

Merton Carers Strategy 2021-2026

Making Life Better for Carers





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Foreword

Councillor Stephen Alambritis, Cabinet Member for Adult Social Care and Health



As the Cabinet Member responsible for Adult Social Care and Health, I understand the essential role that carers play in our community and the incredible support

they provide, and I would like to thank them. Carers not only provide care and support to loved ones with varying levels of need, they often do this without much recognition of the commitments they make and the impact this has on their wellbeing.

This has been a challenging time for everyone but especially for carers. We are aware of the impact that changes in their usual support has had on many carers. We know that carers have reported feeling worried about the future, have experienced isolation and have felt the strain that their caring role has had on their own physical health and wellbeing. Therefore, we have acknowledged the impact of the Covid-19 Pandemic on carers in this Strategy.

To achieve the vision of the Carers Strategy, in the context of sustained financial challenges, our collective aim is to reengineer the investment and resources in services that support carers. We aim to put carers at the centre of this work and to place greater emphasis on working with all our partners to maximise resources as well as seek additional funding opportunities that widen the local offer to carers.

Carers UK estimates that as of 2019 there are as many as 8.8 million adult carers in the UK which means that 1 in 8 adults in the UK are carers. These figures suggest that there are roughly 20,000 carers in Merton. Yet, many of these people are unknown to the authorities and local research has shown that a significant number do not know what support is available to them. Carers UK estimates that by 2037, the number of informal carers across the UK needed could rise by 40 per cent (2.6 million people) taking the total number of people providing informal care to 9 million.

It is really positive to see the collaboration of all key partners working together with carers to produce this strategy. Caring can lead to greater connection with loved ones and when supported by appropriate support and services can have a positive impact on a carer's wellbeing. This strategy highlights the excellent support that is available to carers across the borough (organisations that provide support are listed in Appendix 1) and carers who use these services tell us what a difference they make to their lives. However, we know we need to do more, especially at this difficult time. We also need to provide a broader range of options to support carers throughout their caring journey.

Therefore, this strategy expresses our commitment to improve the services and support on offer to carers in the borough, and ensure that professionals across the health and social care sector recognise the work carers do and value their expertise and experience of providing care for a loved one. I look forward to seeing the actions in this strategy implemented over the next five years and to Merton becoming a carer friendly borough.

Carer Foreword

Sally Burns, family carer and member of Carers Strategy Task Group



Since work started on the new Carers' Strategy nearly two years ago so much has changed. We are now living through a worldwide pandemic and all the disruption and sadness it's

brought with it, and trying to work out what the future holds for us.

Two things are certain – those of us who were already caring for someone have had to work even harder since March last year. At the same time, the number of people who find themselves thrust into a caring role has gone up dramatically. So what does this army of carers want to see happen locally?

I have to admit my initial reaction on hearing there was going to be a new carers' strategy for Merton was rather cynical – I've seen past efforts achieve very little! But what's been so good about this exercise was getting carers involved right from the start – and really listening to what we're saying. It's also been very encouraging to see people from the council, CCG and many voluntary sector organisations working together on it, as it will definitely need coordinated action to make progress.

Our situations and needs as carers vary enormously – and we always need to be treated as individuals. But there are also some very clear themes that came out of the engagement and these are reflected in what we want to see happen next – a range of actions that should help to improve our lives in different ways. Making sure carers get assessments and know about the help they can get, don't have to struggle with unnecessary bureaucracy and can get help to plan for the future are just some examples. In a time of uncertainty, I think it's even more important that we as carers help plan services that will support us in future. And I'm glad to say that carers will be part of the group that will be set up to put these action plans into practice.



1 | Welcome

1.1

This strategy has been co-produced with a number of organisations and carers to make sure that views and expertise from across the borough shaped this strategy.

1.2

Over 200 carers and 50 professionals from a range of organisations have been part of a significant engagement programme, which has shaped the strategy's priorities, which broadly follow the National Carers Strategy. This comprised of a survey for carers, eight focus groups with carers, and engagement with professionals who work with carers. A collaborative task and finish group, which included carers, was established in June 2019 to lead on the development of this Strategy. A full list of task and finish group members is available in Appendix 2.

1.3

To implement and monitor this Strategy, an Implementation Board will be established and state each year (starting 2021), a short implementation plan will be developed which will outline eight to twelve key priority actions and outcomes for each year. Our aim is to achieve these actions, which over time will allow us to build on and deliver the priority outcomes outlined in this document.

1.4

Due to the changes that have taken place as a result of the Covid-19 Pandemic since March 2020, the strategy has had to consider the new landscape for carers whilst balancing these with the long term ambitions of the strategy. Therefore this strategy has been updated by the task and finish group, to consider these new issues and how they are influencing the strategic approach to supporting carers in Merton. These issues are recorded separately in boxes at the end of each priority section, and will be addressed in the strategy's implementation plan.



2 | Introduction

2.1

Many people across the borough spend a large amount of time providing unpaid care for a family member or friend, who would be unable to cope without their help. Carers have a valuable role to play and it is widely acknowledged that carers contribute significantly to ensuring that the person they care for remains independent in their own home for longer.

2.2

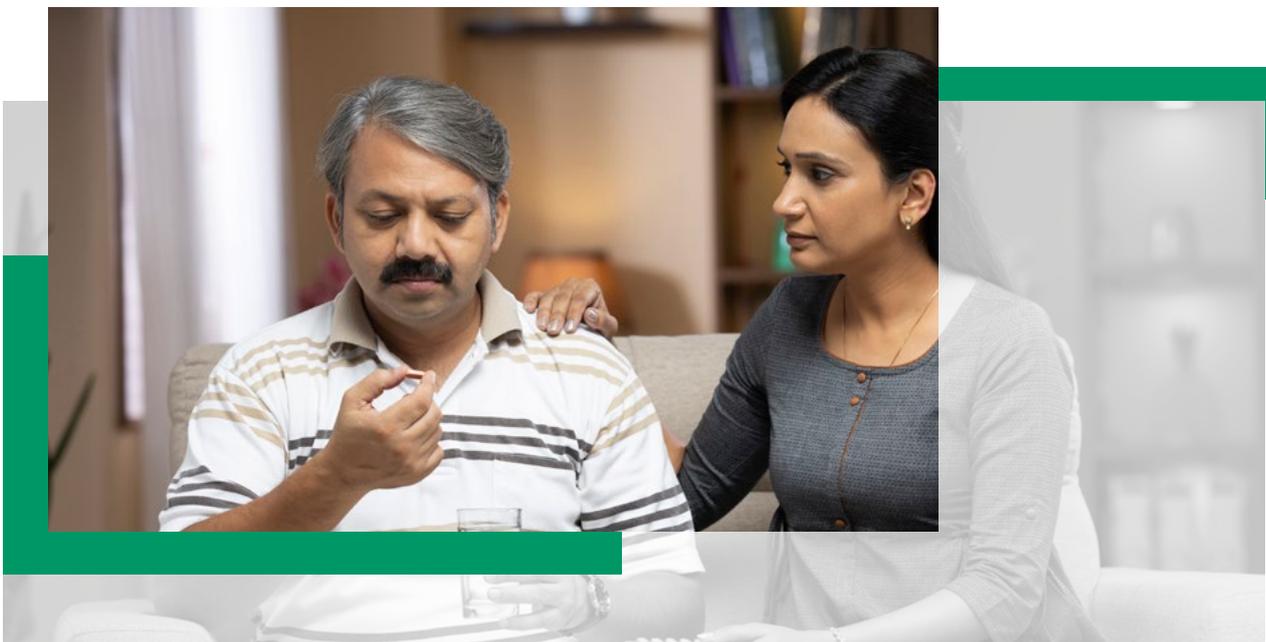
Carers don't always choose or plan to be carers, and can suddenly fall into the role of being a carer without any training, knowledge or preparation. This is true now more than ever, with many who haven't previously provided care to a loved one now taking on this role due to the new health risks and lifestyle changes brought about by the Covid-19 Pandemic. It is crucial that carers are identified and feel supported with their caring role and their life alongside it, both in this time of crisis and going forward. There will be a particular focus on carers from BAME and underserved communities to ensure better outcomes for these residents.

