

## Summer 2020 newsletter

Joined Up Care Derbyshire is the name for Derby and Derbyshire's Sustainability and Transformation Partnership (STP). You can find out more information in our 'Beginners' Guide to Joined Up Care Derbyshire' which can be found on our [website](#).

## Our response to the Covid-19 pandemic

First and foremost we recognise the pain and suffering caused from the Covid-19 pandemic and the impact it has had on our local population. In Derbyshire we made provisions for a significant increase in beds to treat a surge of patients with respiratory illnesses resulting from Covid-19. Many patients required additional oxygen support and sometimes ventilation. There was an increase in patients requiring these beds, but thankfully we did not reach the upper limits of the beds we had available. Alongside this, there was a significant community effort to care for and ensure medical care and basic supplies such as food were available to patients who were required to shield due to their vulnerability to infection. There was an increase in the numbers of community beds made available to ensure more acute hospital discharges could be made to boost capacity, and considerable liaison with the care homes sector to ensure access to personal protective equipment (PPE) and give support and advice on the interpretation of enhanced guidance on infection, prevention and control procedures.

Aside from people getting ill, and the tragic loss of life, we know that coronavirus and the measures to reduce its spread have had a huge impact on health and

wellbeing and substantially changed the way people access care and support.

Some of the changes in how people accessed care and support were due to the way services reacted to the pandemic. This included the need to maintain safety or respond to a reduction in staff - cancelling, postponing or changing appointments, meaning care was either not available or available but not in the usual format.

Other changes were brought about by individuals themselves avoiding seeking help, possibly for fear of being a burden, or for fear of contracting Covid-19. The original message from the Government 'Stay Home, Stay Safe, Save Lives and Protect the NHS' clearly encouraged this response. However, the message has now shifted to 'Help us to Help You', to ensure that we encourage as many people as possible to receive the care and support they need. It is important to note that essential services have continued throughout the Covid-19 response, including accident and emergency work and urgent cancer care. Essential services remain open as usual and patients should continue to access them via their GP, 111, urgent treatment centres and emergency departments, or by calling 999 when there is a threat to life.

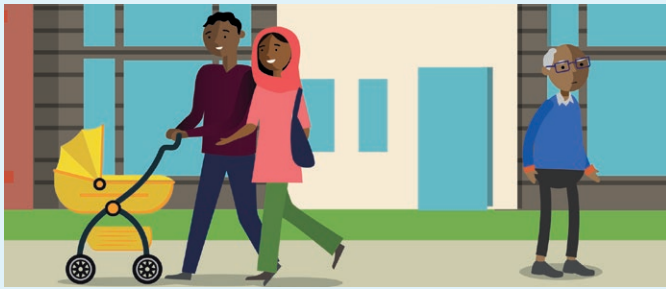
## Help us help you get the treatment you need.

NHS 111, GPs and hospitals are still providing the same safe care they have always done, just in slightly different ways.

#HelpUsHelpYou



## How will services be restored?



**Moving forward, Joined Up Care Derbyshire has a plan for how it will begin to restore health and care services, now that the initial peak of pressure from the Covid-19 pandemic has subsided. Some of the steps we are taking include:**

- **Identifying** the most clinically urgent cancer patients for surgery, including use of the independent sector
- **Restoring** chemotherapy and radiotherapy services back to full capacity
- **Reviewing** all surgery lists, prioritising patients and reintroducing surgery and outpatients services incrementally
- **GP referrals** to hospitals beginning to return to pre-pandemic levels over time, while continuing to focus on high-risk patients
- **Maintaining** increased community services capacity to support discharge from hospital, support care homes and predominantly support young patients, patients with respiratory conditions, and people with learning disabilities
- **Seeking** to understand the potential mental health impact of the pandemic, while making permanent the new 24/7 mental health helpline, providing ongoing support for high risk and urgent patients and developing a specific suicide-prevention plan
- **Continuing** segregation of infected and non-infected patients across all services
- **Understanding** the impact on screening and vaccination/immunisation programmes and promoting these in line with national guidance
- **Running** virtual outpatient appointments as the default and enabling all GP practices to become digitally enabled for online consultations
- **Restoring** cardiology services in hospitals and at home

We will keep a constant check on the development of the pandemic locally and nationally and will remain fully prepared to go back to full Covid-19 provision if this is required, in line with national and regional guidance. As we restore our services we need to ensure that:

- **We protect the long-term welfare of our staff** to be able to treat the numbers of extra patients. Our staff have been fantastic in their response to the pandemic, and affected in many different ways by Covid-19. These include being directly infected and being ill, having suspected symptoms so having to self-isolate, being among the shielded groups so having to isolate, being unable to work due to individual risk assessments of their ethnicity or vulnerability status, conflicts with childcare provision and work, burnout and trauma from the very challenging work they have had to undertake and the environments in which they have had to perform, and other reasons. In addition, our staff have worked tirelessly for many weeks to keep services running, so we must ensure that they can rest appropriately. We must help our staff recover before we take too many steps forward in recovering our services
- **Our stocks of personal protective equipment (PPE)** are able to match service provision to ensure services can commence and continue safely to protect staff and patients
- **We can support patients** to continue to use services in a different way. We have seen reductions of more than 50% in people attending our accident and emergency departments (A&Es) and while some of this may have been patients who perhaps might have been best to come to A&E but were deterred, we expect also that many patients with minor injuries or illness have decided not to attend A&E and either use an alternative service or self-care, which is a message we have been trying to send to the public for many years
- **We have the appropriate equipment** to carry out operations, at a time when the entire NHS is aiming to cater for a backlog of surgery. Access to anaesthetics gas and certain drugs might limit how many operations we can perform
- **We start to understand** the greater impact of the pandemic on the population, both for routine care and where there might be the potential for greater complications due to patients being treated later than would normally have happened
- **We understand the knock-on implications** for different sectors and services within health and social care, not least the secondary impact of operations on primary and community care services. While the NHS is seeing a reduction in demand, colleagues in social care across children's and adults' services are still responding to the first Covid-19 peak.

# Transformation of services



**While recognising the impact the pandemic has had on individuals, the experience has also provided a significant opportunity for providers of health and care services to transform the way we work together and how services are delivered. Throughout this newsletter we will present some excellent examples of how the Derbyshire system has come together, to work differently, and deliver rapid transformation.**

For example:

- **Triage First** - Triage First means that every patient contacting the GP practice is spoken to first via telephone or online, before making an appointment in order to determine which health professional is most appropriate to their health need, and to determine the most appropriate method for that need to be met, for example, online message, video consultation, telephone consultation, or face-to-face appointment. Triage First is important to reduce avoidable footfall in practices and protect patients and staff from the risks of infection, but can also be much more convenient for patients who may not need to leave their own home. Research shows that it can also improve access for people with specific information and communication needs, including those with a disability or hearing loss, carers and people who feel apprehensive about accessing health services, for example for a mental health, sensitive or embarrassing problem. More than 2,000 consultations were carried out online weekly in May and June 2020
- **Virtual outpatient appointments** have increased in our local hospitals to prevent patients from having to physically attend hospital, keeping people safe and well. There has been a shift from 4% of appointments being offered virtually prior to the Covid-19 pandemic, to 61.7% (84.1% Chesterfield Royal Hospital and 51.9% University Hospitals of Derby and Burton) during the pandemic. Feedback from people who have experienced virtual appointments is in the main extremely positive
- **The implementation** of the 'Mental Health All Age, Open Access Helpline', received an average of 50 calls per day, providing 24/7 urgent mental health support, advice and triage to those requiring urgent mental health support, including access for children and young people and their parents/carers, and people with learning disabilities and/or autism. For more information see article on page 5
- **A system-wide care home cell**, with

professionals from all partners, was set up to support care homes which were at the forefront of dealing with the pandemic. This has included:

- **Rolling out an equipment package** to every care home in Derby and Derbyshire to enable them to get online and take part in virtual consultations with GPs regarding their residents
- **Setting up a virtual Covid-19 care home support team** to provide clinical advice for residents with long-term conditions and other health needs
- **A 24/7 end-of-life helpline**, through 111, to support staff and meet the needs of residents at this difficult time
- **A microsite and newsletter** to support effective communications to care homes
- **Wellbeing support** to help staff manage the impact of the pandemic
- **The introduction of GP Connect.** This service makes patient medical information available to all appropriate clinicians when and where they need it to support direct patient care, leading to improvements in both care and outcomes for the patient. GP connect has supported the provision of timely and effective care during the Covid-19 outbreak. It has in particular supported the new Covid Clinical Assessment Service (CCAS). It helps primary care organisations share appointments with CCAS, extended access hubs and NHS 111 to enable direct booking. See article on page 4
- **Ambulance journeys** were significantly reduced, meaning that more patients were seen and treated in their own home, rather than being taken to their local hospital, to reduce footfall through A&E departments and reduce the risks of infection.

