

Carers Involvement and Support Bulletin

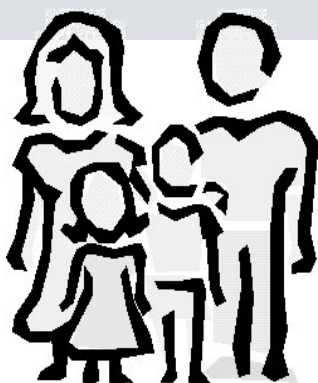
Yorkshire and Humber CQUIN Group

Supporting Carer

Involvement

Thursday 18th

September



Case study

Carers Pack in development (Clifton House)

WHEN -

- On admission

FORMAT -

- Easy read
- Bullet points
- Easy to find information
- Pictures,
- Website/YouTube
- DVD - families who can't visit can see, using voice over of service users linked to family - helpful

INFO/CONTENT - identify:

- Named nurse (one person contact)
- Consultant name
- Ward telephone number
- Visiting hours
- Where visits can take place - ward, garden, community
- How to book off ward visiting room
- Sectioning procedures - how and when leave is given
- Information about carers meetings relative to carers locality as well as service level meetings
- Information about the pathway, options, facilities, timescales - based on individual need
- Identify that the main carers can be invited to CPA's ward rounds/MDT, or organise time with Dr and named nurse.
- Carer opportunity to evaluate pack

INSIDE THIS ISSUE:

Case Study	1
Notes from Carer CQUIN Project Group	2&3
The next meeting	3
CQUIN Indicator Information	4

Notes from Carer CQUIN Project Group

So What?

How are carers currently involved?

1. In my care

CPA meetings – copies of reports
 Conference calls
 Telephone contact – point of contact
 Advocacy
 Meetings with members of clinical team
 Informal advice and support
 Offering meetings with named nurse
 Referral to carers team
 Family work
 History taking
 Liaising with service user to involve friends and family
 Face to face contact
 Involvement in MDT meetings
 Provide general information about diagnosis medication and other interventions
 MHRT meetings
 “Looking out for me” & “Look after me”
 Involvement in care planning
 Contact on Skype
 Contact through letters and support with letter writing
 Involvement in manager’s hearings

2. In service development

Members council
 Seek input for planned changes
 Relatives day – fun and games, bouncy castle, BBQ
 Visitors room
 Open day
 Evaluation tool
 Feedback
 Discuss plans for service re development
 Tour of new development for feedback
 Discussion at carers dialogue group
 Family questionnaire
 Coffee morning in service area
 Visits in the community
 Sports day
 Provide formal and informal forums for feedback
 Carers involved in trust chairs appointment
 Evaluation tool
 Contact list for carers
 Advocacy

Suggestion box

Information awareness of the carers team for the trust
 Wellbeing day
 Joint community leave
 Community ward meetings
 LYPFT carers team approve our tools and carers
 Carers forum

3. Individual Carers Support

Carers assessment
 Advocacy
 Information leaflets
 Visits on the unit, in the community and at home
 Referral to support group/ formal support
 Streamline magazine
 Information sessions – MHA, medication, section 17 leave
 Telephone contact
 Meetings with members of the clinical team
 1:1 meetings with named nurse
 Welcome to contact ward to speak with patient or staff
 DVD footage of facilities to post out
 Facilitate home leave where possible
 Ward contact
 Home visits
 Go for lunch with family
 Assist with travel
 Open attendance at CPA and MDT
 Strong social work input
 Flexible visiting times
 Coffee morning
 Tour of services
 Informal listening ear
 Carers meeting named nurse on admission



Notes from Carer CQUIN Project Group continued....

Now What and How What?

What do services want to do and how will they do it?

Overnight stays in B&B/hotel with family – Obtain links with local B7B's

Mediation between families/extended family – Involve advocacy or occupational health

Communication book in reception area – provide book to write in, review regularly, respond as necessary

Ensuring drink facilities are available in visitor area – patients can prepare drinks prior to visit

More information available to families regarding medication – leaflets on different medications available in reception area

Supply information in a different format e.g. easy read, audio, visual – patients CPA coordinator/care team arrange to provide different formats as necessary

Not so strict on visits (low secure) – allow visits to take place in the community dependant on leave

Information on different mental health issues and sections – leaflets and training, 1:1's

Satisfaction questionnaires

Carers forum

Travel costs

Meeting halfway geographically

Skype – training for staff, service users and carers, change in IT policy

Questionnaires – information gathering

Trying to bring consistency around processes relating to carer involvement e.g. paperwork that captures the consent procedure

Introduction to the service – bring existing good practice across from one service to another

Formalising what we are already doing

Collecting data

Checklist about whether someone is identified as carer/relative/friend and consent to which information the person agrees to be passed on

Model of practice

Developing and using current information leaflets

Use of electronic media/technology

Family days

Where are services in relation to developing a satisfaction tool?

Services are at different stages

Existing tools need reviewing

New tools being developed

Some haven't developed yet

Carers and service users involvement in development varies across services

What should be included to ensure it meets the CQUIN?

Needs to be meaningful and drive improvement

Consider points raised in the bulletin

Ensure it addresses the service that is being evaluated – not too general

Broken down into sections

1. First impressions
2. Involvement in care
3. Visitor environment

The next meeting— Thursday 18th September

The next meeting

Part 1:

Presentation Case Study from Newsam Centre

Sharing progress on strategy developments

Part 2:

Sharing learning from development of satisfaction tools

Planning for next meeting—date to be confirmed

Please can you come prepared to share the work you have been doing around the strategy and the satisfaction tool—with examples/case studies if possible.

Thank you

Holly and Jo



CQUIN Indicator

Carers play a significant role in the lives of service users and can play a large part in an Individual's recovery. Maintaining relationships with carers when in secure services can be demanding particularly where an individual comes into a service in a high degree of distress. It may also be difficult for carers to understand the nature of a secure service. This CQUIN requires providers to develop a strategy to engage and maintain relationships with carers where a service user has identified this as a choice.

SUPPORTING CARER INVOLVEMENT	
Indicator number	MH6
Indicator name	Supporting Carer Involvement
Indicator weighting (% of CQUIN scheme available)	0.4375% (17.5 % of total CQUIN scheme available)
Description of indicator	To support carer involvement with their relatives in secure care, (particularly in the first three months of care) and then on to the point of discharge.

Q2

Develop a written strategy for engaging with carers to maintain good communication including telephone, face to face, written communication and electronic formats (email) if appropriate, including regular carer satisfaction surveys and carer support.

Develop a carer satisfaction tool or develop an interview schedule for individual carer interviews using advocacy services.

Q4

Demonstrate service user by service user, that they have at the earliest opportunity been able to identify key and meaningful family members and that if agreed by the service user they have been invited to attend CPA meetings.

Demonstrate provision of clear information for carers with regard to the nature of the service and related matters e.g. legal context.

Demonstrate that the service has made use of carer satisfaction surveys to improve service provision in accordance with the service's carer strategy.