancelled the appointment, explaining that the client is vulnerable and that we had informed his family. The daughter thanked us for alerting her and we suggested it may help if they could agree a Lasting Power of Attorney. We provided information and recommended getting advice about mental capacity, vulnerability and support with decision making.



Growth and development of solutions 2. Preventative

Four year Aims 2012-16

- Increase the range of preventative and early intervention services providing (non-care) support for carers of all ages.
- Engage with more carers including Young Carers, 'hidden' carers and those from minorities.
- Increase volunteer opportunities for carers and former carers.

Targets 2013-14

- Extend Family Carers Prescription to Peterborough and Borderline NHS Local Commissioning Group areas.
- Increase Family Carers Prescription referrals to 600 per annum.
- Secure extension of ICER carers emergency contract and increase carers supported in emergencies.
- Increase number of volunteers.
- Information Standard compliance.

Achievements 2013-14

- 😊 Family Carers Prescription extended in November.
- 😊 660 prescriptions issued, a year on year increase and 450 'hidden' carers identified via Addenbrooke's Hospital.
- 😊 ICER Contract extended, registered carers increased and a record 127 carers supported during emergencies.
- 😊 25 Volunteers support us. BHN utilised non-Carers Trust volunteers and 20% of people supported by BHN were carers.
- 😊 Information Standard accreditation maintained.



Analysis



We have developed reliable rapid response and crisis support for the NHS and Local Authority and are able to "virtually integrate" support around families.

These prevent escalation and save costs: January is the peak month for emergencies and we help relieve winter pressures on hospitals.

We want to evolve these services, to register more carers, enable more families to plan for emergencies and prevent more admissions to hospital.

Our work with Young Carers and about employment is also preventative - supporting carers to make life changing choices.

ICER (Individual Carers Emergency Respite support)

What did we do?

Carers who have a Carers Assessment from Cambridgeshire County Council are offered support during emergencies from Carers Trust Cambridgeshire. The number registered has grown year on year to over 3000, with almost all selecting to have professional support from the ICER service.

We contact carers promptly after receiving a referral and undertake a risk assessment - 951 were completed in 2013. A dedicated team are on call 24/7/365 and respond within 2 hours of an activation - 127 times in 2013-14. We care for the person with care needs at home during the emergency.

What difference did we make?

Thousands of carers and their wider families are less anxious about what will happen in an emergency and most carers activate their ICER plan due to admission to hospital or being too ill to fulfil their caring duties. About 70 carers of people with complex care needs are also supported with ICER plans in conjunction with specialist community care support. Caring for someone in their own home is better for the person with care needs too.

Impact

Through holding NHS and Local Authority contracts, we were able to “virtually integrate” health and social care support for families in emergencies. The offer of the ICER support encouraged many more people to undertake Carers Assessments, a pre-requisite for ICER registration. Carers Assessments are a gateway to other support, for better long term outcomes and primary care health services were updated with carer ICER status. Activations prevented hospital admissions of people with care needs and enabled sick carers to remain at home and recover, too.

“When the Carer Support Worker arrived, Mr Ball’s sister was there looking after Mrs Ball* as her husband had already been taken to hospital. Mr Ball had been referred to A&E following a prolonged Angina attack which had not relented despite self-medication. Mr Ball came home the same evening, but was only allowed to do so as we were on-site to keep supporting his wife.”*

An activation request was received to support a carer. Mrs Griggs was a business lady; she felt she had lost her confidence whilst caring for her husband. Mr Griggs was ‘End of Life’ and his wish was to spend his last days at home.*

Mrs Griggs activated her ICER so she could have some practical and emotional support at home, to support her and her husband, to prevent him being taken into hospital in his last days.

The ICER team worked with the lady to enable this to happen. Mrs Griggs wrote and told us:

“Thank you all for supporting me and my husband, the service was brilliant. I felt more relaxed and this gave me the strength to carry on supporting my husband until the end. Service fantastic.”



Carers Support - Family Carers Prescription, Carers Groups and more...

What did we do?

We linked carers identified via GPs to carers support on offer, either by others or ourselves. All together, our team ran or supported 460 events in our communities.

We continued to run family carers, parent carers and support a dementia group. Our activities and talks included:

- Bikeability
- Bread making
- Cambridgeshire Green Space
- Community Mental Health Team
- Coping with Emotions
- County Council Carer Support Team
- Dancing for Dementia
- Engagement
- Head of NHS Continuing Care
- Improving your Self-esteem
- Introduction to Mindfulness
- Laughter Workshop (lots!)
- Managing Emotions
- Martial Arts/Self-Defence
- Michael Shann from Carers UK
- Music
- My Time Active
- Poetry
- Red Cross Massage
- Relaxation Techniques
- Reminiscence
- Think Right Self-esteem & Confidence
- Village Benefits Service
- Yoga

We planned ahead for the Care Act 2014 changes, too. The Carers Support and GP team were one of 12 chosen by Carers Trust to participate in a pilot of the Carers Outcome Star; and also participated in Skills for Care's development of Carers Assessment training for the Third Sector.

What difference did we make? Feedback received:

"I cannot thank you enough for your support. I wouldn't be as well off now without it. Thank you again."

"I have known your worker for seven years and I have changed so much, you have supported me throughout that time which shows a vast amount of patience, tolerance and care."

"This group has been a lifeline for me, an invaluable source of help and information and a meeting place with people who have now become friends who understand."

"Well structured, friendly but also focussed session - great ideas to take home."

Impact

Mr Dawson was referred for a Family Carers Prescription after a talk to the Parkinson Group in Ely given by Carers Trust Cambridgeshire. However, both Mr Dawson and his wife were unsure if they would need to use the Prescription.

We understand why many carers find it difficult to accept help initially and how many people with care needs are reluctant to accept their carer's need for a break.

Mr Dawson started to reminisce about farming in the Fens. It was suggested that he use the Prescription to visit Ramsey Rural Museum. He joined the Therapeutic Art group from March who had planned to visit to the museum and Mr Dawson had a fantastic day at the museum with the help of one of our Carer Support Workers.

"The farm machinery brought back memories of when I was 10 years old and working with my Father on our farm. I would recommend the Family Carers Prescription and enjoyed my visit to the Ramsey Rural Museum."

Mr and Mrs Dawson now have more information and guidance about caring and the importance of maintaining their health and wellbeing.



Some Facts and Figures

What did we do?

We increased the number of people we supported and the types of support they chose continued to evolve.

