Carers Strategy
2017-2020
1. Introduction

Who is a Carer?
There is no such thing as a “typical” Carer. A Carer might care for someone they live with or someone they visit regularly. A Carer can be any age and might have other responsibilities such as work, education or family commitments. The roles taken on as a Carer can vary. It could be helping with activities of daily living such as getting out of bed, washing and dressing, preparing and eating meals, taking medication; it could also be providing emotional support to someone with mental health needs. Not all Carers see themselves as Carers; they may find it difficult to identify this as a role distinct from their relationship as a son or daughter, a parent, a partner or a friend. The Trust recognises and will adopt the definition developed by Hillingdon Carers:

“A Carer is somebody who provides unpaid support to a relative, friend or neighbour who is ill, frail, disabled or has mental health, drug or alcohol problems. This includes parent-Carers of disabled children and young Carers under the age of eighteen whose caring role may involve them taking on a level of responsibility that is inappropriate to their age or development”

Hillingdon Carers 2015

National context
There are over 5.4 million unpaid Carers across the UK, and the number is growing faster than the rate of population growth. The need to recognise and support Carers is enshrined in law and public policy. The Care Act 2014 gives Carers the right to an assessment of need, support and for their well-being to be considered and promoted. The Equality Act 2010 includes measures to protect Carers from discrimination, including in the workplace. NHS England’s Commitment to Carers recognises Carers as being an important asset to the NHS and identifies eight priority areas to drive improvement in the quality of life for Carers and the people for whom they care. These include:- raising the profile of Carers; education, training and information; service development; person-centred, well-co-ordinated care; primary care; commissioning support; partnership links and NHS England as an employer.

Carers in Hillingdon
There are 25,905 unpaid Carers in Hillingdon. Many will access services from the Trust, either in connection with the person they care for or as a patient themselves. The Trust is committed to ensuring all Carers attending the Trust are recognised, valued and supported: this strategy reflects the principles of the above publications.
We recognise that the needs of Carers continue across different health and social care settings, this strategy has therefore been co-designed with Carers, staff and partner organisations including Age UK, Hillingdon Carers and Healthwatch Hillingdon.

2. Developing the Strategy

The Trust held a Listening event in March 2017, attended by 45 members of the public, staff and partner organisations. Most identified themselves as Carers, many as being patients of the hospital.

Four Carers, two of whom were also members of staff, shared their experiences and perspectives. All the participants had an opportunity to discuss what they had heard and share their own experiences. This painted a clear picture of what is important to Carers: what matters, how they want to be treated, how their experience and that of the person they support, can be positive. These messages were a key component in developing the strategy and identifying its intended outcomes.

Following the presentations, workshops took place to consider “what good looks like” from the perspective of the Carer across four touch points in the patient journey:

- Emergency Department
- Inpatient Care
- Discharge
- Outpatient Services.

A final plenary session drew the themes together to create a shared vision for the future.

Further consultation took place during Carers Week in June 2017, with the draft strategy being shared at public events, with key stakeholders and people who had attended the listening event.

“Don’t dismiss me as the designated driver, I have been the main Carer for my son for the last 35 years and I will be continuing to care for him ongoing”

Carer, 2017
What our Carers told us was important:

“Waiting areas that can accommodate wheelchairs.”

“Prioritise Carers when they themselves are patients – they may need to go back to home to look after their loved one”

“Do not make assumptions. (E.g. assumption that the wheelchair user must be the patient)”

“Staff should take time to talk with Carers and family, get to know patient and family as individuals”

“Ask Carers if they wish to support the patient, don’t just assume it.”

“Staff need not only to listen, but to hear what is being said”

“Every person should be greeted with a smile and staff introduce themselves with their name and role”

“Ask how I am coping with what’s happening to my dad”

“Don’t dismiss me as the designated driver, I have been the main Carer for my son for the last 35 years and I will be continuing to care for him ongoing”

“I want to be recognised and valued as a Carer “

“Carers should have somewhere to sleep if they stay overnight”

“Staff do not understand how stressful caring is; and how sometimes you think you just can’t cope any more.”

“There should be facilities for refreshments for Carers”

“Patients and Carers need to be included in decision making”

“Consider the information needs of patients and Carers”
3. Strategy Aims

The aim of the strategy is to give direction to the Trust’s development of staff, patient and Carer partnerships, ensuring that the Carer’s voice is heard, their expertise is acknowledged and their needs considered.

Our Vision

“Carers will be welcome in our hospitals, they will feel valued and supported and they will be acknowledged as expert partners in care. We will work together to achieve the best outcomes possible for them and the person they support”.

Key Principles

Drawing from the feedback we have received from an array of sources including the listening event, complaints, compliments, surveys and via stakeholders, we have identified four key principles which underpin our Carers Strategy. These principles are in line with the Trust’s Cares Values: Communication, Attitude, Responsibility, Equity, Safety.
4. Delivering the strategy

For each principle there are a series of commitments which will be delivered during the lifetime of the strategy:

**Principle 1 Carers as partners in care**

We acknowledge that Carers have a right to choose whether or not to take on or continue a caring role, or how much care they wish to provide to the patient in hospital.

**We will:**

- Publish a Carers’ Charter to make visible our pledge of partnership between patients, Carers and professions in the design and delivery of care
- Ensure that training is provided to staff regarding involving and supporting Carers
- Recognise the importance of Carers’ expert knowledge when caring for patients
- Identify Carers at the point of admission to establish who the Carer is and what their individual needs may be
- Include Carers when planning and discussing treatment options and where appropriate, in multidisciplinary meetings
- Involve Carers in discharge discussions at an early stage e.g. medication regimes, equipment needs and arrangements
- Ensure that Carers have unrestricted visiting when caring for the person they support
- Provide information to carers about the Hillingdon Carers Partnership which is available to provide advice, support and training to carers – Tel: 01895 811206 or email: office@hillingdoncarers.org.uk
Principle 2 Clear communication and accessible information

Effective care and treatment depends on accurate information. We believe it is vital to ensure we and our Carers are able to act on the best possible information. This means Carers having the facility to communicate quickly with staff and be listened to carefully. It means staff providing Carers with information they need to fulfil their caring role.

We recognise that confidentiality issues might be a barrier to this and this strategy however these barriers can often be overcome with an understanding that such highly complex issues require a flexible response with carefully weighed judgements tailored to the individual situation.

We will:

- Introduce ourselves at all times – “Hello my name is”
- Ensure that Carers know who is on the care team of the person they care for and what the different roles of team members are
- Ensure staff recognise that some Carers may have individual needs which will require additional support from staff in relation to communication and involvement.

Principle 3 Supporting and signposting

We acknowledge that Carers have a right to choose whether or not to take on or continue a caring role, or how much care they wish to provide to the patient in hospital, but we recognise for those Carers who do make such a commitment it will not be sustainable if their own needs are not met.

It is vital that Carers are adequately supported: this applies across the care and social pathway, in and outside the hospital setting. Support can be physical, emotional and environmental.

We will:

- Identify Carers at the point of contact to establish who the Carer is and what their individual needs may be
• Empower Carers to access ongoing support, ensuring they have access to a Carers Assessment and signposting to other services

• Ensure that information and signposting resources are available in all areas.

**Key Principle 4: Listening and learning**

Each Carer has a right to be satisfied that the person they care for is consistently receiving the best and most appropriate care possible, and to know what efforts are being made to achieve this. It is important that we provide clear explanations of what is being done and why, and what Carers can do if we fall short of this.

We should also ensure that Carers are given regular opportunities to assess and evaluate the services provided, and that their responses are recorded and acted upon.

**We will:**

• Ensure that patients and Carers know how to raise a concern or make a complaint

• Ensure that lessons learned from complaints and incidents are shared with patients and Carers

• Share and promote good practice and lessons learnt throughout the Trust.

Ensure Carers are appropriately informed and consulted when planning and developing new services e.g. attending Carer forums, Carer events, consulting with Carer organisations and through our Trust’s People in Partnership forum.

5. **Expected outcomes**

✓ Raised awareness and recognition of the importance of Carers by all staff at the Trust

✓ Improved patient and Carer experience metrics

✓ Improved staff experience for those staff who are Carers.
6. Implementation, Monitoring and Review

The strategy will be delivered through the development of a detailed implementation plan. Delivery of the plan will be overseen by the Head of Patient and Public Engagement; implementation and progress will be monitored on a quarterly basis through the Experience and Engagement Committee.