UK NETWORK DATA EXCHANGE SURVEY RESULTS 2022-2023

A snapshot of the health of the Carers Trust Network, the challenges we face, our needs and opportunities for the future
ABOUT CARERS TRUST

Carers Trust works to transform the lives of unpaid carers. It partners with its UK-wide network of local carer organisations to provide funding and support, deliver innovative and evidence-based programmes, raise awareness, and influence policy. Carers Trust’s vision is that unpaid carers are heard and valued, with access to support, advice and resources to enable them to live fulfilled lives.
EXECUTIVE SUMMARY 2022/23

1,047,823 unpaid carers registered with Network Partners (up 14% from last year)

378,617 unpaid carers supported across the UK (down 17% from last year)

78% of local authority areas being reached just through local authority or health contracts

85% of local authority areas being reached overall

GROUPS THAT ARE UNDERREPRESENTED

- **Carers aged 25-64**: 52% compared to 69% national prevalence
- **Male carers**: 30% compared to 41% national prevalence
- **Disability carers**: 25% compared to 28% national prevalence
- **Ethnic minorities**: 17% compared to 18% national prevalence
- **Trans carers**: 0.05% compared to 0.6% national prevalence
- **Employed carers**: 13% compared to 51% national prevalence

Cost-of-living crisis for carers

is the biggest Network Partner challenge

Partnership working

is the biggest Network Partner opportunity

A long-term health condition

is the most common cared for condition
Activity groups/social events and general information provision were the most common non-regulated services provided.

Employability support was the service Network Partners were most interested in providing.

Learning disability specific service was the young adult carers (18-24) service Network Partners were most interested in providing.

Counselling was the young carers (0-17) service Network Partners were most interested in providing.

3,792 staff, a decrease of 6%

3,750 volunteers, an increase of 7%

Network Partners won 113 contracts

64% of the Network said their financial sustainability was strong or very strong.

Network Partners won 113 contracts this year, compared to 102 last year.

Network Partners retained 302 contracts this year, compared to 293 last year.

67% of the Network are using at least 1 tool from the Carers Trust Impact Framework, the same as last year.

30% of the Network are in an established stage of impact measurement.

36% of the Network (at least) do not have an external quality mark.
This report provides a descriptive run through of the top headlines from the Network Data Exchange survey. In a follow-up to this, once consultations with Network Partners and staff have taken place, a recommendations report will be produced, which will interpret the findings of the report in more detail and make recommendations for the future.

The annual Network Data Exchange survey is a mixed quantitative survey, asking questions related to reach, services, income, staffing, challenges, opportunities and impact measurement practice. The survey is comprised of 40 questions and takes approximately 30 minutes to complete, according to Survey Monkey’s calculation.

The main objective of the Network Data Exchange survey is to get a snapshot of the health of the Network, through user, engagement and business intelligence data. It aggregates data from all members of our Network and then looks at trends and patterns within that data. The potential use for the data is threefold:

- As the national body, the intention is that Carers Trust will be able to use this information to guide ongoing improvements to our membership offer. This includes using the intelligence to inform our influencing plans, our programme design and grant making criteria.
- It is also hoped that the Network can use the analysis and insights to benchmark where they are amongst the wider network and help improve partnership working at a regional level. This will help inform their business planning and sustainability strategies.
- Figures will be used in funding bids and in annual reports to demonstrate aspects of the impact of Carers Trust work with the Network.

The health of our network is assessed in a number of ways, looking at multiple outcomes. These outcomes are:

- Overall reach
- Challenges and opportunities faced by Network Partners
- Composition of reach (demographics)
- Service provision breadth and depth
- Income, staff and financial sustainability
- Impact measurement practice

For more detail on methodology, find a methodology towards the end of the report [here](#).
REACH

1,047,823 unpaid carers registered with Network Partners, up 14%

378,617 unpaid carers supported across the UK, down 17%

78% of local authority areas being reached through contracts

85% of local authority areas being reached overall, operationally

Scotland had the highest percentage increase in carers registered

The graph below shows the increase in the number of carers registered from 2021-2022 to 2022-2023, for each nation. Scotland has had the highest increase, 16% is due to 2 new Network Partners.

