

# Empowering Carers Through Conversation

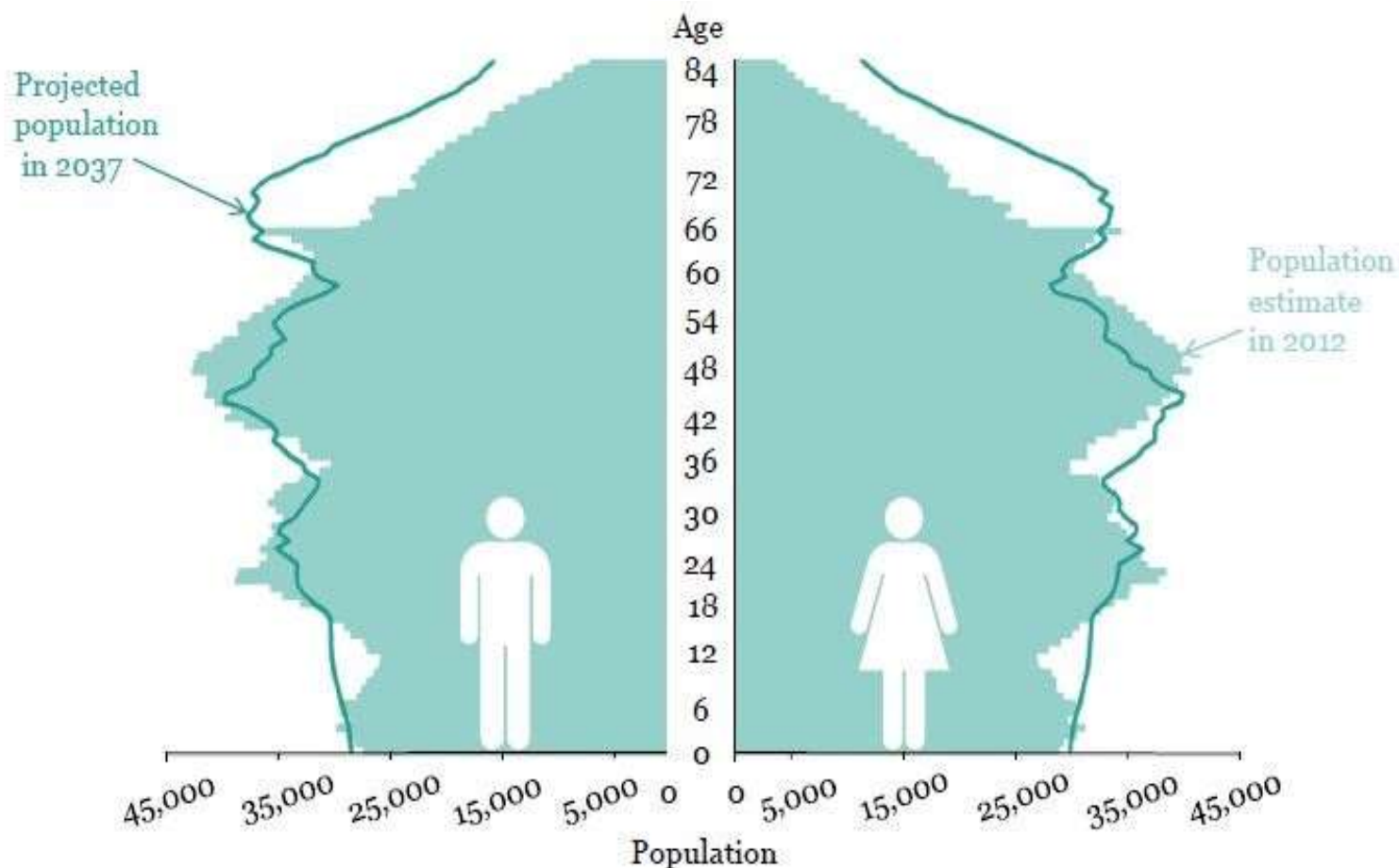
**Elaina Smith**

**NHS Greater Glasgow and Clyde**





# Scotland's Population Projection



Population projections based on 2012 suggest that the population of Scotland may rise to 5.78 million by 2037 and that the population could age significantly, with the number of people aged 65 and over increasing by 59 per cent, from 0.93 million to 1.47 million.



