

Harrow Carers Impact Report 2025–2026

Supporting unpaid carers of all ages to feel informed, connected, empowered and resilient — and to sustain their caring roles with confidence

Executive summary

During 2025–2026, Harrow Carers was alongside unpaid carers at many different points in their caring journey. Through early identification, personalised planning, information and advice, counselling, dementia support, befriending, wellbeing activities, peer support and digital access, we assisted adult carers to sustain their caring roles while retaining a life beyond caring. This reflects the preventative approach at the heart of the Care Act 2014. Section 1 places individual wellbeing at the centre of care and support, while section 2 requires local authorities to provide or arrange services that prevent, reduce or delay adults' care and support needs and carers' needs for support. As a community partner, Harrow Carers contributes to these duties by reaching carers before difficulties become crises, responding early when pressures emerge and helping people manage established needs so that wellbeing, independence and family life can be sustained for longer.

Our work across adult, young adult and young carers' services is underpinned by trauma-informed practice. We recognise that carers may be living with sustained stress, loss, uncertainty or earlier adversity, so we prioritise emotional and physical safety, trust, choice, collaboration and empowerment. Staff build consistent relationships, listen without judgement, explain options clearly, avoid approaches that may re-traumatise and respond to each person's strengths, circumstances, culture and pace. This assists carers to connect with coordinated practical, social and emotional support in a way that feels respectful and manageable.

The scale of this support was significant. During the year, **493 new adult carers registered, 469 Carer Service Plans** were completed, wellbeing activities recorded **4,955 attendances** and **308 adult carers accessed counselling**.

Digital access also became an important part of the offer. Launched in November 2025, the Virtual Carers Centre provided free, flexible access to personalised information, practical tools, local signposting and virtual advice coaches beyond normal opening hours. At the year-end reporting point, verified dashboard data recorded 546 carers on the platform, 687 chat messages and 2,163 advice interactions. The platform complemented rather than replaced telephone, face-to-face and outreach support and was particularly relevant for working carers and people unable to access daytime provision.

We also reached more young carers and helped bring previously hidden caring roles into view. Registered young carers increased from **782 in April 2025 to 884 at the end of March 2026**—an increase of **102**—indicating stronger identification and referral pathways. Between April 2025 and March 2026, Harrow Carers completed **71 Young Carer Assessments**: 17 in Q1, 14 in Q2, 22 in Q3 and 18 in Q4. Assessments were accessed through schools, Children's Services and self-referral routes and were offered at home, in school, at the Harrow Carers office or remotely to suit young people and families. The assessment process provided a

person-centred foundation for understanding each young person's caring role, its effect on education, wellbeing and family life, and the support or follow-up needed. Where assessments identified safeguarding, education or family-support concerns, these were recorded and addressed through appropriate statutory and partnership pathways.

During our young carers reporting period there were, **1,101 session attendances** involved **317 unique young carers**, including **115 who accessed activity-based respite over the summer period**. Newly employed Young Carers staff were trained to deliver the DNAV programme, strengthening our in-house capacity to provide structured psychological-resilience support that helps young carers express feelings, develop coping strategies, build emotional literacy and respond to pressures associated with caring. Together, the evidence shows stronger identification, personalised planning, sustained engagement and protected opportunities away from caring responsibilities; registrations, assessments, attendances and unique participants remain separate measures and have not been combined.

Carers often found their own way to us, reflecting both determination and growing awareness of the support available. Of 493 adult registrations, **356—approximately 72%—were self-referrals**; in Q1 2026/27, this rose to **104 of 127 referrals—approximately 82%**. Community recognition was also evident through **56 referrals from another carer**. In the 2026 carers survey, **45 of 93 respondents** first heard about Harrow Carers through friends or word of mouth and **29** through a GP or healthcare professional. Online registration increased from **25%** in the previous reporting year to **66%** across 2025–2026 and **80%** in Q1 2026/27.

Once carers made contact, their experience was largely positive: **77 of 94 carers (82%)** were satisfied or very satisfied, only four were dissatisfied or very dissatisfied, **68 of 94** found Harrow Carers easy to contact and **73 of 89** found services mostly or very easy to access. Carers described prompt responses, helpful and knowledgeable staff, kindness, confidentiality, feeling listened to and reassurance that support remained available. One said the organisation “truly understands the needs of carers and their families”; another described knowing that a team understood their situation as “uplifting and reassuring”.

Alongside **223 scored I-Statement reviews**, quarterly case studies, surveys and qualitative feedback, the evidence points consistently to four changes: carers became better informed, less isolated, more confident in navigating services and better able to cope emotionally. Taken together, direct approach, peer recommendation, professional signposting, positive experience and continued engagement provide credible, triangulated evidence that Harrow Carers is well established, approachable and trusted across the community. Some carers remain hidden, practical, cultural, language and digital barriers continue to affect access, and anxiety, exhaustion, poor mental wellbeing and insufficient access to meaningful breaks remain prominent.