2.3

The National Carers Strategy defined a carer as someone who spends a significant proportion of their time providing unpaid support to a family member, partner or friend who is ill, frail, disabled or has mental health or substance misuse problems. Many carers do not see themselves as carers, as for them the caring relationship is simply part of everyday normal life as a wife, husband, partner, son, daughter, parent or friend. However, being recognised as a carer can provide access to support, services, information and advice, which can help to make caring more manageable. For a list of carer definitions, please refer to appendix 5.

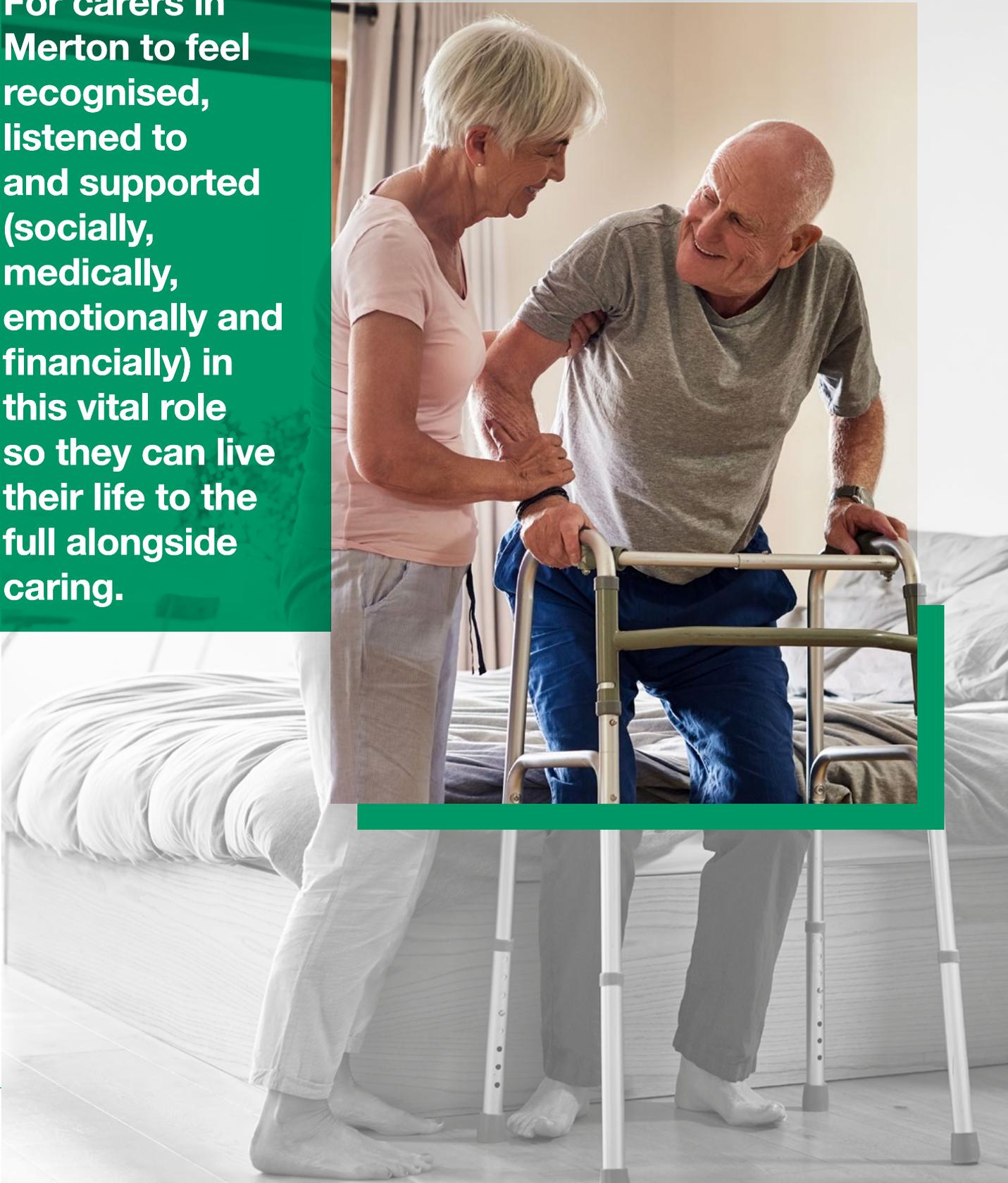
2.4

There are services and support options available in Merton for carers, although we recognise that there are gaps and we need to work together to improve this. Therefore, this strategy sets out the vision for Merton's offer to adult carers and the actions that we will take over the next five years in order to achieve this. The implementation of this Strategy will also align with the action plan for improving outcomes for young carers, which are outlined in the Merton Young Carers Multi-Agency Strategy.

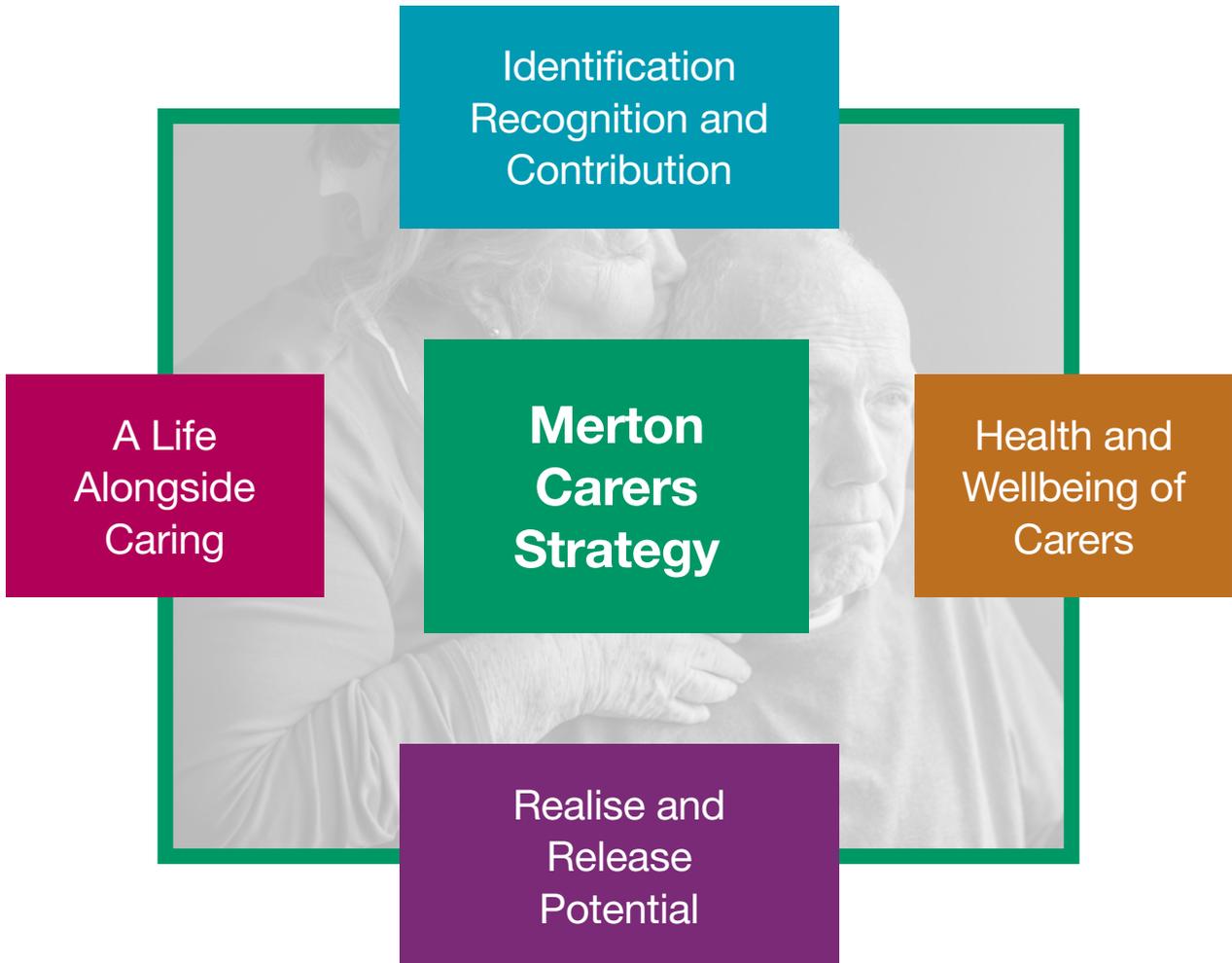


3 | A Vision for Carers in Merton

For carers in Merton to feel recognised, listened to and supported (socially, medically, emotionally and financially) in this vital role so they can live their life to the full alongside caring.