# NHS Greater Glasgow and Clyde

## Population

- Over 1.2 million
- 9.7% are carers

## Health Care Structure

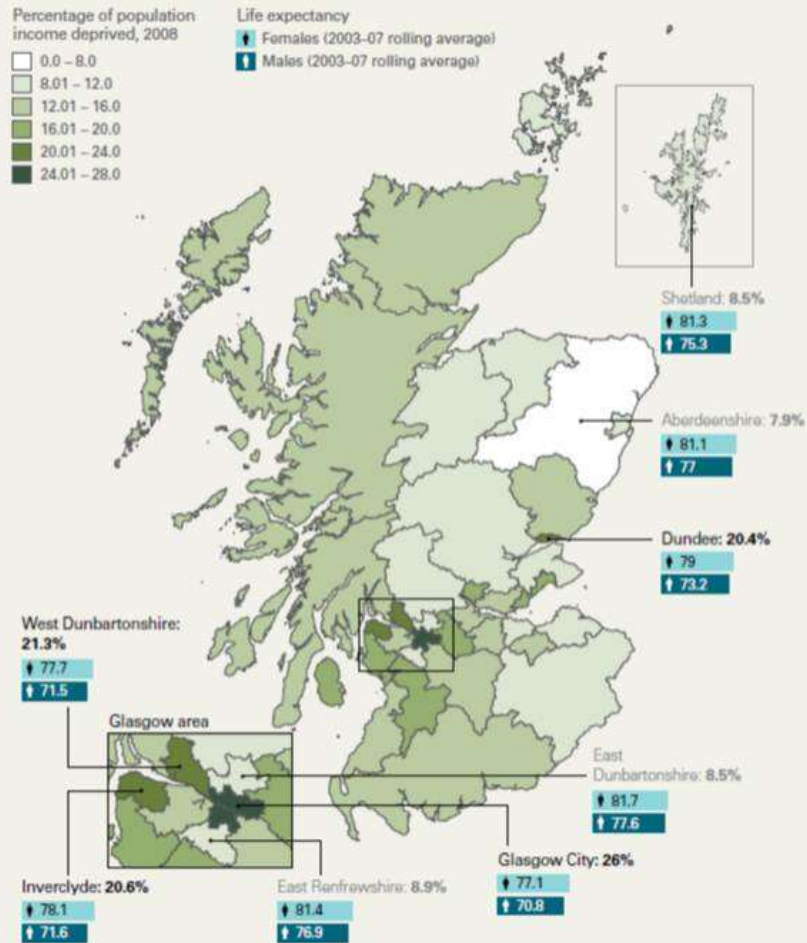
- 8 Adult hospitals, 1 Children's hospital
- 6 Health & Social Care Partnerships
- Circa 240 primary care practices