Dementia support was a significant area of impact for unpaid carers and the people they care for. During 2025–2026, Harrow Carers combined structured dementia education, one-to-one advice, home visits, Friendship Cafés, peer support, counselling links, practical and future-planning guidance, hospital and memory-service pathways, community outreach and activities that included the person living with dementia. Four face-to-face six-week programmes were delivered, alongside an evening online programme for working carers. The service helped carers understand dementia, communicate more effectively, manage distress and changing behaviour, plan ahead, ask for assistance earlier and connect with others facing similar experiences. It also supported loved ones through safe social and cognitive activity and helped families navigate diagnosis, medication, hospital discharge, care options, legal and financial planning, and access to health and social-care services. Over the final three-

year National Lottery funding period, CharityLog recorded **777 unique carers accessing dementia and/or befriending support**, comprising **587 dementia carers** and **190 befriending carers**, supported by **20 volunteers**. In its response to the final report, the National Lottery Community Fund highlighted that surveyed carers reported improved wellbeing, reduced isolation and an ability to use their learning in day-to-day caring. It also recognised the range and accessibility of the offer and the importance of partnerships with NHS dementia services. The grant has now ended, and sustaining this preventative, trusted support remains a major priority. We await the outcome of our stage 2 lottery application which will bring about significant change to the model via expansion of evening and weekend support.

Childhood adversity and social capital. Young carers may carry sustained pressures alongside caring, including family illness, emotional strain, disrupted education, isolation and fewer opportunities for ordinary childhood experiences. These circumstances can overlap with adverse childhood experiences (ACEs), although caring is not itself an ACE and Harrow Carers does not assume or label individual children on this basis.

Through a trauma-informed and strengths-based approach, the Garfield Weston-funded programme strengthened protective factors through early identification, trusted adult relationships, peer connection, respite, emotional-wellbeing support, education and transition planning. Holiday activities, residential experiences, tutoring, DNAV resilience work, one-to-one support and partnership pathways assisted young carers to build social capital: wider networks of trusted people, stronger friendships, greater confidence in community and education settings, and improved access to information, opportunities and support beyond their caring role. These stable relationships, practical support and inclusive opportunities assisted in reducing isolation and strengthening resilience, while recognising that every young carer's experience and progress is individual. We are grateful to the **Garfield Weston Foundation** for enabling this sustained blend of preventative support, respite and opportunity for young carers.

Thank you. None of this impact would be possible without the carers and young carers who trusted us with their experiences and helped shape our services; the staff and volunteers who brought compassion, skill and commitment to their work; and the organisations whose partnership and investment enabled support to remain responsive and accessible. We offer particular thanks to Harrow Council's commissioners, directors and wider partners for their continued support in developing services for unpaid carers. We are especially grateful to the Conversation Café team, whose practical knowledge, engagement with carers and commitment to co-production contributed to the development of a clearer and more joined-up pathway. Joint work across commissioning, governance, service design, communication and implementation helped establish a more accessible route from early information and preventative support to a statutory Adult Carer Assessment, with Harrow Carers' commissioned assessment service beginning in **April 2026**.

Our particular thanks go to the funders and partners who invested in Harrow's Young and Young Adult Carers Service. Support from the **Garfield Weston Foundation** enabled young carers to access sustained activity-based respite, trusted relationships, education and transition support, one-to-one help and opportunities that strengthened wellbeing, confidence and social connection. Funding from **John Lyon's Charity** supported the service's wraparound approach to education, mentoring, homework and study support, school-based provision, employability, youth voice, emotional wellbeing and positive experiences beyond the caring role. We are also grateful to **BBC Children in Need** for its support of inclusive, trauma-informed provision reaching higher need young carers from Harrow's diverse

communities, and to **Harrow Council** for its partnership in identification, referral pathways, Young Carer Assessments, safeguarding and coordinated family support. This combined investment helped the service respond to young carers as whole people—not only by recognising their caring responsibilities, but by protecting time for learning, friendship, aspiration, resilience and an ordinary childhood.

We are deeply grateful to every funder, commissioner, school, statutory service, community organisation and delivery partner that contributed during the year and continues to work alongside us to improve support for Harrow’s unpaid carers and young carers. Their commitment provides both the practical resources and the shared confidence needed to identify hidden caring roles earlier, respond safely and sustain opportunities that young people might otherwise miss.

Our impact at a glance 2025/2026:

Adult carers		
493 New Adult Carers Registered Total Adult Carers 5789 March 2026	469 New Adult Carer Service Plans Completed	356 self-referrals — approximately 72% of adult registrations
66% of new registrations completed online	4,955 wellbeing activity attendances	308 adult carers accessed counselling
82% of 2026 survey respondents were satisfied or very satisfied	223 scored I-Statement outcome reviews	
Young carers		
102 New Young Carers Registered Total Young Carers March 2026 / 884	317 unique young carers engaged 1,101 session attendances	71 Young Carers Assessments 2025 to 2026 Young Carer Assessments completed
17 · 14 · 22 · 18 Young Carer Assessments completed in Q1, Q2, Q3 and Q4 respectively		
Virtual Carers Centre (VCC) verified year-end dashboard data November 2025 to March 2026		
546 carers on the platform	687 chat messages	2,163 advice interactions

Strategic pillars underpinning impact

Harrow Carers’ impact is guided by strategic pillars that translate the organisation’s purpose into clear priorities for adult carers, young carers and young adult carers. The adult-service framework reflects the current organisation-wide priorities, while the updated Young Carers

framework for 2026–2027 provides a more detailed pathway from early identification and assessment through to education, wellbeing, safeguarding and digital support.