We are committed to maintaining these transformational changes where they improve outcomes and experience for people and staff across Derbyshire, embedding them in new ways of working. We know that we will need to continue to adapt to living with the pandemic for some time to come, and acknowledge the demand it will have on our health and care provision for at least the next 12 months or until a vaccine is available. Hence, our immediate focus will be on ensuring the sustainable delivery of services, with the ability to work flexibly and step up and down in response to potential subsequent 'waves' of Covid-19 infection in our population, ensuring we modify our approach where necessary.

## Finding local information

- If you want to find out how Covid-19 is affecting your local services, you can visit the Joined Up Care Derbyshire Covid-19 public information site here - <https://joinedupcarederbyshire.co.uk/public-info-covid-19> - which is updated regularly with new information

- Healthwatch Derbyshire offer a helpline for people who have questions about health and social care services. They can be contacted via phone 01773 880786 or text 07957 149279, Monday to Friday, 10am to 3.30pm



- Derby and Derbyshire NHS Clinical Commissioning Group produce regular briefings containing local and national information about Covid-19. These can be found [here](#).

- You can find information about changes to local authority services from:

Derbyshire County Council <https://www.derbyshire.gov.uk/social-health/health-and-wellbeing/health-protection/disease-control/coronavirus/coronavirus-covid-19.aspx>

Derby City Council <https://www.derby.gov.uk/coronavirus-covid19/impacts-council-services-facilities/>



## GP Connect

This service makes patient medical information available to all appropriate clinicians when and where they need it to support direct patient care, leading to improvements in both care and outcomes for the patient allowing previously separate GP computer systems to “talk” to each other. GP connect has supported the provision of timely and effective care during the Covid 19 outbreak and in particular it has supported the new Covid Clinical Assessment Services (CCAS). It helps primary care organisations share appointments with the (CCAS), Extended Access Hubs and NHS 111 to enable direct booking.

You can view a useful video [here](#).

Covid Clinical Assessment Service (CCAS) – this service is run separately to 111. Patients ringing 111 are assessed and passed to CCAS if their issue is Covid-19 related. Once a patient arrives at CCAS they are assessed, and a decision will be made as to how they need to be treated. For example, they may be assessed as needing to go to hospital, in need of a GP appointment, or advised to stay at home and self-care.

All practices allow CCAS to access GP morning and afternoon sessions each day to allow them to add patients to the lists; the patients will only be added during normal practice hours. Practices are not expected to be open any longer than usual. In the event that there are no GP services available the patients will be referred to out of hours or urgent care.



# Mental health all age open access helpline

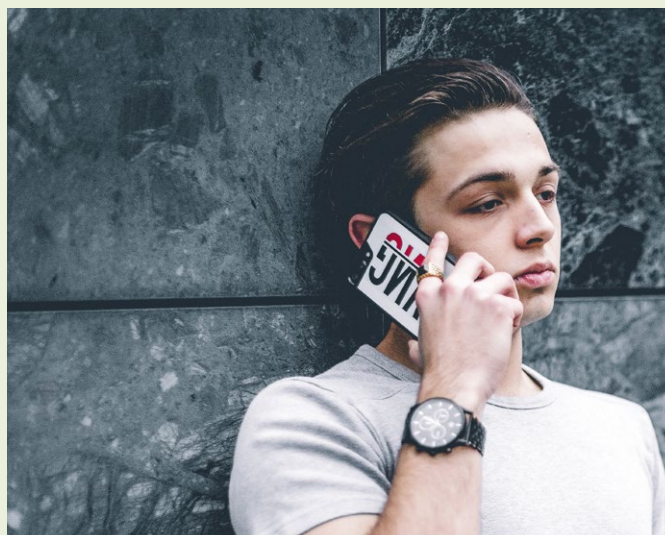
The Mental Health Triage Hub was first established in early 2019 as a prototype model through the Derbyshire Crisis Care Concordat for Mental Health following identification of the need for provision of 24/7 access to age appropriate mental health community support. The model was co-produced through joint partnership working with a range of strategic partners, including Derbyshire Healthcare Foundation Trust, East Midlands Ambulance Service, police, and the voluntary sector. It operated 4pm to 12 midnight providing information, support and triage to referrals from professionals and services. It provided a single point of contact and provision of crisis and early interventions to reduce the risk of mental health crisis, 136 detentions (section 136 allows the police to take you to (or keep you at) a place of safety without a warrant if you have a mental health disorder and are in immediate need of care and control) and reduce mental health emergency department attendances.

