



Strategy for those who provide informal and unpaid care in Havering, 2023 - 2026

Developed by the Havering Integrated Care Partnership (part of the North East London Health and Care Partnership) – a partnership of health, Local Authority, care and community and voluntary sector leads in Havering





Name	Strategy for those of all ages who provide informal and unpaid care in Havering, 2023 - 2026			
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Approved by				
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Equality & Health Impact Assessment record



1	Title of activity	Strategy for those of all ages who provide informal and unpaid care in Havering, 2023 - 2026				
2	Type of activity	Strategy for informal and unpaid carers in Havering				
3	Scope of activity	All unpaid carers in Havering, broadly spread across 3 main cohorts: - Adult carers - Parent Carers - Young Carers				
4a	Are you changing, introducing a new, or removing a service, policy, strategy or function?	Yes				
4b	Does this activity have the potential to impact (either positively or negatively) upon people (9 protected characteristics)?	Yes	If the answer to any of these questions is 'YES',	If the answer to <u>all</u> of the questions (4a, 4b & 4c) is ' NO ',		
4c	Does the activity have the potential to impact (either positively or negatively) upon any factors which determine people's health and wellbeing?	Yes	please continue to question 5 .	please go to question 6.		
5	If you answered YES:	A full EqHIA has been comple	ted. This is attached as Appendix	1 to this strategy.		
6	If you answered NO: (Please provide a clear and robust explanation on why your activity does not require an EqHIA. This is essential in case the activity is challenged under the Equality Act 2010.)					
	Please keep this checklist for your audit trail.					

Date	Completed by	Review date
May 2023	Emily Plane	May 2024

Contents





Foreword





Dr Narinderjit Kullar

Clinical Director, Havering Place based Partnership

The support that unpaid and informal Carers provide to their friends and loved ones on a daily basis is essential to allow cared for people to continue to live the lives that they want, at home. Given the vital role that these Carers provide, it is critical that we as a partnership of health, care, community and voluntary leads in Havering, work together to identify and support Carers in a way that is meaningful to them.

I am particularly mindful of the impact that taking on a Caring role can have on a person. We need to do everything that we can to make this role easier for all those involve, from ensuring that informal carers are listened to by the professionals that they come into contact with, to supporting the Health and wellbeing of the carers themselves. Importantly, we want Carers in Havering to feel valued, listened to, and supported to best enable them to continue to undertake the incredible work they do on a daily basis.



Councillor Gillian Ford

Chair, Havering Place based Partnership Board, and Lead Member for Health

As a partnership we recognise the incredible role informal and unpaid Carers play in the borough and want to support them as much as possible to continue to provide the critical support that they give to friends and loved ones. I am particularly mindful of the effects of caring not just on a person's wellbeing, but on their social interaction and career prospects, both current and future.

We want to ensure that no Carer is left behind or adversely affected by providing support for a friend, child, parent, partner or loved one.

We have developed this strategy by speaking with local Carers, as well as a wide range of clinicians, professionals and community and voluntary sector staff who come into daily contact with local people providing this vital role. This strategy sets out our commitment to supporting people to achieve the outcomes that they want, and we intend to continue working with carers in Havering to shape the support that they receive.

Executive summary



Unpaid Carers (those who provide unpaid and informal care to their friends or family) provide invaluable support for loved ones and friends on a daily basis. The recent Covid Pandemic further highlighted the significant role that they play in supporting people to remain well at home. They coordinate care and appointments, provide personal care, and improve the wellbeing of those they look after. It is important that health, care and the community and voluntary sector support unpaid carers to continue to provide the invaluable tasks that they carry out every day. They often however don't recognise that they are performing this crucial function as a 'carer'. 2021 Census data suggests up to one in ten people in Havering provide informal and unpaid care on a regular basis.

In the context of the developing Havering Place based Partnership, which brings together health, care and the community and voluntary sector in Havering with a focus on integrating services and support for local people in a way that is meaningful to them, partners in Havering have jointly undertaken a refresh of the strategy for informal and unpaid carers, to ensure that we deliver improved experiences and outcomes in the Borough.

Based on what support local people who provide informal and unpaid care have told us that they need, our main strategic priorities for carers moving forward include:

- ✓ Easier access to information and advice, including wider wellbeing services
- ✓ Recognition of the role that they play, and enabling them to have an active role in the decision making for the person they care for
- ✓ Improved Identification and assessment of informal Carers including faster access to individual carers assessments
- √ Access to Respite that is more flexible
- √ Improved links into primary care, and better coordination of services
- ✓ Training for unpaid and informal carers to help them to carry out their caring roles

Vision and aspirations - Havering

Developed with and for those who provide unpaid and informal care in Havering





A system that supports unpaid and informal Carers

- 1. I have easy access to information and advice when I need it, including signposting to the right place
- 2. I have easy access to help and support when I need it, including if/when my caring role ends
- 3. I encounter friendly professionals who understand my role as a carer, listen to me and share information with me
- I am recognised as an expert and equal partner of care with my views and opinions valued and respected
- 5. I have access to a range of support, including breaks from my caring responsibilities, to help me live my life and continue to carry on with my caring role
- 6. I can access an individual carers needs assessment when I need it