Adult carers: current strategic pillars	
Pillar	How it is reflected in the impact report
Provide great services for unpaid carers	Person-centred planning, information and advice, counselling, dementia support, befriending, wellbeing activity and practical assistance improve knowledge, coping and resilience.
Grow and reach more carers	Self-referral, professional pathways, outreach, communications and online registration strengthen earlier identification and access.
Cherish our people	Skilled staff and volunteers deliver relational, trauma-informed support built on safety, trust, choice, collaboration and empowerment.
Create and maintain a financially stable, independent and ethical organisation	Evidence-led reporting, partnership funding and sustainability planning support continuity of valued services, including dementia and befriending provision.
Digital enablement and innovation	Online registration and the Virtual Carers Centre extend flexible, multilingual and out-of-hours access while complementing personal support.

Young Carers and Young Adult Carers: updated strategic pillars 2026–2027	
Pillar	Purpose and impact focus
Young Carers Assessments and action planning	Support statutory responsibilities through person-centred early identification, understanding the caring role, identifying needs and outcomes, and agreeing proportionate or whole-family support.
Education	Support attendance, learning confidence and academic progress, reduce attainment gaps and strengthen long-term opportunities.
Employability	Build skills, experience, networks and confidence for progression into further education, training and employment.
Empowerment and voice	Develop confidence, self-advocacy, co-production, leadership and meaningful influence over decisions and service development.
Service access and development	Strengthen referral pathways, outreach, partnership working and inclusive access so that hidden young carers are identified and supported earlier.
Respite and socialisation	Provide safe breaks, peer connection, positive childhood experiences, residential opportunities and wider social participation.

Emotional wellbeing	Use DNAV, one-to-one support, counselling pathways, safe spaces and structured activities to strengthen coping, emotional literacy and resilience.
Safeguarding and protection	Identify risks early through assessment, record and escalate concerns appropriately, and provide safe, trauma-informed and SEND-aware support.
Digital enablement and support	Develop accessible digital information, safe online support and the Young Carers Virtual Carers Centre alongside face-to-face, school and community provision.

Young Carer Assessments: statutory identification and support planning

The Young Carer Assessment year-end report submitted to Harrow Council recorded **71 completed assessments between April 2025 and March 2026**: 17 in Q1, 14 in Q2, 22 in Q3 and 18 in Q4. Assessments were completed through school, Children's Services and self-referral pathways, with home, office, remote and school-based appointments used to accommodate young people and families. Where assessment identified safeguarding, education, wellbeing or wider family-support needs, staff recorded concerns, agreed proportionate action and connected families with the appropriate statutory or community pathway. The assessments provided a person-centred basis for understanding the caring role, identifying its effect on education, wellbeing and family life, agreeing support plans and arranging follow-up or onward support.

John Lyon's Charity: wraparound support for education, wellbeing and opportunity.

Year 2 reporting provides further evidence of how the Young and Young Adult Carers Service translated its strategic pillars into a blended programme across the year. Educational support included calm, structured homework provision for primary and secondary-aged young carers, tutoring partnerships and support with study skills, organisation and confidence. This was combined with one-to-one and mentoring support, safe spaces to explore stress and everyday pressures, respite and holiday experiences, and opportunities for youth voice, peer leadership and self-advocacy. The approach recognised that progress in education is closely connected to emotional regulation, trusted relationships, social connection and access to experiences beyond the caring role. We thank **John Lyon's Charity** for investing in this rounded model and for enabling young carers to access support that connects educational progress with wellbeing, aspiration and wider opportunity.

The report also described stronger school and partnership delivery, including staff briefings, clearer identification guidance, referral pathways and lunchtime support within schools. Lunchtime provision addressed a practical barrier for young carers unable to remain after school because of caring responsibilities, while links with colleges, youth organisations, employers, Early Help and children's services broadened routes into qualifications, work experience and whole-family support. Safeguarding remained embedded through trained staff, risk management, supervision and appropriate information sharing across sessions, trips and individual interventions. This complements the assessment evidence above by showing how early identification was followed by accessible, relationship-based support.

