

ANNUAL CARER SURVEY 2018/19

Introduction

About the survey This year's Annual Carer Survey was undertaken by Quality Health (Care Quality Commission approved national contractor) between 14th January and 28th February 2019.

The survey is a continuation of our commitment to learning from carers feedback through an annual questionnaire that we have conducted for the last few years. In 2016, we collected two custom questionnaires, one for older adults and one for working age adults. These surveys were developed co-productively by carers, representatives of carer support agencies and KMPT staff. In 2017 the survey was changed to reflect the Triangle of Care's six standards and to monitor carer experience of trust adherence to these standards, we used a survey developed within the Triangle of Care programme.

For 2018, refreshed versions of the 2016 surveys were used and this year we contracted Quality Health to conduct the survey (they also conduct the National Patient Survey on our behalf). It was felt that this gives a greater correlation with our engagement with service user feedback. Quality Health also has robust mechanisms for ensuring the survey could be completed by carers with communication problems such as carers who do not read English or with sensory impairments. They provide a helpline facility for anyone with communication difficulties to access the survey.

Approach Quality Health distributed the survey to all the carers identified as such within our older adult service (356) and to 1000 carers of adults of working age. Members of the Carer Consultative Committees who had not received them through the former route were also sent a copy and further copies were available upon request from the Patient Experience Team.

The survey was in three main parts:

1. Information, Advice and Involvement
2. Carers Needs Assessments (including Carers Care Plans)
3. Carer Experience (Wellbeing, overall experience)

There were also nine questions around carer demographics which concluded the survey.

Background

This is a report of the fourth annual carers' survey which is carried out to seek feedback on how well staff have worked with and supported carers, who are themselves providing support for their loved one. The surveys help us see:

- what we are doing well
- where we need to improve

Triangle of Care As a trust, we are committed to the Triangle of Care approach and we have our Triangle of Care membership accreditation. The Triangle of Care programme supports mental health trusts to improve how they work with and engage with carers. In 2017 we achieved one-star accreditation. We now have two-star accreditation. The second star was earned after the completion of self-assessments for all community services (all mental health, learning disability, older people and dementia and substance misuse services).

"This is the highest accolade a mental health trust can currently achieve in demonstrating a commitment to improving the culture of the organisation to one that is intrinsically carer inclusive and supportive...The stars signify we are being honest about where we are as a trust now and where we need to be to ensure carers are better identified and supported." iconnect news May 2019

Carer engagement is now a core part of care coordination training. We regularly review information with the input of carers to help produce information such as letter templates and carer packs. The Carers, Friends and Family Partnership Charter values the important role that carers play in the lives of those who use all of our services, whatever their age and we recognise that there is joint accountability between the trust and carers who are an important source of information about the people that they care for.

Family Engagement and Liaison Lead (FELL) The FELL works specifically with the families and friends of someone who is being assessed or treated by forensic mental health and learning disability services. The Family Engagement and Liaison Lead is able to offer advice, support and information.

Carer champions The role of the carer champion is to support their teams to support carers. This includes promoting carer awareness to their colleagues as well as being a designated point of contact for carers. They strive to keep carers involved and champion the carers' voice.

Carer engagement To achieve the right outcomes for those using our services, we engage with carers in service development discussions countywide through the provision of Carer Consultative Committees. Carers are also regularly invited to sit on recruitment panels for clinical and senior management staff. They are invited to participate in the KMPT Awards process and have been guests and presenters of awards on the night each year. We have carer representation at the Trust Wide Patient and Carer Experience Group. We provided two training events for carers in the year 2018 -19. One was just for carers and related to the trust approach to protecting people at risk of suicide and self-harm, and the other was training in engagement skills which carers were invited to as well as people with experience of using mental health support. We continue to provide Carer Educational Activities such as those aimed at carers of patients with dementia and within inpatient settings, including forensic services.

Carer Feedback

This year a total of 288 people shared their experiences of being a carer. The Older Adults survey had a response rate of 33% with 126 completed responses. The Working Age Adults survey had a 16% response rate with 162 completed responses.

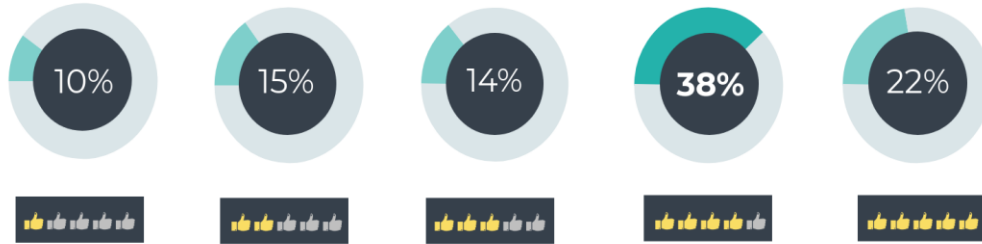
 **68% identify as female**  **32% identify as male**