In total, 5,527 adults and 663 young people received a support service from us, a 3.5% increase on 2012-13. We were pleased with this, achieved in spite of a contract for Carers Support Groups ending in 2012-13. We saw a significant rise in people registering for the carers' emergency service (ICER).

Overall, we provided 108,866 hours of care or support through 49,584 individual breaks, a new record.

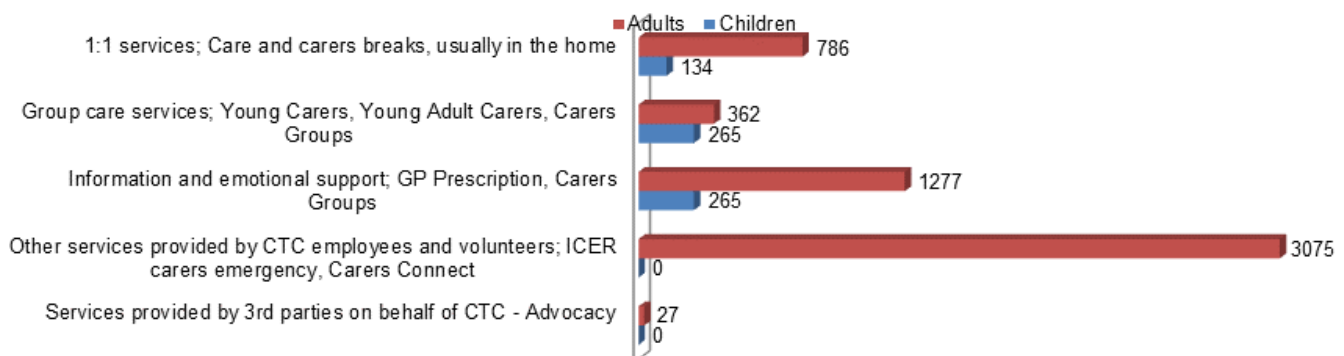
Hours of support increased by 10% over the previous year and breaks by 7.5%. This largely reflects an increase in longer breaks for carers through day groups for adults and clubs for children with disabilities.

We employed 155 people, 11 more than the previous year. Many staff work part time, so these were equivalent to 87 full time employees.

Who did we help?

We support carers of all ages: young carers, young adult carers and adults, caring for people of all ages. Two thirds of the people with care needs were aged 65 or over, whilst carers were younger.

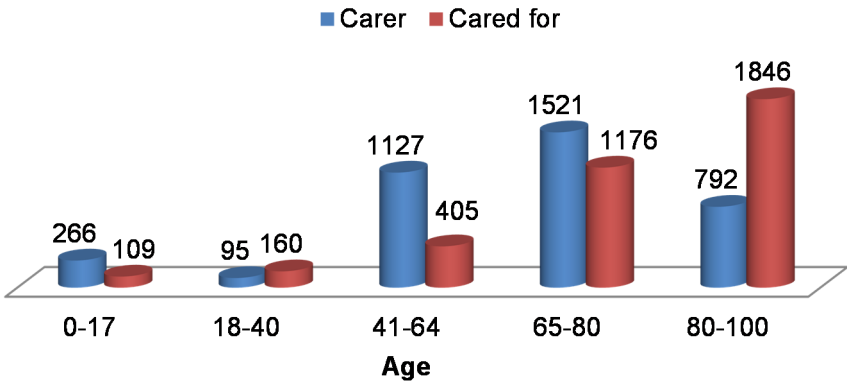
Numbers of Adults and Children receiving CTC services†



† Each service is counted separately, people may receive more than one service.



Ages of carers and the people they care for

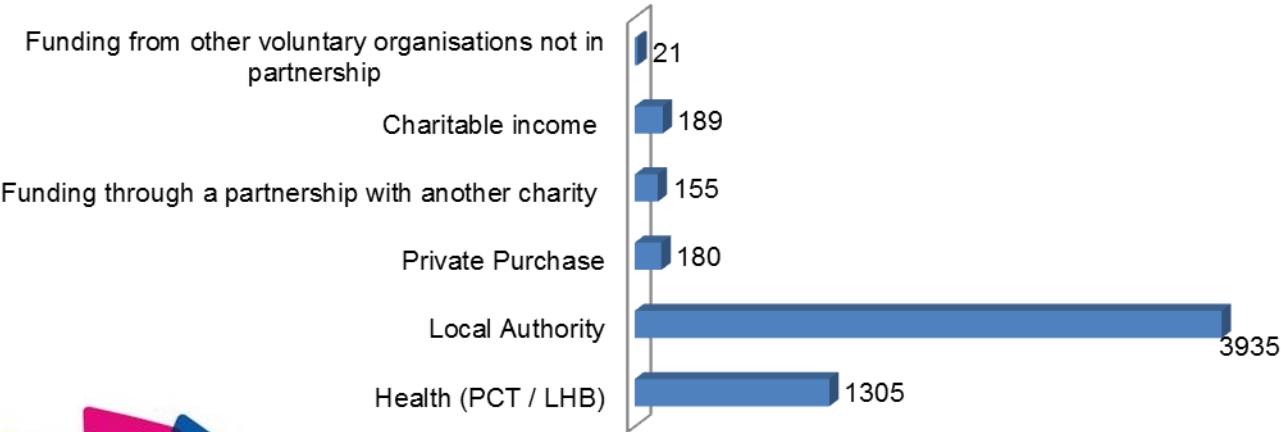


The most common care needs (by disability or condition)

%	Disability or Condition
16	Alzheimer's/Dementia
8	Arthritis
7	Diabetes
7	Heart disease/disorders
6	Sensory impairment
6	Stroke
4	Elderly frail
4	Bronchitis/Asthma/Respiratory
4	Cancer
3	Parkinson's disease/syndrome
3	Learning difficulties/ disability
3	Mental health problems (not Alzheimer's/Dementia)
3	Spina Bifida
3	Autistic spectrum

How was support funded?

Number of carers benefiting from funding



Our Finances







Four year Aims 2012-16

- To grow our income and make 3-5% net profit.
- Diversify income and reduce reliance on Cambridgeshire County Council social care.
- Maintain adequate reserves.

Targets 2013-14

- Increase income to £2,447k in budget.
- Maximum deficit of £55k in budget.
- Improve processes and efficiency to improve net profit margin.
- Replace £21k grant funding for YC/YAC that was about to cease.
- Increase donations.
- Increase income in Peterborough.

