CARERS ASSESSMENT & SUPPORT POLICY

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<td>VERSION NUMBER:</td>
<td>1</td>
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<tr>
<td>KEY CHANGES FROM PREVIOUS VERSION:</td>
<td>N/A</td>
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<tr>
<td>AUTHOR:</td>
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<td>CONSULTATION GROUPS:</td>
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<td>AMENDMENT DATE(S):</td>
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<td>LAST REVIEW DATE:</td>
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<td>NEXT REVIEW DATE:</td>
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<tr>
<td>APPROVAL BY PATIENT &amp; CARER SUB-COMMITTEE:</td>
<td>TBC</td>
</tr>
<tr>
<td>RATIFICATION BY QUALITY COMMITTEE:</td>
<td>October 2020</td>
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SCOPE

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The Director responsible for monitoring & reviewing this policy is the Executive Chief Operating Officer & Deputy CEO
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ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST

CARERS ASSESSMENT AND SUPPORT POLICY

Assurance Statement
This policy sets out the roles and responsibilities of EPUT staff in working together with Local Authority Partners and other agencies in meeting the statutory rights and needs of Carers. The policy complies with the Care Act 2014 and Equality Act 2010.

1.0 INTRODUCTION

1.1 This policy sets out the legal responsibilities of the Trust in relation to assessing and supporting families and friends of service users who have caring responsibilities.

1.2 This policy and the accompanying procedural guideline provide a framework to staff on the process for the early recognition, identification, assessment and support of carers.

1.3 This policy and procedural guideline provides a framework to enable staff to work in partnership with carers and support them to undertake their caring role and maintain their wellbeing.

2.0 SCOPE

2.1 The focus of this policy is families and friends who have informal caring responsibilities for someone who is receiving services from EPUT.

2.2 This policy is relevant to all staff working within EPUT.

3.0 DEFINITIONS

3.1 The Care Act 2014 states: “Carer” means an adult who provides or intends to provide care for another adult (by means of):

3.1.1 Practical or emotional support to someone with a disability, addiction or illness.

3.1.2 The person cared for may be a relative, partner, friend or neighbor.

3.1.3 A carer may be of any age and may be a young person providing assistance to a parent or another person.

3.1.4 A carer may live with the person they care for, or provide support from a distance.

3.1.5 An adult is not to be regarded as a carer if the adult provides or intends to provide care by virtue of a contract, or as voluntary work.
4.0 ROLES AND RESPONSIBILITIES

4.1 The Trust’s statutory responsibilities for assessing and meeting the needs of carers are set out in this policy. In addition the Trust, under Section 75 partnership agreement, has been delegated responsibilities for carers support in relation to carers of working age adults.

4.2 Team Managers will be responsible for ensuring that staff are equipped and supported in undertaking Carers Assessments.

4.2.1 Managers will ensure that carers are identified at the first point of contact with the Service User and offer a Carers Assessment or sign post to the appropriate teams who will undertake the assessment.

4.2.2 Managers are also responsible for ensuring that all members of staff complete Carer Awareness Training

4.3 All care coordinators and named workers must be aware of, and follow, the policy and procedure regarding Carers Assessments.

5.0 CARERS AND THE CARE ACT, 2014

5.1 The Care Act (2014) came into force in April 2015. The Act puts in place significant rights for Carers in England, which include the following:

5.1.1 A focus on promoting wellbeing.
5.1.2 A duty on local councils (can be delegated to Trusts) to prevent, reduce and delay the need for support, including the needs of carers.
5.1.3 A right to a Carers Assessment based on the appearance of need.
5.1.4 A right for carers eligible needs to be met.
5.1.5 A duty on local councils to provide information and advice to carers in relation to their caring role and their own needs.
5.1.6 A duty on NHS bodies (NHS England, clinical commissioning groups, NHS trusts and NHS foundation trusts) to co-operate with local authorities in delivering the Care Act (2014) functions.

5.2 Alongside the Care Act (2014), the Children and Families Act (2014) extended the right to a Needs Assessment to all young carers, regardless of who they care for or the type of care provided. A Young Carer is someone aged between the ages of 5-18.

5.3 Family and carers, as a minimum, should receive relevant information and advice that will assist them in their caring role.

5.4 Carer Services can be provided through a Carers Direct Payment, which allows the Carer choice and flexibility to decide on the type of support needed. This will be dependent on meeting the eligibility criteria as highlighted in the Care Act (2014).
5.5 The Care Act (2014) also provides:

5.5.1 All Carers with an assessment on request and to have their needs regularly reviewed.

5.5.2 Carers maintain the right to request an assessment of their needs, even when the person they care for may refuse for them to have an assessment.

5.5.3 Patients and their carers should be involved at each stage of the admission and discharge process as ‘equal partners in care’ and should be informed of the proposed date of discharge.

5.5.4 The guidance highlights that the discharge process must not put the patient or their carers at risk of harm and must not create a situation whereby the independence of the carer or the sustainability of their caring role is jeopardised.