4 | Overview of Priorities



5 | The Merton Story

5.1

As of 2019, Merton has a population of 210,452³ and an estimated 16,327⁴ unpaid carers. Carers UK estimates that 1 in 8 adults in the UK are carers, which suggests that the figure in Merton could be higher than official figures suggest, therefore more like 20,000 carers.

- Of the 16,327 carers, 1,452 are classed as 'Young Carers' and are aged 0-24. 412 of these Young Carers are below age 15⁴.
- The majority (12,935) of Merton's carers are of working age, with 9,280 in some form of employment. 6% (2,980) of the total number of carers are over 65⁴.
- In Merton, 75% of carers surveyed have been caring for over 5 years, and 32% have been caring for 20+ years⁴. Both of these figures are over 5% higher than the London average, and 10% higher than the average for England.
- Carers care for people with a range of different support needs and very often can care for someone who has more than one condition. In Merton 34% of those cared for have Dementia; 42% have a Physical Disability; 22% have Sight or Hearing Loss; 38% have a Mental Health problem; 20% have problems related to ageing; 24% have a learning disability; 27% have a long-term illness; 4% have a terminal illness; 3% have an alcohol or drug dependency.⁵

- 82% of carers in Merton live with the person they care for⁴.
- According to ONS census data, 5,493 of Merton's carers are from Black, Asian and minority Ethnic (BAME) backgrounds. This is 34% of the overall number of carers. Carers from some BAME backgrounds are less likely to access carers services compared with white-British counterparts, this is particularly true of individuals from Asian and 'other white' (non-British or Irish) backgrounds.* The national review⁶ published in June 2020 highlighted that there is a disproportionate impact of Covid-19 on BAME groups.

*Based on 2018/19 new referral figures to Carers Support Merton.

³ <https://data.london.gov.uk/dataset/housing-led-population-projections>

⁴ https://www.nomisweb.co.uk/census/2011/local_characteristics

⁵ <https://digital.nhs.uk/data-and-information/publications/statistical/adult-social-care-outcomes-framework-ascof/upcoming>

⁶ "Beyond the data: Understanding the impact of COVID-19 on BAME groups" (2020), PHE available at https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/892376/COVID_stakeholder_engagement_synthesis_beyond_the_data.pdf

The Impact on Carers Nationally Since the Beginning of the Covid-19 Pandemic

Due to the Covid-19 Pandemic, Carers Week UK reported in June that the total number of carers in the UK is likely to have grown by 50% since March 2020. This statistic will no doubt fluctuate due to the changing nature of the infection rate of Covid-19, and as a result the restrictions that are removed and imposed on how people can live their lives. Whilst we are learning about the local picture, national research is emerging that shows:

- 70% of carers were providing more care during the outbreak; 81% were spending more money, and 55% felt overwhelmed by the outbreak²
- People new to caring are more likely to be in paid work, and be a parent or guardian for someone under the age of 18:
- Almost two thirds (62%) are in paid work – 41% are working full time, and 21% working part time. These new unpaid carers are 30% more likely to be in paid work and these figures suggest that 2.8 million extra workers are now juggling work and unpaid care¹.
- 35% are a parent or guardian for someone under 18, which is significantly higher than those who were caring already before the crisis¹.
- Unpaid carers who started caring since the outbreak are more likely to be younger. 5% were aged over 65, compared with 23% of unpaid carers who were already providing care pre-outbreak¹.
- It is unclear how long caring responsibilities will continue for, for the new cohort of carers.
- There is accumulating evidence to suggest that cases of Covid-19 who have experienced both mild and severe symptoms can experience long-term health effects; Long Covid-19. This could have a significant impact on carers. In addition, there could potentially be more people in a caring role as a result of this.

Sources

1. https://www.carersuk.org/images/News_and_campaigns/Behind_Closed_Doors_2020/Caring_behind_closed_doors_April20_pages_web_final.pdf

2. <https://www.carersweek.org/images/CW%202020%20Research%20Report%20WEB.pdf>

6 | Caring in Merton

6.1

Although providing care and support can be rewarding, we know that many carers struggle at times. We also know that carers often put the wellbeing of those they provide care for first, meaning their own health and wellbeing issues can be ignored for longer.

6.2

Two surveys⁷ completed by Merton’s carers have helped us to identify the biggest issues carers face as a result of their caring role:

How caring affects mental wellbeing:

63% say caring causing **significant stress**



45% say being **depressed** as a result of their caring role



68% say caring role has **negatively affected their emotional wellbeing**



How caring affects a life outside of caring:

Only 25% have as much **social contact** as they would like



88% say that caring has made **career progression** more difficult



How caring affects physical health:

70% of carers’ **physical health** has been negatively affected due to caring role



79% of carers feel **tired** as a result of caring



64% report **loss of sleep**



20% say that caring made **existing conditions** worse



⁷ <https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/social-care-user-surveys/social-care-carers-survey-2018-19>, and Merton Carers Survey 2019

6.3

The Merton Health and Wellbeing Board recently commissioned a study on the impact of the Covid-19 Pandemic on vulnerable groups in Merton, including carers. We will use the results of this study to inform the implementation of the Carers Strategy.

6.4

The following quotes from carers in Merton capture just a glimpse of issues carers have faced during the Covid-19 Pandemic:

- “My daughter in supported living is really missing her friends and the staff at her day centre who she’s known for years.”
- “Being in the same environment with my husband 24 hours a day with less support and any avenues to escape such as going to work or being able to participate in leisure activities has made me feel very isolated”.
- “My son has lost his confidence and got depressed since losing his volunteer role.”
- “During lockdown I was feeling very emotional, exhausted and snappy. I used to spend a lot of time crying due to being sleep deprived. Now I have had a carers assessment and am receiving support I am feeling better”.
- “I can just about cope at the moment with two days a week activity, but not in the longer term.”
- “It’s so hard to know what it’s safe to do at the moment.”
- “It’s hard to cope with all the extra worry on top of all the usual caring duties.”

7 | Policy Context

7.1

The Care Act 2014, the Children and Families Act 2014, the National Carers Strategy 2008-2018, the Carers Action Plan 2018-2020 and the NHS Long Term Plan 2019 all make a significant shift in the approach to how carers are supported, acknowledging the important contribution they make. These documents place Carers on the same footing as the person they care for when it comes to accessing services they may need. This Strategy has been developed in response to the needs of carers in Merton and the statutory requirements. For a more detailed understanding regarding the Policy Context for this strategy, please refer to appendix 3.

7.2

Merton has a number of strategies and plans that are closely linked to the Carers Strategy, with aligned priorities and a number of the same partners. The key strategies we are working with are the **Merton Young Carers Multi-Agency Strategy** and the **Health and Wellbeing Strategy 2019-24**. It is intended that the Carers Strategy and the Merton Young Carers Strategy will be implemented together through a joint action plan, and progress updates will be collectively provided to the Merton Health and Wellbeing Board.



7.3

As part of a prevention work-stream, the Council is working alongside Merton Clinical Commissioning Group (CCG), Central London Community Healthcare (CLCH), local voluntary community sector organisations and Merton Health and Care Together on a number of prevention activities, all of which are relevant to the Carers Strategy. These include promoting prevention services in the Borough, developing a 'network of connectors', 'making every contact count' through staff training, supporting staff and providing leadership for Healthy Workplaces and embedding prevention in health and care pathways, such as opportunities to access healthy eating information or signposting to a service whilst accessing another social care, health or housing service.