 27% consider themselves to have a disability

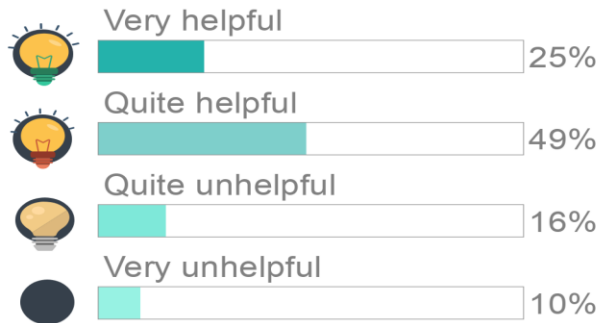
93% are heterosexual and 2% are lesbian, gay or bisexual

- 4% are aged 18-34
 - 50% are aged 35-64
 - 30% are aged 65-74
 - 14% are aged 75-84
 - 2% are 85+
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- Most (83%) care for one person, 13% care for two people and 4% for three people or more
 - 11% care for a parent
 - 43% care for a spouse
 - 46% care for a child
 - 70% live with the person they care for
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- 95% describe their ethnic group or background as White (English/Welsh/Scottish/Northern Irish/British or Irish or Gypsy or Irish Traveller or other White background)
 - 1% describe their ethnic group or background as Mixed / Multiple ethnic groups (White and Black Caribbean / White and Black African / White and Asian or other Mixed/Multiple ethnic background)
 - 1% describe their ethnic group or background as Asian/Asian British (Indian/Pakistani/Bangladeshi/Chinese or other Asian background, please describe)
 - 1% describe their ethnic group or background as Black/ African/Caribbean/Black British (African/Caribbean or other Black/African/Caribbean background).

How satisfied are you with the support received for you as a carer during the last 12 month?



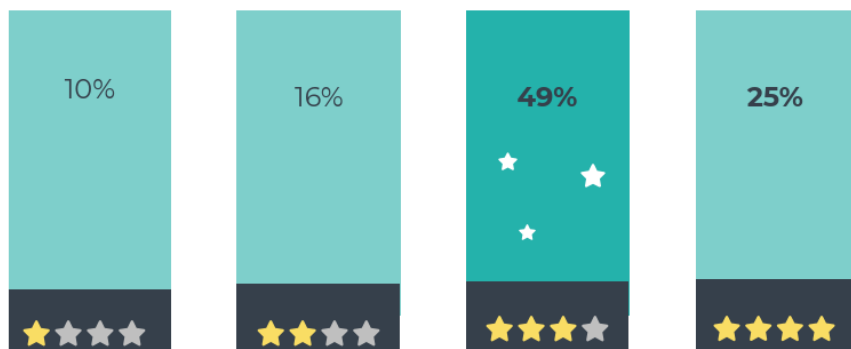
How helpful to you was the information on treatment and medication that the person you care for received / is receiving?



Do staff listen to you as a carer?



How helpful has the information and advice you have received been?



Areas we need to do better in

- How information regarding the person cared for would be shared with the carer was only explained fully to 16% of carers asked and to some extent 24%. 36% of carers said that no, it was not explained and 24% that it has not been explained to them in the last 12 months.
- The subject of confidentiality and sharing of information is a significant concern for service users, their families, carers and staff. Staff should discuss the agreed information-sharing with carers at the earliest opportunity and at regular intervals. If the wishes of the cared for changes then the carer should be updated promptly.
- 62% of carers asked did not feel involved in the discharge planning process (either from the ward or from one team to another) and this has risen since last year so this needs to be improved.
- We asked carers to think “about the support or services the person you care for has received from KMPT in the last 12 months, how have they impacted on you as a Carer?” 36% said that the support or services had made no difference and 15% said they had made things harder. This area needs to be addressed with robust improvements as some carers are feeling that we could support them more than we are doing.
- The Triangle of Care recommends that defined posts responsible for each carer are in place, a named person who they feel they are known to and know them, but 56% of carers are not aware of their named contact. This has worsened since the last survey and needs to be addressed as defined contact is vital in knowing who to contact in a crisis or emergency and in helping carers to feel confident and feel less isolated.
- There still needs to be some work to support some carers who do not feel updated, involved or included in care plans and treatments. The emerging theme is some lack of consistency across the Trust in recognising the essential role of carers.
- Too little signposting to advice hubs or information sources is still a barrier to some carer satisfaction. Many carers feel that clear and effective communication can be lacking and help and support for their own well-being should be more frequent and seamless.

Recommendations

1. Develop and disseminate an information booklet for carers around information sharing
2. Ensure that information is routinely shared with carers, where consent to share has been provided
3. Ensure that carers are included in discharge and transfer processes
4. Raise awareness of carer champions so that it is clear who carers can liaise with within each service
5. Ensure carers are signposted to relevant sources of support and advice such as local Carer support services
6. Conduct a follow up survey in year 2020/21 to review current carer experience and evaluate the impact of changes made