The Mental Health All Age, Open Access helpline was launched on April 6 in response to the Covid-19 pandemic. The helpline, incorporating existing voluntary sector and clinical staff from the Mental Health Triage Hub, aims to establish 24/7 urgent mental health support, advice and triage to those requiring urgent mental health support, including access for children and young people, their parents/carers, and people with learning disabilities and/or autism.

The helpline provides access to all people across Derbyshire where mental health crisis is self-defined. People of all ages, including children and young people, parents and carers can self-refer by telephone for direct access to support, advice and triage from voluntary sector and mental health professionals. The helpline includes a triage hub (centrally sited at Hartington Unit, Chesterfield) to receive incoming calls from the public and agency partners, and has a secondary workforce of home workers who are able to provide support, advice and signposting, and where necessary onward facilitation of secondary mental health interventions.

The service moved to 24/7 provision at the end of July 2020. The hub operates on a 0800 freephone number for self-referrals and also takes 111 direct referrals and referrals from other professionals.

From April to July 2020 the helpline received more than 5,150 calls, receiving an average of 50 calls per day. Approximately 70% of callers to the hub are self-referrals



with other calls coming from carers, the ambulance service, police, GPs, NHS 111 and other professionals.

A recent evaluation from those who called the helpline during the Covid-19 pandemic found it an overall positive and helpful experience. Some recent comments were:

*“The mental health worker who rang me was clearly highly trained and professional. He was exceptionally insightful and was able to clarify some of my thinking with me. He took time to engage and to establish some positive and practical actions which I could try to implement going forward. He made me feel far less lonely during my shielding isolation and he helped me to engage with more hopeful thinking. I honestly couldn’t rate the support more highly. This is a catastrophic time for me trying to manage my mental health and I felt I had access to professional mental health support in a timely and accessible manner. Many thanks to the man who responded to my call and listened with such sensitivity.”*

*“I didn’t know what to expect as the doctor just gave me the number to ring, the young lady who answered my call was very understanding and put me at ease. I have never been able to talk about my anxieties as I was brought up to believe it is a weakness, so it was nice to know I was not alone and there is somewhere to contact.”*

The plans to develop the 24-hour access point for urgent mental health care are part of the wider system transformation plans for mental health crisis provision, including the development of the voluntary and third sector offer in providing alternatives to secondary care provision in the form of crisis cafes, safe havens and voluntary support. The first crisis alternative ‘safe haven’ is due to open in Derby in early November 2020 and there are plans to open a second crisis alternative provision in Chesterfield by early 2021, with additional plans to develop crisis cafes in various settings across the county.

# Hospital discharge and community support



A person over 80 who spends more than 10 days in hospital will lose 10% of muscle mass - equivalent to 10 years of ageing.



Over recent years Derbyshire's health and care organisations have been changing the way patients are cared for when they are fit to be discharged from hospital. Patients were often being moved from a hospital bed in an acute trust (such as Chesterfield Royal Hospital or Royal Derby Hospital) into a different bed in a community hospital. Many of these patients no longer needed this type of care and could receive more tailored treatment in either their usual place of residence or in an intermediate care facility, (a social care-led facility with intensive support from physiotherapy, occupational therapy and community nursing to enable a patient to rehabilitate following an illness or injury, without the need for 24/7 healthcare intervention in a hospital setting, examples of this are Florence Shipley in Heanor and The Meadows at Darley Dale), where the focus could be on physical therapy and rehabilitation rather than medical care.

To change this, a programme was implemented in north Derbyshire, called 'Better Care Closer To Home', and there have been similar programmes more recently in Erewash, Swadlincote and one soon to be finalised in Belper. This had not yet happened though for patients in Derby, but the pandemic has seen rapid, temporary changes which have accelerated progress along similar lines, in a fine example of partnership working that met an emergency need but which also likely resulted in better patient care.