Achievements 2013-14

-  Income increased to £2,610k and gross profit margin increased.
-  Profit of £12.7k after exceptional activities (£5k more profitable than budget).
-  Processes and efficiency savings were not realised this year.
-  We raised £37k in replacement grant funding (including £10k from Huntingdon Freeman's and £17k from Carers Trust).
-  Donations increased, largely due to a legacy.
-  Increased income from NHS from November and successfully tendered for contract from Peterborough City Council which started in July 2014.

Analysis



Income has grown fourfold since 2005, through our successful strategy to merge, grow and offer additional services. The impact of this is that we need higher reserves to safeguard against a downturn.

Our reserves are at a satisfactory level and we make a gross profit from all services.

The board have continued to invest in development rather than add to reserves, due to the opportunities we have and challenges we face.

Next year, we will invest more in efficient systems and processes.



Financial Review

Income

- Our total consolidated income was £2,601k in the year to 31st March 2014. Despite the unfavourable financial climate, this was an increase of £368k compared with 2013.
- Our main source of income, £2,022k relates to the provision of Care Quality Commission (CQC) regulated care services, which are shown in the accounts as 'Care Enterprises'. This is funded by council contracts, NHS contracts and self-funding clients, but we do also provide some of this service funded by donations we receive.
- Our 'Charitable Carer Support Activities' income was £440.6k, an increase of £89.5k from 2013.
- Donations increased by £135k this year – we were fortunate to receive three large one-off donations.
- £147k of income was due to our share of income from Axiom Crossroads Care (ACC), our joint venture with Axiom Housing Association which we launched the year before (see below).
- Other income remained fairly stable, but that masks some underlying changes in funding: in the year we extended our Family Carers Prescription service funded by Cambridgeshire and Peterborough NHS Clinical Commissioning Group (CCG), but funding for our Carers Groups was reduced by Cambridgeshire County Council.
- We have a programme to regularly seek additional grant funding to support our projects. Overall we obtained £55k more grant income this year, primarily for supporting Young Carers and Young Adult Carers, but also we were delighted to be awarded a £90k grant from BBC Children in Need to support families of children with disabilities over the next three years. 4% of our income comes from grants.
- We successfully tendered for Peterborough City Council's Carers Services contract (which started in July 2014), which will replace (and extend) our Peterborough carer's breaks contract.

Expenses

- Our expenditure also increased this year - our total consolidated expenditure of £2,660k was £283k more than last year. Of this, £156k related to the expansion of ACC and the rest was due to additional services provided directly by us to support carers.

Joint Venture - Axiom Crossroads Care (ACC)

- This was the second full year that ACC was trading. During this period it continued to increase the community care provided and successfully tendered for two Extra Care contracts, which resulted in its increased income. However, overall it made a loss of £126k of which our share was 50%, i.e. £63k, which was worse than originally forecast.
- The changing economic climate and delays in commissioning of more Extra Care schemes were reflected in a business plan forecasting a longer payback period and thus requiring higher capital loans.
- The Board decided our priority needed to be focussed on our key priorities of support for carers and our share of ACC was transferred to Axiom Housing Association on 31 May 2014.



- In the accounts we provided against this investment leaving £64k as its book value as that was the sum expected to be paid on transfer of our interest to Axiom Housing. This was £43k more than our share of the net assets at the year end, which were £21k, to reflect its future potential.
- We wrote £66.9k off the investment value - this is shown as an exceptional item in the Statement of Financial Activities.

Balance Sheet

- In 2014 we made a surplus on our general reserve of £16.7k, which was a large improvement over the preceding year (£49k deficit in 2012-13).
- Debtors are £187k less than the year before and Creditors are £219k less. This is primarily due to a change in the timing of invoicing for contracts - in 2013 we invoiced in advance for the services to be provided in the quarter to 30 June 2013, which resulted in higher debtors and higher deferred income (included in creditors) whereas we did not do that this year. However, we also improved our credit control to reduce debtors in 2013-14.
- Restricted reserves for projects increased slightly, but show a net £4k decrease overall. This is due to £10.8k from a restricted capital grant used to cover depreciation on assets acquired by that capital grant. This represents a big improvement on the previous year, when restricted reserves decreased by £40k on ongoing projects, without new restricted reserves being awarded. In 2013 we did not have sufficient management resource to seek additional charitable funding. We have since employed a Fundraising Officer for two days a week to improve this situation further next year.



Investment Policy

As we do not have significant endowments, all of our funds surplus to working capital requirements are deposited in term deposit accounts, for up to 2 years. The policy is to provide a reasonable return in relation to market rates and our re-investment in deposits is reassessed as each one matures. Our funds are deposited with more than one bank, to ensure risk to the funds is minimised.

Reserves Policy

The aim of Carers Trust Cambridgeshire's Reserves Policy is to ensure that its ongoing and future activities are reasonably protected from unexpected variances in income and expenditure and that any excess funds are spent on providing services to support carers.

The board reviews the level of reserves on an annual basis in line with its Reserves Policy.

Our target level of reserves is £526k with a tolerance of + or – 5% which gives an acceptable band of £500k-£552k. This target has been set by looking at our working capital requirements, reviewing the charity's risk register and plans for the future in order to ensure that we continue to meet current obligations to beneficiaries.

At 31 March 2014 our general free reserves were £531k, and fall within the target level required, so no further action is required. We also held restricted reserves of £20k of which £12k is a capital reserve set aside to cover the depreciation on fixed assets acquired by a grant in previous years. Other restricted reserves carried forward are to support young carers and families requiring palliative care.

Patricia Lynch

Patricia Lynch ACA, Finance Director



How we spend our income

For every £1 of total income, 83p is spent directly on our charitable activities including the costs of our CQC regulated Care Enterprise section and the overheads we need to deliver care and carer breaks. We think this is very comparable with leading charities.

For every £1 raised through donations for charitable activities, 98p is spent directly on charitable activities and can be restricted for specific use. This includes care, support and direct activities such as carers' groups with family carers, young carers and young adult carers.