* it should be noted that change in carers supported may be affected by the more precise definition provided this year
The most commonly identified challenge by Network Partners was the "cost-of-living crisis for carers", with 83% identifying this as a challenge, followed by the "cost of living crisis for staff and organisation" with 75% and then "demand for services outstripping capacity" with 73%.

The "cost of living crisis for carers" was also the most commonly identified challenge regardless of Network Partner size or nation.

"Demand for services outstripping capacity" came second for both Scotland (90%) and Wales (80%), whereas "cost of living for staff and organisation" came second for England (76%).

"Fundraising/sustainability" and "staff turnover/retention/recruitment" were the most common challenges last year, but this year these are fourth and fifth most common. It should be noted however that last year Network Partners were asked through an open question, whereas this year, Network Partners were given options they could check off.
The most common Network Partner opportunities are shown below.

The most commonly identified opportunity by Network Partners was "partnership working opportunities" at 79%. This has consistently been the most commonly identified opportunity by the Network for a few years. The second most commonly identified opportunity was "expanding/new services" with 66% identifying this as an opportunity, followed by "reaching more carers" at 65%.

"Partnership working opportunities" was also the most commonly identified opportunity regardless of Network Partner size, as well as for England and Scotland Network Partners. However, for Wales, the most commonly identified opportunity was "reaching more carers".

"Expanding/new services" was the second most commonly identified opportunity for England, Scotland and Wales.
The most commonly identified partnership was with other local Voluntary and Community Sector (VCS) organisation (74%). This was followed by “statutory provider/service” (60%) and then “a Network Partner of Carers Trust” (53%).

It is of note that partnerships are more commonly identified overall compared to competitors. “Healthwatch” was only identified as a partnership in England (37%). “A Network Partner of Carers Trust” was a more common partnership in Wales (88%) compared to England (51%) and Wales (50%). “Other carer organisations not part of the Carers Trust Network” was a more common partnership in Scotland (65%), compared to England (19%) and Wales (13%).

“Other local VCS organisation” was also the most commonly identified partnership in last year’s survey. It should be noted however that last year Network Partners were asked through an open question, whereas this year, Network Partners were given options they could check off.
The graph below shows the percentage representation of each carer age group across time and compared to the national expected prevalence. You can see that representation has not changed greatly over time and that carers aged 25–64 and young adult carers are underrepresented. Older carers and young carers however are over-represented.

**Age**  (responses = 114)

The gauge shows the percentage representation of ethnic minorities, compared to the expected national prevalence in England and Wales. It shows that ethnic minorities are slightly underrepresented (16.5%). This has decreased from last year's 17.4%.

**Ethnic Minorities**  (responses = 87)
**Sex** (responses = 115)

The graph below shows the percentage representation of each sex across time and compared to the national expected prevalence. However, there are no national prevalence figures for non-binary and identified in another way carers. The data shows that males are underrepresented and females are overrepresented.

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**LGB+ Communities** (responses = 49)

The gauge on the right shows the percentage representation of LGB+ communities, compared to national expected prevalence. This figure has stayed the same since last year.
Carers with a disability

The chart to the left shows the percentage of carers that have a disability across time and compared to the expected national prevalence. The data shows that overall carers with a disability are slightly underrepresented, but there has been an increase since last year.

Cared for conditions

Below, you will find data on how many unpaid carers are caring for each condition. You can see that a long-term health condition is the most commonly cared for condition, whereas substance use issues is the least commonly cared for condition.
Regulated services  (responses = 116)

24 Network Partners reported to be regulated, they support 75,922 unpaid carers directly.

The most commonly provided regulated service is home care, followed closely by respite care (adults) and then respite care (children). The services Network Partners are most interested in providing are day centre and groups and hospital to home discharge, which are also the least commonly provided services.
Non-regulated services  (responses = 116)

The below chart shows the frequency that each service was provided across the Network, as well as the number who are interested in providing that service.