Access 68%
of the young carers supported were recorded as being from Black, Asian and minority ethnic communities

This figure is taken from the BBC Children in Need year-end report dated February 2026 and describes the profile recorded within that funded service. It indicates that the programme reached young carers from a range of ethnic communities and reinforces the importance of culturally responsive, trauma-informed support, trusted relationships with families, schools and community partners, and flexible routes into assessment and support. We are grateful to BBC Children in Need for supporting inclusive provision that helped young carers from Harrow's diverse communities access trusted relationships, wellbeing support and opportunities beyond their caring role. The figure is specific to this service and reporting period; it is not a borough-wide estimate and should not be used to infer differences in need, access or outcomes between ethnic groups.

Year-end Care Act impact: April 2025–March 2026

The year-end Care Act report provides the clearest full-year view of reach, need and outcomes. It shows that many carers approached Harrow Carers with several needs at once, sometimes when pressures had become particularly difficult to manage. The organisation's response combined early identification, a personalised Service Plan and access to several in-house services, helping carers develop practical strategies, protect their wellbeing and sustain their caring role. This work contributes to the Care Act 2014 emphasis on promoting wellbeing and preventing, reducing or delaying needs for support. Prevention is not a single service or one-off intervention: it ranges from universal information, awareness and community connection that help people remain well; through targeted support when risks such as isolation, stress, financial pressure or declining confidence first emerge; to timely assistance that reduces the effect of established needs and helps prevent escalation, breakdown of the caring role or avoidable crisis. Harrow Carers applies this continuum through outreach and accessible information, early registration and personalised planning, benefits and rights advice, peer and wellbeing activity, counselling, dementia education, befriending, contingency planning, digital access and referral into statutory or specialist services. Together, these interventions strengthen carers' knowledge, resilience, social networks and ability to make informed choices, while supporting the wider local system to identify need earlier and use more intensive services proportionately.

Who we reached. Demographic data for the **493 newly registered adult carers** shows broad reach across Harrow's communities. The largest age group was **46–64, with 195 carers (approximately 40%)**. A further **165 carers (approximately 33%) were aged 65 or over**, while 20 were young adult carers aged 18–30; age was unknown for 34 registrations. Women represented approximately 70% of registrations and men approximately 30%, with a small number of carers recording another gender identity. The profile indicates growing reach among older and male carers and the continuing need for accessible, culturally responsive and age-appropriate support.

Ethnicity of newly registered adult carers	
40% Asian or Asian British	37% British White / White European categories
7% Black or Black British categories	1% Mixed categories

3% Another ethnic background	11% Preferred not to say or unknown
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Year-end evidence adults	2025–2026 result	Impact interpretation
New adult carer registrations	493 , including 135 in Q4; every quarter exceeded the target of 75.	Registrations remained above the quarterly planning benchmark throughout the year, demonstrating sustained demand for support.
Carer Service Plans	469	Most newly registered carers who engaged in the process received a structured, personalised assessment of their needs and support options.
Needs identified at registration	Information and advice 332 ; social support groups 270 ; wellbeing courses 254 ; activity or exercise groups 253 ; one-to-one counselling 194 ; dementia support 122 ; homecare 85 ; training or employment support 51 ; adult carer assessment referral 39 .	Carers commonly needed several forms of assistance, supporting a wraparound rather than single-service response.
Self-referral pathways	356 self-referrals. Recorded routes included GPs and healthcare professionals, other carers, Harrow Council and Adult Social Services, community sources, and website or online access.	Word of mouth, health and social-care partners, Council pathways, community connections and direct digital access all contributed to identification and reach.
Online registration	66% of new registrations, up from 25% in the previous reporting year.	Digital access became an established entry route and offered a flexible option, particularly for carers unable to access support during standard opening hours.
Outcome reviews	223 scored I-Statement reviews plus 20 non-scored reviews, giving 243 reviews or I-Statements overall.	The strongest repeated outcome themes were having assistance when needed, better information, increased confidence, peer connection and improved emotional wellbeing; stress and access to meaningful breaks remained weaker areas.

The year-end report demonstrates prevention across three connected levels. **Primary prevention** included accessible information, awareness activity, community hubs, peer and social groups, physical and creative activity, friendship cafés, online registration and the Virtual Carers Centre—helping carers remain connected, informed and well before needs intensified. **Secondary prevention** included personalised Service Plans, early advice, counselling, dementia training, falls-prevention information, grief and loss workshops, benefits support and

targeted follow-up when stress, isolation, financial pressure or reduced confidence became apparent. **Tertiary prevention** supported carers with established or complex needs through coordinated practical and emotional support, care-home guidance, advance care planning, Universal Care Plans, Lasting Power of Attorney information and links to statutory or specialist services, reducing the risk of further deterioration or crisis. Carers also formed relationships that continued beyond formal sessions through independent WhatsApp groups and informal meet-ups, strengthening sustainable peer support and community resilience. Co-production meetings chaired by the Carers Engagement Lead were used to shape new services. Digital access was broadened through online registration and the Virtual Carers Centre, delivered through the Bridgit Care platform, with Arabic, Bengali, English, Farsi, Gujarati, Somali, Tamil, Polish and Romanian available. The verified usage figures and implementation learning are set out in the following section.