# Population Challenges

## Exhibit 3

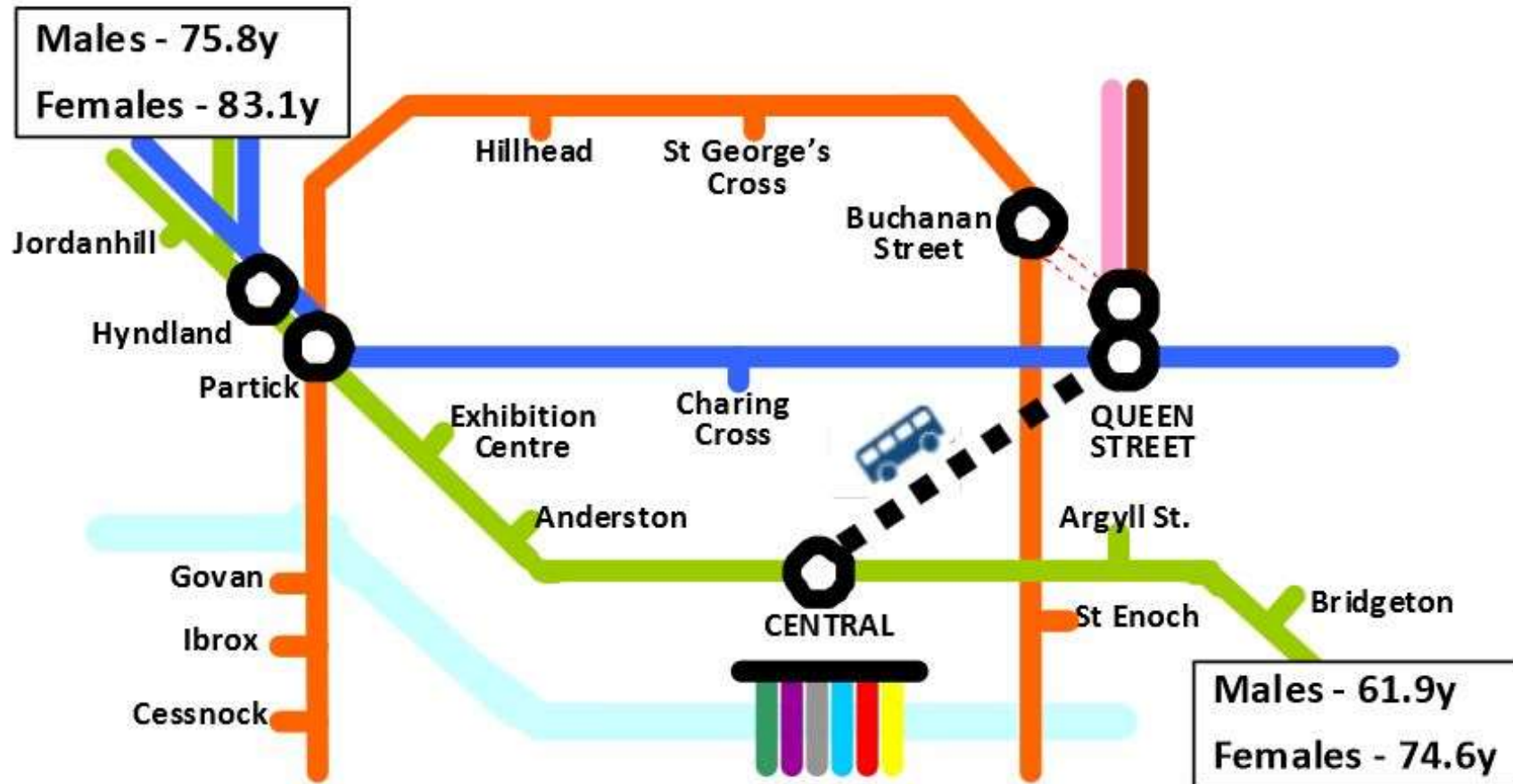
Deprivation and life expectancy in CHPs  
The west of Scotland experiences higher levels of deprivation and lower life expectancy compared to most other parts of Scotland.



Note: We have presented comparisons for the four most deprived and four least deprived CHPs in Scotland. © Crown copyright and database rights 2012, Ordnance Survey Science number 0100050061. Source: Audit Scotland, 2012

- Demographic shift
- Long term conditions impact
- Years lived with disability impact
- Life expectancy inequalities