5.5.5 Carers have the right to request flexible working from their employer.

6.0 CARERS AND THE MENTAL HEALTH ACT, 1983

The Code of Practice that accompanies the Mental Health Act, 1983 also provides guidance on the involvement of carers:

6.1 The involvement of carers, family members and other people who have an interest in the service user’s welfare should be encouraged (unless there are particular reasons to the contrary) and their views taken seriously. (Code of Practice, 1.5 – Participation Principle)

6.2 The Code of Practice 2.39 to 2.42 provides further guidance on the involvement of Carers and emphasises the duty to inform carers of their rights to an assessment, and to ensure that they have access to information and support.

6.3 Even if Carers cannot be given detailed information about the patient’s case, where appropriate they should be offered general information which may help them understand the nature of mental disorder, the way it is treated, and the operation of the Mental Health Act.

7.0 CARERS AND THE MENTAL CAPACITY ACT, 2005

The Mental Capacity Act is relevant to Carers, as they are often faced with caring for someone who lacks capacity.

7.1 The Mental Capacity Act introduces a new requirement to consult anyone caring for the person or interested in their welfare (for example family, friends and unpaid carers) when deciding on best interests.
7.2 Carers are often involved in the following ways:

7.2.1 Assessing the capacity of the person they care for.
7.2.2 Carers can also find themselves in a position where they take on the role of an attorney and are appointed by a formal document called a Lasting Power of Attorney (LPA).
7.2.3 Or as a court appointed Deputy to deal with property and affairs or personal welfare decisions of someone who lacks capacity.

7.3 **Lack of ‘Informed Consent’** to share information in cases where the Carer lacks the express ‘informed’ consent of the person they care for, staff will need to exercise greater caution in relation to the sharing of information.

7.4 Healthcare and social care staff, in consultation with the patient’s Responsible Clinical and the MDT, may disclose information about somebody who lacks capacity only when, following a best interest assessment, it is deemed to be in the **best interests** of the person concerned to do so, or when there is some other, lawful reason for them to do so.

7.5 The teams need to balance the person’s right to privacy with what is in their best interests or the WIDER PUBLIC INTEREST.

### 8.0 CONFIDENTIALITY AND INFORMATION SHARING WITH FAMILIES AND CARERS

Staff should use this policy in conjunction with the Trust Policy document for Consent and Confidentiality (CLPG16) the Records Management Code of Practice (CPG9c) and the Carers Assessment and Support Procedure.

8.1 The confidentiality principle, in circumstances where it is applicable, has the effect of prohibiting the professional from disclosing to a third party, without the user’s consent, information provided by the service user, or discovered in the course of the professional relationship with him or her.

8.2 Staff must obtain the consent of the Carer for the sharing of their information.

8.3 The limits of its operation:

8.3.1 The service user has no right to prohibit the professional from engaging with the Carer, or from providing information advice and support, or from talking to the Carer about the user, providing that no confidential information is divulged.
8.3.2 The service user has no right to prohibit the professional from receiving information from the carer.
8.3.3 The professional is not prevented from talking to Carers about facts that they already know; a breach of confidentiality only occurs when confidential information is newly disclosed.

8.4 Staff cannot give assurance of confidentiality where there are concerns of significant harm, particularly where other people may be at risk of significant harm.
8.5 Disclosure without consent may be justified where:

8.5.1 Seeking consent is likely to increase risk to the adult in question or other people;
8.5.2 Permission has been refused but sufficient professional concern remains to justify disclosure;
8.5.3 Seeking permission is likely to impede a criminal investigation.

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<tr>
<th>9.0 PERFORMANCE REPORTING</th>
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<tr>
<td>9.1 Under Section 75 the Trust is performance managed on provision of Carers Assessments, carers information and advice, and carers service.</td>
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<td>9.2 All staff, who engage with carers, must record their engagement with Carers on the relevant electronic systems including Mobius, Paris and Daily Diary Sheets.</td>
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<td>9.3 Proportional assessments; from telephone contact, to provision of information and advice to a family member or carer, must be recorded.</td>
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<th>10.0 RECORD KEEPING</th>
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<td>10.1 All recording of information regarding Carers should adhere to the Trust Information Governance Framework (STRAT02).</td>
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<td>10.2 Effective recording should promote an effective working partnership with service users and Carers, and should show evidence of how information has been shared with the service user. The feelings and wishes of the service user and Carer and will be recorded.</td>
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<th>11.0 TRAINING</th>
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<td>11.1 All staff who provide care and support to Carers must undertake the Carer Training provided by the Carers Support Team in relation to Carers Assessment.</td>
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<td>11.2 When making a decision about who should carry out a particular assessment under the Care Act, EPUT, under the delegated Section 75 arrangements with the Local Authority must:</td>
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<td>- Ensure that any assessor has the general skills, knowledge and competence required to carry out an assessment on behalf of the Local Authority (including knowledge of Local Authority processes, the assessment requirements and duties of the Act);</td>
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<tr>
<td>- Ensure that any assessor has the specific skills, knowledge and competence to carry out an assessment with the particular person or carer in question (for example that they are able to adapt communication, or are able to work confidently alongside other professionals)</td>
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12.0 STAFF AS CARERS

Where an employer is made aware of an employee with caring responsibilities, employers can take simple but effective action to enable Carers to balance their caring and employment responsibilities.