Wellbeing, Career prospects, and employment

- 1. I am supported to recognise that I am a carer, and that I may need help both in my caring role and to maintain my own health and well-being
- 2. I have access to information and advice to help me look after my own mental and physical health
- 3. If I recognise a change in my cared for person's needs, I know where to turn, and am listened to; for example, that an increase in care package is needed
- 4. I am supported to maximise my income, including accessing benefits to which I may be entitled
- 5. I am supported with my caring responsibilities so that I can continue to work or study
- 6. I am offered access to training better equip me to deliver my caring role



Support for young Carers

- 1. I can attend carers support groups and activities with young carers that understand what I am going through
- 2. I can access help to support me with my mental health and wellbeing
- 3. I am able to focus on my future and my studies without impacting on my caring role, including university, training, apprenticeships and employment options
- 4. My school or college understands my caring role and I feel supported

Introduction; who is a Carer



Who is a Carer

NHS England describes a carer as "anyone, including children and adults who looks after a family member, partner or friend who needs help because of their illness, frailty, disability, a mental health problem or an addiction and cannot cope without their support. The care they give is unpaid."

Carers span all ages and backgrounds and provide informal support to loved ones, who would otherwise likely be in a care home or hospital. Whilst there are many sub-sections and groupings of carers, for this strategy we have sectioned carers into three broad groups to focus aims and actions tailored to each group.

There are several sub categories of unpaid Carers, including:

- Adult Carers: anyone aged 18 years or above who provides care for another person
- Young Carers: anyone under the age of 18 who provides care to another person, often a parent or sibling
- Parent Carers: someone aged 18 years or above who provides or intends to provide care for a disabled child for whom the person has parental responsibility.

Introduction; development of this strategy



This strategy refresh builds on the previous strategy (2017-2019) and reflects learning since the Pandemic that a greater focus on support for informal/unpaid Carers is needed. This strategy also takes into account that ways of living and working have changed dramatically since 2019. Following engagement with local carers, it seeks to address shifts in needs of carers, whilst expanding scope of the strategy to range across all ages. This has been an opportunity for carers to design their strategic vision with the Council and wider partners, and directly contribute to the action plan which will be owned and delivered by partners across Havering.

The Strategy for those provide informal and unpaid care in Havering, 2023 - 2026 has been developed by Havering Council in partnership with the new system operating across health and wider partners — the North East London Integrated Care System (ICS), and Havering Place based Partnership. The ICS aims to enable greater cohesion and collaboration across partnerships, and this strategy is an example of how this can work — with issues affecting Carers drawing heavily upon health, as well as social care, and the wider determinants of health.

As a joint Strategy across the Havering Place based Partnership, the Council and partners were eager to imbed collaboration at every stage; a key aspect of this strategy has been the underpinning key principle of co-design and co-production. Carer engagement for this strategy started with an initial introduction presentation to the Havering Carers Hub, which over the following months expanded into a recurring working group of key leads over the partnership. Our engagement plan started with the introduction of the Strategy context to the Havering Carers Hub which sparked conversations about what the priorities should look like.

Activities that have fed into the development of this strategy:

- Partnership workshops
- Programme of engagement with local Carers including:
 - 1-1 discussions
 - o Focus Groups
 - Carer consultation events
 - Carer workshops
 - o Borough-wide online engagement survey
- Discussions solidifying priorities across all groups
- Mapping out action points with Carers to focus on the priorities that were most meaningful to them
- ICB involvement and working group
- Partnership Board discussion
- Attendance and discussion at Carers Hub events
- Meetings with ICB colleagues across North East London
- National webinars and collaborative events
- National Survey 2021 of adult carers in England
- National GP Survey with dedicated questions to Carers
- Close working with our commissioned services, the Carers Hub, Imago and Havering Young Carers

The All Age Carers Strategy will sit alongside other key strategic documents that impact upon carers and their families including:

- Autism Strategy
- Learning Disabilities strategy (in development)
- Voluntary Sector Strategy
- Havering's Joint Commissioning Strategy
- Havering's Dementia Strategy (to be published)

National Legislation

Putting People at the Heart of Care – April 2023

- 10 year vision for transformation of care and support in England including joining up services to support people and carers
- Extension of the Better Care Fund (BCF)
 Support Programme and the launch of a new national leadership programme for local health and social care leaders.
- Sets out investment for additional support for unpaid carers in recognition of the enormous contribution they make
- The DHSC provides funding through the Better Care Fund for "short breaks and respite services for carers, as well as additional advice and support
- Key policy changes to support; improved information and advice, empowering unpaid carers and supporting autistic people and people with a disability into employment

Other related legislation:

- Breaks for Carers of Disabled Children Regulations 2011
- Care and support for deafblind children and adults policy guidance

