# Carers’ Policy

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<tr>
<th>Category:</th>
<th>Policy to promote standards of care and inclusion for carers.</th>
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<tr>
<td>Summary:</td>
<td>To promote standards of care and inclusion for all carers visiting the Trust, including carers of people with a learning disability who may have a learning disability themselves.</td>
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<td>Equality Analysis</td>
<td>February 2013</td>
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<td>Valid From:</td>
<td>April 2013.</td>
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<td>Date of Next Review:</td>
<td>February 2013</td>
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<td>Approval Date/ Via:</td>
<td>March 2013. Clinical Governance Committee</td>
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<tr>
<td>Distribution:</td>
<td>All ward and department Managers.</td>
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<tr>
<td>Author(s):</td>
<td>Chief Nurse Equality and Diversity Manager</td>
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<td>This Document replaces:</td>
<td>Oxfordshire Carers Strategy 2008-2012 to be refreshed in the summer of 2013.</td>
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**Lead Director:** Chief Nurse  
**Issue Date:** April 2013
Introduction
1. This Trust will contribute to the improvement of Carers’ experiences of health and social care services in Oxfordshire.

2. This policy is required to promote the recognition, identification, support to and inclusion of, unpaid Carers or family members, in the care of patients and decisions affecting a patient’s care whilst in hospital.

3. The Francis Report states the “provision of the right information to patients and their families, at the right time is vital.” (22)

4. The Healthcare For All Report states “Families and other carers should be involved as a matter of course, as partners in the provision of treatment and care, unless good reason is given and Trust Boards should ensure that reasonable adjustments are made to enable them to do this effectively.” Recommendation 3. (23)

5. Putting Patients First (December 2007) requires the NHS to recognize family members and carers as experts and care partners.

6. The NHS Constitution (section 2A) in a pledge to patients, commits the NHS to “work in partnership with you, your family, carers and representatives.”

7. The National Carers’ Strategy 2008 and the Refresh 2010 outlines the need to: support those with caring responsibilities to identify themselves as carers at an early stage, recognize the value of their contribution and involve them from the outset, both in designing local care provision and in planning individual care packages.

8. This Trust will contribute an action plan to the Oxfordshire Carers’ Strategy in line with the Trust Carers’ protocol, to provide detail by June 2013, on how this policy will be achieved.

Policy Statement
It is the policy of this Trust that:

9. All carers will be identified, involved, informed, respected, supported, trained as appropriate and treated as partners in care, throughout a patient’s pathway including the discharge process.

10. Opportunity for a patient’s carer, to be supported to discuss their future role as a carer will be provided. Young Carers will be identified and given appropriate help and support.

11. All carers who are employees will be supported and assisted to maintain a balance between paid work and caring responsibilities to promote their health and well-being. Please refer to the Special Leave Policy and the Flexible Working Policy.

12. All carers will be given information in an accessible format appropriate to their individual needs.

13. This Trust will apply this policy fairly, appropriately and according to individual needs for all carers who enter the Trust.
14. The Trust will work to minimize potential discrimination by association, on the grounds of race, age (young and adult carers of all ages), sex, disability (including carers who have a learning disability), sexual orientation, religion or belief, gender reassignment, pregnancy and maternity and marriage and civil partnerships. Carers have the right to private and family life and their wishes will need respecting.

Scope

15. This policy applies to all employees directly involved in patient care and all employees involved in improving patient and carer experiences.

16. This policy applies to all employees who are carers and their line managers.

Aim

17. The purpose of this policy is to:

17.1 ensure positive and supportive carer experiences;

17.2 ensure that carers accessing the services of this Trust or as employees, experience compassionate excellence;

17.3 ensure carers feel empowered and fully involved in a patient's care;

17.4 ensure carers feel fully informed about services, opportunities for support, and their rights as carers;

17.4 ensure that carers get the opportunity to discuss any concerns;

17.5 ensure all carers receive information in a way that they understand and in an accessible format.