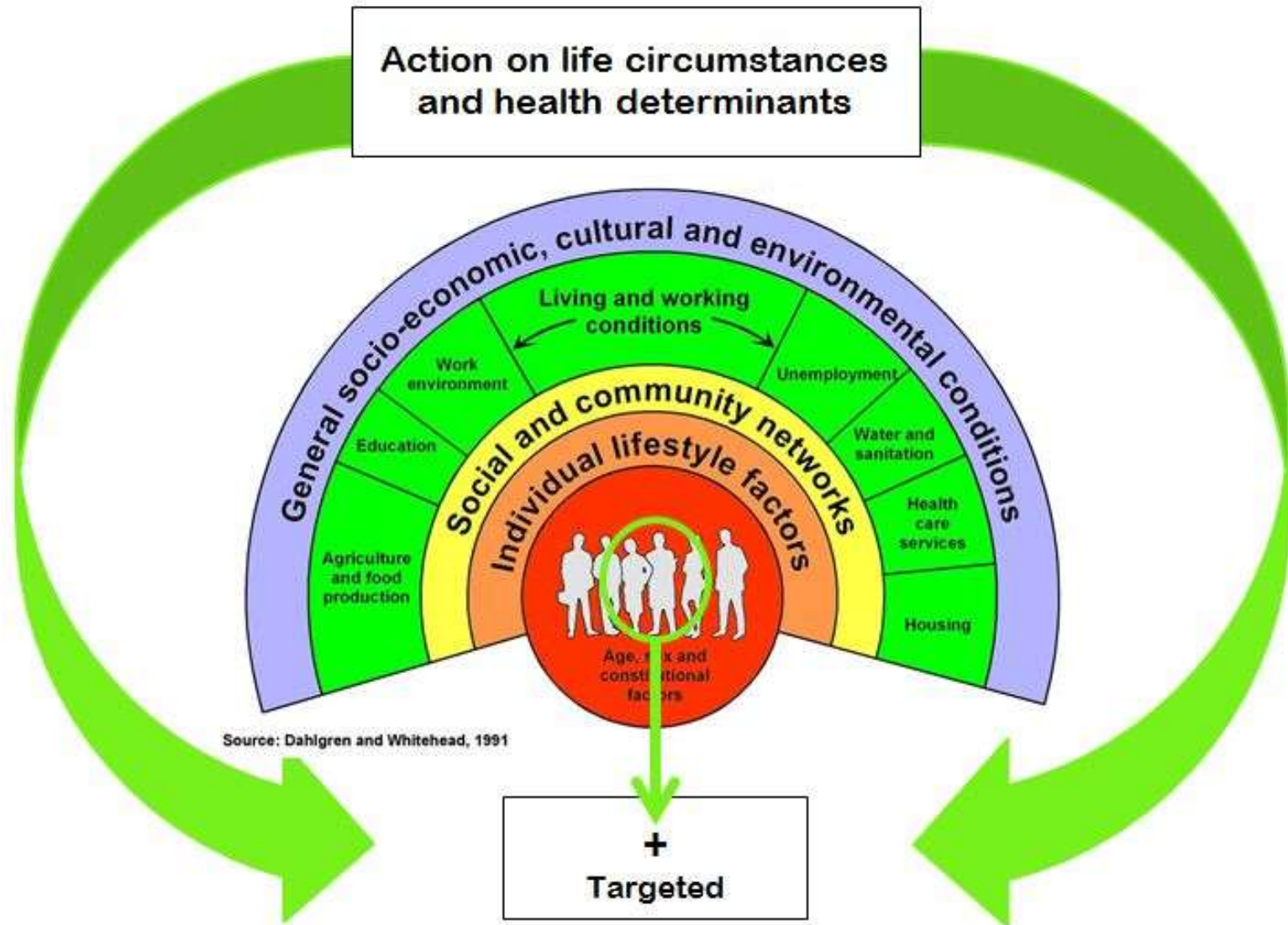
# Health Inequalities & Life Expectancy in Glasgow



Life expectancy data refers to 2001-05 and was extracted from the Glasgow Centre for Population Health community health and wellbeing profiles. Adapted from the Strathclyde Partnership for Transport travel map by Gerry McCartney.



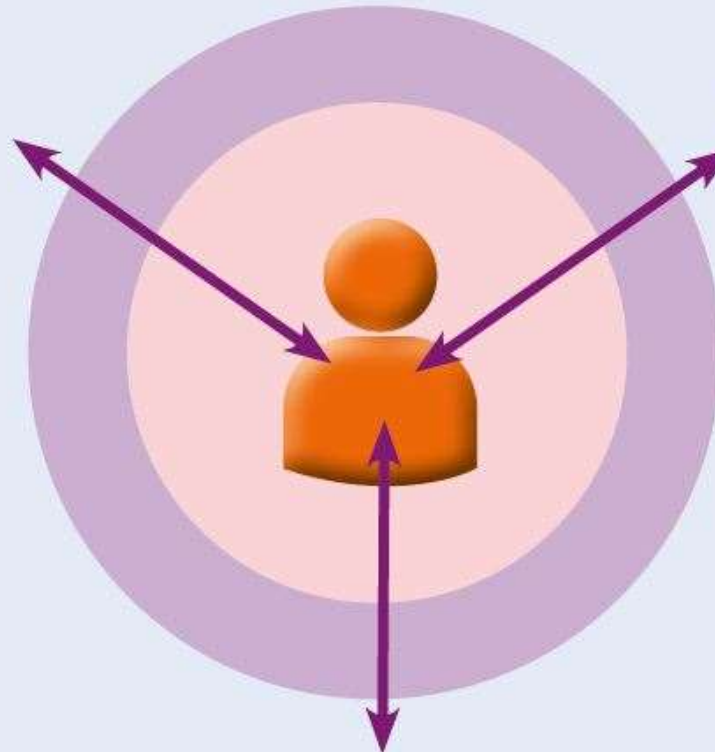
# Proportionate universalism with targeted tailored interventions



# Partnership Approach

People should be supported by practitioners that help them to be in the driving seat and make choices about their own lives and support.