Health and Care Act 2022

- •Aims to make it easier for health and care organisations to deliver joined up care to people who require multiple services, building on earlier recommendations by NHS England and NHS Improvement
- Recognises the equal importance of supporting carers as well as the people they care for, giving carers the right to receive support from their local authority if they have eligible needs; which can be identified through a carer's assessment.
- Sets out the establishment of Integrated Care Boards, who carry new duties which make them responsible for involving carers as well as those they care for in decision-making; Carers must be involved when decisions are made around changes to or developments to a service, where there is an expectation of involved care in relation to the patient's prevention, treatment, and diagnosis.
- ■NHS hospital trusts in England must ensure that unpaid carers are involved as soon as possible when plans for a patient's discharge after treatment are being made. This covers all carers of adults needing care and support following hospital discharge, including health care support such as Continuing Healthcare.
- Childrens Act 1989
- Chronically Sick and Disabled Persons Act 1970
- Children and Families Act 2014



2014 Care Act

- ■The Care Act aims to ensure people needing care receive the support they need and that their wellbeing is at the centre of the process. The Act also aims to bring personalisation to care services, giving greater control and influence to those in need of support.
- the Care Act gives local authorities a responsibility to assess the level of support that a carer may need (building on the Carers Recognition and services act, 1995)
- To do this, the local authority will undertake an assessment with the carer to decide whether the carer has needs that require support
- ■Once a carer's assessment has been completed, the local authority will then decide whether the carer is eligible for support. The carer will be entitled to support if they meet the eligibility criteria and the person they care for lives in the local authority area.

What matters to local carers – feedback from engagement

One to one discussions



"I live alone with my mum who is ill, it's just us but it's always been that way"

Imago Young Carer (aged 9-12)

"Sometimes I don't know where to get help, I care for my husband on my own and struggle using technology to access information"

Adult Carer

"I take care of my twin sisters with mental health problems and my great grandmother. I used to have a group of young carers to meet up with, but now with my college schedule and caring I don't have time"

Young adult carer (aged 19)

"I just want carers to be acknowledged as workers, entitled to breaks. We work so hard and employers often don't recognise this strain"

Adult Carer

"I have cared for my grandad for as long as I can remember, but since he became bedbound 2 years ago, it has taken more time. I had to take 8 weeks off college because it's just me and my mum who care for him"

Young adult carer (aged 23

Borough wide Survey



1 in 3

Of 125 respondents said that access to timely GP appointments was their top priority

64%



Of respondents felt that training to help them fulfil their informal/unpaid caring role would be useful 1 in 2



50% of respondents felt that better access to get through to services on the phone in a timely way is their top priority for improvement

1 in 2



Of the 125 respondents felt that their relationship with their GP worked well in terms of the care and support they currently receive

The general additional comments provided focussed on the need to coordinate care around people, ensuring that it is more seamless, ensure access to information and advice so that people can navigate the system, and ensure access to timely appointments.

Focus Groups



?

It is often difficult to understand what services are out there to support Carers and the people that they care for. Carers will often have to go to the GP to be referred on for support. This should be more simple. A single directory would be helpful, if everyone could access it.



Access to respite should be easier, and it should be more flexible. It's really important that Carers have access to respite when they need it, that doesn't disrupt the routines of the person they're caring for



Access to Primary Care appointments should be easier and more quick. A flexible model would be helpful, that means you are seen by the right person for your query, in a timely way.



Services should be more streamlined around the needs of the person. It can be difficult to navigate a range of appointments, and it takes time to take the person that you care for to different appointments at different places.



Carers should be identified and recognised for the key role that they play. Sometimes it's difficult to get the GP to call the Carer rather than the cared for person to discuss their care, even if the cared for person has dementia

Further engagement with local Carers to test our priorities



Citizen's space Havering engaged with Carers across Havering to test the emerging feedback and priorities from the focus groups, one to one discussions, and engagement survey.

Feedback from 125 respondents included:

100%

of respondents agreed with the priorities identified through engagement with local people, and articulated in this strategy

60%

of respondents didn't propose any additional priorities and some respondents suggested additional priorities such as Carers Allowance benefit increase and help applying for grants and benefits 44%

of respondents were registered on the Council's Carers Register, with nearly two thirds of respondents unaware this channel of support existed. 64%

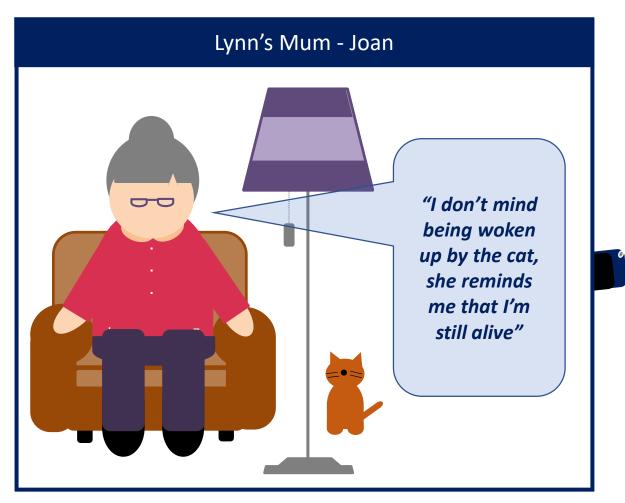
Of respondents were certain that their GP knew about their caring role