The most commonly provided non-regulated services are activity groups/social events (109) and general information provision, advice and guidance (109). Peer support groups is the next most commonly provided service (102). This is the same as last year.

Network Partners are most interested in providing employability support (31), cognitive behavioural therapy (28), and learning disability or difficulty specific service (26). Last year, cognitive behavioural therapy was the service Network Partners were interested in, followed by substance misuse specific services and statutory carer assessments.
**Young and young adult carer services**  (responses= 117)

There are 75 Network Partners providing young carer (0-17) services. This includes 57 in England, 13 in Scotland and 5 in Wales. There are 86 Network Partners providing young adult carer (18-24) services. This includes 62 in England, 17 in Scotland and 7 in Wales.

The most common young carers (0-17) service provided was activity groups/social events (72), followed by general information provision (70). Network Partners were most interested in providing counselling (26) to young carers.

The most common young adult carer (18-24) services provided were activity groups/social events (80) and general information provision (80). Network Partners were most interested in providing learning disability or difficulty specific service (23) to young adult carers.

**Parent carer assessments**  (responses= 90)

![Parent carer assessments chart]

The data above shows that 16.5% of the Network provide parent carer assessments and 7.4% provide parent carer transition assessments. It was most common for Network Partner to signpost to a service that does provide parent carer assessments (45.5%) but 30.6% neither provided parent carer assessments or signposted to a service that did.
In the below, you can see parent carer assessments mapped by Geography. There are 29 Network Partners in England with no provision of any parent carers assessments, 4 in Scotland and 4 in Wales.

- Parent carer needs assessments
- Parent carer transition assessments
- None, but we signpost to a service that does provide parent carer assessments
- None
**FINANCE AND SUSTAINABILITY**

**Income**  
(Responses = 111)

In total, the income of the Network for the last financial year was £134,965,999.62. However, 15 Network Partners did not provide a response to this question.

The graph on the right shows the distribution of this income across nations.

**Income sources distribution**  
(Responses = 111)

The distribution of UK income by type is shown in the graph below. This shows the Network relies heavily on statutory income, with collectively 68% coming from local authority and health combined.

**Financial sustainability**  
(Responses = 118)

64% of the Network said their financial sustainability was either strong or very strong. This is the same as last year. 30% said they were neither strong nor weak. 6% said they were weak and 0 said they were very weak.
Staff (responses= 116)

The graph to the right shows the number of staff across years. You can see this number has been decreasing for the last two years.

Volunteers (responses= 114)

The graph to the left shows the number of volunteers across years. You can see this number has been increased in the last year.

Contracts (responses= 95)

The graph to the left shows the number of contracts won, retained and lost over the years. While the number of contracts retained and won has been increasing, so has the number lost.
Impact measurement stage (responses = 115)

Network Partners were asked to specify where they thought they were in relation to their current impact measurement practice. Three terms were defined in the question.

- **Early**: no use of impact framework tools, no or little use of theory of change, use of some case studies, some reporting of number of services/number of attendees but no reporting of sustained improvements to carers’ lives.
- **Embedding**: some use of impact framework tools, some use of theory of change, some projects report on sustained improvements to carers’ lives.
- **Established**: most projects have surveys used before and after intervention, most/all projects have a theory of change, most/all projects report on sustained improvements to carers’ lives, use of a range of both quantitative and qualitative measurement tools.

The distribution of responses to this question across years are shown in the graph below. It shows that most Network Partners are in the embedding stage, which indicates that there is still room for improvement in this area. This distribution has stayed more or less the same since last year after an improvement from 2020-21 to 2021-22.

Databases (responses = 117)

The most commonly used database is charitylog with 72% of the Network using this database, compared to 65% last year. The second most used database is a bespoke one (17%), followed by Salesforce (5%), Access/Webroster (4%) and PASS (2%).
Impact measurement tool use  (responses = 116)

The graph below shows what percentage of the Network are using the various impact measurement tools. You can see that case studies and focus groups are the most used.