Thank you for supporting us

We're grateful for donations from a range of organisations, events and individuals including in memoriam and legacies. Every pound helps! Thank you to:

BBC Children in Need	Big Lottery Fund Awards for All
Bluntisham Baptist Church	Braza Short Mat Bowls Club
Buckden & District Churches	Cambridge Masonic Trust
Cambridgeshire Community Foundation	Cambridgeshire County Council
Carers Trust	Caring for Carer
Cash in the Community	City & University of Cambridge Masonic Charitable Trust
Cycle Legacy	Davey Grover Ltd
Delta Consultant	Ellington Village Hall
Fireworks in Hemingford	Foundation of Hinchbrook School
Godmanchester Mayor's Charity Fund	High Sherriff
Hilton Parish Church	Hullabaloo
Huntingdon Freeman's Trust	IYSS
Lloyds TSB Foundation - Matched giving Scheme	Luminus Group Limited
Made a Difference	March Solo Group
Mid Anglia Centre of Caravan Club	National Gardens Scheme
Priory Fields Partnership	Province of Cambs Charity Care & Relief
Roddons Housing	Rotary Club Huntingdon
Rotary Club St Ives	Rotoract Club of Huntingdon
Royal Air Force Wyton - Brampton Thrift Shop	Sainsbury's Charity of the Year
Shelford Dementia Support Group	St Anne's Church of England Primary School
St Ives Golf Club	St Ives Golf Club
St Ivo School 6th Form	St Neots Ladies Circle
St Neots Tangent Club	The Co-operative
Trinity College	Waitrose Community Counts
Waitrose St Neots Community Matters	Whittlesey Singers
Women's Institute	Wisbech & Walsoken Sick Poor Charity

A Aldrich	Mrs J Allington	Mr B Angus	Mr J R Ayres
A Bell	Mr & Mrs Bellamy	Mrs Beresford	Mr Blake
A C Bonner	Mr J M Brady	B F & ME Brown	A Burling
Ms L Callear	Mr Cook	Mrs M Davidson	Mrs B E Driver
Mr Farmer	Mr & Mrs Farrell	S Fordham	Mrs Forman
Sqn Ldr Frost	K Gallagher	Mr & Mrs Garbett	Ann Gilbert
Miss Haigh	Mr & Mrs Hall	Frances Hayden	Mrs V Jackson
Mr Kirkby	P C & J R Mott	F E Murton	Mrs D Older
Mr A E Owen	Mr R Parrish	E M Perry	GB Petman
Ms Potter	Mr Prowse	R J & M Pye	Mrs Scullion
Mrs M Scurll	S Sims	Mr Spreckley	Mr & Mrs Steward
Mr & Mrs Strickland	Jean Swanson	Mr Tilley	Mrs Tucker
Mrs Tutt	Mr Van Gelder	Mr & Mrs Waixel	Mrs Wells
Mrs L H Wharton	P A & J B Withall	Mrs Woodhouse	



Quality Assurance

Providing high quality services is one of our key priorities. We are a fully compliant Care Quality Commission (CQC) registered care provider. Here's a quotation from our 2013 inspection:

“During the inspection we spoke with several people who use the services provided by [CTC]. We spoke with people who were receiving personal care and support as well as with people who were family carers who were receiving support... They overwhelmingly told us that they were totally satisfied with the service and that the service was exceptionally good at meeting their needs. People made very positive and grateful comments about the care staff and the management office based staff. One person said, ‘The personal support is perfect for me because my support is organised so that I can choose the care I need. The management have always been available and very helpful whenever I have spoken to them.’

We found [CTC] had worked with a number of other service providers and commissioners of care to start innovative partnership arrangements to identify people's needs and to provide support and care services to vulnerable adults and to children.

We saw that staff recruitment was rigorously and safely managed to ensure that people were protected from harm and were provided with well-trained support staff.”

Quote taken from CQC website¹⁰: <http://www.cqc.org.uk/location/1-139853361/reports>

We are also audited or accredited by:

- Cambridgeshire County Council Home and Community Support Services
- Children and Young Peoples services
- OFSTED (accredited as GOOD)
- the contracting departments of commissioning organisations
- Carers Trust, as a Network Partner. We retained their quality assurance standard, CROQUET (CROSSroads QUALITY Evaluation Tool, a PQASSO based scheme) at the highest Level 3. CROQUET covers not only the provision of care but the management of the organisation.

We hold Investors in People (IiP) accreditation.

We retained the Department of Health sponsored Information Standard accreditation as a certified producer of reliable health and social care information.

Further information about Quality Assurance is available on our website.

Future Plans

To review and update our strategic plan to reflect the legislative changes taking place from 2015.

To continue to strengthen our role as carers' specialists and care providers in the region and to expand the range of support and services available to a larger number of carers.

To increase the proportions of unrestricted income earned from individuals and from fundraising.



Governance

The Trustees, who are also Directors of the charity West Anglia Crossroads Caring for Carers known as Carers Trust Cambridgeshire, for the purposes of the Companies Act 2006, submit their annual report and the financial statements of the charity for the year ended 31 March 2014. The Trustees confirm that the annual report and financial statements of the charity have been prepared in accordance with the accounting policies set out in note 1 to the financial statements and comply with the charity's constitution, applicable law and the requirements of the "Statement of Recommended Practice: Accounting and Reporting by Charities" issued in 2005.

Trustee organisational structure

The charity has a Board of Trustees who meet monthly, plus 2 or more Strategic Board meetings per annum. Task and Finish groups may be mandated to complete specific functions.

A scheme of delegation is in place and day to day responsibility for the provision of the services rests with the Chief Executive, along with the senior management team. The Chief Executive is responsible for ensuring that the charity delivers the services specified and that key performance indicators are met. The Chief Operating Officer was responsible for the day to day operational management of the Care Enterprise in 2013-14.

Governing Documents

The organisation is a charitable company limited by guarantee, incorporated on 22 February 2002 and registered as a charity on 8 September 1992, although the founder charity began in April 1985. The company was established under a Memorandum of Association which established the objects and powers of the charitable company and is governed under its Articles of Association. In the event of the company being wound up members are required to contribute an amount not exceeding £5 while they are members, or within one year after they cease to be members, for payment of debts and liabilities contracted before they ceased to be members.

West Anglia Crossroads Caring for Carers ('Carers Trust Cambridgeshire') is governed by the articles of association and memorandum dated 11 September 2012.

*"I passionately believe society should value the role of carers more. I hope my experience [as a carer] will help me empathise with carers and give them a voice."
Gillian, Trustee*



Charitable Objectives

Our objects are to relieve the stresses experienced by carers, and both children and adults who have caring needs, as a result of disability, illness or age by offering a respite service through the provision of community based support workers, within Cambridgeshire and the surrounding area.

Appointment to the Board of Trustees

The Board of Trustees is elected by and from the membership at the Annual General Meeting. New Trustees are co-opted by a majority of Trustees in office at that time, to fill any casual vacancies arising. Trustees are selected to ensure that the board has all relevant competencies, including a good mix of business and caring skills. Trustees are also selected to be representative of both the communities served by the charity and our beneficiaries. Many of our Trustees are family carers or former family carers.

