



## PROJECT REPORT:

# HCL (Hertsmere Commissioning Ltd) Innovations Carers Project in Partnership with *Carers in Hertfordshire*

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## 1 INTRODUCTION

This report describes the project conducted by 6 GP Practices in Hertsmere to improve carer recognition and support and therefore the health outcomes for carers.

In 2005 a Hertsmere GP asked, “*We are tagging notes and signposting Carers, but what difference is it making?*”. This led to a study by *Carers in Hertfordshire* - ‘Identifying and Supporting Carers Through the GP Surgery - What Difference does it make? (Reeve and Baker 2005)’. The results demonstrated that carers identified at their GP Surgeries and referred to *Carers in Hertfordshire* experienced considerable benefits compared to carers identified by their GP Surgery and not referred. The outcomes included:

- a) Carers were twice as likely to report that they were better informed.
- b) Almost three times as likely to know who to contact in a care crisis.
- c) More than three times more likely to know about their right to a carer’s assessment.
- d) More likely to have received a carer’s assessment in the past two years.
- e) More than five times more likely to have had a benefits check.
- f) More likely to have had a significant break in caring in the last 12 months.
- g) More likely to be using alternative care services.
- h) More confident about access to work, leisure and education if any of these were important to them.

A great deal of work has been carried out in Hertfordshire to try to engage GPs and improve identification, registration and referral. However, despite this work, GP Practice Carer Registers continue to record much lower numbers of carers than demographic information available suggests and referral rates to *Carers in Hertfordshire* remain lower than expected. This is despite the fact that ‘an estimated 10% of practice population are carers’ (Supporting Carers: an action guide for general practitioners and their teams - Professor Nigel Sparrow, The Princess Royal Trust for Carers [PRTC] and Royal College of General Practitioners [RCGP] 2009). With the implementation of the National Carers Strategy, local and national initiatives are now in place; the importance of carer identification via GP Surgeries and primary health care professionals has increased.

'Valuing Carers in an Intermediate Care Team' (Patricia Joy Watters 2008), showed that individuals working as change agents and, supported by an external coach, could improve outcomes for carers. This was achieved by empowering staff, improving their job satisfaction and motivating them to improve the support offered to carers. The HCL Innovations Carers Project built on the learning from that work using Carer Champions as change agents in conjunction with the use of the Appreciative Process (Bushe and Pitman, 1991) and Bridges Transition Model (Bridges 2003). The Appreciative Process identifies good practice and seeks to encourage building on this whilst the Bridges Transition model stresses the need for people to be supported over a period of time in order for change to take place.

This Carers Project, funded by the Innovations grant, sought to support the outcomes of the National Carers Strategy especially that carers 'Be supported to stay mentally and physically well'. The aim of the Innovations Carers Project was to achieve this through training for Carer Champions in GP Practices and the involvement of carers to develop enhanced primary care services. The Carer Champions are members of staff nominated by their GP Practices to be the agents of change. It was recognised that merely increasing the numbers of carers on the register was not the aim. Registrations could, however, be an indicator of how well carers were identified and signposted to the support that could impact positively on their health and wellbeing (Reeve and Baker 2005).

As part of the Innovations Carers Project, HCL and *Carers in Hertfordshire* worked in partnership to help bring about improvement in health and wellbeing outcomes for carers. Six GP Practices within the HCL Practice Based Commissioning Group accepted the invitation to participate in the project to achieve the following objectives:

- a) Carers to be identified, registered at the GP Practice, informed and signposted to services available to support them in their caring role.
- b) Improvements in the health and wellbeing of carers.
- c) Carers to be actively involved in developing services that would support them within the GP Practices.

Staffing requirements were outlined for the GP Practices. They were advised that the change agents (Carer Champions) who were nominated should have an interest in the issues of carers and have the power to influence the primary health care team. The individuals nominated were keen and enthusiastic members of the administrative teams at the various GP Practices and have dedicated as much time to the project as their workload allowed. It was clear, however, with the progress of the project that without the on-going support of the Carer Champion's line manager the project would be of limited success. Using 'Valuing Carers in an Intermediate Care Team' (Patricia Joy Watters 2008) as the model, it was clear that some Carer Champions had limited experience and this needed to be taken into account. External support in terms of planning and implementation of change was fundamental to the management strategy. Each Carer Champion was allocated a mentor to support them through the project. This project benefitted from the joint working of all the parties involved:

- a) Carers attended and contributed to the Listening to Carers Events to have their say about what the change would look like for them.
- b) HCL with an awareness of low numbers of carer registrations and poor recognition and signposting for support, commissioned *Carers in Hertfordshire* to implement the HCL Carers Innovations Project.

- c) The 6 Carer Champions were nominated by the participating GP Practices to work on this project and implement changes with the Practices.
- d) Patricia Joy Watters (Project Facilitator and Health and Social Co-ordinator Intermediate Care Team - Hertfordshire County Council) with experience of the implementation of change management strategies to support carers in Hertsmere.
- e) *Carers in Hertfordshire* with experience of involvement and research in carers' issues provided project facilitators and mentors.

## 2 THE PROCESS

- 2.1 The 6 Carer Champions attended a half day training session to gain an understanding of the fundamentals of the Change Management Strategy to be used which included Bridges Transition Model (Bridges 2003). This focussed on the transition that people need to make to bring about change in behaviour and the Appreciative Process (Bushe and Pitman 1991) which aimed to identify and give recognition to existing good practice rather than focus solely on what needed to be changed. It was acknowledged that the appropriate choice of change models was crucial to the project.
- 2.2 The Carer Champions took part in 5 peer group meetings. The purposes of the meetings were to:
  - a) Plan the changes which could be implemented within their own GP Practices. Although all GP Practices had the same requirements for Quality and Outcomes Framework (QOF) Management Standards, these changes needed to be implemented differently and from varying starting points.
  - b) Share the experiences of the work being carried out - offering peer support.
  - c) Gain an understanding of the services available to carers following identification and registration with the GP Practices and referral to *Carers in Hertfordshire* for support.
- 2.3 The Carer Champions together with *Carers in Hertfordshire* held two Listening to Carer events in October 2009 – one for Borehamwood and one for Potters Bar. Both these events were well attended. A total of 78 carers attended which exceeded expectations. It is believed that the invitations being sent out directly from the GP Practices had an influential effect on carers' attendance. Carers reported it demonstrated they were recognised and respected as care partners. At these events the Appreciative Process was used with carers to:
  - a) Identify the good work already being carried out at the various GP Practices that Carers would like to see – CONTINUE.
  - b) Discuss what carers would like to see as improvements - START.
  - c) Identify unhelpful ways of working that should if possible cease - STOP.

- d) An innovative approach was taken by using the skills of an illustrator at these events who was able to use the information gleaned and demonstrate it in a pictorial format. An illustration was designed to demonstrate the thoughts of carers. This illustration is now available for the participating GP Practices to keep as a reminder of the on-going partnership between GPs and carers (Appendix 2) and is a shared picture of what everyone has been working to achieve.
- e) The Project Facilitator, Patricia Joy Watters, met with senior team members at each GP Practice to update them on the progress of the project and support the Carer Champions to influence and support change.
- f) Each Carer Champion conducted a SWOT analysis to determine their own characteristics in relation to being able to manage change within their own team setting and the strengths of their GP Practice. An action plan was then produced bearing in mind the varying starting points for carer support in each GP Practice.
- g) Ongoing mentoring was provided to Carer Champions to support them through the change process.
- h) An event was held in April 2010 to feedback to carers on the progress of the project. This feedback was requested by carers at the Listening to Carers events held at the start of the project. The Carers Feedback Event – ‘Moving Forward’ also offered carers the opportunity to meet with other statutory and voluntary services (Appendix 3). A number of carers had not had the opportunity or knowledge to access these services previously. One carer stated “it was helpful having the organisations in one place with the opportunity to ask questions”. A total of 63 carers attended this event together with a team from each Practice including GPs, Carer Champions and in some cases nursing staff, practice managers and administrators. The poster which was created from the comments made at the Listening to Carers events was launched at this event. Carers who attended the event were given postcard sized copies of the poster with details on the reverse of the Carer Champion at each GP Practice and the contact details of *Carers in Hertfordshire*. Presentations were given by participants of the project explaining the process and progress within the GP Practice setting (Appendix 4). Comments from carers when asked if there was anything they found particularly helpful included:
- “Very pleased to hear about the progress the GP surgeries are making”.
  - “The fact that so many GP Surgeries are so involved and committed to helping carers and the interaction between Surgeries and *Carers in Hertfordshire*”.
  - “Help with services available”.
  - “How much has improved for carer information and what surgeries have done”.