Definitions

18. Carer

Carers are people who care, unpaid, for friends or family members who are ill, frail or disabled. Carers impact on and are impacted by all health and social care services. (Oxfordshire Joint Carers' Strategy Refresh.2013-2016)

18.1 Carers may have a disability and be vulnerable themselves. (E.g. a learning disability)

18.2 Young Carer: Children and young people under 18, whose life is restricted by the need to take responsibility for a person who is either: chronically ill, has a disability, is experiencing mental distress, is affected by alcohol and/ or substance misuse or is elderly or infirm. (Birmingham Crossroads)

Responsibilities

19. The Chief Executive has overall responsibility.

19.1 The Chief Nurse has delegated authority.

19.2 The Carers Lead for the Trust is: Equality and Diversity Manager

19.3 All Ward Managers will ensure there is a named Carers Champion on all wards and will ensure Carers’ reasonable needs are met.

19.4 All employees who have direct patient contact have a responsibility to share information about a patient’s care and future care with the carer.
Content of the Policy

20. Identification: All unpaid carers of patients, or carers who are patients, will be identified at the earliest opportunity on admission or attendance at outpatient departments.

21. Record: All carers will be recorded as such within the electronic patient records.

22. Inform: All carers will be respected, empowered and kept fully informed. Carers will be treated as partners in the care of a patient, so that with the patient’s permission, all carers will be included in discussions about all plans for current and future care. Communication will be in the required format both for individual patients and their Carers.

23. Support and Signpost: All carers will be supported to be involved in key decisions and express any fears and concerns about maintaining their caring role. All carers will be encouraged to visit their G.P. and given information on where to obtain support, carers break funding and a carer’s assessment, via the Social Services Access Team telephone number.

24. Awareness raising about carers and their needs will be available for all staff that have direct patient contact.

25. The Trust will contribute to the Oxfordshire County Carers Strategy as a partner. A Trust action plan will be included in the Oxfordshire Strategy, which will give detail of how this policy will be achieved, in line with the Trust Carers’ Protocol.

26. All carers who themselves have a disability or specific needs will have reasonable adjustments made in order that they can be fully involved and informed about a patient’s care. This may include a Carer with a learning disability or a physical disability or both.

27. All carers who are deaf will have access to British Sign Language and communication aids as required.

28. The religion or belief of carers and the patient will be respected.

29. All carers who are very elderly or are under 18 years of age will have access to appropriate reasonable adjustments.

30. Carers who may not normally identify as a carer (for cultural reasons) will be given information about appropriate support available.

31. Carers who do not speak English will be given access to interpreting services so that they may be fully involved and understand information given.

32. All carers will be shown respect and dignity and involved equally, whatever their sex/gender and sexual orientation.

33. Carers who are pregnant will be supported according to their individual needs.

34. All carers will be respected and treated fairly and inclusively whether they are married, partners or within a civil partnership.
Training

35. Training required to fulfil this policy will be provided in accordance with the Trust’s Training Needs Analysis. Management and monitoring of training will be in accordance with the Trust’s Learning and Development Policy.

35.1 Awareness of the needs of carers sessions can be obtained from Carers Oxfordshire, via the Equality and Diversity Manager.

Monitoring Compliance

36. Compliance with the document will be monitored in the following ways:

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<tr>
<th>Aspect of compliance or effectiveness being monitored</th>
<th>Monitoring Method</th>
<th>Monitoring Responsibility</th>
<th>Frequency of Monitoring</th>
<th>Committee that will review findings and monitor completion of any resulting actions</th>
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<tr>
<td>Carer experience</td>
<td>Carer feedback and involvement</td>
<td>Equality and Diversity Manager/ Patient Services Team Manager?</td>
<td>Six monthly</td>
<td>Clinical Governance Committee.</td>
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<td>Annual</td>
<td>Clinical Governance Committee.</td>
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Review

37. This policy will be reviewed in one year to ensure it meets national guidance and Trust requirements.

Equality Analysis

38. An equality analysis is attached as an Appendix. The purpose of including this analysis is to ensure all steps have been taken within this policy, to minimize any potential to discriminate, on the grounds of all nine protected characteristics. Consideration has also been given to promoting equal opportunity and good relations for all carers.
References

Document History

<table>
<thead>
<tr>
<th>Date of Revision</th>
<th>Version Number</th>
<th>Reason for review or update.</th>
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<tr>
<td>February 2013</td>
<td>1</td>
<td>New policy</td>
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Carers’ Policy: Appendix 1

Equality Analysis
Policy: Carers Policy February 2013

Date due for review: February 2014.
Lead person for policy and equality analysis: Equality and Diversity Manager

1. Identify the main aim and objectives and intended outcomes of the policy.
The policy is to set standards to ensure Carers’ experiences of care and support within the Trust hospitals are improved.