7.4

Other local strategic links to the Carers Strategy include:

- The Special Educational Needs and/or Disabilities (SEND) Strategy 2020-2023
- Merton Autism Strategy 2018-2023
- South West London and St George's Mental Health Trust Strategy 2018-2023
- Merton Dementia Action Alliance
- Merton Local Outbreak Control Plan 2020

7.5

Full descriptions of some of these local strategies, and how we are forming links between them and the Carers Strategy 2020-2025, can be found in Appendix 4.

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Priority One:Identification, Recognition,
and Contribution

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of Carers

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Priority Three:Realise and Release
Potential

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Priority Four:

A Life Alongside Caring

8 | Priority One: Identification, Recognition, and Contribution

8.1

As identified in the NHS Long Term Plan, carers are twice as likely to suffer ill health as a result of caring, and earlier, better identification of carers can ensure that they get the support they require. The Long Term Plan makes the commitment to continue to identify and support carers, particularly those from vulnerable communities.

8.2

We aim to make sure that people who provide support are identified as carers at the earliest opportunity. This is so carers can be offered appropriate information, advice and support, and access to services to help them in their caring role. We aim to create a system where carers feel listened to and, where appropriate, able to contribute to the design and monitoring of services and in planning individual care packages.

Identification, Recognition, and Contribution:**8.3****What carers and people who work with them said:****8.3.1**

Identifying carers: Some people with caring responsibilities are not identified as a carer until later on in their caring journey. This can mean carers can miss out on support, including emotional support and financial assistance to which they may be entitled.

- “It took me 5 years to access carers services. A carers assessment seemed to be an afterthought for the team treating my son”
- “People don’t necessarily ask for support until things go wrong, services need to reach out to make sure carers know what is available and that there is an advantage to being in the system.”
- “Work has to be done through schools and GPs to identify carers.”
- “For some of us, it takes 2/3 years from initial concern to diagnosis. For all this time carers are caring without recognition.”

8.3.2

Carers identifying themselves: Significant numbers of people with caring responsibilities do not readily identify themselves as carers. Carers told us that they took a while to identify as a carer, for a number of reasons. For some, people do not want to assume the responsibilities of being identified as a carer. For some, they feel that this is just part of their family role. The concept of caring is assumed but not recognised in some families in ethnic minority communities. For example, in Urdu there is no direct translation for the work ‘carer’. Some carers told us that carers are not recognised by services at all stages of their caring journey.

- “I didn’t realise how recognising myself as a carer would help, I wish I knew then what I know now; it would have really helped me emotionally.”
- “Even when my daughter moved into supported living, I was still her carer and I have to continuously advocate for her.”

8.3.3

Carers assessments: There are clear benefits to undergoing a carer’s assessment, but some carers also told us they did not know what the assessment was, or how they could request one. Carers responding to our survey, who have previously undergone a carer’s assessment, felt better informed about the local services available to them and were more likely to say that they know where to find appropriate information and advice. However, professionals stated that often carers can refuse an assessment and think it is a test of how well they provide care.

- 81% of carers who have had a carer’s assessment would know where to find information and advice vs 56% who had not had a carers assessment
- 54% who have had a carer’s assessment felt informed about local services vs 37% who had not.

8.3.4

Raise awareness of Information and advice for carers: Carers and professionals feel there is a lack of awareness of what carers are entitled to, such as access to information and advice, specifically

on benefits, finances and activities. In Merton, the percentage of carers, who say they find it easy to access information about support has fallen since 2012/13, to 58%, and is now below the comparator group average. Services need to be promoted more widely across the Borough.

8.3.5

Listening to carers: There are areas of good practice, where carers told us they feel listened to by health and social care professionals and are able to contribute where appropriate. However, carers also told us how they have to fight to get their voices heard by health and social care services and this can be exhausting. There is scope to improve the way services listen to carers and ensure consistency across Merton.

8.3.6

Valued carers services: Organisations that support carers in the borough, are highly valued by many of the carers that use these services.

- “Support groups and lessons put on by Carers Support Merton are wonderful and have helped me to change my outlook.”
- “Carers support groups are a fantastic way to share best practice and provide support to each other.”

8.3.7

Support for family carers for under 18s: Family carers told us there are only a few support groups and activities specifically for them. Whilst carers in this group are able to attend support groups at Carers Support Merton and Kids First, family carers felt there were a lack of activities and opportunities.

8.3.8

Carer contribution: Carers would like more opportunities to feel listened to when services and support are being planned with their loved one and would like to contribute to the design, monitoring and re-provisioning of local services. This can sometimes present challenges when the customer chooses not to involve their carer. There are examples of good practice locally and we would like to build on this. Carers thought the Triangle of Care⁸ in the Mental Health Trust was a good approach but needed to be available for more carers.

- “Services work best when they listen to carers, as we have an expert knowledge of our loved one’s condition and their needs”

8.4.

Priority One: Identification, Recognition, and Contribution

Strategy Outcomes:

8.4.1

Identify carers: Promote the identification of carers at the earliest possible stage in their caring journey; this means working with partners, to identify and then support people in their caring role. We will focus on ensuring carers can access support, even if a diagnosis is still being sought.

8.4.2

Carers identifying themselves: Raise the profile of carers across Merton and promote the benefits to identifying and recognising yourself as a carer, including specific actions to engage with harder to reach groups and BAME communities.

8.4.3

Carers assessments: Work to ensure that people understand the benefits of having a carer’s assessment, with a view to increase the number of carers having these assessments.

8.4.4

Information and advice for carers: Improve our local information and advice offer to carers through a range of channels including the digital offer and aim to increase the local support available to carers.

8.4.5

Listening to carers: The council, local NHS services including those provided by the Mental Health Trust will work in partnership, to make sure the views of carers are recognised and they have opportunities to comment on the design and monitoring of services. We will aim to make sure that people and their carers have opportunities to share their views and help shape local services.

8.4.6

Valued carers services: We will raise the profile of Valued Carers Services and promote services more widely by sharing and promoting best practice and sharing carers stories.

8.4.7

Raise awareness of information and advice for carers: Work to make sure that staff in universal services, schools, GP surgeries, and other public and voluntary-sector providers understand the role carers play and the support that is available to them.

8.4.8

Support for family carers of under 18s: We aim to ensure adult and children’s services work together and take a whole family approach in identifying and supporting carers. Services need to adopt a whole family approach to assessment, planning and service provision which is more likely to result in support that is sustainable.

⁸ <https://www.swlstg.nhs.uk/publications/594-trust-strategy-2018-2023/file>

8.4.9

Carer contribution: We will work with partners across the health and social care sector to make sure carers are able to share their views, where appropriate, on individual care packages for the cared for person, and through monitoring and reviewing of services and training and support of

professionals. We will ensure that more carers of people with mental health issues have access to a 'Triangle of Care', key principles that support the carer role, whilst contributing to collaboration between professional, service user and carer.

How is the Covid-19 Pandemic Currently Influencing Priority One: Identification, Recognition, and Contribution?

Raise Awareness of Information and Advice for Carers:

- With such a large increase in carers, it is particularly important that we make sure they can identify as carers and receive the necessary information and advice to ensure the best outcomes for them and their cared for person.
- A decrease in engagement with statutory services means that opportunities to identify carers are potentially reduced.
- Throughout the Pandemic, Adult Social Care and Mental Health Trust staff worked hard to make regular contact via telephone to provide information, advice and reassurance to carers. We will need to consider how carers can access all the services they need.
- Voluntary Sector organisations reshaped their service offer to provide online support and telephone information, advice and assessments to carers. This supported a lot of carers, but also highlighted digital inequality.

Lack of Opportunities for Family Carers for Under 18s:

- It should be noted that people providing care since the Covid-19 Pandemic began are more likely to have children under the age of 18¹. This may have been due to the closure of schools and colleges, resulting in a higher number of dual carers.

