



Carers Involvement and Support Bulletin

Supporting Carer

Involvement

CQUIN Group

Next meeting:

Tuesday 21st April

Sandal Rugby Club

2 - 4

Last meeting summary 12th February 2015

The last meeting was on the 12th February and the end of the CQUIN for this year was in sight. As we all know; the Supporting Carer Involvement CQUIN is going to be a 2 year CQUIN and as such we were hoping to be able to see the CQUIN information for the coming year, however the guidance is not out yet, We will look at this at the next meeting.

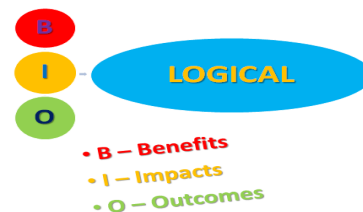
We looked at the Benefits, Impact on patient experience, and Outcomes of the Carer CQUIN. We asked

everyone to write on the post it notes provided and then place them on the sheets so that we could think about these 3 areas. This was useful in relation to the Benchmarking tool that is in development.

For each area of the tool we have worked with service users and staff to identify the Benefits, Impacts and Outcomes, in line with the **BIO-Logical** Model of Involvement. **Pages 2&3**

We then did some group work to think about what the standards around carer involvement should be for the benchmarking tool. **Page 5**

We thought it would be useful to look at everyone's Top Tips for Involving family and carers from everything that they have learnt from implementing the CQUIN over the last year. It was useful to reflect on the learning points from this, thinking about what worked well, and other things that perhaps were less successful. **Page 4**



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Benefits

- Formalising the carer involvement
- Know what is available at hospitals
- Increase understanding
- Know how they can be involved
- Encourage more frequent visits
- Better information available—newsletter, carer booklet
- More flexible visiting areas, e.g. grounds, secure garden, sports hall
- Encourage continued development of services—what else can we offer for carers?
- More frequent carers events
- Able to attend other meetings to find out first hand what is happening
- Formalise the structure of what we already do
- More collaborative decisions
- Better relationship between staff and carers
- More carer involvement

Impacts on patient experience

- Help to know what is going on—feel more included
- Increased comfortably
- Know where they stand!
- More positive view on the impact on families of admission
- Positive impact to enable changes
- Improved communication and relationships
- Better communication with carers
- More understanding for carers
- Service user Experience meetings have been developed
- Breaking down barriers
- Carers get listened to much more



Benefits – Better information available

More collaborative decisions

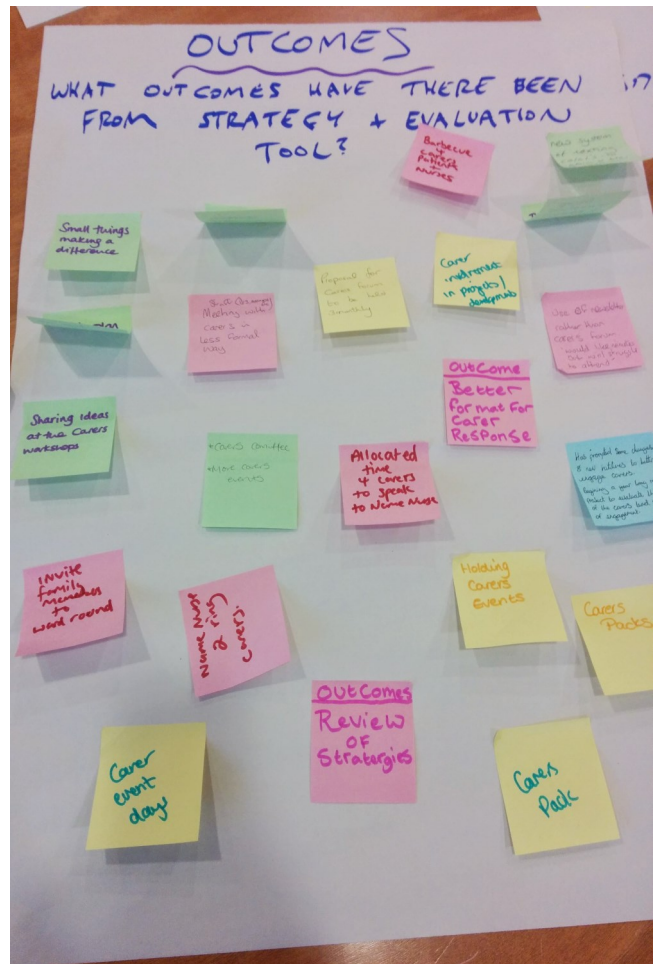
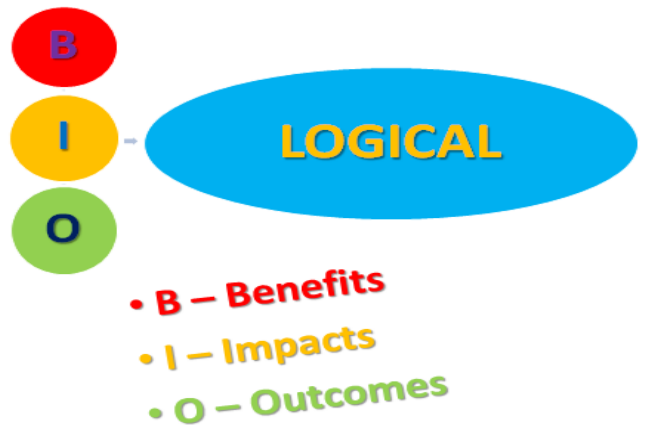
Impact; on Patient/Carer Experience –

Improved communication and relationships. More positive view on family member admission and treatment

