

Our overall message to systems planners in terms of carers

- Planning must be carer sighted ie understanding of the role that carers play in each of the nations across the UK. Carers in the UK provide unpaid care to the value of £132 billion a year – equivalent to the NHS. The majority are invisible to health systems in particular, but many are also outside of formal social services, and even wider social care systems and community organisations.

Employers need to ensure that their staff members can juggle work and care

- All employers consider what might happen for their staff if they need to provide unpaid care for someone because there is no alternative available and they are at risk. Whilst many carers will try to work flexibly, this may be impossible for some. Our message to employers, including in the health or social care sector, is that they will need to consider this very urgently and make new or extra leave and work provisions to ensure that workers do not lose their job or extensive amounts of pay.

Services must be in place for the following situations

- If carers become ill themselves with COVID-19, they may not be able to provide care.
- If the carer lives with the person being cared for, robust plans to support the person with care needs must be developed. It is essential that services are not withdrawn without clear risk planning. This equally applies to a clear process for providing emergency support for those carers who provide care with no support from formal social care.
- Carers may not always live with the person being cared for. 76% of those providing less than 20 hours of care per week do not live with the person they care for⁴.
- In the event that carers are not able to support the person needing care eg travel or are looking after children unable to attend school, then it is essential that the local health and care services have a clear picture of the person needing support.
- Carers may have long term conditions or disabilities themselves that increase their vulnerability, which must be factored into planning.

Who needs care in a local area?

- When health and social care are developing their plans for who is most in need or at risk in the community, this needs to take on board the fact that many will be unknown to health, care and even community services.
- This is often because they are being cared for by family or close friends. It is essential that national planning takes this on board, and locally health, social care, GPs and community organisations must work together to get the best possible picture of this.
- Data and intelligence pooling could be a real asset to ensure that we get the best picture possible of those most in need. Carer identification needs to be a core part of this.
- Information systems, like 111 should start collecting data on whether someone is a carer and ask this question to anyone who either reports symptoms or has to self-isolate ie if they provide an important level of care to someone who might be vulnerable in the community. This should then lead to an appropriate response from the authorities.

4 NHS Information Centre for Health and Social Care (2010) Survey of Carers in Households 2009/10