

Carers Health Development Project

The Carers' Support Centre Bristol & South Gloucestershire

Carers as equal partners in care in hospitals

- Carers have a vital role in providing information to health professionals about how the patient manages their condition, providing reassurance to the patient and in communication.
- Carers Health Development Project (CHDP) was successful in embedding a hospital carers' strategy within each trust.
- It was important to the credibility of the project that CHDP staff were working alongside hospital staff on a daily basis.
- Targeted carer awareness training was delivered on wards and at clinical meetings and as part of NHS continuing professional development.
- Admission documentation was changed to try to identify carers.
- Information leaflets and information events helped to raise awareness of carers' issues.
- North Bristol Trust developed its own carers support scheme.
- A carers charter was launched publicly by both trusts setting out their commitment to work together with carers as expert partners in care.

Carers Health Development Project (CHDP) is an initiative by The Carers' Support Centre and was set up to assist local NHS organisations in implementing the Bristol Joint Carers Strategy. CHDP worked with the 2 acute hospital trusts in Bristol, North Bristol Trust (NBT) and University Hospitals Bristol (UHB), to increase their ability to recognise the role of carers and to develop better ways to involve them as expert partners in care.

Page 1 September 2012

1. Background

The Carers Health Development Project (CHDP) began in March 2010 to assist the 2 local hospital trusts to implement the Bristol Joint Carers Strategy. Included in the strategy's aims are that carers are recognised and valued; and that they are informed and involved.

Increasingly government guidance recognises that patients and carers are experts in how they feel and what their caring situation is like. It points out that carers and patients need to be involved to ensure the quality of their care whilst in hospital.

It has also been recognised that a key issue that prevents a successful hospital discharge is "patient/carer involvement/choice eg the lack of engagement with patients and carers in decisions about their care" (Discharge from Hospital: pathway, process and practice 2003).

The contribution carers can make is all too often overlooked. They can help hospital staff to understand the care of the patient. They have a vital role in providing information about how the patient manages their condition, providing reassurance to the patient and promoting communication.

Carers themselves may experience difficulties and want help and support in understanding and coming to terms with changes in the patient's condition. They may have anxieties about the additional burden of care for them after discharge; but this support may not be easily offered within a busy hospital ward where the focus is on the patient.

"I often feel I am kept in the dark by nurses and doctors. It is very frustrating and makes me question if the care is right."

"It feels like staff do not have enough time to talk to me. I begin to feel like I am in the way. I am sure they must think I am a nuisance."

"Sometimes the staff do not see the bigger picture. They do not see the person. It makes me worry that they haven't got the diagnosis right or that they are not giving him the care he needs. I worry when I am not there."

Barriers to carers being equal partners in care

- Hospital staff have low carer awareness and do not recognise the role that carers play in the health of patients.
- Records and hospital systems do not encourage this recognition.
- Hospital staff have limited information on what to do with a carer in crisis.
- Hospital staff have limited knowledge of the resources provided in the community for carers.

2. The strategy for engagement

CHDP was successful in embedding a carers' strategy within each trust. This was achieved by working within the hospital systems and finding hospital staff whose work or personal experience made them natural supporters of carers. CHDP also identified existing initiatives and strategies where the carer's role is relevant.

In the past, voluntary sector staff working with hospitals have tended to be viewed as outsiders. It was important to the credibility of the project that the staff were working alongside hospital staff on a daily basis. The 2 project workers were therefore integrated into the 2 trusts. Each worker had their own desk in the hospital, a trust email address, trust badge and identification.

The project influenced the hospitals' systems and processes by:

- Identifying a senior manager as a carers lead.
- Setting up a carers strategy group. The membership were made up of staff from: OT, HSC, Matrons, Divisional leads PALS, the discharge and safeguarding team, the carer governors and carer representatives involved in the hospital.
- Working closely with specialist nurses who had a remit to work with the patient in a wider context.
- Establishing the relevance of carers to existing initiatives, such as improving discharge; and strategies, such as the Dementia Strategy.
- Setting up carers reference groups to raise and discuss issues relevant to carers in the trusts. This information was then fed back to the strategy group and to other relevant initiatives and committees.

3. Carer awareness training

Carer awareness training was already well established across Health and Social Care in the city offering a comprehensive introduction to carers' issues in half day or full day sessions. Initially this training was offered to hospital staff in both trusts, but it was soon clear that most staff were unable to leave their posts for this length of time for training that was not seen as mandatory.

The project staff therefore developed targeted sessions which were delivered on wards in short staff breaks or at directorate or clinical meetings with an offer of follow up. They also developed on-line training modules as part of the NHS continuing professional development (CPD) programme so that staff could gain carer awareness training as part of their CPD requirements.

In addition, CHDP tried to convince hospital trainers and managers to make carer awareness training a greater priority. As a result, this training was included in the actions coming out of the overall strategy development.

4. Changes to admission documentation

Admission documentation was changed in both trusts to try to identify carers when patients were admitted. The new Emergency Department documentation includes prompts for staff to ask the question 'Do you care for someone else?'

