INTRODUCTION

The following protocol sets out the mechanisms the practice has in place for the identification of carers and ensuring that they are referred appropriately to Adult Care Services for a Carers Assessment or to other agencies.

Research shows that for every 1000 patients, 100 will be carers. Carers play a particularly important role in the NHS. They look after those who are in need of additional care, assistance or support because of long-term illness or problems associated with disability, and without them many would lose their independence. Clearly, without carers most modern health organisation would simply be unable to cope with demand and recent Government statements make the point that carers have been undervalued in the past. To redress this situation the Department of Health has produced a National Strategy for Carers which encourages all health organisation to both consider the needs of carers in all future developments and to involve them more when planning future services.

What is a carer?

“A Carers is a person of any age, adult or child, who provides unpaid support to a partner, child, relative or friend who couldn’t manage to live independently or whose health or wellbeing would deteriorate without this help. This could be due to frailty, disability or serious health condition, mental ill health or substance misuse “ (SUPPORTING CARERS- An action Guide for general practitioners and their teams. Royal College of General Practitioners)

The word carer, does not mean care-worker or care staff of any kind who are paid to provide care as part of a contract of employment. A carer is someone who looks after a relative or friend who needs support because of age, physical or learning disability or illness, including mental illness. These include:

- Parent Carer – someone who is the parent of a disabled child. Parents will often see themselves as parents rather than carers, but their child will have addition care needs and may be entitled to additional services

- Young Carer – persons under the age of 18 who have caring responsibilities for another family member who is either unwell (from either mental or physical illness) or disabled

OBJECTIVES

The objectives of this policy are to ensure that:

- Carers are identified
- Carers are provided with appropriate and relevant information
- Carers are provided with appropriate support
- Carers are provided with appropriate care
Identification of Carers

Every opportunity will be taken to identify carers, and in particular:

1. A notice in reception will ask carers, and patients who have a carer, to identify themselves to their GP or the reception staff and will be given a referral form to complete (Appendix C). The details will then be entered on EMIS. Depending on what box the patient has ticked at the bottom referral forms will then be copied and sent to either: Herefordshire Carers Support, Berrows Business Centre, Bath Street, Hereford HR1 2HE and/or Social Services for New referrals the Advice and Referral Team at The Nelson Centre, Whitecross Road, Hereford HR4 0DG, TEL 01432 260101, for those who have already been assigned a social worker the Local Neighbourhood Team.
2. New patients will be asked to complete the relevant section of the New Patient Information Form
3. All health professionals in the surgery will complete referral forms when they ascertain a patient is a carer.

Information & Support for Carers

Up-to-date and relevant information will be available in the waiting room and during Carer’s Week higher profile will be given and a notice board will be dedicated to information at this time. Information will incorporate details of local services and support groups. Newly identified carers will be given a ‘Caring in Herefordshire Pack’.

Care for Carers

Whenever possible and appropriate:

1. Reception staff will take carers’ special needs into account in terms of appointment allocation, procedures for issuing prescriptions and arrangements in the waiting room
2. Clinicians will refer carers to local sources of advocacy, help and support
3. The physical and emotional health of carers will be checked whenever a suitable opportunity arises
4. Carers will be informed of their right to seek a Social Services assessment of their own needs
5. Explicit consent will be sought from patients for health information about them to be divulged to their carer
6. With appropriate consent, carers will be given information about the diagnosis, treatments and prognosis of the person they care for, and about medication and possible side-effects