The Board of Trustees comprises of a minimum of 3 Trustees and a maximum of 12 Trustees. Trustees serve an initial term of three years that can be extended up to a maximum of 9 years.

The charity reviews Board member skills and competencies regularly. New Trustees are recruited through selective advertising via the local paper, recruitment organisations such as Reach, our website, newsletter and networking with the community. Interested parties apply and are invited to meet Trustees for informal discussions. Should both parties want to proceed, prospective Trustees are interviewed and invited to meet the Chief Executive. All Trustees are subject to appropriate vetting checks and asked to sign policies which include a Fit and Proper Persons (disqualification disclaimer) form.

Trustee induction and training

The charity has developed a Trustee induction pack based on information from the Charity Commission which covers the obligations of Trustees, Trustee policies and guidance produced by Carers Trust, the charity's Memorandum and Articles of Association, the latest financial statements and strategic plan and other relevant documentation.

Additionally, the Chief Executive meets with new Trustees to familiarise them with the charity and the context within which it operates and they are encouraged to meet or shadow members of staff. A peer mentoring scheme has been developed between Board members. Trustees are also encouraged to attend appropriate professional training courses and receive copies of Governance magazine.

Public Benefit

The Trustees confirm that they have complied with their duty under the Charities Act 2011 to have due regard to the Charity Commission's general guidance on public benefit.

We have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing our aims and objectives and in planning our future activities. In particular, the Trustees consider how planned activities will contribute to the aims and objectives set.



Ensuring our work delivers our aims

Trustees are responsible for the strategic direction and governance of the charity.

We produce 3-4 year Strategic Plans every 2-3 years. We are currently working to our 2012-16 strategy, with plans to replace it in early 2015. Annual business plans, objectives and budgets relate to the strategy. These are reviewed each year, at two separate strategy meetings.

These strategic reviews look at what we have achieved and the outcomes of our work in the previous 12 months. We examine the success of each key sector and the benefits brought to those groups of people we are set up to help. Reviews also help us ensure our aims, objectives and activities remain focused on our stated purposes and vision.

Risk Management

The Board of Trustees has conducted a review of the major risks to which the charity is exposed. The risk register is updated regularly and reviewed at all Board meetings. Systems or procedures have been established to mitigate the major risks the charity faces.

Financial risk: Significant external risks to funding, particularly cuts in social care budgets, are managed through the development of a strategic plan to diversify income streams and increase products/activities. Large contracts with Cambridgeshire County Council and NHS are due to end in 2014-15 or 2015-16. We expect carer services to be commissioned by competitive tender.

Operational risk: Compliance risks are mitigated through implementation of CQC and Carers Trust Quality Assurance (CROQUET) standards and high levels of staff training. Procedures are in place to ensure compliance with health and safety of staff, volunteers, and service users. New CQC inspection standards and a new QA system from Carers Trust in 2014-15 pose a risk.

Internal control risks are minimised by the implementation of procedures for authorisation of all transactions and projects. These procedures are periodically reviewed to ensure that they continue to meet the needs of the charity.

Given the objectives and the nature of the charity's activities, the Trustees recognise the acceptance of some risks which are outside the charity's control i.e. risks which cannot be fully mitigated or managed. The Board of Trustees considers that systems and controls are in place to monitor, manage and mitigate the charity's major risks. These include, among other control mechanisms, the maintaining of the charity's general reserves at the levels stated below and the review of key systems and processes.

Related Parties

We are a Network Partner of Carers Trust, an independent registered charity in England and Wales (No. 1145181) and pay an affiliation fee for central support and services.

Carers Trust was formed on 1st April 2012, when Crossroads Association merged with The Princess Royal Trust for Carers to form the largest charity for carers.



Responsibilities of the Board of Trustees

Company law requires that the Board of Trustees prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charity and of the surplus or deficit of the charity for that year.

In preparing those financial statements, the Trustees are required to:

1. Select suitable accounting policies and apply them consistently.
2. Make judgements and estimates that are reasonable and prudent.
3. Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue to operate.
4. State whether the policies adopted are in accordance with the Companies Act 2006 and with applicable accounting standards and statements of recommended practice, subject to any material departures disclosed and explained in the accounts.

Observe the methods and principles of the Charities SORP.

The Board of Trustees is responsible for keeping proper accounting records which disclose with reasonable accuracy at any time, the financial position of the charity and to enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In accordance with company law, as the company's Trustees, we confirm that:

- so far as we are aware, there is no relevant audit information, information needed by the charity's auditors in connection with preparing their report, of which the charity's auditors are unaware; and
- we have taken all the steps that we ought to have taken in order to make ourselves aware of any relevant audit information and to establish that the charity's auditors are aware of that information.

Auditors

Prentis & Co LLP were re-appointed as the company's auditor in 2013.

This report has been prepared in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities (issued in March 2005) and in accordance with the special provisions relating to companies subject to the small companies regime within Part 15 of the Companies Act 2006.

Approved by the Board of Trustees and signed on its behalf by:

M. R. Pearce Higgins

Margaret Pearce Higgins
5 September 2014

A. Braithwaite

Ann Braithwaite
5 September 2014



Independent Auditor's Report to the Trustees

Income

Year ended 31 March 2014

We have audited the financial statements of West Anglia Crossroads Caring for Carers for the year ended 31st March 2014 which comprise the Statement of Financial Activities, the Balance Sheet and related notes. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

This report is made solely to the Charity's Trustees, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the Charity's Trustees those matters that we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Charity and the Charity's Trustees as a body, for our audit work for this report, or the opinions we have formed.

Respective Responsibilities of Trustees and Auditors

As explained more fully in the Statement of Trustees Responsibilities on page 39, the Trustees (who are also the Directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board (APB's) Ethical Standards for Auditors.

Scope of the audit of the Financial Statements

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error.

This includes an assessment of: whether the accounting policies are appropriate to the Charity's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the Trustees; and the overall presentation of the financial statements. In addition we read all the financial and non-financial information in the Trustees Report to identify material inconsistencies with the audited financial statements and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by us in the course of performing the audit. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.



Opinion on Financial Statements

In our opinion the financial statements:

- give a true and fair view of the Charity's affairs as at 31st March 2014 and of its outgoing resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006

Opinion on Other Matters prescribed by the Companies Act 2006

In our opinion the information given in the Trustees' Report for the financial year for which the financial statements are prepared is consistent with the financial statements.