Dementia support: strengthening carers, families and local pathways

The dementia service operated as a joined-up pathway rather than a stand-alone course. Carers could enter through self-referral or through GPs, memory services, Northwick Park Hospital, frailty and multidisciplinary teams, Harrow Council, voluntary organisations and community settings. The six-week programme combined clear information about dementia with practical strategies for communication, behaviour, stress, resilience and future planning. Specialist contributions during the year included medication, speech and language, advance care planning, Lasting Power of Attorney and wills, falls and mobility, and care-home information. The Herbert Protocol was discussed with carers as part of safety planning. Home visits, telephone support and an evening online course extended access for carers whose responsibilities or work made daytime attendance difficult.

The impact extended beyond knowledge. Carers reported feeling better equipped to manage changing situations, regulate their own stress, communicate differently and seek assistance without feeling they had to cope alone. Friendship Cafés and post-programme peer networks created continuing relationships, including informal contact and meet-ups beyond organised sessions. Separate spaces and activities for people living with dementia enabled social participation while carers accessed information, emotional support and a degree of respite. A research-mapping session during the reporting period found that carers valued Harrow Carers for information, kindness, friendship, signposting, preparation for what might come next and reassurance that they were not alone; it also informed wider learning about gaps in post-diagnostic support. Carer feedback shaped service development, including support around financial assessments and care-home fees, hospital experience and discharge, medication, future and contingency planning, culturally responsive outreach and more flexible access.

Partnership working increased the preventative value of the service. Harrow Carers contributed to the borough dementia hub with the Memory Service, Harrow Council, Age UK and other voluntary organisations, offering earlier information and emotional support following diagnosis rather than waiting until families reached crisis. This partnership is now developing further through Cognitive Stimulation Therapy (CST). Following invitations from Dr Chris Wilson and Harrow Memory Service at Bentley House, Harrow Carers staff are undertaking training delivered by the University College London International CST Training Team. The training covers Core CST, Maintenance CST and the cultural and linguistic adaptation of CST for Harrow's diverse communities. It is preparing the team to contribute to two linked services: **Maintenance CST for people living with mild-to-moderate dementia**, supporting continued cognitive stimulation, communication, confidence, social connection and emotional wellbeing after a core CST programme; and a **parallel CST-informed support programme for unpaid carers**, providing practical guidance, emotional support and strategies to reinforce CST

principles at home while protecting carers' own wellbeing. Together, the two services are intended to strengthen continuity between clinical intervention, home life and community support, with agreed training, clinical oversight and outcome measures being developed with CNWL. Harrow Carers dementia advisers also attended hospital and frailty pathways, multidisciplinary discussions and community events, raised carers' concerns about communication and discharge, and connected families with the right professional or community response. NHS partner feedback described the dementia-adviser role as strengthening continuity of care and helping address concerns early, with the potential to reduce avoidable escalation and admission. This combined household and system approach is closely aligned with the Care Act 2014 principles of wellbeing, early intervention and preventing, reducing or delaying needs.

Virtual Carers Centre: extending support beyond opening hours

Launched in November 2025, the Virtual Carers Centre extended Harrow Carers' support beyond normal opening hours and provided an additional, free route to personalised information, practical tools, local signposting and virtual advice coaches. At the year-end reporting point, verified dashboard data recorded **546 carers on the platform, 687 chat messages** and **2,163 advice interactions**. The service complemented—rather than replaced—telephone, face-to-face and outreach support and was particularly relevant for working carers and people unable to access daytime provision. Accessibility was broadened through multilingual introductory content and the option for carers to select a preferred written language. Feedback from carers, staff and partners informed continuing improvements, including clearer reassurance about privacy, supported introductions, simpler onboarding and stronger measurement of repeat use and outcomes. Harrow Carers' early implementation also contributed learning to wider North-West London partners developing digital support for unpaid carers.

“Very happy with the prompt service. I registered recently and found the staff very helpful and knowledgeable.”

“I really appreciated my call from Harrow Carers. I was not aware of the service and support available to me. Your adviser went through all the services available and I am very grateful.”

Communications supported this reach by providing several clear routes into Harrow Carers, including the website and online registration form, GP and professional signposting, Harrow Council information, the Joy referral platform, newsletters, social media, WhatsApp updates, community outreach and direct contact with the team. The combination of self-referral, professional referral and word-of-mouth evidence suggests that visibility was strengthened through both trusted relationships and accessible digital routes.

1. Carers were better informed and more able to navigate support

Information and advice was one of the six most common reasons carers approached Harrow Carers. The year-end report shows that support often began with a service plan and developed as staff understood the full caring situation. In the July 2026 survey, 46 of the 89 carers answering the outcomes question said they were better informed about services, support and rights. An anonymised example demonstrates the practical value of patient, accessible

assistance with complex benefit forms, including home visits and support in a carer's preferred language. The carer explained that the form had seemed manageable until they tried to describe the full extent of the caring role; an adviser helped them present an accurate picture, understand the evidence required and complete a successful application.