5. Information for staff

A handy pocket sized leaflet was developed for health staff. The *Supporting Carers* leaflet includes information on how to get a carers assessment, registering for a carers emergency card, and local organisations that can provide support.

The trusts' own newsletters and magazines were regularly used to raise the profile of carers and the issues affecting them.

6. Information events

CHDP organised regular information stands to raise awareness of carers' issues amongst staff and to offer information and support to carers visiting the hospitals. The events were used to identify and give information to a number of hitherto unknown carers.

- A carers information day was attended by over 70 people. It included stands by 12 voluntary sector carer organisations as well as the Chaplaincy, Social Services and Advice and Complaints team. There were 2 training sessions held for staff and 2 focus groups held for carers to feedback their experiences of being a carer within the trust.
- An information stand was set up in the canteen during Carers Week giving information about carers' issues to both staff, patients and their families.
- Information stands were subsequently set up in both trusts on a monthly basis. These involved other voluntary sector carer organisations, giving them the opportunity to make links with the hospitals eg KWADS, BASF, Stroke Association, St Johns Ambulance, Alzheimers Society, Wellaware.
- The Supporting Carers leaflet was delivered to wards and via the WRVS shops.

Hospital staff had limited knowledge of the resources provided in the community for carers, and information events led to establishing useful links, particularly with black and minority ethnic groups. For example, the Chinese Women's Group made contact with ward staff. When staff realised their potential for communication with patients and their families, they were invited to come onto the wards on a regular basis.

It was significant that many staff, who were themselves carers, came to the stalls to ask for help and advice.

Following on from this, CHDP has worked with UHB to provide their own staff with carer information and support through their HR website and to develop a Staff Carers Charter.

7. Carers support scheme

The carers support scheme at NBT developed out of discussions with the carers reference group and ward staff about the need to be able to identify carers who are supporting patients on the wards.

The scheme comprises a pack for ward staff which includes 'carer conversations' (points to discuss with a carer around what they are willing and able to do for the patient); a sticker for carers to identify them while they are in the hospital and allow them to come and go on the ward and not be restricted to visiting times; and discounts for carers in the cafes and for parking.

The aim of the scheme is to involve carers more fully, for them to be seen as partners in care and also for them to have some practical help.

The scheme was piloted on 2 wards, then rolled out across both sites. Initial feedback from staff and carers is generally positive, particularly around the parking.

8. Carers Charter

A Carers Charter was developed between both trusts and was the culmination of a year of negotiations with carers leads and the trusts' strategy groups and consultation with carers. The charter's aim is to be a point of reference for carers on what to expect in the hospitals and also challenges the trusts to be "answerable" to carers' experiences. The charter recognises the vital role carers play in both organisations and sets out both trusts' commitment to work together with carers as expert partners in care.

The charter was signed by both trusts at a public launch and is to be displayed in every ward in the hospitals. Its effectiveness will be reviewed annually. Quotes from the launch:

"We are all in difficult, challenging and changing times so it is especially good to be celebrating such a positive event. It demonstrates a willingness and desire to connect and to engage in a conversation with carers. It does mean a lot of hard work and evaluation in the future, but I hope it will mark the beginning of closer work and understanding between hospital staff at all levels and carers, where carers will be truly valued as 'Partners in Care'." (Carer representative)

"Carers are vitally important – they provide a unique link between the patient and our staff. This charter sets out how we can support them so they can help us. It's an important partnership and one we are 100 percent committed to." (Acute trust staff member)

The Charter focuses on 6 key areas for carers

- Carers as equal partners
- Sharing information
- Supporting carers
- Young carers
- Having a voice
- Discharge

9. Conclusions

The quality of the relationship between carers and professionals is key in ensuring a high quality of patient care, the safety of patients and developing a sense of trust. A culture of respect for carers and willingness to learn about carers' issues are an important part of this process.

Feedback from the project so far shows that awareness of carers and the vital role they play is improving amongst hospital staff. This is borne out by carers themselves who are beginning to notice positive changes within the hospitals.

More work needs to be done to ensure sustainability and the fact that funding has been made available to continue in a second stage of CHDP work with hospitals is good news.

This paper is part of a series of 7 short reports produced by the Carers Health Development Project (CHPD). CHDP is an initiative by The CarersqSupport Centre and was set up to assist local NHS organisations in implementing the Bristol Joint Carers Strategy. During the first 2 years of the project (April 2010 . March 2012) CHDP worked with GP practices and hospitals to develop ways of recognising and supporting carers.

The reports are:

Carers Health Development Project evaluation Engaging with GP practices Carers registers project Identifying carers through flu vac programmes GP Link volunteers Carers as equal partners in care in hospitals Carer awareness training in the NHS

The Carers' Support Centre provides support for carers of all ages across Bristol and South Gloucestershire. In addition to the CHDP, The CarersqSupport Centre provides a confidential carersqsupport line, a team of carer support officers, carers holidays and a variety of workshops, training and events.

For information and advice call CarersLine 0117 965 2200 www.carerssupportcentre.org.uk



The Carers' Support Centre