Percentage of Network Partners using each impact tool

- Case Studies: 77.7%
- Focus Groups: 48.8%
- Statutory Assessments: 37.2%
- Carers Star: 34.7%
- Young Carers: MACA/ PANOC/ PISA: 29.8%
- Other: 28.5%
- Warwick Edinburgh Wellbeing Scale: 24.0%
- We Care Feedback Survey: 20.7%
- CORE: 10.7%
- Quality Assurance Mechanism: 10.7%
- Quality of Life: Survey of Adult Carers: 7.4%
- Employability: Self-reported outcomes: 5.0%
- UCLA3 Item Loneliness Scale: 5.8%
- Brief Resilience Scale: 3.3%
- My Life Now: 3.3%
- Mental health: Self-reported Likert Scale: 2.5%
- Physical Health: Self-reported Likert Scale: 2.5%
- Stress: Self-Reported Likert Scale: 2.5%
- None impact measurement: 1.7%
- Rosenberg Self-esteem Scale: 0.8%
Respondents

The survey is sent to all Network Partners. It is part of the partnership agreement and Network Partners commitment to Carers Trust and each other to contribute their data. This year 121 Network Partners responded to at least some of the questions. The total number of Network Partners who were part of the Network at some point between April 2022 and March 2023 was 127. A number we couldn’t get responses from because they left the Network part way through the year or merged with another Network Partner. A handful provided responses to our critical question set, and some others missed other questions. It should be noted that the list of Network Partners this year is not exactly the same as last year, due to the loss of some organisations from the network and the addition of others. There were 8 Network Partners in Wales, 20 in Scotland and 98 in England for the period of April 1st 2022 to March 31st 2023.

Procedure

The survey was initially sent through an email, in which Network Partners had the option of either clicking on a survey monkey link and completing the survey online, or downloading a word version of the survey. Respondents could use this word version to collate their responses before filling in the data online, or some sent the word version through by email. There were three versions of the survey, one for each nation; England, Scotland and Wales. Along with the survey, a definitions document was provided, which gave definitions of ambiguous terms or jargon within the survey.

A deadline was set for Network Partners to complete the survey by, which was 6 weeks from the launch of the survey. Those who did not complete the survey by this deadline were chased up. Those Network Partners that expressed issues with completing the survey due to extenuating circumstances were given the option of responding to our critical question set of 3 questions.

Survey variations

Three different versions of the survey were sent out for the different nations, England, Scotland and Wales. The survey varied slightly for the different nations. The Welsh version included a question on how many carers Network Partners supported whose first language was Welsh. For the Scotland survey, all questions relating to regulated care were not included, as there are no regulated partners in Scotland. England, Scotland and Wales also differ slightly in their regulatory bodies and therefore the options which could be selected for the question on quality was slightly different for each survey.
Differences in this year’s survey to out 2021-22 survey

A number of changes were made to this year’s survey questions compared to last year’s. Therefore, some of the comparisons made in the ensuing analysis may not be entirely comparable. In most cases, comparisons have not been made if the questions were not asked in the same way. However, where the comparisons have been analysed because there have only been slight changes in wording, this is mentioned as a caveat within the report.

One major change to note is the change in the question asking for the number of carers directly supported. In response to Network Partners last year enquiring as to what the definition of “directly supported” meant, this year, the survey included an explicit definition next to the question. The definition limited its scope to only those carers who received direct support and not those who received mass mailings. Many Network Partners told us that their decrease in carers supported numbers was due to no longer including those who received mass mailings.

Outlier analysis

Once all the data was collected, the number of carers registered and the number of carers directly supported were compared to last year. Following this, the Network Partners who submitted data that was deemed unlikely, were emailed asking if they could check that the figures were correct and provide updated figures if not.

How will this data be looked at?

