



# Listening to Carers: Shaping the Future of Support in Central Bedfordshire

*Analysis of focus group held 4th June 2025*

**June 2025**

**healthwatch**  
Central Bedfordshire

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# Introduction

Healthwatch Central Bedfordshire (HWCB), in collaboration with Central Bedfordshire Council (CBC), facilitated a Carers Focus Group to capture the lived experiences and insights of unpaid Carers. This engagement aimed to inform the council's upcoming procurement process for Carer support services.

The session sought to understand the barriers to accessing support, preferences for how services should be delivered, and the changes needed to encourage more people to recognise themselves as Carers and seek help.

Participants were also asked to contribute suggestions for a quality question for inclusion in the council's tender process.





# Methodology

The Carers Focus Group was designed to gather insights from unpaid Carers, particularly those who had not previously accessed, or only recently accessed support services, or did not readily identify as Carers.

In particular, the focus group aimed to understand barriers to accessing support, explore what types of support Carers need and prefer and identify improvements to inform CBC's upcoming procurement process for Carer services.

HWCB promoted the focus group widely through various different channels, including social media campaigns, flyers and posters circulated online and face to face in the community, and direct outreach via our networks and partner organisations.

The invitation particularly encouraged Carers who may not have previously accessed formal support services to share their experiences.

The focus group was held on Wednesday 4th June 2025 at Flitwick Football Club, Ampthill Road, Flitwick, Bedfordshire, MK45 1BA (chosen for its accessibility) between 10.00 – 12.30.

We also arranged transport for one participant from Leighton Buzzard to ensure full accessibility.

Six Carers participated in the focus group comprising two men and four women. The participants varied in age and caring experience, providing a range of perspectives.

We facilitated the session using a semi-structured discussion guide based on key areas agreed with CBC. Open-ended questions encouraged Carers to share their experiences freely and provided space for additional comments.

The questions explored included:

- ◆ Experiences of identifying as a Carer.
- ◆ Barriers to accessing support.
- ◆ Preferences for types and delivery of support (peer support, advice, social activities).
- ◆ Reasons for not using services previously.
- ◆ Challenges with current services.
- ◆ Suggestions for improvements.
- ◆ Preferred ways to engage with support services (face-to-face, online, or hybrid).
- ◆ Ideas for a "Quality Question" to shape future service commissioning.

All contributions were recorded anonymously and analysed to identify key themes, direct quotes, and recommendations for the Council's procurement planning.



# Key Themes and Findings

## 1. Identifying as a Carer

- ♦ Many participants did not initially identify as Carers, viewing their support as part of being a spouse, partner, or family member.
- ♦ A reluctance to adopt the 'Carer' label stemmed from feelings of duty, loyalty, or fear of seeming selfish.
- ♦ External validation (e.g., from healthcare professionals) often helped participants recognise their role.

***"I never thought of myself as a Carer. It's just what you do for family."***

***"It wasn't until a nurse told me I was a Carer that I even realised."***

## 2. Accessing Support

- ♦ A lack of knowledge about available services was a major barrier.
- ♦ Experiences of formal support were mixed. Some had engaged with social prescribers or charities like Age UK, but many found services inconsistent or hard to navigate.
- ♦ Financial challenges, particularly relating to rising care costs and housing, were significant.

***"Nobody tells you what help is out there — you just have to stumble across it."***

***"It's hard to know what you're entitled to. The system isn't easy."***

## 3. Barriers to Access

- ♦ Services were often hard to navigate and poorly signposted.
- ♦ Administrative burdens, such as complex forms for benefits, were discouraging.
- ♦ GP support was seen as inconsistent; not all Carers were recognised or flagged on medical records.

***"I gave up halfway through filling out the forms — they're so complicated."***

***"My GP doesn't even know I'm a Carer. I just get treated like any other patient."***



#### 4. Preferences for Support Delivery

- ♦ A mix of online and face-to-face support was preferred: online for ease of access, face-to-face for personal connection.
- ♦ Peer support was highly valued, particularly informal settings where Carers could share experiences.

***“Sometimes it’s just nice to talk to someone who really gets it.”***

***“Zoom is fine to start with, but you need to meet people properly too.”***

- ♦ Reliable respite care was highlighted as crucial, but there were concerns over trust and continuity with unfamiliar Carers.