Listening to Carers:

- It is really important for carers' views to feed into plans for both the recovery of services, and any new ones as we learn to live with Covid-19.

Sources

1. https://www.carersweek.org/images/CW_2020_Research_Report_WEB.pdf

9 | Priority Two: Health and Wellbeing of Carers

9.1

Carers can experience a range of health issues as a result of their caring role. A key local policy for this priority is the Health and Wellbeing Strategy 2019-2024, which not only has corresponding outcomes but also ways of working such as tackling health inequalities, and focusing on prevention and early intervention.

9.2

We know caring can be rewarding, but it can also make managing one’s own health and wellbeing more difficult. Therefore, we aim to support carers to manage their own health and wellbeing and make sure people with caring responsibilities are able to remain as physically and emotionally well as possible.

9.4

Priority Two: Health and Wellbeing of Carers

What carers and people who work with them said:

9.4.1

Planning for the future: Carers worry about the future, when they are no longer able to provide care and support and want to be able to plan for this.

9.4.2

Emergency planning for carers: Carers worry about what will happen to the person they care for in the event of an emergency.

9.4.3

Health and wellbeing of carers: Caring is often rewarding, with 70% of carers surveyed agreeing or strongly agreeing with this; but it can also be stressful too, with 98% of those surveyed agreeing or strongly agreeing with this.

Caring for a loved one can have a physical and emotional impact on the carer; 70% of carers told us their physical health has deteriorated as a result of their caring role and 67% said the same about their emotional health.

9.4.4

Health services and carers: Some carers told us that they often don’t have time to address their own health concerns and that they struggle to fit in health appointments for themselves due to a lack of time away from caring.

- “There are many reasons carers go without treatment; recovery times, being unable to find an appointment at a suitable time, and having no one to look after the cared for person are all reasons why carers don’t get the help they need.”
- “If an operation or medical procedure gets rescheduled last minute, everything falls through!”

9.4.5

Health and wellbeing activities for carers: Health and wellbeing classes for carers are well regarded by those who use them. However, carers told us that the main factors that prevent them from exercising, eating healthily and looking after their emotional wellbeing are time, cost, and existing health issues.

- “Where is the time to eat well and exercise when you’re caring all day and lacking sleep at night.”

9.4.6

Council processes and carers: Carers told us that navigating the council's processes and pathways can cause unnecessary stress.

- “The amount of time spent interacting with the system is mentally draining [...] The way the system works puts an extra-load on us!”
- “Merton's systems are time consuming, especially when something goes wrong.”
- “Why can't the different systems not talk to each other? We have to give the same information and evidence several times.”

9.4.7

Life after caring: Former carers can find it hard to adjust to changes in their life when their caring role ends. It may be that the person they care for has moved on or has died. Whilst there are some services and courses to support former carers, it is important to acknowledge the impact this has on a person's health and wellbeing.

9.5

Priority Two: Health and Wellbeing of Carers: Strategy Outcomes

9.5.1

Plan for the future: We aim to support carers to make a plan for the future. This will include supporting carers to manage wills and power of attorney; it also means supporting carers to have provisions in place for if they are no longer able to provide care.

9.5.2

Carers emergency plans: We aim to have a plan in place for the cared for person in the event of an emergency. This could be in the form of a carer's card. We will also work with partners to implement more widely Co-ordinate My Care⁹ and My CMC¹⁰ to consider the wishes of the cared for and their carers in the development of urgent treatment plans.

9.5.3

Health and wellbeing of carers: The Council, Clinical Commissioning Group, Mental Health Trust and other community connectors will work together to make sure that carers are supported to access the universal services they need, in a way that is accessible to them. We aim to improve the digital offer for carers in Merton as a mechanism for improving access to health and wellbeing information. We will also work with partners towards making sure that carers do not have to share the same information several times with professionals.

9.5.4

Health services and carers: We aim to make it easier for carers to manage the appointments and wellbeing of the person they are caring for and themselves.

9.5.5

Health and wellbeing activities for carers: We will look at how carers can be provided with affordable, flexible, and inclusive opportunities to take part in activities, which contribute towards good health and wellbeing, such as Merton Uplift workshops and support, fitness or mindfulness classes. This will involve working with partners such as local leisure centres, colleges, and community connectors.

⁹ <https://www.coordinatemycare.co.uk/>

¹⁰ <https://www.coordinatemycare.co.uk/cmc-videos/20-mycmc/>

9.5.6

Council processes and carers: We will review council processes, aiming to make these more efficient and easier to use, minimising the stress caused to carers trying to navigate the system.

9.5.7

Life after caring: We will review support and services on offer to former carers and recognise the valuable contribution that they have to offer.

How is the Covid-19 Pandemic Currently Influencing Priority Two: Health and Wellbeing of Carers?

Emergency Planning for Carers:

- The Covid-19 Pandemic has increased concern that stretched services would be unable to cover the gaps in care caused by a carer's illness or self-isolation.

Health and Wellbeing:

- The Covid-19 Pandemic has increased the pressure on the health and wellbeing of carers. Not only has the lack of respite from caring increased the possibility of burnout, but the type of care being provided is also more likely to include emotional support for a loved one as routines have changed. In Carers UK April 2020 research, one third of carers felt they were unable to look after their own health and wellbeing¹.
- Online wellbeing activities that Carers Support Merton have provided during lockdown have had high levels of uptake.
- A survey carried out by Alzheimer's UK stated that 95% of carers reported that the increased caring responsibilities due to the Covid-19 Pandemic has had an impact on their mental or physical health².
- Despite the Government now announcing that one person will be able to visit their loved one in a care home, it has been very distressing for carers who have been unable to see people living in residential and nursing care.
- Analysis of South West London Primary Care Covid-19 Risk Survey, July 2020, recognised the important role that informal carers play and identified carers as a group of concern at this time.
- The Government has announced its roadmap out of lockdown. However, measures are likely to still include social distancing and restrictive access, which inevitably will have an impact on carers.
- On a positive note, Carers will be prioritised to be offered Covid-19 vaccinations. This could increase the numbers of carers identifying themselves and needing support, so services will need to ensure that they have capacity to support this.

Continued overleaf...

How is the Covid-19 Pandemic Currently Influencing Priority Two: Health and Wellbeing of Carers? *Continued.*

Duration and Intensity of Care:

- There are a number of reasons why 70% of carers have increased the amount of care they provide. For 35% of these carers it is due to local day services closing, whilst 10% of the overall figure say that social and health care staff have decreased the amount of care they provide¹.
- 76% of carers responding to a survey by Alzheimer's Society, reported an increase in their caring responsibilities due to the worsening dementia symptoms of the person they care for, over the period of lockdown².

Accessing Services:

- The South West London CCG carried out engagement from March-August 2020. Results suggests that people are hindered from accessing health services due to concern about burdening the NHS, fear of contracting the Covid-19 Pandemic overriding other health concerns; lack of clarity about what is happening to services they usually use; and digital exclusion.
- Availability and access to social care services and short breaks has been limited through the pandemic, increasing the level of support the carer provides which has caused additional strain. As we move towards recovery, we will need to ensure that services that support carers to have a break are more widely available.
- Coordinate My Care (CMC) is an online urgent personalised care plan that enables the wishes and choice of an individual around their health and social care to be documented and visible to health services. All partners are working together to help increase awareness and understanding of the benefits of Co-ordinate My Care.
- Carers Support Merton has seen an increase in concern regarding wellbeing across all Carers Assessments since the beginning of the pandemic.

Sources:

1. https://www.carersuk.org/images/News_and_campaigns/Behind_Closed_Doors_2020/Caring_behind_closed_doors_April20_pages_web_final.pdf
2. <https://www.alzheimers.org.uk/sites/default/files/2020-09/Worst-hit-Dementia-during-coronavirus-report.pdf>

10 | Priority Three: Realise and Release Potential

10.1

People who provide care to a loved one often face multiple challenges; these challenges can make reaching employment and educational potential more difficult. We also know that many working carers experience substantial challenges in balancing employment and their caring responsibilities. Changing demographics and an ageing population mean that 3 in 5 people will end up caring for someone at some point in their lives. The Department of Health and Social Care has been working, as part of the Carers Action Plan 2018-2020¹¹ to raise the profile of carers with employers to enable carers to continue to work alongside their caring role.