Matters on which we are Required to Report by Exception

- We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:
- Adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- The financial statements are not in agreement with the accounting records and returns; or
- Certain disclosures of Trustees' remuneration specified by law are not made; or
- We have not received all the information and explanations we require for our audit; or
- The Trustees were not entitled to prepare the financial statements and the Trustees' report in accordance with the small companies regime and take advantage of the small companies exemption in preparing the Trustees Report.



Signed



Dated

Ian Shipley FCCA (Senior Statutory Auditor)
For and on behalf of Prentis & Co LLP
Chartered Accountants and Statutory Auditors
115c Milton Road
Cambridge
CB4 1XE



Year ended 31 March 2014

Statement of Financial Activities

Notes	Continuing			Discontinued
	Charitable Carer Support Activities 2014		Care Enterprise unrestricted 2014	
	Unrestricted Funds £	Restricted Funds £		
INCOMING RESOURCES				
From generated funds:				
Donations	70,631	23,706	94,337	
Fundraising	151	284	435	
Investment income	-	-	-	
From charitable activities:				
Grants receivable	-	64,662	64,662	
Care fees and contracts	275,429	-	275,429	
Other income	2,979	2,834	5,813	
TOTAL INCOMING RESOURCES	349,190	91,486	440,676	
RESOURCES EXPENDED				
Costs of generating funds	296	556	851	
Charitable activities	261,816	94,100	355,916	
Governance costs	4,772	1,250	6,022	
Exceptional Item	-	-	-	
Other resources expended	-	-	-	
TOTAL RESOURCES EXPENDED	266,883	95,906	362,789	
Gross outgoing resources from joint ventures	82,307	-4,420	77,887	
NET (OUTGOING)/INCOMING RESOURCES	66,221	24,058	90,279	
RESERVES BROUGHT FORWARD	-445	445	-	
Transfers	148,083	20,083	168,165	
RESERVES CARRIED FORWARD				

There were no recognised gains or losses for 2014 or 2013 other than those included in the Statement of Financial Activities. The joint venture was discontinued in May 2014; all other activities are continuing.

West Anglia Crossroads Caring for Carers (Known as Carers Trust Cambridgeshire, formerly Crossroads Care Cambridgeshire)

Financial Statements for the Year ended 31 March 2014

Accounts Audited by Prentis & Co LLP.
Full Accounts and/or an extensive Trustee Report are available from our office.

BALANCE SHEET

2014

				Continuing Activities		Discontinued	
		General	Restricted	Company	Interest		
Notes		£	£	Total	in joint	Total	2013
				£	ventures	£	£
					£		
FIXED ASSETS							
Tangible assets	8	-	12,409	12,409	1,111	13,520	23,698
Investment in Joint Venture	9	64,000	-	64,000	-20,622	43,378	47,035
		<hr/>	<hr/>	<hr/>		<hr/>	<hr/>
		64,000	12,409	76,409		56,898	70,733
		<hr/>	<hr/>	<hr/>		<hr/>	<hr/>
CURRENT ASSETS							
Debtors	10	148,629	-	148,629	25,505	174,134	361,960
Cash at bank and in hand		597,458	7,674	605,132	31,986	637,118	641,573
		<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
		746,087	7,674	753,761	57,491	811,252	1,003,533
		<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
CREDITORS: amounts falling due within one year	11	222,878	-	222,878	37,980	260,858	479,707
		<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
NET CURRENT ASSETS		523,209	7,674	530,883	19,511	550,394	523,826
		<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL ASSETS LESS CURRENT LIABILITIES		587,209	20,083	607,292	20,622	607,292	594,559
		<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
NET ASSETS		£587,209	£20,083	£607,292		£607,292	£594,559
		<hr/>	<hr/>	<hr/>		<hr/>	<hr/>
RESERVES							
Unrestricted funds							
Designated	12	0	-	-			820
Undesignated	12	587,209	-	587,209			569,681
		<hr/>	<hr/>	<hr/>			<hr/>
		587,209	-	587,209			570,501
Restricted funds	13	-	20,083	20,083			24,058
		<hr/>	<hr/>	<hr/>			<hr/>
ACCUMULATED RESERVES		£587,209	£20,083	£607,292			£594,559

There were no recognised gains or losses for 2014 or 2013 other than those included in the Statement of Financial Activities. The joint venture was discontinued in May 2014; all other activities are continuing.

The financial statements were approved by the directors on ~~5th September 2014~~ and signed on their behalf by

M. R. Pearce *Higgins*

Margaret Pearce Higgins (Director)

A. Braithwaite

Ann Braithwaite (Director)



West Anglia Crossroads Caring for Carers

(known as Carers Trust Cambridgeshire, formerly Crossroads Care Cambridgeshire)

Financial Statements for the Year Ended 31 March 2014

NOTES TO THE ACCOUNTS

1 ACCOUNTING POLICIES

(a) BASIS OF PREPARATION OF FINANCIAL STATEMENTS

The financial statements have been prepared under the historical cost convention and include the results of the charity's operations, which are described in the Report of the Trustees and all of which are continuing. They have been prepared in accordance with the provisions of the Statement of Recommended Practice (SORP) 'Accounting and Reporting by Charities' issued in March 2005, accounting standards and the Companies Act 2006.

Basis of Consolidation

The consolidated accounts incorporate the accounts of West Anglia Crossroads Caring for Carers and its associate Axiom Crossroads Care in which it has a 49% holding. The Charity's share of its associated undertaking's results are included in the Statement of Financial Activities.

(b) INCOMING RESOURCES

Incoming resources are recognised in the year in which the charity is entitled to the receipt, and the amount can be measured with reasonable certainty. Income is only deferred when the charity has to fulfil conditions before becoming entitled to it or where the donor has specified that the income is to be expended in a future period.

(c) RESOURCES EXPENDED

Expenditure is recognised on an accruals basis as a liability is incurred. Expenditure includes any VAT which cannot be fully recovered, and is reported as part of the expenditure to which it relates.

Charitable expenditure comprises those costs incurred in the delivery of the charity's activities and services for its beneficiaries. It includes both costs that can be allocated directly to those activities and those costs of an indirect nature necessary to support them.

Governance costs include those costs associated with meeting the constitutional and statutory requirements of the charity and include the audit fees and costs linked to the strategic management of the charity.