Outcomes – Increased contact with carers. Inspires new and creative ways to engage and communicate with carers

Outcomes

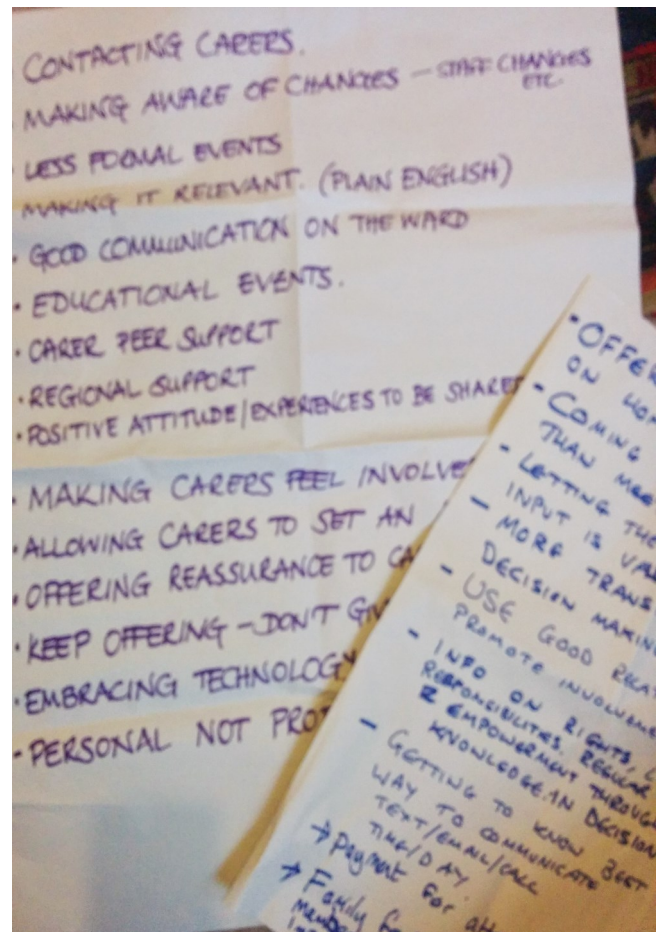
- Small things make a difference
- Proposal for carers forum to be held monthly
- Staff meeting with carers in much more informal way
- Carer involvement in projects/developments
- BBQ for carers, patients and staff
- New system of making carers aware of support and information
- Better format for carer response
- Use of newsletter rather than carers forum—would like information but would struggle to attend
- Carers committee—more carers events
- Allocated time for carers to speak to named nurse
- Has prompted some changes and new initiatives to better engage carers
- Beginning a year long project to evaluate the role of the carers lead and level of engagement
- Holding more carers events
- Carers packs developed
- Named nurse to regularly ring carers
- Invite family members to ward rounds
- Review of strategies



Top tips for involving carers

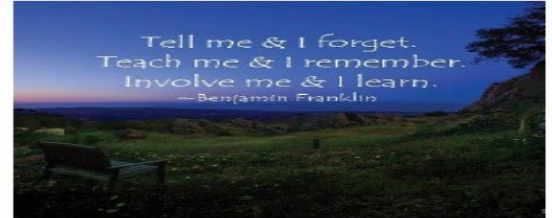


- Contacting carers
- Making aware of changes – staff changes etc.
- Less formal events
- Making it relevant – plain English
- Good communication on the ward
- Educational events for carers
- Carer peer support
- Regional support
- Positive attitude/experiences to be shared
- Making carers feel involved
- Allowing carers to set an agenda
- Offering reassurance to carers
- Keep offering opportunities to get involved
 - don't give up!
- Embracing technology
- “Personal not protocol”
- Help the family member
- Offer to meet them on home turf
- Coming to events rather than meetings
- Letting them know their input is valid
- More transparency in decision making
- Use relationships to promote involvement
- Info on rights, legal responsibilities, regular updates, empowerment through knowledge:
 - In decision making
- Getting to know best ways to communicate – text, email, call, time of day etc.
- Payment for attending committee/support with travel etc.
- Family feeling proud of family member – promoting involvement improves family visits.



Benchmarking Tool

Reviewing Involvement Structures



Standards	Score	Evidence
1. There is an engagement strategy for the service that addresses how families and friends are involved and recognised in the provision of care		
2. Carers are given an information booklet specific to the service, prior to or on admission. This is to include (minimally): Minimum standards, Contact details including the primary point of contact person, Information about how carers may address their needs, Visiting process		
3. The main entrance where visitors are expected to wait is welcoming, has comfortable seating and provides a positive first impression		
4. Where safe to do so, staff endeavour to help service users see family and friends in the environment that service users and family considers most dignifying ie the ward, the garden		
5. With service user consent, staff actively work with family and friends providing practical, educational and emotional support in the programme of regular meetings		
6. Direct communication with carers is proactively made whether this is to invite people to meetings/forums/events/open days, or when discussing family member feedback		
7. Feedback is given to carers via a number of ways. These may include: Regular newsletters, Texts or email, Online through the hospital website, Personally whilst visiting or by phone, Post		
8. Carers have the opportunity to be orientated around the unit. This may include planned coffee mornings to visit the ward surroundings (including the family members bedroom) and hospital facilities, where safe and appropriate to do so		
9. The service has at least one dedicated carers link worker		

Yorkshire and Humber CQUIN Group

Supporting Carer Involvement



21st April 2015

4th June 2015

24th August 2015

24th November

Sandal Rugby Club Wakefield

*friends
family*

2-4

Refreshments provided