"I would not have thought to include much of what was important to give a full, truthful and accurate picture of my husband's needs and my role as his sole carer."

The communications approach reinforced this outcome by prioritising plain English, clear calls to action and proportionate information that carers could act on without feeling overwhelmed. Service information was shared through digital and in-person routes, while the Virtual Carers Centre provided an additional way for carers to access advice, rights information, wellbeing guidance and practical tools at a time and pace that worked for them.

Befriending: trusted relationships that reduce isolation

The National Lottery-funded befriending service provided a structured, time-limited programme of telephone or face-to-face contact for carers experiencing loneliness, social isolation or reduced confidence. Carers were matched with trained volunteers who offered consistent, non-judgemental listening, encouragement and a safe space to speak openly about the emotional and practical demands of caring. The model was designed not only to provide companionship, but also to help carers recognise their own wellbeing needs, rebuild confidence, reconnect with interests and community opportunities, and access other Harrow Carers or partner services where appropriate. Regular co-ordinator contact, volunteer support, boundaries, risk assessment and debriefing helped maintain a safe and purposeful service.

Final data shared with the National Lottery Community Fund and the independent evaluator recorded **190 unique carers accessing befriending support** across the three-year grant period, with **20 volunteers** supporting delivery. The wider final dataset recorded 777 unique carers using dementia and/or befriending services. The independent evaluation found that the befriending service was valued by carers and volunteers and that its core outcomes included improved wellbeing, reduced isolation and greater confidence to continue caring. The Lottery Fund's feedback similarly noted that surveyed carers reported improved wellbeing, reduced isolation and an ability to use their learning in day-to-day caring. Carer debriefs described the value of having the same volunteer, building trust over time, being able to talk without judgement and having space to reflect on practical next steps. For some carers, befriending also became a bridge into peer groups, grief-and-loss support, creative activity and wider community participation.

"I would 100% recommend befriending to anyone. It was great to offload in a relaxed atmosphere. It made my mental burden lighter."

"I felt relieved that I could talk about my feelings about my caring role. My volunteer helped me recognise that my wellbeing is important too."

"Having the same volunteer helped to build trust. They listened, understood and gave me time to reflect."

2. Carers were less isolated and more connected

Peer support, befriending, creative activity and community events provided carers with relationships as well as activities. In Q2, 1,145 attendances were recorded and feedback from the dementia and befriending celebration directly informed the development of telephone befriending, additional peer groups and skills-based sessions. In Q3, 1,291 attendances reflected expanded self-care and themed wellbeing activity. The carers 2026 survey found that 57 of 89 respondents had opportunities to meet other carers and 43 reported reduced stress or isolation. Final three-year CharityLog data submitted for the National Lottery audit recorded **777 unique carers accessing dementia and/or befriending services**, comprising **587 unique dementia carers** and **190 unique befriending carers**. A total of **20 volunteers** supported the befriending service. The National Lottery grant has now ended, and Harrow Carers is awaiting the outcome of its stage-two application for continuation funding. A loneliness-project example also showed how volunteer support enabled a carer who had experienced 5 years of prolonged isolation to re-engage with their local community.

“Befriending has been a godsend... It is good to know you are not alone and have forums to share tips and strategies that assist us in our caring roles.”

3. Carers developed resilience and improved emotional wellbeing

Counselling, dementia education and follow-up reviews show some of the clearest changes for carers. An anonymised 2025–2026 case study recorded a substantial reduction in psychological distress following continued counselling, while wider case evidence showed that counselling, befriending and group activity helped carers rebuild confidence and peer connections. In Q1 2026/27, 85% of counselling exit responses reported improved psychological wellbeing. Dementia-programme feedback was equally strong: carers described the six-week course as a lifeline and said it improved their understanding of dementia, communication, management of stress and behaviour, confidence in future planning and willingness to ask for support. One carer reported feeling far better equipped to cope with the future; another explained that learning alongside peers changed how they responded to difficult situations and showed them they were not alone. The final National Lottery report confirmed that surveyed carers reported improved wellbeing, reduced isolation and an ability to apply their learning in everyday caring.

“My deeper attitude to this period of my life has changed for the better... making plans for the future has put me in a much better place to ask for assistance and not feel I should cope on my own.”

“The six-week carers programme was a lifeline. I learnt about dementia, how to face difficult situations and, through other carers’ experiences, realised I am not alone.”

From supported carer to community contributor

Case study illustrates the value of integrated support. A carer experiencing emotional strain and isolation used dementia awareness training, Friendship Cafés, the Community Hub, one-

to-one counselling, physical wellbeing activity and a ten-week befriending placement. Reported outcomes included reduced isolation, improved confidence and emotional wellbeing, feeling listened to and increased resilience. After the caring role ended, the carer remained connected and began facilitating sketching sessions and taking part in peer-led poetry, turning personal recovery into support for others.