All costs are allocated between the expenditure categories of the SoFA on a basis designed to reflect the use of the resource. Costs relating to a particular activity are allocated directly, others are apportioned on an appropriate basis eg number of desks used, as set out in Note 4.

(d) FUND ACCOUNTING

Restricted funds are to be used for the specified purposes laid down by the donor. Expenditure for those purposes is charged to the fund, together with a fair allocation of overhead and support costs.

Unrestricted funds are donations and other incoming resources received or generated for expenditure on the general objects of the charity.



West Anglia Crossroads Caring for Carers

(known as Carers Trust Cambridgeshire, formerly Crossroads Care Cambridgeshire)

Financial Statements for the Year Ended 31 March 2014**NOTES TO THE ACCOUNTS****(e) CONTINGENT LIABILITIES**

Contingent liabilities are possible obligations whose existence will be confirmed only by uncertain future events, and present obligations where the transfer of economic resources is uncertain or cannot be reliably measured. Contingent liabilities are not recognised on the Balance Sheet but are disclosed unless the outflow of economic resources is remote.

(f) DEPRECIATION

Individual tangible fixed assets costing £1,000 or more are capitalised at cost. Depreciation is provided on all tangible fixed assets at rates calculated to write off the costs less estimated residual value of each asset over its expected useful life. Equipment: 25% on straight line basis

(g) OPERATING LEASES

Rentals applicable to operating leases, where substantially all of the benefits and risks of ownership remain with the lessor, are charged against income as incurred.

(h) PENSIONS

The charity operates a defined contribution pension scheme. The pension charge represents the amounts payable by the charity to the fund in respect of the year.

The assets of the scheme are held separately from those of the charity in an independently administered fund.

(i) CASH FLOW STATEMENTS

The charity has taken advantage of the exemption from the requirement to produce a cash flow statement provided by Financial Reporting Standard No. 1 on the grounds that it qualifies as a small charity.

2 GRANTS RECEIVABLE

	2014			2013
	Unrestricted funds	Restricted funds	Total funds	Total
	£	£	£	£
Cambridgeshire County Council	-	30,000	30,000	-
National Garden Scheme	-	14,810	14,810	-
Carers Trust	-	17,258	17,258	3,240
Huntingdon Freeman's Charity	-	10,000	10,000	12,400
Awards for All	-	10,000	10,000	-
Children in Need	-	19,143	19,143	9,973
IYSS Transformation Fund	-	500	500	5,744
The Foundation of Hinchingsbrook School	-	5,000	5,000	4,000
Cambridgeshire Community Foundation	-	500	500	3,290
South Cambs District Council	930	-	930	3,720
Others under £2,500	4,140	2,754	6,894	14,090
Add brought forward deferred from previous year	45,960	12,365	58,325	52,910
Less deferred to projects in the next year	-	-57,668	-57,668	-48,401
	51,030	64,662	115,692	60,966



West Anglia Crossroads Caring for Carers

(known as Carers Trust Cambridgeshire, formerly Crossroads Care Cambridgeshire)

Financial Statements for the Year Ended 31 March 2014**NOTES TO THE ACCOUNTS****3 OTHER INCOME**

	2014			2013
	Unrestricted funds	Restricted funds	Total funds	Total funds
	£	£	£	£
Session fees	1,472	-	1,472	4,836
Other income	2,979	2,834	5,813	3,880
	<u>4,451</u>	<u>2,834</u>	<u>7,285</u>	<u>8,715</u>

4 RESOURCES EXPENDED

2014

	Basis of allocation	Fundraising	Charitable Carer Support Activities	Care Enterprise	Governance	Total
		£	£	£	£	£
Costs directly allocated to activities						
Staff costs	Direct	-	242,272	1,340,042	17,554	1,599,868
Staff travel	Direct	-	7,911	182,847	-	190,758
Staff training	Direct	-	292	85,044	-	85,336
Direct project costs	Direct	-	15,234	27,368	-	42,602
Communications	Direct	-	4,009	16,877	-	20,886
Fundraising and promotion	Direct	100	11,948	5,520	-	17,568
Staff welfare and recruitment	Direct	-	3,039	9,492	-	12,531
Annual report, audit & AGM	Direct	-	-	-	3,928	3,928
Trustees' expenses & training	Direct	-	-	-	905	905
Subscriptions, insurance & prof	Direct	-	813	3,121	-	3,934

Support costs allocated to activities

General office & finance staff	Desks used	361	30,509	144,003	5,408	180,281
Premises	Desks used	112	15,626	57,112	1,677	74,528
Communications	Desks used	158	13,374	63,127	2,371	79,030
Subscriptions, insurance & prof	Desks used	62	5,220	24,638	925	30,845
Staff welfare and recruitment	Desks used	59	5,018	23,685	890	29,652
Depreciation	Usage	-	650	10,193	-	10,843
		<u>851</u>	<u>355,916</u>	<u>1,993,069</u>	<u>33,658</u>	<u>2,383,495</u>
	2013	<u>981</u>	<u>346,422</u>	<u>1,948,382</u>	<u>27,514</u>	<u>2,323,298</u>

Exceptional item

Provision against the cost of the investment in joint venture (see note 9)

£66,900

West Anglia Crossroads Caring for Carers

(known as Carers Trust Cambridgeshire, formerly Crossroads Care Cambridgeshire)

Financial Statements for the Year Ended 31 March 2014**NOTES TO THE ACCOUNTS****5 STAFF COSTS**

No member of staff received remuneration of more than £60,000.

The staff costs were:

	2014 £	2013 £
Wages and salaries	1,747,237	1,637,423
Social security costs	113,376	108,908
Payments for Redundancies	3,400	6,022
Pension costs	5,655	3,202
	1,869,668	1,755,555

The average number of employees during the year, calculated on the basis of full time equivalents, was as follows:

	2014 Number	2013 Number
Senior management	6	5
Provision of care	74	70
Administration and finance	7	7
	87	82

At 31 March 2014 the total number of employees was 155 (144 in 2013).

6 NET INCOMING RESOURCES

This is stated after charging:

	2014 £	2013 £
Depreciation	10,843	10,843
Audit fee	2,400	2,200
Operating lease rentals - land & buildings	44,641	45,140

7 TRUSTEE REMUNERATION

No trustees received any remuneration during the year. Travel costs, training and subscriptions amounting to £619 were reimbursed to 5 directors (2013 - £1,178 to 4 directors) and an honorarium of £1,200 awarded to one trustee for heading up the Better Health Network.



