

NHS Tees Valley CCG

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24 June 2021

Jennifer Metcalfe
Healthwatch Stockton-on-Tees
Carers Way
Newton Aycliffe
County Durham
DL5 4SF

Dear Jennifer,

Re: The Impact on Unpaid Carers – Living with Coronavirus/Covid-19, December 2020 – March 2021

Thank you very much for sharing the latest Healthwatch Stockton-on-Tees report with us, which provides insight from unpaid carers in relation to the Covid-19 pandemic. We value the contributions of unpaid carers enormously and recognise that the pandemic has had a significant impact on their lives.

It is fantastic to know that unpaid carers have had positive experiences of health and social care services, particularly valuing communication, regular contact and quality of care. We also recognise that many unpaid carers are now providing more care than they were before the pandemic, and that this has adversely impacted their mental health.

As a Clinical Commissioning Group, it is important that we do everything we can to ensure that unpaid carers have access to the support they require.

We have reviewed the recommendations assigned to us in the report and provided comments below in the table below:

Recommendation	Comments
Place high priority on guidance, information and advice for carers that is adapted to their needs.	We aim to commission services which are responsive to the needs of carers, as well as raising awareness of carers in health and social care professionals and facilitating their representation across services and systems, all of which should ensure that guidance, information and advice are provided to carers in the most effective way.

During commissioning of health services, we undertake 'Equality Impact Assessments' to assess how our work will impact people with protected characteristics. Since being a carer is considered a protected characteristic, we identify what we need to do to ensure that the service being commissioned is representative of carers.

A number of GP Practices in Stockton-on-Tees offer the option of registering as a carer which ensures that people receive information on available help and advice, as well as signposting to carer support organisations. To support this, we are able to raise awareness of new / updated services and resources to GPs through our monthly newsletter, which goes to all GP Practices in the Tees Valley.

We will also make sure commissioned services and projects are regularly assessed, with Carer input, to determine whether they are working, ensuring that carers have an opportunity to express how information should be presented.

Prioritise carers health and wellbeing and deliver targeted mental health for carers and those that they care for. Carers can receive emotional wellbeing and mental health support from the 'Impact on Teesside' service

https://www.impactonteesside.com/.

In addition, specific targeted support is funded by Local Authorities through Middlesbrough and Stockton Mind (who are a partner of the Impact service):

http://www.middlesbroughandstocktonmind.org.uk/services-support/carers-support.aspx

Many services who provide respite to carers and those that they care for closed or reduced their provision during lockdown in response to government guidance, however we are working with providers to reopen them and prioritise access for those most in need and many clients are now being offered 50% of their previous offer.

Delivery of healthcare appointments that take into account the different communication needs of carers.

Throughout the pandemic we have embraced new forms of communications which some carers have preferred. An example of this is virtual communication via Microsoft Teams, as this means taking less time away from work or caring and being able to include some carers who were previously unable to engage. Despite this, we recognise that some carers have struggled with new technology.

The Standard Operating Procedure (SOP) for general practice in the context of coronavirus (COVID-19) states that general practice teams and Primary Care Networks should continue to deliver accessible services (including face-to-face appointments and online consultations), connecting patients to the right service for their needs. Both options should be available subject to what is clinically appropriate. Further information can be found here (see sections 6.1 and 6.3).

Thank you again for sharing these findings with us, and we look forward to reading the next report.

Kind regards,

Alex Sinclair
Director of Commissioning, Strategy and Delivery – Children, Young People and Maternity
Link Director, Stockton Local Area