Havering Carers experience: Lynn's story

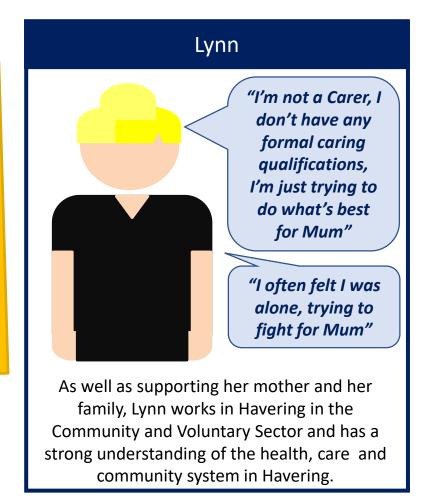
Lynn and her mother Joan share a really close bond, and are more like best friends. They're always there for each other, and see each other frequently.

Lynn's mother had started to slowly decline in the past couple of years, being less able to manage. Lynn noticed this and, as well as supporting her mother herself; acting as her advocate, booking appointments, arranging food shopping and other support, Lynn requested a Social Care assessment following which a care package was put in place (single handed, 4 times per day). A lot of the monitoring of her mother's diabetes and blood sugar levels falls to Lynn, including the decision of when to escalate; Lynn also notices that the diabetes medication is given by nurses on several occasions despite her mother's blood sugar levels at the time suggesting that it should not have been administered.

In 2022, Lynn's mother, who was at this point defined as 'housebound' developed a rash across her body, which left her in extreme discomfort. From then on, Lynn's mother's condition began to decline, despite Lynn's struggles to get her seen by the right people to support her. The following page maps their journey from this point.







Lynn and Joan's story

6 Sept 2022

Saw diabetic foot nurse because Lynn's mother had been removed from the toenail cutting service -Lynn had to go back to the GP to be re-referred for this.

Lynn asked about the rash that had broken out for circa two weeks and was advised to see GP and provided with creams



Called GP and was asked to send photos of the rash.

Several weeks later, Lynn's mum started to struggle with her breathing as the itch from rash was becoming unbearable.

Lynn advised by GP to call the **Community Treatment Team** (NELFT Community Rapid Response service)



Lynn called the CTT on advise of her GP, and advised that she was calling due to her mother's rash, and irregular breathing.

CTT called the GP and spoke with them, then called Lynn back the next morning. Nurse arrived to undertake obs and take bloods. Also reviewed rash. GP arrived to see rash after request from CTT doctors

10th Oct 2022

Lynn took her mum to a dermatology appointment that the GP instigated for the rash at DMC Westland medical Centre in Hornchurch. Struggled to find somewhere to park. They did not have access to Lynn's mum's medical records, and were not aware of the medication that she was on. No thorough inspection of rash or resolution for this just cream and antihistamine tablets again



Seen by diabetic Nurse in the community; concerned that Novamix had been prescribed. Stopped this medication and changed to Tresla.

4th JAN 2023

Queens dermatology were chased for an appointment as previous provision of medication not working. Further options proposed BUT checked the lump found that morning by Lynns Mums career and direct Lynn to make an urgent 2 week pathway referral to screening for mum by the GP.

Mums hair is falling out at

this point as well.

1st Dec 2022

Medication review with Pharmacist 15th Dec – Queens dermatology. Inconclusive biopsy results. Creams and tablets given 30th Dec another Westland appointment no access to medication changes and no attempt to check over mums rash physically.

A&E – from 2pm – 8.30pm until Mum fell out of her Chair and was rushed through. CT scan and bloods. No pain relief/cream given. Jnr doctor wanted to admit, initial consultant wouldn't; told to send home with cream and Puritan and let GP deal 28th October 2 with it. Lynn has to get another

consultant to prevent her Mum being

discharged at 1.30am



really affecting Lynn's Mum; she is unable to focus on eating, drinking or anything else. Lynn went back to the GP and was seen by a Nurse practitioner to try to get another appointment with the dermatologist. Advised to go to A&E as the nurse felt it was now life threatening

Series of Hypos, - Lynn rushed to her mother's house when couldn't see her on the CCTV. Lynn arrived, found mother on floor, and called 999. LAS crews attend after several hours. Blood sugar level at 1.1

Advised that both doses of insulin were administered that day incorrectly (when blood sugar was at 4). Hypo again the following day, Lynn sat with Mum all night and LAS attend the next morning.



Admitted to hospital for 3 weeks. Lynn pushed the hospital for a dermatologist to review the rash which was finally done. Biopsy taken - 12 week wait for results. Hospital prescribe Novamix Insulin twice daily, which requires blood sugar to be tested and at the right level before administration of insulin by a





Lynns Mum suddenly deteriorated. Tested negative for COVID and obs done by CCT team that evening. Were going to do bloods but didn't as mum was comfortable. At 6.10am on 19th Jan Lynns mum lent against wall and slides down to the floor. Lynn got call from carer at 8.10 and goes to see her. Appeared Hypothermic. LAS

20th January

Lynn's Mum sadly

Lynn is at her side.