West Anglia Crossroads Caring for Carers

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Financial Statements for the Year Ended 31 March 2014**NOTES TO THE ACCOUNTS****8 FIXED ASSETS**

	Cost £	Depreciation £	Net Book Value £
At 1 April 2013	43,373	20,121	23,252
Additions / depreciation charge	-	10,843	-10,843
At 31 March 2014	43,373	30,964	12,409
General reserve	-	-	-
Restricted reserve	43,373	30,964	12,409
	43,373	30,964	12,409

9 INVESTMENT IN JOINT VENTURE

Two years ago the charity set up the joint venture, Axiom Crossroads Care Ltd (ACC), to diversify care provision, in partnership with Axiom Housing Association.

At 31 March 2014 the company owned 49% of Axiom Crossroads Care Ltd.

Company:	Cost £	Provision £	NBV £
At 1 April 2013	60,900	-	60,900
Long term loan made	70,000	-	70,000
Provision made in the year	-	66,900	-66,900
At 31 March 2014	130,900	66,900	64,000

In addition to the loans made to ACC we have also invested significant management time in setting it up which has not been capitalised or cross charged to the joint venture.

On 31 May 2014 we transferred our interest in the joint venture to Axiom Housing Association as the charity felt that this project was diverting us from our main strategy of concentrating on providing more services directly to carers. We have provided against this investment as ACC had been making losses. We left £64k as the book value as that was the sum expected to be paid on the transfer of our interest to Axiom Housing. This was £43k more than our share of the net assets at the year end, which were £21k. This uplift which we negotiated is shown in the balance sheet in the Total group results column.



West Anglia Crossroads Caring for Carers

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Financial Statements for the Year Ended 31 March 2014**NOTES TO THE ACCOUNTS****10 DEBTORS:** Due within one year

	Company	
	2014	2013
	£	£
Accounts receivable	36,197	241,502
Prepayments	111,555	112,822
Other debtors	876	1,606
	<u>148,629</u>	<u>355,930</u>

11 CREDITORS: Due within one year

	Company	
	2014	2013
	£	£
Accruals & deferred income	162,440	236,729
Other creditors	2,883	174,918
Social security and other taxes	33,218	28,536
Accounts payable	24,337	24,620
	<u>222,878</u>	<u>464,803</u>

12 GENERAL RESERVES

The Designated reserve was for support for people suffering with dementia and their carers.

	Brought forward	Surplus	Transfer to Restricted reserves	Carried forward
	£	£	£	£
General reserve	569,681	17,973	-445	587,209
Dementia designated reserve	820	-820	-	-
	<u>570,501</u>	<u>17,153</u>	<u>-445</u>	<u>587,209</u>



West Anglia Crossroads Caring for Carers

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Financial Statements for the Year Ended 31 March 2014**NOTES TO THE ACCOUNTS****13 ANALYSIS OF MOVEMENTS IN RESTRICTED FUNDS**

	Brought forward	Incoming resources	Resources expended	Transfer from General reserves	Carried forward
	£	£	£	£	£
Young Carers* for carers aged < 18yrs	6	54,114	46,686	-	7,434
Better Health Network pilot to provide joined up care for older people	-	25,868	25,868	-	-
My Challenge for Children with disabilities and their siblings	-	4,004	4,004	-	-
Carers Connect To give carers a voice	-	6,000	6,000	-	-
Capital Grant for expenditure on equipment and training	23,252	-	10,843	-	12,409
End of life for palliative care	800	1,500	2,505	445	240
	-----	-----	-----	-----	-----
	24,058	91,486	95,906	445	20,083
	-----	-----	-----	-----	-----

* also funded by unrestricted funds

14 OTHER COMMITMENTS

At 31 March 2014 the charity had annual commitments under non cancellable operating leases as follows:

	Land and buildings	
	2014	2013
Expiry date:	£	£
In less than one year	16,493	36,200
Between one and five years	33,167	8,940
In over five years	-	-
	-----	-----

15 CONTINGENT LIABILITY

The charity has a potential liability of £100k in respect of an overpayment by Birmingham Midshires (BM) in 2007. The overpayment was communicated to BM several times and no communication was received back from BM. There is a risk that this overpayment may have to be repaid back to BM.



Our Trustees and Key Skills



Linda Collumbell (Vice Chair)

Key skills: Local knowledge; knowledge of carers' issues; staff supervision; recruitment & personnel management; group work skills. Linda took a sabbatical to work as the BHN Project Manager.



Ann Braithwaite (Company Secretary)

Key skills: Management, Education (including young people), Computing and IT.



Richard van der Hart

Key skills: Finance controls, business and financial management, target setting, monitoring and evaluating performance.



Anne Davis (Treasurer)

Key skills: Financial/management experience, strategy & operational, project management and process improvement.



Wayne Weedon

Key skills: Chartered Global Management Accountant. Expertise in Business, Financial Management & Control, IT & Strategic Change Management, with the ability to shape the direction of organisations.

Margaret Pearce Higgins
Key skills: Medical/nursing expertise; knowledge of carer's issues; staff support & supervision; networking; target setting, monitoring & evaluating. Chair since September 2010.



Peter Menczer
Resigned March 2014. Key skills: Business strategy development, financial management, IT, organisational change, project management, business risk audits and negotiating strategies.



Dr Maryan Pye (Vice Chair-elect)
Key skills: Public health and primary care, policy analysis, resource allocation, training and adult learning, project planning, management and analytical skills.



Adam Rowles (Chair-elect)
Key skills: Commercial, business and financial management.



Roger Rhodes
Key skills: Financial management and investment, business management, local charitable networking.



Gillian West
Key skills: Experience in professional regulatory, discipline, governance and compliance work; HR and business process. Gillian is also a family carer.



... the people carers turn to



“Without this group life would have been much harder for me.”

Telephone

0845 241 0954 or 01480 499090

Email

care@carerstrustcambridgeshire.org

Website

www.carerstrustcambridgeshire.org

Office Hours

Monday-Thursday 9.00am-5pm
Friday 9.00am-4.30pm

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PE27 4LG

Stay in touch



***“Keep doing what you are doing;
being a voice for carers.”***



West Anglia Crossroads Caring for Carers (known as Carers Trust Cambridgeshire), is a Registered Charity No. 1091522
A company limited by guarantee
Registered in England No. 4379948
Registered Office: 4 The Meadow, Meadow Lane,
St Ives, Cambridgeshire, PE27 4LG
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Ver 1.0 September 2014



Previously known as:

