



Royal College  
of Nursing

# Improving the lives of carers

Final project report





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# Improving the lives of carers

## Final project report

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## 1

# Introduction and background

This report has been produced to provide feedback to the Department of Health on the funding given to the Royal College of Nursing (RCN) for the *Improving the lives of carers* project. The project was originally conceived as a two-year development programme targeting 80 school nurses, community children's nurses, district nurses and practice nurses with the aim of:

- supporting 80 local service developments to support the needs of carers and achieve improvements in their health outcomes
- increase the numbers of carers identified, supported and referred on
- leadership and capacity building for an ongoing focus on the needs of carers in 80 areas
- facilitation of networks, profile and awareness raising of the needs of carers in senior health managers, clinical and local authority commissioners
- sharing of innovation and good practice with organisations such as the Queen's Nursing Institute, Royal College of General Practitioners and carers' organisations.

Participants would have been required to attend for seven days over 18 months. Due to delays in confirmation of the grant award and the requirement for the money to be spent by the end of the 2014/2015 financial year the programme was condensed to be delivered over a six-month period.

The call for nominations for the condensed development programme during the summer of 2014 yielded a poor response. Following discussion with the lead representative from the Department of Health, the programme was reformatted into four regional summits and an end of project event – a national summit. The regional summits were scheduled in February 2015 with approximately 60 participants at each summit.

The purpose of each summit was to:

- identify new innovations and good practice within UK health care organisations
- disseminate innovations
- disseminate a statement of commitment to provide good practice.

The target audience was widened to include nurses from emergency care and mental health, as well as school nurses, community children's nurses, practice nurses and district nurses.

The end of project national summit was held in London in 30 June 2015 where participants from all regional summits were invited to showcase good practice and developments since attendance at the regional summits.

## 2

## Regional summits

Despite extensive communications using both the RCN and Department of Health networks, there was a lower uptake than anticipated. The summit scheduled to take place in Plymouth to cover the South West region was, in agreement with the Department of Health, cancelled due to low numbers. Participants booked for the summit in Plymouth were redirected to one of the other regional events with their travel and accommodation funded, to aid attendance.

There was interest from nurses from a wide range of clinical practice areas and three successful events were held during February 2015, in Manchester, London and Birmingham.

The numbers that attended each summit were:

- Manchester – 25 (47 booked)
- London – 26 (41 booked)
- Birmingham – 28 (32 booked).

The programme for each event was designed to encompass:

- a national update on carers by the Department of Health
- hearing directly from both adult, young adult carers and young carers. The latter was by means of a very powerful DVD produced by the Children's Society to avoid young people missing school to attend events
- a speaker from an adult practice area and a school nurse who had made improvements for carers.

A sample programme is included in Appendix A.

All delegates were encouraged to think about an improvement idea for their practice area before attending the summit. The afternoon session was designed to introduce practical tools they might use to critically consider the issues required to start their change and take it to completion. This included using a systematic approach, involving others, keeping their change manageable and making progress. Opportunity was given for delegates to share the learning from past experiences and to use tools to consider their stakeholders. The final session was used to hone their idea in just one sentence and commit to the next steps they needed to take to implement their idea.



## 3

## Evaluation and learning from regional summits

The delegates at the summits were from a wide range of practice areas and from varying levels of experience – from divisional lead nurse to health care assistant. This added to the richness of the events but also made it a challenge to meet different needs and expectations.

Delegates were asked to rate their overall experience and the following results were received:

Event	Excellent	Good	Average	Poor
Manchester	8	7	4	0
London	11	14	2	0
Birmingham	3	12	7	1
<b>Total</b>	<b>22</b>	<b>33</b>	<b>13</b>	<b>1</b>

Comments in response to the question, “What have you learnt that will help you with your improvement idea?” included a number saying it highlighted:

- the need for a systematic approach, to tap into resources already there, and to address barriers with a clear plan
- that young carers want to be involved; involving carers in change and giving them options rather than thinking your way is the only right way
- how to link with professionals and service users to obtain useful information
- how to prioritise and recognise who is essential in taking things forward
- how to structure change and the different elements of the change process
- the crucial importance of involving carers in co-production
- the need to plan carefully and negotiate.

Each participant was asked to complete a sheet setting out what their improvement idea was and to identify the next steps they committed to take. The improvement ideas included:

- to take forward having a health care assistant as part of a hospice community team focusing on the needs of carers within a caseload of 100
- implement either telephone support or a discussion forum on the hospice website to provide carers with regular support when looking after people at the end of life
- implement an on call system for senior support workers to cover home visits in times of staff absence or family crisis
- to provide leaflets aimed at carers, empowering them to seek advice regarding medical conditions, when to speak to the GP, when to refer on and specific associations
- parent/carer training to help them cope with young people with mental health problems

- introduce a carers' card for staff to give to identified carers
- align the carers' support team closer to each directorate to improve clinical services service delivery
- setting up a young person with mental health problems carers group (pilot)
- to provide an information leaflet for carers on how to spot and identify trigger signs of an exacerbation of chronic obstructive pulmonary disease
- to design a falls prevention leaflet for carers on her ward
- to create and implement a health assessment tool specific to young carers
- co-produce courses for/by carers
- to provide information, support and education in relation to infection prevention, as identified by carers themselves
- to ask the question, are you a young carer?
- to raise trust staff awareness of carers needs, roles and issues
- to develop a collaborative approach towards carer safety in the moving and handling of children/ young people
- to develop a carers' information pack
- expand a 'Why Carers?' course to South Devon
- explore ways of carers being heard and their specific issues being highlighted so they can be disseminated to students and ward to board
- improve the voice of carers in the Patient Experience Forum and with governors and trust board
- develop a full time carer's lead role to help improve services
- to consider the needs of young carers in Lewisham, especially those not attending education or other services

- to improve carer support within outpatient/ outreach service for both adult and young carers.

In addition, delegates were asked what they would like covered in the national end of project event in June 2015 and these suggestions informed the national summit programme.



## 4

## National summit

The national summit was held in London on 30 June 2015. It was hoped participants from the regional events would have undertaken changes in their practice area and be able to share these at the national summit. Three to four months is a very short timescale to effect a change in clinical practice and it was recognised that there may be more focus on the journey of change rather than necessarily the final outcomes. Participants were encouraged to bring with them a key person from their organisation and a representative of the carers they had worked with.

To help participants take their improvement idea further they were asked to complete a proforma. Nine forms were completed and returned and the information obtained is set out in Appendix B. Three of these changes were shared at the national summit.

The objectives of the national summit were agreed with Wendy Nicholson, Professional Officer – School and Community Nursing, Public Health Nursing, Department of Health, latterly Public Health England. These were:

- to showcase the changes made by the regional summit participants
- to harness the learning from the regional summit participants who had gone on to make a practice improvement
- to add impetus to the various initiatives already underway to further improve the lives of carers by influencing board level staff in both provider and commissioning organisations with the launch of a pledge.

There was a low response rate from the regional summit participants to attend the national summit, and in agreement with Wendy Nicholson, the event was opened up to any nurse wishing to learn more about improving the lives of carers.

A total of 85 people attended the national summit, including nurses from a wide variety of practice areas and other relevant stakeholders, such as the Queen's Nursing Institute and the Carers Trust. The national summit programme included national perspectives about current policy updates from the Department of Health and Public Health England, NHS England commitments and activities and the personal experiences of Dame Philippa Russell as a carer and a national campaigner. Three examples of local improvements in practice were also showcased at the national summit:

- the development of a young carer's health assessment in Shropshire
- improving the lives of both young carers and adult carers project in Lincolnshire
- the development of a consultant admiral nurse role to support the Good Care Group live-in care and respite care services.

The full programme can be found in Appendix C.

The national summit was a very successful, vibrant event with informal feedback including:

*"Thank you for enabling me the opportunity to attend the RCN Improve the lives of carers national summit on the 30 June. I gained such a lot of information and understanding from the day. I have since provided a presentation to fellow district nursing students at the university campus about what I learnt from the day. Thus, spreading the word to improve the lives of carers. The event was just an amazing experience and set in such a beautiful hotel. Thank you again."*

Dame Philippa Russell commented:

*"I really enjoyed the conference on Tuesday – it was truly a national summit with a wonderful range of speakers. I also thought the venue was first class."*

## 5

## Conclusions

The overall message from the national summit was that there has been great improvements in the awareness of the needs of carers, but there is still a way to go for all practitioners and their organisations to be truly ‘carer aware’.

A number of speakers also emphasised the importance of treating carers as individuals with their own personalities, situations and needs and that “if you consult one carer, you have only consulted ONE carer”.

The event provided a range of networking opportunities for delegates. Two examples of this networking were Liverpool John Moores University staff committing to support school nurses in Shropshire to publish their work on a health assessment tool for young carers and links made between teams working in North and South Lincolnshire that were previously unaware of each other’s work.

As there were a large number of participants who had not attended a regional summit the opportunity was taken to build on the enthusiasm and inspiration generated at the event and again ask delegates to pledge to make a change in practice and commit to the next steps needed to implement the change. This generated a rich range of commitments including:

- setting up a young person’s carers forum for those with mental illness
- developing more appropriate and tailored respite/ long-term options for families of younger people with dementia so that carers feel able to relax and get maximum benefit from respite and/or placement choices
- changing the carers assessment process from a form sent in the post to a meeting with the carer to help them complete the assessment.

A full list of these commitments are set out at Appendix D.

The original concept of an ongoing development programme may have been ambitious at a time when provider health organisations are under enormous staffing and funding pressures. It is difficult to know why there was limited take up of the regional summits and national summit. This may have been influenced by other initiatives, such as events to launch the carer champion. A range of communication channels were utilised to publicise the events but it is not known whether these were effective in reaching the target audience or whether other communication approaches were needed.

Nevertheless, in total 154 people attended the regional and national summits and heard inspirational speakers sharing either their personal experiences as carers or nurses who are genuinely committed to making practice improvements. As a result there are many examples of nurses who attended these events seeking to improve the lives of carers and progress being made at a local level which are evidenced in this report.

As the numbers of carers is likely to increase it is hoped this project will have contributed to the awareness and practice changes needed to improve the lives of carers.

# Appendix A

## Regional summit – sample programme

### Improving the lives of carers

**Monday 23 February 2015**

**Holiday Inn, Smallbrook, Queensway, Birmingham, B5 4EW**

9:30-10:30	Registration, tea and coffee
10:30-10:35	<b>Welcome and introduction</b> Fiona Smith, RCN Adviser in Children's and Young People's Nursing
10:35-11:00	<b>National background and update</b> Chris Humphrey, Independent Consultant
11:00-11:20	<b>The lived experience of being a carer</b> Chris Barber, Adult Carer
11:20-11:40	Messages from young carers – DVD
11:40-12:00	<b>Taking a service improvement from ideas to a plan</b> Tricia Vickers, Practice Nurse, Cheshire and Carer Champion
12:00-12:20	
12:20-12:30	<b>Questions and discussion</b>
12:30-13:15	<b>Lunch</b>
13:15-15:15	<b>Moving from idea to action</b> This session will support you to critically consider the issues required to start a change and take it to completion. Facilitated by: Chris Humphrey, Independent Consultant Ruth Burey, RCN Professional Learning and Development Facilitator
15:15-15:30	<b>Final round up and plans for the national summit</b>
15:30	Close

# Appendix B

## Regional participants' responses

Improvement/change	Key achievements to date	Barriers encountered	Plans to take forward
Developing a new carer champion role in each ward in the Worcestershire Royal Hospital.	Making the wards realise the benefits of a carer champion.	Recruiting carer champions from the wards that have staff shortages and heavy workloads.  Raised with ward managers to allow staff the time to attend champion meetings.	To continue to develop in both acute and community hospitals.
Implementing the Triangle of Care 6 Key Elements.	Revision of the referral pathway and consent forms to identify carers prior to referral and assessment to allow carer involvement from initial stage of pathway.  Carers now receive a full induction to the ward with information packs given on first visit and a range of information provision throughout.  All staff received carer awareness training.  New flowchart devised identifying support/ involvement strategies available to carers including: education, referral to carer support services locally, structured family work, involvement in multidisciplinary team meetings and home visits.	As of yet there have not been any barriers identified. Support throughout the team has been very high as improved carer support has been identified unanimously by staff and service users when identifying objectives using the Implementing Recovery through Organisational Change Framework towards the end of last summer.	Carers' forum (including staff/carers and service users) continue to highlight carer involvement deficits and plan strategies to overcome.  Carer day planned (carers' week). All plans to be discussed.

Improvement/ change	Key achievements to date	Barriers encountered	Plans to take forward
<p>Introduction of a carers' support card (see below) and the introduction of a staff intranet page detailing help for staff to support carers and identify carers at an early stage in the patient's journey.</p>	<p>Produced an engagement plan involving various stakeholders. As a result I had 10,000 carers' cards printed and I am in the process of distributing them. I have started with the discharge teams and will then access the surgical pre-assessment teams next.</p> <p>I have developed the carers' staff page and this will go live at the end of this month.</p>	<p>How to gain access to the wards without feeling worried regarding confidentiality. I overcame this by wearing a uniform.</p> <p>I produced an engagement plan – this was extremely worthwhile even though it did add to the time it took to produce the card.</p> <p>My IT skills were not the best so it took some time to develop the carers' staff page.</p>	<p>Plans to take this forward by giving awareness sessions at NHS Tayside corporate welcome sessions as well as taking it into the wards.</p> <p>It will be advertised on the carers' staff page on the internet.</p>
<p>Improving wellbeing of carers. Hoping to start with event in carers' week, with tour of stadium and discussion afterwards to discuss with carers their needs, opportunities for volunteering and gaining qualifications through Rotherham United Football Club, and possible activities to address wellbeing such as sport and exercise and nutrition.</p>	<p>Making contact, discussing ideas, sending links to carers' week.</p>	<p>Difficulty initially in identifying the person to speak to and make contact with.</p>	<p>Continue to try and engage with Rotherham United Football Club. May need to readjust timing if not possible during carers' week.</p>

Carers' card (as mentioned above)



Improvement/ change	Key achievements to date	Barriers encountered	Plans to take forward
<p>Salford Carers' Centre is committed to working with professionals and organisations to promote identification of carers, young adult carers and young carers and to offer specialist advice, information and support to carers as and when needed.</p>	<p>Increase the number of new referrals to our carers' centre year on year. Many of these carers are also offered one-to-one advice, information or support which will have improved their caring situations or helped them become less difficult or challenging. Over the past five years we have developed and increased our work within general practitioner practices and now have a dedicated carers link worker in each of the 52 practices within Salford. We are committed to offering carer awareness training to all staff within the practices. Initially we have spoken to receptionists and practice managers who are on the frontline who are able to identify carers and younger carers, and building on this success we have found that GPs are now regularly referring to our service. This is an ongoing project to keep the carer aware message at the forefront of primary care.</p>	<p>Carers (of family members, neighbours, friends) often don't recognise themselves as such and are therefore unaware that there may be services (other than social care) which they could access for independent advice, information or support. Some groups for example older people, male carers, young adult carers, working carers or those caring for someone with mental ill health or substance misuse problem, may be more reluctant to identify themselves as a carer and/or be willing to accept help. The development role is to work with, and regularly liaise with, as many professionals, voluntary organisations, agencies and groups as we can to promote carer awareness and to empower staff to refer carers for support.</p>	<p>Planning a strategy to take the carer awareness message to all health professionals particularly nursing staff working within hospitals – with regard to carers' involvement in hospital discharge or transfer of care. However, there is also a great opportunity to promote carer awareness to staff working in community settings where their work (treating the cared-for persons) will take them into homes where they are best placed to identify (often hidden) family carers and have the opportunity to be able to offer them local referrals for support and advice. Other health related projects which are targeted to promote recognition and referral of carers include pilot plans to work with pharmacies (where a substantial percentage of carers pick up prescriptions).</p>

Improvement/ change	Key achievements to date	Barriers encountered	Plans to take forward
<p>Supporting carers at point of transition into 24-hour live in care – this can be couples or a family member who does not live with the person who requires the service.</p>	<p>Being able to offer a support and information to family carers at point of contact.</p> <p>Supporting in crisis and if necessary signposting or referring to other services.</p> <p>Supported families manage better when the service starts as they often have been able/had time to think about the impact of 24-hour live in care.</p> <p>Facilitated and collaboratively worked with legal and care services to deliver open forums for support and information in local communities.</p>	<p>When requesting a service many family members are in crisis, the person who requires the care is often very frail with co-morbidity. Funding can then be an issue.</p> <p>Prospective clients often do not have the information they need to find an appropriate service for their loved one – they are mostly self funding people who have been left largely alone to find help. This impacts on start of service and it is often difficult to co-ordinate the care as several services can be involved across all sectors.</p>	<p>Continue to provide a support service by a specialist dementia nurse for families/clients looking for a service – start to track six monthly outcomes from May 2015.</p> <p>Post to become a Consultant Admiral Nurse post-April 2015.</p> <p>Work collaboratively with other providers from the legal and care sector to deliver open information and support session in local communities.</p>
<p>Develop a pilot at a rural general practice and local school – who are our carers and young carers?</p>	<p>Getting buy-in from the general practice surgery. Maxine has spoken to the partners at the general practice surgery, they are keen to be involved.</p> <p>Working with LCYCP.</p> <p>Action plan decided with timescales.</p>	<p>Identifying what we wanted to achieve and how we were going to get there.</p> <p>Identifying pilot stakeholders. Maxine is based at Welton health centre and Angie covers schools in the Welton area.</p> <p>Time.</p>	<p>Develop a live action plan.</p> <p>Presentation to school to be included in the rolling year vaccination programme – starts between Sept – October.</p> <p>Project lead to speak at the School Nurse Professional Development Day on supporting carers and young carers – 2 July and 6 August.</p> <p>Planning meeting with the practice carers lead and Carers and Young Carers Partnership May 15.</p> <p>To arrange awareness session in village hall in September to coincide with roll out of school presentation.</p> <p>After data collection full report to be compiled.</p>

Improvement/ change	Key achievements to date	Barriers encountered	Plans to take forward
<p>Designing a young carers' health assessment tool. This tool is be used to assess the specific health needs of any young carers that we come in contact with through our normal school nursing contacts.</p>	<p>We have worked collaboratively with the Red Cross young carers and their forum of young people to ensure that the health assessment is designed to address their actual and individual needs.</p>	<p>Distinct lack of examples of a health assessment tool for young carers, we have gone out nationally via the Department of Health and Queen's Nursing Institute to source some example of good practice but very few have returned. I believe this to be a national issue with very few school nursing teams providing a health assessment to young carers. We will try to overcome this problem by using what evidence we have available and a focus group of young carers to design a tool that is fit for purpose.</p>	<p>Once the health assessment tool is completed we plan to pilot it with our young carers' forum, provide the school nursing team with training to use the tool. I will also share the tool with other school nursing teams, with a view to publishing an article about the project.</p>
<p>Developing a pre-school group for children with complex health needs.</p>	<p>Gaining the trust of parents and carers in their caring role.</p> <p>Supporting children with complex health needs to enable them to access early years provision, thus enabling their families to experience a positive progression in their child's life.</p> <p>Supporting the child's transition into school, working in partnership with children's services, social care and the voluntary sector.</p>	<p>I have raised the need for reliable access to NHS mail and local resources.</p>	<p>To expand the service, identify potential developments in joint working practice and ways to achieve.</p> <p>Identify pathways to support smooth transitions in the children's journey through services.</p> <p>Enable parents to meet together in chill and chat sessions.</p>

# Appendix C

## National summit programme

### Improving the lives of carers

**Tuesday 30 June 2015**

**Amba Hotel Charing Cross, London**

9:30-10:30	Registration, tea and coffee
10:30-10:40	<b>Welcome and introduction</b> Dr Peter Carter, Chief Executive & General Secretary, RCN
10:40-11:00	<b>Nursing, public health and the carers agenda</b> Wendy Nicholson, Professional Officer for School and Community Nursing, Public Health England
11:00-11:10	<b>Podcasts from key national speakers</b>
11:10-11:30	<b>Releasing power and passion to meet Carers needs in pre- and post-registration nurse training; Developing resilience, confidence, competence and wellbeing</b> Michelle Laing, Senior Lecturer, Liverpool John Moores University
11:30-11:45	<b>Coffee break</b>
11:45-12:45	<b>Sharing practice – making practice improvement</b> Dr Penny Hibberd RN, RMN, DN, PGCLT(HE), Consultant Admiral Nurse, The Good Care Group Kirsten Ellmore, School Nurse Team Leader, Shropshire Community Trust
12:45-13:05	<b>NHS England update on carers work streams</b> Jen Kenwood, Head of Patient Experience, NHS England
13:05-13:15	<b>Questions and discussion</b>
13:15-14:00	<b>Lunch</b>
14:00-14:30	<b>A personal journey as a carer and a national campaigner</b> Dame Philippa Russell D.B.E, Former Chair of the Standing Commission on Carers, Vice President, Carers UK
14:30-15:30	<b>Sharing practice – Making practice improvements</b> Rachel Higgins, Maxine Cumberpatch and Angie Gale, Lincolnshire Community Health Services
15:30-15:50	<b>Commissioning for outcomes – the needs of carers</b> Sue Matthews, Consultant in Public Health, Health and Social Care Integration and Tim Napper, Commissioning Manager – Community Wellbeing, Health and Community Services, Hertfordshire County Council
15:50-16:00	<b>Next steps nationally</b> Amy Baldwin, Policy Lead for Carers, Department of Health
16:00	<b>Closing remarks</b>