4. Events created access, learning and shared voice

Events were designed to combine respite, information, public awareness and community connection. Feedback on the June 2025 Carers Week programme was positive and informed recommendations for shorter presentations and more outdoor activity. Dementia carers and their loved ones participated in a wide range of inclusive opportunities during the year, including Friendship Cafés, a dementia walk with Northwick Park Hospital, the Bentley Priory visit, cultural celebrations and a Christmas event attended by more than 50 people. These activities gave families time together in welcoming, dementia-aware settings while also creating peer connection and access to advice. The Bentley Priory feedback described the event as well organised and educational and highlighted learning from other carers' experiences. A UCL-linked dementia mapping project enabled carers and people living with dementia to describe their journeys, identify gaps in post-diagnostic support and influence research. Feedback characterised Harrow Carers as bringing information, kindness, friendship and a place to speak openly, while also reinforcing the need for stronger GP and hospital signposting.

"Harrow Carers sessions were extremely helpful — they changed my outlook."

"Knowing where to go for support — Harrow Carers assisted."

5. Practical support reduced pressure at critical moments

Qualitative evidence shows that practical assistance often removed an immediate barrier while also reducing emotional pressure. Feedback praised patient support with benefit, disability, parking and Council Tax applications, including home visits where carers could not leave the person they supported. Small-grants work also helped households replace essential items and meet urgent practical needs at times of financial pressure. In dementia support, carers' lived experience of moving from self-funding to Council support was used to co-produce clearer guidance about financial assessments and care-home fees.

"The concentration and demands of form filling can be challenging when you are a carer. Your assistance was very much appreciated."

6. Quality, trust and partnership strengthened impact

The Carers Trust Excellence for Carers review reported that the assessed outcome-and-impact requirements were met and described Harrow Carers as person-centred, community-rooted and trusted. Carers described the service as "family", while external reviewers highlighted the organisation's integrated approach, early relationship-building and preventative support. Dementia partnerships were a particular strength during 2025–2026.

Harrow Carers worked with Northwick Park Hospital dementia and patient-experience teams, frailty services, multidisciplinary teams, Bentley House Memory Clinic, the Memory Service, Harrow Council, Age UK, St Luke's Hospice, care providers, community health specialists, researchers and local voluntary organisations. This supported earlier identification, post-diagnostic information, specialist input to training, hospital and discharge advocacy, carer voice in dementia strategy and participation groups, and clearer onward referral. The National Lottery Community Fund specifically recognised the importance of the project's NHS dementia partnerships and its wraparound support. During 2025–2026, Harrow Council also approved a contract variation enabling Harrow Carers to deliver adult carers assessments, alongside continued investment in preventative support for 2026/27. Ongoing dialogue with commissioners identified opportunities to make year-to-date outcome reporting and assessment-flow information clearer, and these priorities have been incorporated into governance and reporting improvements.

Assurance and partnership value. Harrow Carers achieved a full ISO pass and the Carers Excellence Award, providing independent assurance of organisational quality and practice. External reviewers described the organisation as person-centred, community-rooted and trusted. Partnership working with Harrow Council, NHS teams, schools, Age UK, memory services, community organisations and researchers strengthened the identification of carers, referral pathways and the influence of carers' voices on service development. Taken together, this evidence positions Harrow Carers as a valued preventative partner: helping carers seek support earlier, understand their rights, connect with appropriate services and sustain their caring roles for longer.

Strengthening governance and strategic oversight

Harrow Carers strengthened its governance and strategic oversight by welcoming **Marigold Bacuyani, RN, MSc, CMgr FCMI**, Matron for Older People and Dementia Services at London North West University Healthcare NHS Trust, to the Board of Trustees. Her senior clinical experience brings valuable insight into dementia care, the pressures experienced by unpaid carers and families, hospital and community pathways, safeguarding, quality improvement and continuity of care. This expertise complements the Board's existing skills and supports informed scrutiny of service priorities, partnerships, risks, outcomes and sustainability. It also strengthens the connection between carers' lived experience, frontline practice and trustee decision-making, helping the Board provide constructive challenge and strategic direction as Harrow Carers develops its dementia offer and advocates for earlier, coordinated and person-centred support. Marigold's appointment enhances governance capacity; responsibility for decisions remains collective across the Board.

Harrow Carers Marketing and Communications Plan provides a framework for deepening this partnership impact. It identifies coordinated in-reach through GP practices, Northwick Park Hospital, dementia and memory services, adult and children's social care, schools and voluntary-sector networks, supported by clear referral routes through online registration, GP Carer Identification, Joy and direct professional contact. It also prioritises outreach through faith groups, libraries, community venues and local networks to identify hidden carers who may face cultural, language, disability, digital or practical barriers.

Mercers-funded outreach: finding and supporting hidden carers

The Mercers-funded contract is helping Harrow Carers find and support unpaid carers who may not yet be known to formal services. Through **six information / support sessions each week**, with targeted outreach in **deprived wards and communities experiencing poverty**, the contract creates regular and trusted opportunities for carers to receive information,

practical help and wellbeing support. It also helps people who may not recognise themselves as carers to understand their caring role and connect with the wider Harrow Carers offer.