10.2

This priority is about supporting carers to start or maintain employment, volunteering, training, and learning if they wish to do so. We will look to gain a better understanding of carers' needs and make sure they have opportunities to gain skills, which can help them to reach their employment and educational potential so that they are not forced into financial hardship by their caring role.



10.3

Priority Three: Realise and Release Potential

What carers and people who work with them said:

10.3.1

Carer friendly work environment: Carers feel being in employment has a positive effect on wellbeing, as well as providing them with a greater sense of identity. However, any job needs to have carer friendly work-practices such as flexible working, home working, and time off to attend appointments with the cared for person.

10.3.2

Financial hardship for carers: Despite Merton as a whole being a less deprived London Borough, carers who live in the east of the borough are more likely to have a lower socio-economic status than Carers who live in the west of the borough¹². Carers who work in lower paid roles face additional financial hardship; therefore, it is important for carers to know what benefits and financial support they are entitled to. There are also significant financial implications for people if they are not or no longer able to work. Some people can lose their income immediately if they suddenly need care or are looking after someone that needs care. Therefore, no matter what someone's financial circumstances are, people can experience extremely difficult and complicated financial hardship.

¹¹ https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/713781/carers-action-plan-2018-2020.pdf

¹² https://www.merton.gov.uk/assets/Documents/www2/Merton%20Story%20FINAL_June_2018.pdf

10.3.3

Carer friendly work practices: The majority of carers surveyed, who are in employment, told us that their employer was accommodating of their caring responsibilities. However, we understand that carers can face difficulties with their employer. Carers in Merton have had to reduce their hours, compromise their position, or give up employment.

10.3.4

Career progression for carers: Carers surveyed told us that career progression has been made more difficult because of their caring responsibilities. 1 in 6 carers give up work or reduce their hours to care and many of these employees will be the most valuable staff, the 45-64 year-olds at the peak of their careers¹³.

- “I had to leave my job two-years ago, now I’ve gone back but in a far lower position in a sector I don’t want to be in”
- 78% of carers feel their caring role has made career progression more difficult for them.

10.3.5

Learning and development for carers: Carers who are not in employment or education said that they would like to undertake training and learning to improve the skills they have. However, some find the opportunities unaffordable and inaccessible.

- “There are courses carers can do, but if you want something more skilled it costs a lot!”
- “I would like to access Adult Ed courses to progress my career and learning, but these are very expensive”

10.3.6

Digital skills for carers: Carers told us they would appreciate more opportunities to learn IT and digital skills. A report by Carers UK and the Good Things Foundation (previously known as the Tinder Foundation) concluded that poor knowledge of and access to IT is a key issue for carers. With more organisations moving over to digital platforms, there is an increasing need to support carers to develop the necessary skills they need to access services.

- In Merton, 660 known carers do not have access to the internet or email. This affects not only their ability to find work, but also provides another barrier to accessing information and advice; and staying connected.
- “IT training is essential for many carers, especially those that have been out of work for a number of years and are behind in this.”

10.3.7

Volunteering for carers: There is appetite amongst carers to participate in volunteering. 14% of carers surveyed would like to volunteer more.

¹³ <https://www.employersforcarers.org/about-us>

- “Volunteering can be valuable but many volunteering positions require a reference; it is very hard for some carers to get references due to not having worked for a number of years or being socially isolated.”

10.4

Priority Three: Realise and Release Potential: Strategy Outcomes:

10.4.1

Carer friendly work environment: By recognising the needs of carers, employers can hold on to experienced staff and reap the rewards of creating a supportive working environment for carers. The council and NHS organisations, two of the largest employers in the borough, aim to review workplace practices with their organisations and ensure carers within these organisations feel supported at work.

10.4.2

Financial hardship for carers: We need to acknowledge the importance that demographics play in realising and releasing potential for carers in Merton. Therefore, we will work with partners to identify what actions would need to be taken to ‘bridge the gap’ between the east and west of the borough.

10.4.3

Carer friendly work practices: We aim to promote carer-friendly work practices to employers across the borough. This could mean working with local employers and the Chamber of Commerce to develop a set of standards for which recognition can be awarded, if carer-friendly practices are adopted.

10.4.4

Career progression for carers: We will look at how we can ensure carers are able to access to affordable training and learning, which can help them gain the skills they need to reach their employment potential.

10.4.5

Learning and development for carers: We aim to review affordable learning and development opportunities for carers. Adult Social Care will also review the Carer’s Discretionary Grant, to see how it can be used more creatively to support carers, which will include:

- Technology to help improve skills and stay connected
- Short breaks
- Assistive technology to support cared for safety and carer reassurance.
- Learning and development opportunities

10.4.6

Digital skills for carers: We will explore ways to support carers to gain IT and digital skills. This will mean carers are better able to stay connected, access information and advice, and gain the necessary skills for the workplace.

10.4.7

Volunteering for carers: We want to make sure carers are adequately supported to take advantages of opportunities to improve their skills and knowledge, including volunteering placements. This links to the Merton Sustainable Communities Plan 2020-2025, which aims to remove barriers to volunteering across the borough.

How is the Covid-19 Pandemic Currently Influencing Priority Three: Realise and Release Potential?

Work:

- People providing unpaid care since the start of the Coronavirus outbreak are more likely to be in paid work, and in total 26% of all workers are juggling work and unpaid care².
- 1,230 respondents who indicated they were in paid work before the crisis were asked for details about their current working situation. Almost a fifth (17%) reported either having lost or given up their job or being unable to work because of the social distancing rules¹.
- More opportunities for flexible working could improve the work/life balance situation for some carers.

Finance:

- According to research this year, the vast majority of carers have seen an increase in household costs - 81% said they were spending more, and the biggest reason for an increase was spending more on food¹.

Learning and development:

- Throughout the Covid-19 Pandemic, a number of resources have been developed online to provide support including courses via Merton Adult Learning, the Recovery College, and Department of Work and Pensions. However, not all carers are able to access online learning resources.

Sources:

1. https://www.carersuk.org/images/News_and_campaigns/Behind_Closed_Doors_2020/Caring_behind_closed_doors_April20_pages_web_final.pdf
2. <https://www.alzheimers.org.uk/sites/default/files/2020-09/Worst-hit-Dementia-during-coronavirus-report.pdf>

11 | Priority Four: A Life Alongside Caring

11.1

The Care Act 2014 has led to a significant shift in approach to the way that carers can expect to be supported by the Local Authority with promoting wellbeing being at the heart of the legislation.

11.2

Having a strong social network is important for emotional wellbeing, but it is also important for our physical health. With that in mind, this priority focuses on ensuring carers are supported to have a family, community, and social life alongside their caring role; this links to the Promoting Mental Health & Wellbeing priority area of the Health and Wellbeing Strategy, which aims to reduce loneliness and increase social connectedness.

11.3

Priority Four: A Life Alongside Caring

What carers and people who work with them said:

11.3.1

A break from caring: Having a break was a recurring theme throughout the engagement. 72% of carers surveyed were dissatisfied with the amount of breaks they were able to have. Carers also told us that there should be a greater variety of breaks available to them.

11.3.2

Unplanned breaks from caring: Carers told us of their frustration and worry that any break from caring must be planned in advance, meaning that plans can't be made in the short term.

- "I want something that will allow me to do something in the spur of the moment".
- "I worry about needing support in an emergency and what would happen"

11.3.3

Planned breaks for caring: Carers told us they were unable to plan holidays in advance, because Merton's current offer means respite cannot be confirmed on an annual basis and there is no way of having an allocation (with the exception of Learning Disability bed based respite).

11.3.4

Carers connected with family and friends: The vast majority of carers surveyed (85%) feel socially isolated as a result of their caring responsibilities. 29% of Carers surveyed felt dissatisfied with the amount of time they spend with their family and 57% of carers surveyed were dissatisfied with the amount of time they spent with friends.