At the start of the pandemic, national guidance asked the NHS to create capacity within acute hospitals to ensure there was space and beds to treat the predicted numbers of patients who would be admitted with Covid-19. This meant that acute trusts discharged many patients into the community, either to their usual place of residence, to a care setting such as a residential or care home, to an intermediate care

setting or to a community hospital, where that type of care was required.

This process was made possible by a new discharge assessment unit at Royal Derby Hospital which was opened in response to Covid-19 discharge service requirements, with acute and community staff within the unit alongside on-site pharmacy, therapy, equipment and transport. This enabled patients to receive rapidly everything they need, for example, medication and equipment post-assessment to enable a timely and safe discharge from acute care. Royal Derby Hospital previously discharged on average 15 patients per day through the discharge lounge, but these changes mean the hospital can now accommodate the discharge of 75 people per day.

For community services, a legislative change was made to funding arrangements, which removed some of the existing barriers to complex discharge overnight, for example national changes to accessing Continuing Health Care placements, and local authority community re-ablement and assessment capacity – in the patient's own home or nursing homes were increased quickly. Community services committed to a two-hour rapid response for referrals to all types of onward community care, and this enabled Royal Derby Hospital to discharge people later in the day whom otherwise would have stayed in an acute bed another night.

Overall, acute and community staff worked closely together to enable the discharge of more than 70 patients from London Road Community Hospital's beds over a three-day period. It is felt that while the changes were driven initially by the pandemic, they in fact quickly delivered desirable changes that improve care for patients, in line with local policy on discharge. Planning is underway to ensure the benefits of this work are captured and preserved.

# System Insight Group

The vision of the System Insight Group is to 'develop a culture of being insight-led across the system when making decisions'. This insight could be from evidence, research, reflections, conversations and observations, from any number of different sources. The aim of this group is to link this insight together. The group was launched in May 2020, and in the short-term aims to gain an accurate and deep understanding of people's experiences during the Covid-19 pandemic. The structures put in place will have longer term benefits for the system.

The focus of the group is on health and wellbeing to ensure attention is given to the wider determinants of health supporting the strategic approach to population health management.

The membership is diverse with approximately 50 members consisting of patient experience and engagement leads from across the system, public health representatives, voluntary sector representatives, Healthwatch Derbyshire and Derby and local authority representatives.

It aims to:

- Collect and organise insight being gathered across the system to make it easily accessible and searchable. Insight could be gathered from:
  - Healthwatch
  - Provider and service-level surveys and patient groups
  - Derby and Derbyshire CCG patient experience team
  - Council feedback
  - Local care opinion information
  - Voluntary and community sector including community response hubs
  - Public health information

- Promote and achieve buy-in from system partners to use this insight in decision making, and before making decisions to engage with the public. Reviewing existing information can save time and money and point towards gaps in insight
- Reduce over-surveying of the residents of Derbyshire, and reduce the instances of people being asked the same questions over and over again
- Support collaboration between organisations around gathering insight by enabling links to be made between individuals/organisations who are working on the same area, or are wanting the answers to the same questions
- Move away from seeing residents as patients, service users, or communities, depending on which organisational perspective you hold, and see them as people who need to be put at the heart of decision making across the system. Despite having multiple public sector partners, we have one Derbyshire population
- Support the use of a variety of methods for gathering insight, moving away from an over reliance on surveys to methods that nurture and use existing relationships.

For further information please contact Karen Lloyd, Head of Engagement for Joined Up Care Derbyshire, [karen.lloyd24@nhs.net](mailto:karen.lloyd24@nhs.net).



## Flu vaccinations

The most comprehensive flu programme in UK history will be rolled out this winter with 30 million people to be offered vaccination.

Last year, 25 million people, including primary school children, health and care workers and over-65s were eligible.

This winter, to prevent the seasonal, predictable virus creating conditions for a second, more serious wave of Covid-19, vaccinations will also be offered to:

- Over-50s
- Anyone on the shielding list, and the people they live with
- Children in the first year of secondary school.

Work is underway to coordinate and communicate the flu vaccination work which will be taking place across Derbyshire's health and care system.

Letters seeking consent from parents for their child to be immunised have already been issued, and all four maternity wards across the county will be offering vaccinations at 12 and 20 week scans.

Renal patients at Derby are now also going to be offered a vaccination at their appointments.

Further details and updates will be provided through the system's flu operational 'cell' and we will share updates through the Joined Up Care Derbyshire website.