1. Percentages of demographic groups are compared to national expected prevalence figures to determine if the Network is reaching all unpaid carers equitably. In most cases, expected prevalence figures are taken from the 2021 census for England and Wales and report on prevalence in the carer population specifically, not the entire population as a whole.
2. Where possible, outcomes from this year are compared to last year, to see if impact is improving or declining.
3. Data is compared across different locations to give a more local picture.
4. For services, analysis will convey the most common services provided and those Network Partners are most interested in providing.
In some cases we had missing data on certain questions from Network Partners. In this report, next to each heading, you will find the sample size of Network Partners who responded to that question. The questions that have a much lower response rate may be affected by response bias. This means that those who did answer the question, have systematic differences in the way they respond compared to how those who didn’t respond would have responded. This would be particularly the case for the question on sexual orientation in which only 49 responded.

In some cases, even when Network Partners responded to a question, they still had some missing data. This, put together with the missing data from Network Partners who did not respond to questions at all, resulted in there being a lot of missing data for some questions. This was particularly the case for the question which asked for the breakdown of sexual orientations, in which 80% of carers’ sexual orientations were not known. This was also an issue for ethnic groups, in which 46% of ethnic groups were unknown. For age, 23% were unknown and for sex 19% were unknown. This missing data has a strong influence on the validity of the data, as it is likely to result in response bias.

In addition, 15 Network Partners out of 126 did not provide their income breakdowns.

As Carers Trust are not the primary collectors of the data from unpaid carers, we rely on Network Partners to ensure that their data is accurate. We endeavour to support Network Partners throughout this process and try to make the survey intuitive and easy to complete. However, there have been some cases where it has been difficult to ensure the accuracy of the data. For some Network Partners, the total of all carers of different age groups did not equal the same as the total of all carers of different ethnicity groups and/or genders. This is despite providing an ‘unknown’ option for each. In these cases, enquiries were made to the Network Partner and in some cases, the discrepancies were resolved. Where they were not resolved, unaccounted for carers were classified as unknown. Nonetheless, in cases where there were large discrepancies, it may be the case that a lack of high standard data processing has had an effect on figures provided generally in the survey.
Outliers in year-on-year change

After receiving data on the number of carers registered and the number of carers supported, an outlier analysis was conducted on the change in numbers from last year to this year. A number of outliers were identified. As a result, those Network Partners with outliers were contacted to check the data was correct.

Expected prevalence figures

The expected prevalence figures are taken, in most instances, from the 2021 census in England and Wales. It is acknowledged that this census data does not include data from Scotland on carer prevalences and therefore they may not be representative. However, it is the most reliable source available for expected prevalence figures, which is why they have been used in this report and will make for useful benchmarks.

Question changes

In some cases, the wording of questions were changed from last year to this year. In these circumstances, comparison of the responses on those questions from last year to this year is more complex. This is particularly the case for our question on the number of carers supported. this year, next to the question, we provided a precise definition which wasn't provided last year:

“We define 'directly supported' as the direct contact by staff or volunteers via phone, email, remotely, or face to face. This does not include those who are sent any mass mailing, including a newsletter. Do not provide the number of every interaction for every carer, but the number of individual carers that have been supported.”

After contacting Network Partners with outliers, they informed us that the reason for very large decreases was because they had included carers who had received mass mailing last year but not this year.

In addition, the questions on ethnic minorities and LGB+ communities have changed this year and the data analysed in a different way. This year, we only analysed Network Partners who provided a full breakdown of ethnic groups or sexual orientations, not those who just provided the number of ethnic minorities or number of LGBTQ+ communities.
THANK YOU TO OUR NETWORK PARTNERS FOR SUBMITTING THEIR DATA AND ALL THE WORK THEY DO FOR UNPAID CARERS

The contribution to this survey will be put to good use, informing the way we support our Network and unpaid carers.

The data presented in this report does not present all the findings from the survey. We have only shown here headline figures. If you still cannot find what you are looking for, do get in contact with the Social Impact team at Carers Trust.

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