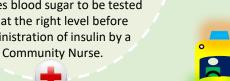
passes away in

hospital at 3am.

Mother continues to deteriorate, is fighting cold sepsis and Lynn is told she has now also contracted Covid.

convey to hospital.

28 Oct - Nov 202



Rash significantly worse and itch



Havering Carers experience: Lynn's story There are many instances within Joan and Lynn's journey where care could have been improved, particularly:

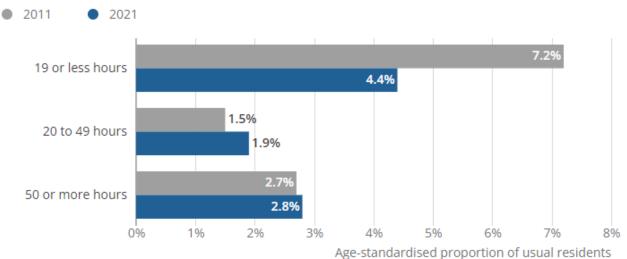
- There was a lack of care coordination /person centred care around Joan's journey, with Lynn trying to fill this function; there were many occasions where Lynn was not listened to, and she really had to push to have her mother seen
- There were many cases where, to get the referral or support she knew that her mother needed, Lynn had to go back to the GP for an appointment, to get the onward referral
- Joan's rash was never properly investigated / addressed, and she was in significant discomfort because of this throughout the last few months of her life
- Lynn was never identified as a carer / no one who saw Lynn ever checked that she was receiving the support to which she was entitled
- Joan's journey was convoluted, and without Lynn acting on her behalf and taking her to appointments, could have been significantly worse
- Lynn is now left with not only the impact of losing one of the people whom she loved most in the world, but also the impact of the experiences that she and her mother had to go through during the last months of her mother's life

What the data tells us - nationally



- Carers UK charity and the University of Sheffield used 2021 Census figures to calculate the value that unpaid carers contribute to the economy.
 For England and Wales, this was estimated to be £162bn per year, based on a calculation of £25 per hour in 2021.
- Recent Census data (2021) has shown a decrease in the proportion of the population who provide unpaid care, nevertheless around 5 million people in the UK identify themselves as providing unpaid care, the breakdown of which is shown in the chart below:

Figure 1: Number of hours of unpaid care provided per week, usual residents aged 5 years and over, age-standardised proportions, 2011 and 2021, England and Wales



Despite a decrease in the overall number of carers, proportions of carers providing higher numbers of unpaid care have risen.

Source: Office for National Statistics - Census 2021

What the data tells us - Havering



- Havering has seen an increase in population of 10.5% from 2011-2021, almost 3% higher than London's overall population increase, this is being driven by new housing developments, and migration into the borough. Havering has the second-least densely populated local authority area across London (Census, 2021), which could predict high potential for population booms in the future. Havering has a high number of single person dwellings, and the second oldest population in London.
- With regards to carers, this population growth is relevant, as with a growing population, and a nationally ageing population, there is a higher demand for care. This particularly affects older adults, but as families increasingly move to Havering amidst economic development, unpaid care as young carers and parent carers will increase.

1,400

Adult Carers registered with the Carers hub (with access to information, advice and Carers assessments

5,000

People coded as a carer with their GP practice i.e. they have identified that they are providing informal or unpaid care to a friend or loved one

1,209

Adult Carer assessments completed in the past year

250

Young Carers identified and receiving support from Imago (aged between 5-17 years old)

- Despite these figures, it is known that the true number of unpaid carers across the borough is likely to be much higher than this, as many people will not recognise the caring role that they are fulfilling, or may not wish to, access support services. With Census 2021 figures showing that 8.7% of the population are providing some level of unpaid care, this could potentially equate to over 22,800 unpaid and informal carers in Havering.
- This is a significant gap between the number of known carers registered with a GP (5,000) or the Carers Hub (1,400), and the potential number of actual carers of nearly 23,000. One of the top priorities for Havering will be helping those providing unpaid and informal care to identify their key role, and register for support, information, and advice.
- Community and voluntary sector partners and local people have fed back that there has been a rise in the number of young children struggling with personality disorders, as well as an increase in incidents of Autism and other conditions. Support is needed for parent and family carers of these people to ensure that they can support their needs, and are able to link into services if needed.

What the data tells us - Havering

Informal Care can have a significant impact on the physical, emotional, financial, and mental wellbeing of the person providing it. As such, it is essential that Carers receive regular assessments of their own wellbeing, in their own right, to ensure that they are also receiving the support that they need.