## Joined Up Care Derbyshire Citizens' Panel



Joined Up Care Derbyshire keeps a panel of citizens to ensure that we listen to and learn from our local residents. By sharing your feedback and opinions on health and care services, you can help us to design services that take into account 'what matters to people', on a range of topics related to health and care services.

Members of our panel are contacted at regular intervals with opportunities to get involved in decisions being made about local health and care services. Members are invited to take part in surveys which can be filled in online, attend focus groups around specific topics, or join committees and working groups to talk about health and care policy and strategy in more detail.

There are many benefits of being a Citizens' Panel member:

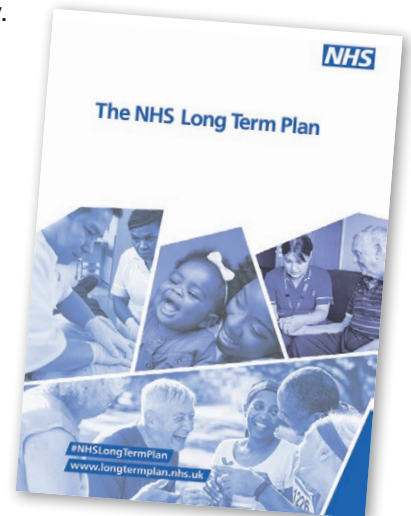
- You will be helping to ensure we provide better quality care in a way that matters most to local residents
- You will have the opportunity to have your views heard by local health and care decision makers
- You will find out about new plans and ideas for Derbyshire
- You can get involved as much or as little as you like, in the comfort of your own home through taking part in our online surveys, or you can choose to attend one of our workshops or focus groups
- You will be reimbursed reasonable travel expenses for participation in face-to-face meetings such as focus groups (subject to social distancing guidance being relaxed).

Every aspect of the panel is entirely voluntary. We are currently recruiting new members to the panel, which is easy to sign up to. To sign up as a panel member, complete our online form at <https://secure.membra.co.uk/jucderbyshire/> or email [joinedupcarederbyshire@nhs.net](mailto:joinedupcarederbyshire@nhs.net) if you need assistance with this form. You will need to input an email address, as all contact is currently made via email.

## Integration Index

Citizens' panels are being considered as a method of measuring patient and user experience of integrated care nationally and locally.

The NHS Long Term Plan signalled the development of the Integration Index, which is a method of measuring from patients, carers and the public, the extent to which the local health service and its partners are genuinely providing joined up, personalised and anticipatory care.



Most patient and user experience is gathered within organisations, and the Integration Index is about gathering evidence of the user perspective of care provided across organisational boundaries.

There will be a national index which will be the same for each Integrated Care System (ICS), and allows for comparable data across different systems, and local indices which will be developed by local systems, and have local ownership.

As a number of systems have set up citizens' panels to support local involvement in decisions being made about health and care services. NHS England and Improvement are interested in understanding how citizens' panels can support the development of the local Integration Index.

The Kings Fund and Picker Institute have been commissioned to do this work, and will be speaking to a number of different stakeholders across our developing ICS. Their work will involve:

- Assessing strengths and limitations of citizens' panels
- Understanding how they could work alongside other ways of understanding integration from the user perspective
- Reviewing appropriate questions to ask and create a bank of relevant questions to be used locally and nationally
- Making recommendations for changes to citizens' panel if needed and provide support to implement these recommendations.

The work started in July and ends in the autumn.



# Teenagers inspired by healthcare workers saving lives invited to apply to new academy at Derby's University Technical College

East Midlands teenagers inspired by the healthcare workers and scientists saving lives in the global fight against the coronavirus pandemic are being offered an exciting new careers pathway.

A new education and technical skills programme, backed by the region's top healthcare employers, is opening at UTC Derby Pride Park, on Locomotive Way, this September.

Young people, and parents and carers, were invited to find out more by attending a virtual open event.

The open day held on 7 July was well-attended, with prospective students hearing from the likes of University Hospitals of Derby and Burton, the University of Derby and the UTC Principal. Speakers showcased the fantastic opportunities health and social care has to offer, from clinical apprenticeships to university study.

UTC Derby Pride Park is a technical school for 13 to 19-year-olds that specialises in engineering and is launching a second specialism in health and life sciences from September 2020. The Derbyshire Health and Life Sciences Academy at the UTC will equip students with the skills they need to go into careers in health, life sciences, wellbeing and social care.