The policy is aimed at all clinical staff to recognize and promote the rights of all carers to be fully involved in individual patient care and to ensure that their own reasonable needs as a carer are met.

Carers can be any age and can have a disability themselves; the policy is to promote inclusion and recognition of different needs including for those who may normally be marginalised or ask for help.

2. Involvement of stakeholders.
There has been much national (Carers UK) and local (Oxfordshire) research and work recently to produce a refreshed Oxfordshire Carers Strategy.

Links with Carers Oxfordshire, provides regular feedback on Carers' experiences.

Nationally and locally there is growing frustration and the need for Carers to be fully involved, informed and supported is urgent.

3. Evidence.
Census 2011: 9.4% of the population of Oxfordshire of 653,800, provide a level of unpaid care.

There is evidence to show that carers’ own health can deteriorate.
Many carers give up work to care and can become very marginalised and...
disempowered.

It is known that many unpaid carers do not know of the support that is available or about their rights; they see themselves as wife, husband, daughter, son or family member or friend.

Carers may also be vulnerable themselves and have a disability, learning disability or another specific need.

**Disability**

Consideration that some carers will have a disability themselves has been included within the policy:

“All carers who themselves have a disability specific needs will have reasonable adjustments made in order that they can be fully involved and informed about a patient’s care. This may include a Carer with a learning disability or a physical disability or both.”

“All carers who are deaf will have access to British Sign Language and communication aids as required”

Learning Disability- as above.

**Sex**

Consideration is prompted in the policy:

“All carers will be shown respect and dignity and involved equally, whatever their sex/gender and sexual orientation.”

**Age**

The policy states:

All carers who are very elderly or are under 18 years of age will have access to appropriate reasonable adjustments.

“Opportunity for a patient’s carer, to be supported to discuss their future role as a carer will be provided. Young Carers will be identified and given appropriate help and support.”

**Race**

The policy states:

Carers who may not normally identify as a carer (for cultural reasons) will be given information about appropriate support available.

Carers who do not speak English will be given access to interpreting services so that they may be fully involved and understand information given.

**Sexual orientation**

The policy states:

“All carers will be shown respect and dignity and involved equally, whatever their
sex/gender and sexual orientation.”

**Pregnancy and maternity**
“Carers who are pregnant will be supported according to their individual needs.”

**Religion or belief.**
The religion or belief of carers and the patient will be respected.

**Gender re-assignment.**
All carers will be shown respect and dignity and involved equally, whatever their sex, gender and sexual orientation.”
This statement includes people who may be in transition.

**Marriage or civil partnerships:**
All carers will be respected and treated fairly and inclusively whether they are married, partners or within a civil partnership.

**Carers** the whole policy addresses the diverse individual needs of carers

Remember to ensure carers are fully involved, informed, supported and they can express their concerns. Consider the need for flexible working.

**Safeguarding people who are vulnerable:**
This policy specifically notes that carers have different needs and all who are vulnerable need to be protected.

“All carers who are vulnerable will be supported appropriately and the Safeguarding Adults or Children Lead involved as stated in the Trust Safeguarding Policy.”

**Other potential impacts** e.g. culture, human rights, socio economic e.g. homeless people.

Some patients and carers may be more vulnerable due to their culture, socio-economic group; this policy promotes inclusion of all carers.

Carers have the right to private and family life and their wishes will need respecting.

**Section 4 Summary of Analysis**

This policy has included consideration of people from all nine protected characteristics and promotes inclusion and support of all carers including the most vulnerable.

Natural bias is a risk for the potential to discriminate in human relationships and communications– staff are required to have completed the Equality and Diversity
<table>
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<th>Training – Level 1 by the end of March.</th>
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**How does the policy advance equality of opportunity?**
By promoting better communication between all carers and Trust employees or all carers who are employees and their line managers.

**How does the policy promote good relations between groups? (Promoting understanding)**
The policy includes the need to keep all carers informed and fully involved in the care of a patient/cared for person.