Delivery is being developed through a borough-wide mix of community activity, employment and wellbeing support, co-production, public awareness and partnership working. The engagement includes work with health partners, community organisations and local venues, alongside plans for visible activity in Harrow Town Centre and stronger referral and signposting relationships. This is a positive, preventative use of the funding: it takes support closer to carers in the places and networks they already use, reduces reliance on people finding the service unaided, and creates earlier opportunities to respond to financial pressure, isolation, employment concerns and wellbeing needs. By combining consistent weekly provision with targeted outreach, the contract supports Harrow Carers' strategic priority to grow its reach and strengthens the prospect that carers from under-reached communities across the borough will be recognised, registered and offered timely support before pressures escalate.

7. Priorities identified through carer feedback

Continuing need	Evidence	2026–2027 response
Mental health, exhaustion and burnout	In the July 2026 survey, 46 carers reported stress or anxiety, 29 exhaustion or burnout, 27 sleep problems and 21 depression or low mood.	Prioritise sustainable counselling capacity, early identification, appropriate follow-up and trauma-informed support.
Meaningful breaks	41 of 94 carers said they rarely or never get a break when needed.	Work with carers and partners to clarify what constitutes a meaningful break and explore practical, safe and sustainable options, including sitting, replacement-care, emergency and short-break pathways.
Access around caring and work	Carers cited timing, transport, mobility, geography, short notice and inability to leave the cared-for person.	Use feedback and partnership planning to increase flexible, local and blended options where resources allow, and provide earlier, repeated notice of events.
Financial pressure	23 of 93 survey respondents reported significant or severe cost-of-living impact; feedback shows continued need for benefits, grants and financial guidance.	Strengthen benefits, grant and referral pathways and monitor financial gains and reduced hardship.
Future and contingency planning	75 of 93 worried about their own health and 63 about what would happen to the person they care for.	Embed contingency, emergency and future-planning conversations within reviews and dementia support.

Communications performance will form part of this improvement work. Quarterly review will examine which messages and channels generate the strongest response, which audiences and referral routes remain under-reached and what changes are needed to improve clarity, access and engagement. Measures will include website and Virtual Carers Centre usage,

newsletter engagement, social media reach, online registrations, referral-source data, outreach and in-reach activity, partner sharing and feedback from carers and professionals.

Conclusion

Overall, the evidence shows substantial reach and meaningful positive change across adult, young adult and young carers' services, delivered through a personal, relational and trauma-informed approach. It also demonstrates Harrow Carers' contribution to the preventative ambitions of the Care Act 2014: identifying carers earlier, promoting wellbeing, reducing emerging pressures and helping prevent established needs from escalating into avoidable crisis. Dementia support stands out as a major part of this impact.

Across the three-year **National Lottery grant**, 587 unique dementia carers accessed support within a wider dementia and befriending programme reaching 777 unique carers. During 2025–2026, structured education, one-to-one advice, home and telephone support, Friendship Cafés, peer networks, counselling links, practical and future-planning guidance, inclusive activities for people living with dementia, and strong NHS and community pathways helped families move from uncertainty and isolation towards greater knowledge, confidence, connection and preparedness. Feedback confirmed that surveyed carers reported improved wellbeing, reduced isolation and use of their learning in day-to-day caring. Adult carers more widely reported improved knowledge, stronger confidence, reduced isolation and better emotional coping, while personalised planning and connected services helped people address several needs through a coordinated response. The National Lottery grant has ended and the outcome of the stage-two continuation application is awaited; sustaining dementia and befriending provision is an important partnership and funding priority because it supports both unpaid carers and the wellbeing, dignity and continuity of care of their loved ones.

For young carers, growth from 782 registered young carers in April 2025 to 884 by March 2026, 71 Young Carer Assessments completed during 2025–2026 and sustained engagement through respite, education, DNAV resilience work and one-to-one support demonstrate stronger identification, personalised planning and opportunities to build confidence, relationships and social capital.

Digital innovation widened access: the Virtual Carers Centre recorded 546 carers on the platform, 687 chat messages and 2,163 advice interactions by the year-end reporting point. Carer feedback continues to highlight pressures including anxiety, exhaustion, financial strain and limited access to meaningful breaks, while some carers remain less visible to services. Harrow Carers is therefore continuing to strengthen outcome, demographic, repeat-use and follow-up reporting across service areas.

Throughout 2026–2027, Harrow Carers has continued to focus on sustaining effective preventative services, responding earlier to identified needs, strengthening safeguarding and contingency planning, extending inclusive and digital access where feasible, and improving outcome measurement so carers, communities, commissioners, partners and funders can understand how support prevents, reduces or delays need and sustains wellbeing over time.

Thank you to our Trustees. We are grateful to Harrow Carers' Trustees for their continued strategic guidance, effective governance, constructive challenge and careful stewardship. Their commitment helps ensure that the organisation remains accountable, sustainable and focused on achieving the best possible outcomes for unpaid carers, young adult carers and young carers.