Outcomes of the Personal Social Services of Adult Carers in England (SACE) survey 2021-2022, suggest that :

- Circa 75% of carers had not received an assessment in their own right or a review in the past year
- Ease of access to information for carers (30.9% found accessing information either 'fairly' or 'very' difficult), and awareness of the availability of information for carers (37.6% of respondents having not tried to access information and advice)
- Financial considerations (59.5% of respondents were retired), which also relates the potential for carers to have to leave the workforce to be able to carry out their caring duties – increased in likelihood by the fact that 56% of carers in Havering are aged 45-65.
- The impact of Covid affected carers significantly in their interaction and isolation (86.3% of respondents did not have as much social interaction as they would like, with a large proportion of these mentioning feeling socially isolated)





Local Carers and cared for people celebrate the Kings Coronation at an event hosted by Havering Carers Hub, May 2023. Photo courtesy of Havering Carers Hub

Young Carers



Who is a Young Carer

The definition of a young carer, according to section 96 of the Children and Families Act 2014 is:

- A person under 18 who provides or intends to provide care for another person (of any age, except where that care is provided for payment, pursuant to a contract or as voluntary work).
- This can relate to care for any family member who is physically or mentally ill, frail, elderly, disabled or misuses alcohol, or substances.

National figures

- Over 800,000 secondary school aged children are young carers in the UK
- One in five children and young people are young carers
- Their unpaid work is the equivalent of £12,000 a year on a part-time carer's wage
- 68% of young carers are bullied in schools
- The average was 48 school days missed or cut short because of their caring role
- 45% of young adult carers report they have mental health problems.
- There are 50,000 children and young people looking after someone with mental ill health in the UK
- 40% of young carers are having to get up in the night
- Young carers spend an average of 25 hours a week looking after loved ones



Young Carers



What support do young carers provide?

- Practical tasks
- Physical care
- Personal care
- Managing the family budget
- Administering medication
- Looking after or "parenting" younger siblings
- Emotional support
- Interpreting

Impact on young carers of the care they provide

- Limited horizons and aspirations
- Limited opportunities to take part in social or leisure activities
- A fear of professionals and statutory services
- Young Carers are often more mature than their peers
- Health problems may develop due to their role
- Emotional wellbeing of Young Carers can also be negatively affected
- The presence of problematic substance misuse in the family
- Family income lower than average family
- Exposure to adults risky behaviour



Young Carers



Young Carers in Havering

- There are over 200 Young Carers registered with Imago, from the ages of 5-18
- The largest age group is 9 11
- Imago are currently supporting 25 young carers that have a social care plan in place
- The most common "cared for" is the mother but it can be another relative with a large number caring for a sibling as well
- Imago are working with 48 different schools across
 Havering and supporting young carers that attend
- Majority of the referrals to Imago are currently from; social services, family wellbeing, schools and CAMHS

Thresholds for support and support provided by Imago to young carers:

Level	Criteria	Action
3 HIGH 10%	Significant caring role and negative impact of caring, additional support needs, moderate to high level of care given, significant additional risk factors	Liaise with relevant social care team to assess the cared-for family member
2 MEDIUM 25%		Action plan, 1:1 support, advocacy, support groups, workshops and respite activities. Signposting, consulted on YC issues; invited to one-off events, liaise with other professionals involved with the family e.g. school
1 LOW 65%	Low levels of caring, little negative impact of caring	Monthly bulletin, signposting, consulted on YC issues, invited to one-off events, travel pass

Current provision and support in Havering



Adult Carers

Havering Carers Hub provide carers support to adult carers in Havering

Website: https://www.haveringcarershub.org.uk/

Telephone: 01708 961111

Email: info@haveringcarershub.org.uk

Young Carers

Imago provide carers support to young carers in Havering

Website: https://www.imago.community/Children-and-Young-People/Havering-Young-Carers