Conversations between people and health and social care practitioners should focus on what matters to the person.

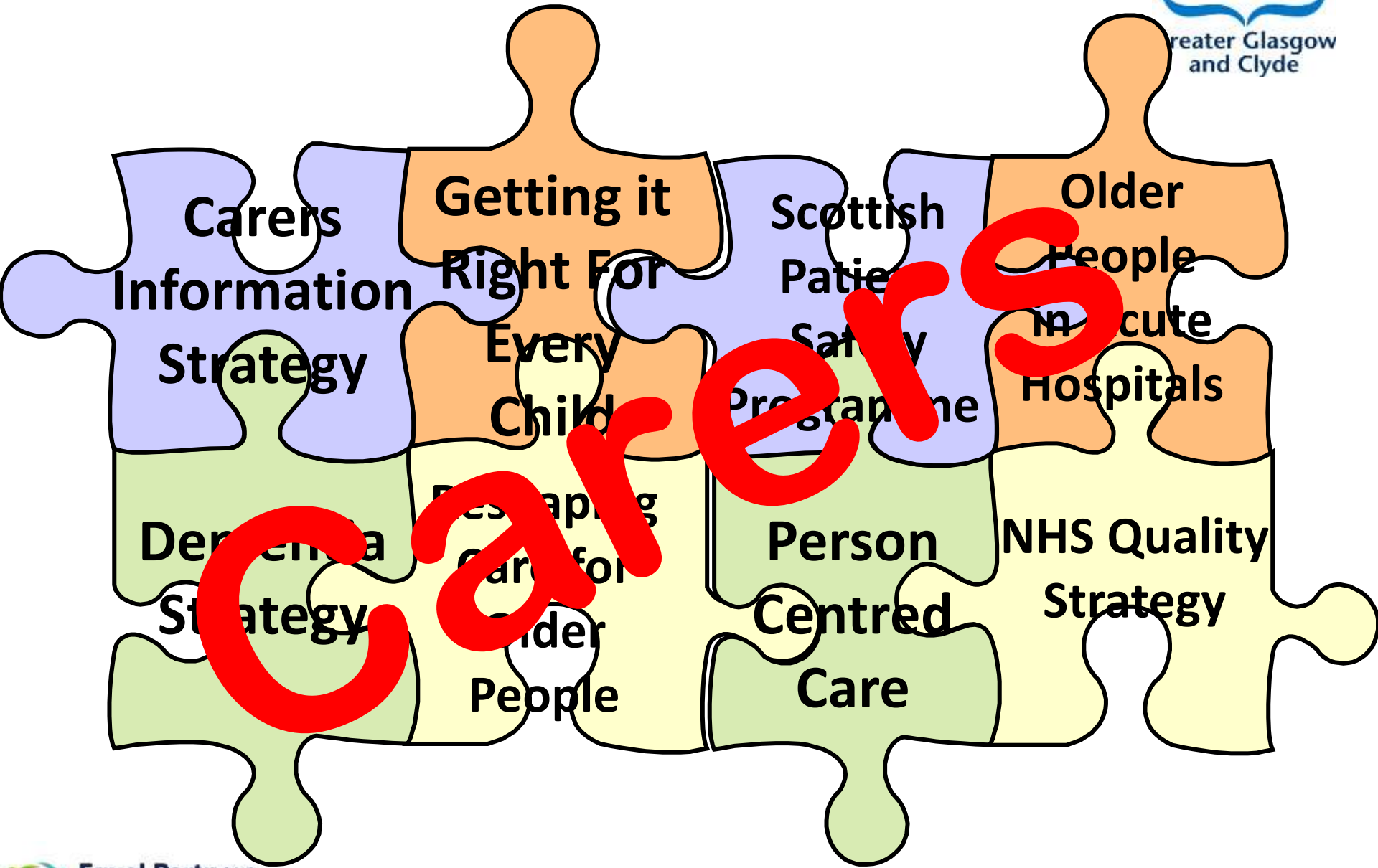


People should experience smooth pathways through the health and social care system.

Services should help meet the needs of people with multiple conditions and help reduce health inequalities.

Care and support should help people to self manage and to stay well. This includes making sure people can access good support within their communities.