Backed by the University of Derby, the initiative is launching in partnership with Joined Up Care Derbyshire. The employers include Chesterfield Royal Hospital NHS Foundation Trust, Derbyshire Community Health Services NHS Foundation Trust, Derbyshire County Council and Derby City Council, Derbyshire Healthcare NHS Foundation Trust, East Midlands Ambulance Service NHS Trust and University Hospitals of Derby and Burton NHS Foundation Trust.

Nick Crew, Executive Principal, UTC Derby Pride Park, said: *"The life-saving roles that healthcare workers and scientists are playing in tackling the world's biggest health crisis have captivated the nation. We are pleased to work with employers, and the University of Derby, to meet an urgent need for more highly skilled young people for the healthcare and life sciences professions in the East Midlands.*

*"UTC technical specialisms reflect growth areas of the local economy in the communities where they are based. In Derby, we will draw on the expertise that we have already gained from running a successful health sciences specialism for young people with employers in Sheffield."*

According to recent NHS statistics, job applications have jumped as the nation showed its support for healthcare workers with millions taking part in the clap for carers at the height of the pandemic.

Susan Spray, Programme Lead, Joined Up Careers Derbyshire, which supports the development of the workforce including recruitment and supply, introduction of new roles, and opportunities for optimisation and efficiency across the system, said: *"It has been our pleasure to work with the UTC team in a collaborative and innovative way. We are delighted to see plans coming together for the launch of the new academy, providing a new approach, improving the reach and impact of recruitment and careers development activity across the health and social care sectors in Derby and Derbyshire."*

Dr Paula Holt, Pro-Vice Chancellor Dean of the College of Health and Social Care at the University of Derby, said: *"The range of health, care and science careers is incredibly diverse, offering exciting opportunities for rewarding careers that make a real and lasting impact on the lives of individuals as well as society as a whole. We would particularly like to see more boys considering a career in the healthcare sector and I would urge parents and carers to encourage their children to take up this opportunity, and see for themselves how they can begin that journey."*

Anyone wishing to apply, visit <https://www.utcderby.org.uk/apply/>



## Guidance for unpaid working carers in the NHS at the time of Covid-19 and beyond

Do you provide unpaid care and support to a family member or friend due to their disability, health condition, frailty, mental health problem, addiction or other health and care need? If you answer 'yes' to this question, then you are a carer.

If you are an unpaid carer, you are not alone. Carers UK estimates the NHS has some 250,000 staff providing unpaid caring responsibilities outside the workplace – that is one in five of our staff, compared with approximately one in seven of the general population. Many carers will be in the 45-64 age range, the peak age for caring, and therefore some of our most skilled and experienced staff. Carers will be spread across all staff groups and bands - the true numbers may be even higher, as some staff may choose not to disclose their carer status or may not realise that they are carers.

At any time, those of you providing unpaid care are often helping to keep those who you care for out of hospital and safe in their own environments. This becomes even more critical at this point. Frequently, those requiring extra care are the most vulnerable when it comes to the impact of contracting Covid-19.

We want to encourage you to discuss your caring responsibilities with your manager. By discussing the options around support for those providing unpaid care, we can support you to balance the demands of both your work and your caring responsibilities. While this remains important at all times, it is critical now and we need to rapidly address the support we can offer.

If you haven't already, please make it known to your line manager that you are providing unpaid care. This will enable your organisation to signpost you to helpful resources both internally and externally. You can find help and support [here](#).

## Mental health support for children, young people, parents and carers

It's a tough time for children, young people, and their parents and carers. If you find yourself feeling anxious, stressed or overwhelmed, support is available.

You can find information on a whole range of support services [here](#). Including Information about the new Derby and Derbyshire Emotional Health and Wellbeing website, which has been set up to support the mental health and wellbeing of children, young people, parents/carers and professionals in Derby and Derbyshire. On the website you can find a range of information including local and national support, training and resources.



## Joined Up Care Derbyshire board meetings in public

The Joined Up Care Derbyshire Board resumes its meetings in public in September this year. These meetings will take place via Microsoft Teams while we are still in a period of restrictions on public gatherings. You will be able to find more information on the Joined Up Care Derbyshire website at the beginning of September.

<https://joinedupcarederbyshire.co.uk/>

## Contact

The Joined Up Care Derbyshire team are currently working from home and can be contacted on [joinedupcarederbyshire@nhs.net](mailto:joinedupcarederbyshire@nhs.net)