Telephone: 0300 111 1110

Email: hello@imago.community

Parent Carers

Detail to be added Sycamore Trust **Positive Parents**

SEND **IASS**





info@haveringcarershub.org.uk www.haveringcarershub.org.uk



Carers Strategy Action Plan



Ask from local carers	Project / Action to deliver this	Lead	How will we measure success	Timescale	Responsible Officer
I have easy access to information and advice when I need it, including signposting to the right place	Roll out of the Joy app across Havering; particularly the 'marketplace' element, which will provide a single database of all services including health, care and the wider community and voluntary sector services that can support local people. All professionals in the Borough will have access, as well as local people. Project underway within the Havering Place based Partnership to bring together all of the roles aimed at connecting local people to wider services and support, and better coordinating care. This group will have a focus on supporting Carers and ensuring that their care and needs are met. This group includes: Social Prescribers, Core Connectors, Local Area Coordinators, Health Coach leads and other similar roles.	Project manager to be identified once the NHS and Local Authority consultations are completed and there is a full team at 'Havering Place'	 Increase in carer satisfaction relating to access to services - reported through the Carers hub survey and qualitative surveys for those who access Social Prescribing / Local Area Coordinator services. Timelier access to GP and other appointments as people are directed to the right service for their needs, first time, reducing unnecessary activity in the borough 	Joy app to be rolled out in 2023/24	ТВС
I have easy access to help and support when I need it, including if/when my	Local Area Coordination has been funded for a further year to support local people. A project is underway to support teams of health, care and community and voluntary sector staff to work together at a 'primary care network' level as a multidisciplinary team. This will ensure that services are more joined up. Through this work, partners will seek to improve coordination of services, including informal and unpaid carers in these discussions, and ensuring that they are not left holding the ring on coordination of services. This project will also seek to ensure that appointments for the most vulnerable are more timely. Population Health Management approach is being developed to enable targeted support and coordination of services for those who need it. Community Chest monies has increased capacity for local people in Havering to access Bereavement support - the Carers Hub will ensure that local carers are aware that they can access this if they have recently suffered a bereavement.	Project manager to be identified once the NHS and Local Authority consultations are completed and there is a full team at 'Havering Place'	 Increase in the number of informal/unpaid carers being supported by Social Prescribers and Local Area Coordinators. Number of staff trained to recognise Carers and have the necessary conversations with them. Increase in the number of people registered as a Carer in Havering. Qualitative measures - satisfaction rates of those who provide informal and unpaid care. 	2023/24	ТВС
l encounter friendly professionals who understand my role as a carer, listen		Project manager to be identified	 Number of staff trained to recognise informal and unpaid carers and have conversations with them to 	2023/24	ТВС
I am recognised as an expert and	Training to be rolled out for all staff who work with local people in Havering, to support better identification of those who provide informal and unpaid care. Staff will be supported to have conversations with these people to ensure that they are able to recognise the important role that they play, and are linked to the Carers Hub to register as a carer to access an assessment, information and advice / further support as needed.	once the NHS and Local Authority consultations are completed and there is a full team at 'Havering Place'	register them for the support and advice that they need. Increase in the number of people registered as a carer in Havering. Qualitative measures - satisfaction rates of those who provide informal and unpaid care.	2023/24	ТВС
I have access to a range of support, including breaks from my caring responsibilities, to help me live my life and continue to carry on with my caring role	A review of respite services has been undertaken across Havering to enable this to be more flexible. Increasing the number of people who register as a Carer via training for frontline staff and better communication across the borough, to ensure that local carers receive the right information and advice on how to access respite care. Through the Multidisciplinary team work described above, ensure that Carers have a link in local health and care services who can support them to ensure that the care for their cared for person is more joined up and coordinated.	Project manager to be identified once the NHS and Local Authority consultations are completed and there is a full team at 'Havering Place'	 Number of carers who access respite. Qualitative measures - satisfaction rates of those who provide informal and unpaid care. 	2023/24	ТВС
l can access an individual carers	Support more people across the borough (via training for front line staff) to identify as a carer and register with the Carers hub. Review underway to enable the Carers Hub themselves to deliver individual Carers Assessments for local people, to increase the timeliness of these assessments. From this they are able to access better signposting and coordination of services and support, and better qualitative outcomes for local carers including improved wellbeing scores.	Project manager to be identified once the NHS and Local Authority consultations are completed and there is a full team at 'Havering Place'	 Increase in the number of informal and unpaid carers having an individual Carers assessment. Decrease in the wait time for an individual Carers Assessment. Qualitative measures - satisfaction rates of those who provide informal and unpaid care. 	2023/24	ТВС

Havering Place based Partnership

Carers Strategy Action Plan



Ask from local carers	Project / Action to deliver this	Lead	How will we measure success	Timescale	Responsible Officer		
I am supported to recognise that I am a carer, and that I may need help both in my caring role and to maintain my own health and well-being	Targeted text message to those registered as a Carer with their GP (circa 5,000 people) to encourage them to register with the Carers hub for further support, information and advice (increased capacity will be provided to the Carers hub to ensure that they can cope with a potential increase in calls /	Project manager to be identified once the NHS and Local Authority consultations are completed and there is a full team at 'Havering Place'	GP practice Improved qualitative reports from Carers / satisfaction rates – reporting improved wellbeing and support following identification as a Carer, and registration with the Carers hub,	2023/24	TBC		
I have access to information and advice to help me look after my own mental and physical health	single database of all services including health, care and the wider community and voluntary sector services that can support local people. All professionals in the Borough will have access, as well as local people.	Project manager to be identified once the NHS and Local Authority consultations are completed and there is a full team at 'Havering Place'	Prescribing / Local Area Coordinator services.	2023/24	ТВС		
If I recognise a change in my cared for person's needs, I know where to turn, and am listened to; for example, that an increase in care package is needed	recognise the important role that they play, and are linked to the Carers Hub to register as a carer to	and there is a full team at	Qualitative measures - satisfaction rates of those who provide informal and unpaid care. Increased number of people supported via the Carers hub, including reporting data on the number of Carers who go back to the hub for information and advice / signposting, and the outcome of this.	2023/24	ТВС		
I am supported to maximise my income, including accessing benefits to which I may be entitled	employment and their caring role.	Project manager to be identified once the NHS and Local Authority consultations are completed	Increase in the proportion of unformal and unpaid carers at working age who	Longer term project	ТВС		
I am supported with my caring responsibilities so that I can continue to work or study	gSupport for young Carers to prevent adverse impact of their caring role on their academic achievement. Timely access to respite services that are flexible, as and when needed.	and there is a full team at 'Havering Place'	Academic attainment for Young Carers improved	2023/24	ТВС		
	understand some of the conditions their cared for people have, and how to manage them. This will include training to better understand some of the conditions their cared for people have, and how to manage them. This will include support for those with personality disorders, and other specific conditions that are on the rise.	and there is a full team at	Qualitative measures - satisfaction rates of those who provide informal and unpaid care. Measure number of additional training options requested by carers from feedback at end of any training provided, and seek to provide this additional training / ensure the identified needs are met.	2023/24	ТВС		