- **Carers policy** - under the Agenda for Change terms and conditions of service, all NHS employers must have a Carers’ policy to address the needs of people with caring responsibilities and to meet the requirements of the ‘right to request’ flexible working legislation. This policy should emphasise the benefits of flexible working arrangements, balancing work and personal life and employment breaks.

- **Working time regulations** - in reaching local arrangements to implement this agreement, employers or employees are expected to ensure that no arrangements are reached that discriminate against members of staff with family or other Care responsibilities. For more information see the Agenda for Change terms and conditions of service.

- **Flexible working practices** - this can be flexi-time, home working, annualised hours, shift swapping, early retirement, self-rostering, job sharing or part-time working. Employers may also consider redeploying a staff member into a less stressful or more appropriate role as a way of keeping them well at work.

- **Emergency leave** - employers are required by law to give a reasonable amount of time off for emergencies. **Other leave** - employers could offer compassionate leave or a system of planned leave.

- **Management support** - having a supportive manager is key to enabling Carers to feel that they can continue to work alongside their caring responsibilities. This may help employees come forward and let their manager know that they are a carer and may need some support and flexibilities. Access to a personal telephone in case of emergencies is a great way to show practical support. If an employee is in the position of having to care for someone, they may wish to consider getting a Carers Assessment; this helps them to find out if they would benefit from support and whether they are eligible for any services or support from local organisations.

- **Supporting staff** - Human Resources (HR), Occupational Health (OH) and managers need to have awareness in how to support staff. Not knowing how to help when first approached by a carer could impact whether the employee remains at work or takes time off sick. HR and OH teams can offer help, advice and assessment on keeping well at work; this may be through access to leaflets, offering counselling or simply having a contact name that carers know they can turn to if needed. Managers should link with HR and OH so they are made aware of what support is available and who to link with for support for staff with caring responsibilities.

- **Carers’ support network** - employers could consider supporting and/or encouraging the establishment of an in-house support group for carers, where they could easily get together to have coffee and a chat about their caring responsibilities. Many workplaces now use digital and social media to communicate with staff and could use this channel to create an online support group- we do this so can you detail what we do as it is our policy.
13.0 CARER’S ASSESSMENTS

13.1 The Trust’s overall aim is to develop ways of working that ensure Carers feel informed and engaged in the care of the person (or people) they support, as much as possible. In order to do this, we need to ensure that carers’ needs are assessed and where possible, that they are met through individualised support plans. We also aim to improve their involvement in care planning development, delivery, review, service development and monitoring and evaluation of services.

13.2 All staff who come into contact with Carers, should always inform Carers about their right to a Carer’s Assessment. Where the sustainability of the caring role is under pressure, there is a duty to offer the carer an assessment or review of their needs.

13.3 Where there is more than one carer providing regular care to the service user, each Carer is entitled to a Carers Assessment. The catchment area of the carer will be identified by the area where the service user resides.

13.4 Following the Carer’s Assessment, it may be assessed that the Carer may benefit from a Direct Payment. Direct Payments are a sum of money that can be applied for on behalf of the carer, to choose and buy the services they need for themselves (rather than being provided directly from the Local Authority) to provide them with the necessary support to continue to provide care to the Service User. Direct Payments should only be considered if EPUT cannot meet part, or all of the carers identified needs, or if all other avenues have been explored (including local charities.)

14.0 IMPLEMENTATION AND MONITORING

The Carers Framework, Policy and Procedure will be available on the Trust’s intranet, as well as through the e-learning program.

14.1 This policy will be distributed to all managers within the Trust, who have the responsibility to ensure that staff are informed and comply with their statutory responsibilities, and strive for best practice.

14.2 The Director of Partnerships will be responsible for the overall monitoring and review of this policy.

14.3 This policy should be reviewed in conjunction with the Trust’s Carers Framework 2020-2023.

14.4 An audit of the policy and procedure will be undertaken every 3 years.
15.0 QUALITY ASSURANCE

15.1 The Trust will undertake an annual survey of families and carers.

15.2 Annual audits to provide assurance that:

15.2.1 Carers are identified in a timely manner.
15.2.2 Carers are offered a Carers Assessment
15.2.3 Carers Assessments are completed and reflects Carer Support Plans.
15.2.4 Carers Support Plans are reviewed yearly or as required.
15.2.5 Where relevant, Carers are signposted to appropriate support in their respective communities.