11.3.5

Carers connected with others: In the focus group discussions, many carers told us they feel they would benefit from befrienders, peer support and other forms of volunteer support.

11.3.6

A quality service for both cared for and carer:

It was clear that the enjoyment of the cared for person, whilst the carer was taking a break without their loved one, was also important.

- “Both of us have to enjoy the respite. I can’t relax unless I know [the cared for person] is having fun and being looked after”

11.3.7

A break with a loved one: Some carers told us that a break does not necessarily have to be time away from the cared for person; it could be an activity they can both enjoy together.

- “A break could be something that we do together; an extra pair of hands and eyes to help look after [the cared for person] would help me to relax.”
- “I used to attend ‘Stay and Play’ activities with the cared for person. They were great and you could meet other carers in similar situations. Unfortunately, these were stopped.”
- “It’s great coming to this support group. I get two hours to relax and talk to people whilst my husband enjoys taking part in activities in another room. When he has a good time, I can relax and have fun myself.”

11.4

Priority Four: A Life Alongside Caring: Strategy Outcomes:

11.4.1

A break from caring: We will work towards making sure support in the community provides a variety of options for customers and carers.

11.4.2

Unplanned breaks from caring: We will work with all partners with the aim to support carers when an unplanned break is needed.

11.4.3

Planned breaks for caring: We will consider the council’s processes relating to respite, so that carers can plan time away in advance.

11.4.4

Carers connected with family and friends: Review the way we use and distribute Carers Discretionary Grants, with a view to provide carers with greater flexibility with how they use these to support themselves.

11.4.5

Carers connected with others: Review the current offer relating to befriending and peer support for carers, with a view to strengthening the offer. We will also review volunteering support to carers in Merton. Continue to promote the carers support groups available in the borough, ensuring those who are new to caring are aware of the support services available to them.

11.4.6**A quality service for both cared for and carer:**

Make sure the views of carers are heard when reviewing and making changes to current services that support carers in Merton. We aim to ensure there are services available that can give the carer a break whilst the cared for is engaged in a meaningful activity.

11.4.7

A break with a loved one: We aim to ensure there is a range of options exist for carers to take a break, including activities that can be done with the cared for person.

How is the Covid-19 Pandemic Currently Influencing Priority Four: A Life Alongside Caring?

Carers concerns around current risk:

- Carers have reported feeling worried about the current risks of Covid-19. Lots of carers have been self-isolating to support a loved one that has been shielding and have experienced isolation and have felt the additional strain of an increased level of caring.
- Carers have said they feel increasingly concerned about the future and what support and services will be available to support them with their caring role¹.
- As we move towards re-opening of services, careful consideration needs to be given to supporting carers that have been isolated and providing additional support to their loved ones for an extended period of time. We will need to understand and respond to the impact of this.

Digital Accessibility:

- Those without digital access will have been unable to access activities and support to the same extent as other carers. It is therefore important to increase digital accessibility so all carers are able to explore the wide range of options available to them.

Declining independence/skills development for cared for person due to lockdown:

- There is concern that the independence, and related skills, that a cared for person previously had will be lost over periods of shielding. This could then cause extra strain for carers, such as limiting their ability to go and meet friends.

Continued overleaf...

Sources:

1. https://www.carersuk.org/images/News_and_campaigns/Behind_Closed_Doors_2020/Caring_behind_closed_doors_April20_pages_web_final.pdf

How is the Covid-19 Pandemic Currently Influencing Priority Four: A Life Alongside Caring? *Continued.*

Short Breaks:

- Availability and access to short breaks has been affected by the Covid-19 Pandemic.
- When asked about what the biggest challenges carers face are, 'not being able to take time away from caring' was selected by 66% of respondents².

Awareness of the role of carers has increased:

- Awareness of unpaid carers is higher since the outbreak of coronavirus according to the general public. Half (48%) of those who had never been a carer said they were either more aware or much more aware of unpaid carers².

Sources:

2. https://www.carersweek.org/images/CW_2020_Research_Report_WEB.pdf



12 | Next Steps

12.1

A time limited, Carers Strategy Multi-agency Implementation Board will be established to oversee the strategy and implementation of an action plan. The group will include carer representatives (including young carers), senior managers/commissioners in Merton Council, Merton Clinical Commissioning Group and South West London and St Georges Mental Health Trust and voluntary and community sector organisations.

12.2

The Carers Strategy priorities will align with the priorities of the Young Carers Multi-Agency Strategy 2019-22, and will be jointly implemented.

12.3

An implementation plan will be developed for each year of the Strategy and reviewed annually. This sets out timescales and leads for implementing actions and expected benefits and outcomes. We recognise that the Covid-19 Pandemic will influence the prioritisation of actions for the next year, but over the longer term our intention is to still meet our wider strategic objectives.

12.4

The Implementation Board will monitor progress against the actions, and report to Merton Community and Housing Recovery and Reset Board, the Children's Trust Board and provide an annual update to the Merton Health and Wellbeing Board.

12.5

The delivery of the Strategy is based on working collaboratively and in partnership to use resources within the system more effectively. Where possible, the Implementation Board will seek additional funding opportunities to widen the local offer to Carers in order to achieve the vision of the Carers Strategy.



13 | Organisations that provide information, advice, and support to carers in Merton

There are a number of organisations that can support Carers in Merton, however listed below are a few key providers:

Carers Support Merton

Carers Support Merton is an independent charity that provides information, advice, and support services to local carers via the Carer's Hub. To see the full range of services and support on offer, or to refer a carer to Carers Support Merton, please visit the website.

Website: www.csmerton.org

Telephone: 020 8646 7515

Alzheimer's Society

Alzheimer's Society is the UK's leading care and research charity for people with dementia, their family and carers. Alzheimer's Society offers a range of valuable information and ongoing support to people affected by dementia and their carers. They provide a range of services and activities which can be accessed by both carers and people with dementia and specific outreach programmes for carers.

Website: alzheimers.org.uk

Telephone: 020 8687 0922

Merton Mencap

Merton Mencap is a local, independent charity supporting children, young people and adults with a learning disability and/or autism, and their family carers. The charity has been at the heart of Merton's community for over 50 years; its support of parents and carers includes:

Adults First

A forum for carers of adults with a learning disability and/or autism aged 18+, led by a steering group of carers.

Kids First

A forum for parents of children and young people aged 0-25 with special needs, led by a steering group of parents.

Talk Autism

A forum for parents and carers of children, young people and adults with autism.

Carers Community Adviser

Supporting carers of adults with a learning disability and/or autism including providing carers' assessments.

Carers Groups

Events & outings for carers of adults with a learning disability and/or autism

Website: mertonmencap.org.uk

Tel: 020 3963 0599

Adult Social Care, Merton Council

The Adult Social Care team can provide care and support to people over the age of 18 and their carers to live as well as possible with their disability, illness, or other problem.

If you, or someone you know, needs support for any of the reasons above please contact the First Response Team, who are part of Adult Social Care.

Website: <https://www.merton.gov.uk/social-care/adult-social-care>

Telephone: 020 8545 4388

Email: ASCFirstResponse@merton.gov.uk

Merton Local Directories

Merton Local Directories is an online directory of services, hosted by the London Borough of Merton. Here you can search different services available to adults, children and families, and carers in Merton.

Website: <https://directories.merton.gov.uk/>

As a carer you may be entitled to help with benefits, employment or training. Find out more about Carer's Allowance and Bereavement Support on www.gov.uk or visit your local jobcentre.