Carers Strategy Action Plan



Ask from local carers	Project / Action to deliver this	Lead	How will we measure success	Timescale	Responsible Officer
I can attend carers support groups and activities with young carers that understand what I am going through	Recommission a comprehensive and supportive service for young carers	Project manager to be identified once the NHS and Local Authority consultations are completed and there is a full team at 'Havering Place'	Qualitative measures - satisfaction rates of those who provide informal and unpaid care. Number of support groups / people supported.	Tender process to be undertaken in 2023/24	ТВС
I can access help to support me with my mental health and wellbeing	working closely with local schools.	Project manager to be identified once the NHS and Local Authority consultations are completed and there is a full team at 'Havering Place'	Number of young people registered as a carer and in receipt of an assessment, information and advice / support Number of young people who are supported by a social prescriber. Qualitative measures - satisfaction rates of those who provide informal and unpaid care.	2023/24	TBC
my studies without impacting on my caring role, including university,	Increased identification of informal and unpaid Carers as set out in the actions within this plan. Support for young Carers to prevent adverse impact of their caring role on their academic achievement, including working closely with local schools to raise awareness of this. Timely access to respite services that are flexible, as and when needed.	Project manager to be identified once the NHS and Local Authority consultations are completed and there is a full team at 'Havering Place'	Increase in the proportion of unformal and unpaid carers at working age who are able to enter / continue work if they wish, alongside their caring role – assess this via Carers Hub surveys and qualitative feedback Academic attainment for Young Carers	2023/24	ТВС
As a young carer, my school or college understands my caring role and I feel supported to continue to undertake my studies, without my caring role impacting on them	Targeted work and training for local schools to identify and support the needs of young carers.	Project manager to be identified once the NHS and Local Authority consultations are completed and there is a full team at 'Havering Place'	improved (work with schools and colleges to capture this information)	2023/24	ТВС

Governance and oversight of this strategy and action plan



Partners of the Havering Place based Partnership have established a working group, including leads from across the council, social care, NHS and community and voluntary sector, to oversee the development of this strategy.

This group will eventually evolve into the Havering Carers Board and will oversee delivery of the action plan set out within this strategy. It is our aspiration that the group will be chaired by, and be comprised of a number of local people who are, or were informal/unpaid carers.

The group is currently chaired by a person who was an informal carer for six years in Havering for her grandfather who had dementia.

Terms of Reference – Supporting unpaid / informal Carers in Havering – working group

This group is formed to bring together oversight of support for Carers in Havering across partner organisations. For the purposes of this group the definition of a 'Carer' is someone who provides informal/unpaid support on a regular basis to a family member or friend who due to illness, disability, a mental health problem or an addiction, cannot cope without their support.

The group will, in the short term:

- Provider oversight for development of the Carers strategy for Havering. As part of this process:
 - o Support engagement with local Carers to capture and map their experiences and challenges, to feed into the content of the strategy
 - o Map current provision / support for carers within Havering to feed into the strategy
 - Collate data on carers within the borough to feed into the strategy
 - o Identify the current gaps in provision to feed into the strategy
 - o Identify short, medium and long term priorities for carers in Havering and articulate these within the strategy
- Oversee the proposal and implementation of the subsequent project/s for the 2022/23 Health Inequalities funded project to support Carers in Havering

In the longer term, this group will:

- Evolve into a board of the Havering Place based Partnership for informal/unpaid carers
- Oversee delivery of the Havering Carers strategy and monitoring of outcomes for unpaid/informal Carers in Havering
- Oversee implementation of the priorities identifies in the strategy, as required
- Shape further proposals relating to short term funding for projects to improve outcomes for Carers in Havering, and oversee implementation of these

Onward reporting

Remit/purpose

This group will report into the Havering Place based Partnership Board





This strategy was developed with input from a range of health, care and community and voluntary sector partners as well as local informal and unpaid Carers. The Havering Place based Partnership are thankful to all of the individuals who gave their time to shape the priorities, detail, and action plan.

We would like to thank in particular; Imago, Carers Hub, partners of the Havering Place based Partnership, and the fantastic community and voluntary sector groups who have given their time and expertise.

Special thank you to Lynn Warnett for sharing her story and allowing us to use it as a case study to highlight the improvements needed for local people and drive the change needed to do better for all informal and unpaid carers in Havering.