***“You can’t just drop someone off with a stranger — they need to feel safe.”***

#### 5. What Doesn’t Work

- ♦ Digital-only services exclude those less comfortable with technology.
- ♦ Frequent turnover of care staff caused distress and frustration.
- ♦ Lack of proactive support: Carers often felt they had to fight to be recognised and helped.
- ♦ Services are too generic

***“Nobody tells you what help is out there — you just have to stumble across it.”***

***“It’s hard to know what you’re entitled to. The system isn’t easy.”***

***“Services need to be more personalised, and look at the individual, not one size fits all”***

#### 6. What Needs to Change

- ♦ Greater awareness campaigns are needed to help people recognise their caring roles earlier.
- ♦ Simplified pathways to support, with help navigating financial and wellbeing entitlements.
- ♦ Recognition of Carers in GP and health systems was seen as essential.
- ♦ Access to mental health support for Carers, acknowledging the emotional toll.

***“If there was one thing that would help, it would be someone telling me I wasn’t alone right from the start.”***

***“They talk about supporting Carers, but half the time you’re invisible.”***



# Suggested Quality Question for the Tender

Following detailed discussion, the group suggested the following draft for a potential 'Quality Question' to be included in the Tender documents:

***"Please outline how you will ensure Carers are consistently recognised, supported, and engaged in ways that are accessible, flexible, and person-centred, particularly those new to caring or those who may not readily identify as Carers."***

Participants also recommended that the Council prioritise services that:

- ◆ Provide relationship-based, continuous support rather than one-off interventions.
- ◆ Offer advice lines with staff who understand Carers' individual circumstances.
- ◆ Deliver a hybrid model with both digital and face-to-face options.





# Conclusion

The focus group provided valuable, first-hand insights into the real needs and expectations of unpaid Carers in Central Bedfordshire. Participants spoke with candour and a strong sense of purpose, demonstrating a genuine eagerness to contribute to shaping the future of local Carer support services.

Carers made it clear that they want more than basic compliance or minimum standards, they want services designed around their lived experience. They consistently called for:

- ♦ **Early recognition and validation** of their caring role, ensuring Carers are seen and supported from the outset.
- ♦ **Accessible and flexible support pathways** that are simple to navigate and tailored to individual circumstances.
- ♦ **Reliable, trusted respite care** and sustained investment in Carers' own health and wellbeing.
- ♦ **Better integration of Carer identification** within health systems to enable proactive, coordinated support.

Above all, Carers asked for a shift towards services that deliver genuine, empathetic, person-centred support, services that recognise the complexity of caring and respond with the compassion and consistency Carers deserve.

Their strong engagement and thoughtful contributions throughout the session underline their commitment to informing positive change. This feedback provides a compelling foundation for Central Bedfordshire Council as it moves forward with its procurement process, ensuring that future services are not only fit for purpose but truly make a difference in the lives of Carers.





# Recommendations

**1**

**Raise awareness**  
to help people self-identify as  
Carers earlier and access help  
sooner.

**2**

**Simplify access**  
to support services, with  
streamlined information and  
single points of contact.

**3**

**Integrate Carer  
recognition**  
into GP and hospital systems  
for proactive support.

**4**

**Invest in trusted, flexible  
respite care**  
that respects the needs of  
Carers and care recipients.

**5**

**Ensure continuity**  
of support and staff to  
build trust and reduce the  
emotional burden.

**6**

**Develop hybrid service  
delivery models**  
to offer both digital and  
in-person access.

**7**

**Embed Carer feedback**  
into service design and  
delivery to ensure continuous  
improvement.



# Key Message

The voices of unpaid Carers are clear: support services must go beyond ticking boxes. They must offer early recognition, flexible access, and meaningful, relationship-based support that genuinely values and uplifts Carers.

By embedding these insights into the upcoming procurement process, Central Bedfordshire Council has the opportunity to commission services that not only meet needs, but truly transform lives.



# About Healthwatch Central Bedfordshire

Healthwatch Central Bedfordshire is the local consumer champion promoting choice and influencing the provision of high quality health, social care and wellbeing services for all across Central Bedfordshire.

Healthwatch Central Bedfordshire (HWCB) has significant statutory powers to ensure that the voice of the consumer is strengthened and heard by those who commission, deliver and regulate health and care services. HWCB engages and consults with all sections of the local population so that a wide cross-section of views are heard, understood and acted upon. Everything we say and do is informed by our connections to local people and our expertise is grounded in their experience.

Healthwatch Central Bedfordshire is one of three local Healthwatch in the County of Bedfordshire and belong to a network of local Healthwatch. Healthwatch England leads, supports and guides the Healthwatch network which is made up of the national body and local Healthwatch across each of the 152 local authority areas in England.

Healthwatch is the only body looking solely at people's experience across all health and social care. As a statutory watchdog our role is to ensure that local health and social care services, and the local decision-makers put the experiences of people at the heart of their care.

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