14 | Members of the Carers Strategy Task Group

John Morgan	Assistant Director Adult Social Care
Heather Begg	Adult Social Care Commissioner
Jacob Lawrence	Management Graduate Trainee
Jennifer Quested	Management Graduate Trainee
Sally Burns	Carer Representative and Member of Adults First
Ann Traynor	Clinical Manager, SWLSTG MH Trust
Daniel Butler	Senior Public Health Principal, Public Health
Avril Doyle	Operations Manager, Carers Support Merton
Bill Gibbons	Service Manager, Alzheimer's Society
Daniel Steiner	Dementia Adviser, Alzheimer's Society
Andrew Whittington	CEO Merton Mencap
Rebecca Adeojo	Senior Transformation Manager, SWL CCG Merton
Dave Curtis	Head of Healthwatch Merton
Hannah Pearson	Primary Care Commissioning Manager, CCG
Liz Sherwood	Carer Representative
Drukshan Sarwara	Carer Representative
Kate Jennings	Commissioning Manager – CSF
Paul Bailey	MSCB Safeguarding Development and Policy Manager
Jennifer Lewis-Anthony	Associate Director Social Work, SWLSG MH Trust
Mihoko Ogawa-Higgins	Carer Representative
Ayda El-Deweiny	DWP – Disability Champion
Tracy Weight	CEO Carers Support Merton
Patrice Beverney	Head of Mental Health, CCG
Dr Mohan Sekeram	Carers Lead, Primary Care

15 | Policy Context

15.1

Care Act 2014 Adult Social Care has a duty under section 10 of the Care Act 2014¹⁴ to undertake an assessment of any carer who appears to have any level of need for support. A carer's assessment must explore the carer's need for support, whether the carer is able to continue caring now and in the future. A carer's assessment must consider the impact on the carer's activities including the carer's desire and ability to work, opportunities to partake in education, training or recreational activities and opportunities to have time to themselves.

15.2

Children and Families Act 2014 Children, Schools and Families has a duty under section 96 of the Children and Families Act 2014¹⁵ to ensure young carers and their families are identified and their needs for support are assessed. All young carers are entitled to an assessment of their needs from the local authority. Adults and Children's services have a joint responsibility to ensure that young carers/carers have a transition assessment as they approach adulthood and whilst they are in transition.

15.3

The NHS Long Term Plan¹⁶ commits to identifying and supporting carers, particularly those from vulnerable communities. The NHS will look to develop quality marks for carer-friendly GP practices and encourage the national adoption of carer's passports, which identify someone as a carer and enable staff to involve them in a patient's care. The NHS will also ensure that electronic health records allow people to share their caring status with health professionals, have back up plans, and support when needed.

15.4

The DoH Carers Action Plan June 2018 outlines the cross-government programme of work to support carers in England over the next 2 years and builds on the National Carers Strategy¹⁷. The DoH Action Plan focuses on delivery and progress that can be made in the near future to give visibility to the range of work that is planned or already underway across government to support carers, their families and those that they care for.



¹⁴ Care Act 2014 duties to Carers in Sections 9 to 13, Care Act 2014; Chapter 6, Care and Support Statutory Guidance; Care and Support (Assessment) Regs 2014; Care and Support (Eligibility Criteria) Regs 2014

¹⁵ <http://www.legislation.gov.uk/ukpga/2014/6/section/96/enacted>

¹⁶ <https://www.longtermplan.nhs.uk/>

¹⁷ <https://www.gov.uk/government/publications/the-national-carers-strategy> published in 2008 as a 10 year strategy.

APPENDIX 4 | 16 | Local Strategic Link Summaries

16.1

Merton Autism Strategy 2018-2023 is a joint strategy between the Council and the local NHS Clinical Commissioning Group. Like the Carers Strategy, it was written in collaboration with a range of partners.

The strategy sets out the vision that Merton will be an 'autism-friendly borough in which people are able to reach their full potential at all stages of their life'. Within this, it is stated that providers will actively involve people with autism, their families and carers in the design of services and co-production will be promoted across the borough.

Links can be drawn to the Information, Recognition, and Contribution priority area of this strategy, which sets out the vision that, where appropriate, carers will be able to contribute to the design of services and individual care and support plans.

16.2

Health and Wellbeing Strategy 2019-2024 is governed and monitored by the Merton Health and Wellbeing Board. The strategy identifies target outcomes across the different stages of the life course, in key healthy settings. The key healthy place attributes are: promoting mental health and wellbeing, making healthy choices easy, protecting from harm.

The key attributes and outcomes are based on engagement with residents, and analysis of current health outcomes across the borough. The challenges exposed include the health inequality between the east and the west of the borough, loneliness, and poor air quality.

16.3

Merton Dementia Action Alliance is an initiative that aims to help make Merton a more dementia friendly borough. The alliances priorities for 2019/20 include cross-sector collaboration with carers, which includes engagement and co-production of services with carers; and a focus on involvement of BAME and faith groups. Both of these priorities relate to the Information, Recognition, and Contribution priority area.

16.4

South West London and St George's Mental Health Trust Strategy 2018-2023 aims to improve access to services, achieve quality outcomes for patients, enable transition and require pathways allowing seamless movement between services, provide more interventions in the community and increase the level of engagement. The Strategy aims to supports carers in the following ways:

- Increase secondary prevention activities for carers.
- Improve access to services and information available to carers.
- The 'Triangle of Care'¹⁸ has been relaunched as an initiative to ensure a working collaboration between the patient, professional and carer that promotes safety, supports recovery and sustains wellbeing.
- Involvement plan published in 2018, with carers at its heart.
- Patient Advice and Liaison Service supports service users and carers

¹⁸ The Trust developed a Carers' Charter (2017) which sets out the Trust's commitment to identify carers and support and involve them through the concept of the 'Triangle of Care', developed by the Carers Trust.



16.5

SEND Strategy 2020–2023 is defined as Merton’s strategy for meeting the needs of children and young people aged 0-25 who have special educational needs and/or disabilities.

The strategy is aligned with the Merton Autism Strategy 2018-24, and the priorities are based on those of Merton Children and Young People’s Plan 2019-23, these are Being Healthy; Staying Safe; Enjoying and Achieving; Getting involved, having a say; Becoming Independent; My Merton – connection with family, friends and the community. An action plan is being developed alongside this strategy, which will include actions for continued and improved support for family Carers.

16.6

The Covid-19 Outbreak Control Plan for the London Borough of Merton was created to outline Merton’s current plan for how the council will work with Public Health England’s London Corona Virus Resilience Cell (LRCR) and local partners to complement that effectiveness of the NHS test and contract tracing service (NHST&T). The plan is part of the national Covid-19 policy to protect from Covid-19 infections, and prevent or flatten a potential second wave.

The key steps underpinning the local approach are:

- Identification of high-risk settings and vulnerable communities
- Pro-active communication and engagement
- Notification/ Response Triggers
- Risk Assessment
- Control Measures

17 | Carer Definitions

The Care Act defines a carer as “an adult who provides or intends to provide care for another adult”. The Children and Families Act 2014 extends the rights of carers to Family Carers, who look after an ill or disabled child, and Young Carers, under the age of 18.

This strategy focuses on all carers over the age of 18, including family carers for under 18s. For young carers, please access the Merton Young Carers Multi-Agency Strategy 2019-2022. The Carers Strategy is aligned with the priorities of the Young Carers Multi-Agency Strategy 2019-22, and they will be jointly implemented.



There are many different types of carer and a carer may belong to more than one of these groups. The word ‘carer’, in the context of this strategy, refers to any of the below groups:

Young Carer

Young Carers are children and young people who look after someone in their family, usually a parent or sibling, who has a disability, a long term illness or is affected by mental ill health or substance misuse.

Parent Carer of a Child

A carer over 18, who provides care to an ill or disabled child for whom they have parental responsibility, continuing into adulthood.

Adult Carer

A carer over 18 who provides care for another adult.

Dual Carer

Sometimes known as a ‘Sandwich carer’; a carer who provides care for more than one person. Often, the cared for people are from different generations, for example, a dual carer could provide care to both an elderly parent and a young child.

Lifelong Carer

A carer who provides care to someone with a life-long illness or disability and intends to do so indefinitely. Carers in this group usually care for their disabled son or daughter; or spouse who requires long-term care.

Former Carer

Someone who no longer provides care. This is usually due to a change in circumstances. Some former carers can find it challenging adjusting to a life after caring, especially if they have been providing care for many years.



