QNPICU and QNFMHS joint webinar

Engaging and communicating with carers

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Please keep microphones muted
Engaging and Communicating with Carers

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• Engagement is more than communication
• Challenges around implementing engagement
• Why engage with carers?
• Communication with carers in the Coronavirus epidemic and new initiatives
• How might you engage with carers?
Engagement is more than communication

Some examples of good practice:

Our carer and families strategy 2018-2021
- Developed, designed, co-produced with staff and led by carers
- Easy to read, what we are going to do, how, by when and measuring progress
- ‘I’ statements

Confidentiality guidelines
- Sensible confidentiality
- Good practice checklist for staff
- Processes to follow if carer or person accessing services withholds consent to sharing of information
- Case studies
You may have all of the strategies, policies and guidelines in place but....

• How do you embed them as standard practice?
• Not by prescriptive ‘you must do this’ training courses
• Winning over hearts and minds by giving real examples of what happens when carers are left out of the loop.
• I tell my carer story as part of our new staff corporate induction. Many staff have remember this for many years after.
Why communicate and share information with carers?

• Root Cause Analysis (RCA) on untoward events continually highlight the repercussions of not communicating, involving and sharing information with carers especially in risk planning and assessment.

• ‘If only we had known we (as carers) would have reacted differently

• Many carers would like to get more skills to support the person they care for

• Carers are there 24/7 and feel that responsibility
Communication with carers during coronavirus

- ‘From the carers perspective Covid 19 is making it more difficult, stressful, distressing and challenging to care for a loved one’
- Carers are worried about what happens if they or the cared for person catches the virus.
- Some carers are putting themselves at risk to support the person they care for as services have changed.
- Lots of information out there, constantly changing and some contradictory!
Co-produced advice for carers during coronavirus and put on DPT website

Contains some basic information:

• How to support the person you care for on one of our inpatient units, by phone, texts, games and dropping off items.

• Delivering DPT interventions by phone or remote technology rather than face-to-face

• Key contacts

• Helping yourself

• Contingency planning and a basic contingency plan form

• How to get essential supplies

• Useful links and websites especially to Devon Carers and Torbay Carers
How might you engage with carers?

Giving carer specific information:

• Who can they contact if they have a concern?

• Clinicians to ring families with updates if the ‘patient’ consents

• Asking how the carer is ... it’s really difficult not being able to see your loved one when they are in hospital

• Have discussions on confidentiality

• Use of technology to be involved in ward rounds (but not all carers would have access to this technology)

• All the things that you would normally recommend but are done differently

• The small things that really do make a difference

• Having a continuous 2-way conversation with carers (DPT is currently developing)

• I’m mindful that there also needs to be some practical support as well
Discussion/questions

• What practical things can you do to engage with carers?

Resources:

• DPT’s carers and families strategy, confidentiality guidelines and advice for carers during coronavirus can be found at:

https://www.dpt.nhs.uk/resources/carers-and-families
Engaging and Communicating with Carers

Sheena Foster – carer. F and F representative - Forensic Quality Network, member of AS CRG and involved with the National Secure Programme NHSE.
Attempt to look at -

• Being a carer in a secure service.
• Why it’s important to engage with carers.
• Where are we now?
• Opportunities for carer engagement.
• Has the revolution begun thanks to the pandemic?
Being a carer in a secure service.
Exploring Family Carer Involvement in Forensic Mental Health Services (2014)

- 2014  UCLAN/Support in Mind/Scottish Gov.
- “I was almost overwhelmed by stress. I felt dreadful guilty at the time, felt I’d failed, you feel like you’re a criminal, I can’t move on with my life.”
- Confusion
- Isolation
- “They don’t like people sharing things—there’s this kind of veil of silence”

Carer Support and Involvement in Secure Mental Health services.
www.england.nhs.uk/securecarerstoolkit
Why it’s important to engage with carers.

NICE
Service Specifications /CCQI standards
Maintain family relationships
Know person prior to the illness – likes and dislikes
Know when their behaviour is out of character
Know their skills and talents
Will likely know what led to the admission - risk
Help identify relapse signature
Have medication history / know allergies and physical health needs
Identify impact on other family members
Accurate Social Circumstances Report
Enable their relative’s recovery
Can provide information about worrying behaviour or incidents.
Most importantly for their wellbeing.
Where are we now?

• “Communicating effectively and engaging patients, families and carers is more important than ever during this time of uncertainty.” (Legal guidance for mental health, learning disability and autism, and specialized commissioning services supporting people of all ages during the coronavirus pandemic, 19th May 2020, Version 2)

• 3.12 Service specification - “must have a carer engagement and involvement strategy.” Standard 57

• Standard 54 – Carers are supported to engage in meetings, events and service initiatives.
Building Relationships

Smile! Courtesy costs nothing
Validate feelings – find time to listen to their story
Share information for the benefit of patients
Give hope and assurance
Have courage to have difficult conversations
Be proactive in your approach – ask questions
Questionnaires, e-mail, text, letters, phone calls, skype
Peer Support
Carers are human too!
Opportunities for carer engagement.

- How can you do the best for the patient if you do not engage with the people who care the most?
- CPA, Social History, tribunals, social circumstances report, Ward rounds, risk assessment. (3 questions)
- Changes to the service, reception area, planning events, carer forum. Opportunities for views.
- Understanding the system – being engaged in the process.
- Anytime you see a carer. How are you?!!!!
- Email, text, phone, skype, Teams.
Up the Revolution!

• Biggest opportunity to engage carers with relative-skype thereby maintaining family relationships.
• Mobile phones on ward.
• Updates
• Teams /zoom – CPA – family meetings.
• One to one psychology sessions.
• Carer groups – zoom
• E-mails.
• How do the staff feel about this?
Thank you for listening!
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