# Appendix D

## Pledges from the national summit

Organisation	Improvement idea	Next steps
Norfolk & Suffolk NHS Foundation Trust	Set up a young people's carers' forum for those with mental illness.	Speak with local stakeholders.
Kirklees Council (Senior Infection & Prevention Control Nurse)	Explore what her organisation offers to carers so she can signpost people.	Promote the flu vaccine for care staff and carers.
North & North East Lincolnshire	Create a more robust evaluation of service and need.	Research new ideas and tools used in other areas.
Crossroads Care, Hertfordshire North	A mailing campaign to get buy-in from all partners like Frank.	Use the general practitioner survey data to demonstrate to general practitioners and clinical commissioning group the difference for carers. Speak to practice nurses at their network meeting. Find out if there is a nurse carer champion in the locality. Re-connect with the district nurse teams post-Care Act.
Rotherham, Doncaster & South Humber NHS Foundation Trust, Rotherham	Supporting carers when service users are transitioning from the early intervention in psychosis service.	Discuss in multidisciplinary team. Speak to carers about their experiences – possibly a focus group.
St Margaret's Hospital	To bring social care and NHS closer together making care easier to access.	Discuss with colleagues presentations from the summit. Liaise with the Alzheimer's Society to introduce a group for carers of people with newly diagnosed dementia and a group for carers of people with young onset dementia.
South West London St George's Mental Health Trust	Quicker and more robust identification of carers at the point of initial assessment of clients. Particular consideration of young carers assessment of need.	Highlight these areas as the carers' champion in the team at monthly meetings. Involve local carers services and arrange joint team meetings to further promote their work with her team and work collaboratively.
Berkshire Healthcare Foundation Trust	Develop more appropriate and tailored respite/long-term options for families of younger people with dementia so that carers feel able to relax and get maximum benefit from respite and/or placement choices.	Explore current options across the three boroughs she supports. Approach different care providers to discuss developing more specialised services and help them better understand the needs of both the younger person with dementia and also the importance of family engagement and support.

Organisation	Improvement idea	Next steps
Berkshire Healthcare Foundation Trust	<p>Joint working with the admiral nurse to put together a folder of services for carers.</p> <p>Hopes to set up a carers peer support group.</p> <p>To do more networking within the area including social care.</p>	Look for ways to demonstrate outcomes for carers.
Homerton University Hospital – Community Children’s Nurse	To work in collaboration with GPs and school nurses to identify and improve the life of local young carers.	<p>Link up with local carers centre to obtain information to carry out young carers assessments.</p> <p>Identify unknown young carers.</p> <p>Seek funding from the clinical commissioning group for young carers breaks.</p>
Oxleas NHS Foundation Trust	To get district nurses to engage with family and carers.	Provide training to district nurses on how to engage and support families.
Brent Mental Health	Change the carers’ assessment process from a form sent in the post to a meeting with them to help them complete the assessment.	Speak to her manager about the idea.
Sussex Community NHS Trust	<p>Improve the provision of respite care.</p> <p>Reduce the number of workers visiting carers.</p>	<p>Explore 24-hour live in care provision.</p> <p>Campaign for an integrated carer assessment and a more simple system resulting in fewer services visiting.</p>
Norfolk Community Health and Care	Ask carers whether they have been signposted to the local “in my place” scheme.	Liaise with clinical commissioning group to ensure health services are in place for carers.
Norfolk Community Health and Care	Encourage other health and social care professionals to “think carer” and ask “how are you?” and discuss the learning from the National summit with these colleagues.	<p>Identify the carer of each patient.</p> <p>Ensure we present “think carer” on every patient visit.</p> <p>Teach pre-registration students about caring for carers.</p> <p>Enquire what is happening re carers in local area.</p> <p>Find out if she can get involved with local carer support groups.</p>
Liverpool John Moores University	To help publish and share the Shropshire school nurse health assessment model for young carers.	Contact the person who spoke about this at the conference to support her and her team with academic writing for journal publication to ensure the tool becomes part of evidence base for future assessments.
North West London Healthcare Trust	<p>Improve access for carers to service.</p> <p>Provide support for general practitioners, other professionals and voluntary sector.</p> <p>Provide carers’ awareness training.</p>	<p>Creating a network of supporting carers by collaboration with primary and secondary services as well as the third sector.</p> <p>Support carers who are professionals within the organisation to ensure managers take their needs into consideration.</p>



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**August 2015**

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