**Carers**

# Carers Pathway

**Identify carers  
and young carers**

*"Are you  
looking after  
someone?"*

Consider all  
involved in the  
caring situation

**Provide relevant  
information**

*"I don't know what  
I don't know"*

Carers Information  
Line and Patient  
Information Centres  
are there to support  
staff and carers get  
the information they  
need

**Signpost / refer  
to support**

**CARERS  
INFORMATION  
LINE**

**0141 353 6504**

**PATIENT  
INFORMATION  
CENTRE**

**0141 355 1527**

# Carers Pathway

## Identify carers & young carers

- How do you find this information?
- How do you record this information?
- How do you share this information?

## Provide relevant information

- What information is needed?
- When do you provide it?
- How do you provide it?

## Signpost / refer to support

- Signpost or refer – how do you decide?
- Who to?





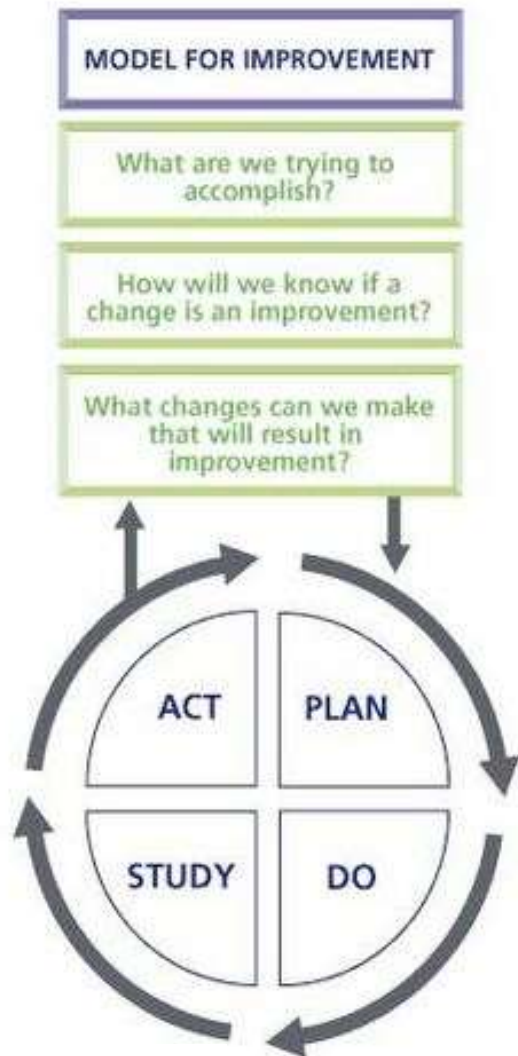
# NES Equal Partners in Care



# Stroke Carers Pathway Pilot

- 1916 patients diagnosed with Stroke in 2014
- 82% previously independent
- Age < 60yrs            20%  
   60 – 80yrs    49%  
   > 80yrs        31%
- Mean age Male 68yrs Female 75yrs

# Service Improvement Approach



What we wanted to achieve:

- Staff equipped with knowledge & skills for effective conversations on caring
- Effective multidisciplinary documentation
- Evidence of effectiveness



# What we did

- Multidisciplinary team trained in Carers Awareness
- Implemented Carers Pathway
- Introduced Caring Situation Summary (CSS) into documentation
- Began reviewing feedback structures

# Caring Situation Summary

Caring Situation		Outcome	
Patient is carer		Booklet given	
Patient is cared for		Carers Information Line card given	
Young Carer		Referred to service	
<b>Carer Status</b>		No action / not appropriate at this time	
Not recognised carer		Required to be discussed again	
New carer		Who informed	
Known carer			

# What we learned

- Training equipped staff with knowledge on how to raise the issue with improved understanding of life circumstance effects on health
- Caring Situation Summary utilisation mixed – position key to being completed
- When compared with generic documentation, CSS better at establishing caring situation
- All disciplines of staff involved in conversations on caring



# Did it do what we expected?

- Numbers linking with Hospital Discharge Support Service only marginally increased
- Carers self referring increased from 0% to 37%
- Case study analysis of those engaging with service showed improvements in involvement with planning of services for themselves and their cared for

# What we still need to know

- What questions do we need to ask to better identify caring situation?
- Who are we expecting to have these conversations?
- How do we make our feedback tools effective for carers?

# Thank you



# Contact details

Elaina Smith

Health Improvement Senior Acute Carers  
Information

[elaina.smith@ggc.scot.nhs.uk](mailto:elaina.smith@ggc.scot.nhs.uk)