### 3 OUTCOMES FOR GP PRACTICE PROJECT INVOLVEMENT

Action	Indicator	Outcome
<p>1 Meetings with Project Facilitator and GP Practices to explain and support implementation of change.</p> <p>Carer Champions updated staff in team meetings on progress of the project.</p>	<p>All participating Practices met with Project Facilitator. Attendance ranged from Carer Champion only, to GP teams with information cascading from Carer Champions to the GP Practice teams.</p> <p>GP Practice staff are actively involved in the project.</p> <p>GP lead for carers identified.</p>	<p>Commitment from whole GP Practice to support Carer Champion with change process.</p>
<p>2 Identification and registration of carers through:</p> <ul style="list-style-type: none"> <li>• clear information for carers in the GP Practice on new or updated boards</li> <li>• easy to complete registration forms</li> <li>• well placed posters including on the back of toilet doors</li> <li>• use of events such as Flu vaccinations and health checks</li> <li>• increased awareness of carers and the benefits of registration in the whole staff team.</li> </ul>	<p>Carers' registers that are up to date with new carers added on a regular basis.</p> <p>Increased referrals to other agencies including Crossroads Care.</p>	<p>Patients at the GP Practice identify themselves as carers and, recognise their own position.</p>
<p>3 Carers' information packs developed and carers encouraged to ask for them.</p> <p>Carers referred to <i>Carers in Hertfordshire</i> for information, support and advice.</p>	<p>All GP Practices have information packs which are distributed to carers upon identification.</p> <p>In the preceding 6 months leading up to the commencement of the project, 12 carers had been referred to <i>Carers in Hertfordshire</i> by the participating Practices.</p>	<p>Carers are given appropriate information, support and advice to carry on caring if they want to and access support services as appropriate.</p>

Action	Indicator	Outcome
3 continued	<p>During the first 6 months of the project 93 Carers were referred for information, support and advice.</p> <p>The number of referrals continues to increase.</p>	
4 Improved computer data input to increase visibility for staff of carer status and be able to produce useful and up to date carer registration information.	<p>GP Practice staff are aware of and consider the impact of the patient's caring role when they communicate with a carer.</p> <p>GP Practices are able to use the carers' register as an effective tool to support the carer population.</p>	<p>Carers feel valued and respected as care partners.</p> <p>Carers are encouraged to look after their own health and wellbeing through appropriate offers from the GP Practice, e.g. Flu vaccinations.</p>
5 Consideration of flexible appointments for carers.	GP Practice staff aware that carers may need some flexibility in appointment times, e.g. double appointments with cared for, specific times when care is available.	Carers are able to look after their own health and wellbeing as well as that of the person they care for.
6 All Participating GP Practices nominated for Royal College of GPs and Princess Royal Trust for Carers - Caring About Carers Award	<p>In the citation for the award the adjudicators hope that the following initiatives and procedures implemented by Highview Surgery will be replicated by other surgeries:</p> <p><i>'Practice protocol for the identification of Carers. Practice has managed to identify 50% of Carers – the adjudicators were impressed at this percentage and that carers are being identified so effectively.</i></p> <p><i>Two receptionists responsible for ensuring that information on carers is regularly updated.</i></p>	<p>Highview Surgery (Potters Bar) awarded: Joint overall UK winner with Scotland + Winner of England Caring about Carers award.</p> <p>This demonstrates that they have achieved the aims of this project to help bring about improvement in health and wellbeing outcomes for carers through training for Carer Champions in GP Practices and the involvement of carers to develop enhanced primary care services.</p>

Action	Indicator	Outcome
6 continued	<p><i>Information on carers included in new patient's registration form.</i></p> <p><i>The carers' notice board in waiting room requesting that details be given to reception.</i></p> <p><i>Cared for patient's records coded and details of carers written in patient summary and updated.'</i></p>	

#### 4 PLANS FOR THE FUTURE IN PARTICIPATING GP PRACTICES

- a) Using the technology available, matching up patients with long term conditions who may have an unidentified family carer.
- b) Where possible GP Practices to arrange for meetings with carers to encourage greater engagement.
- c) Display the Road Plan poster in the GP Practice as a synopsis of the shared work which had been undertaken and which is an on-going reminder for the staff to keep carers on the agenda.
- d) Work towards offering carers annual health checks.

#### 5 BARRIERS TO SUCCESS OF THE PROJECT

Lack of baseline for carers' registration at GP Practices due to:

- a) no common understanding of the purpose of the register;
- b) inclusion of patients with long term health needs in initial figures;
- c) difficulties in retrieving the information from computer systems;
- d) variable levels of management support to Carer Champions which inhibited the ability to implement change.

The project relies on good communication between the Carer Champion and the GP Practice team. Where there are no existing mechanisms for effective communication e.g. multidisciplinary meetings, this made it harder to achieve.

## 6 HCL HAS REPORTED THAT FOLLOWING THIS PROJECT

- a) Consistent processes are now in place to register carers.
- b) There is improved carer awareness across GP Practice staff.
- c) Increased advertising and exposure has led to more patients registering as carers in GP Practices.
- d) GP Practices now have a robust benchmark on the number of carers they have registered.

## 7 CONCLUSION

The 2008 Carers Strategy recognised that carers are at disproportionate risk of experiencing health inequalities and that prevention and early intervention measures can make a significant contribution to supporting individuals to manage their own health. It also recognised *'GP's are often the first point of contact for carers and will normally continue to be the professional in closest contact with them. There is however a large variation in service provision'* (Carers at the heart of 21<sup>st</sup> Century families and Communities - Department of Health 2008).

In this project, Carer Champions were supported to work as change agents in GP practices to improve the identification and support for carers from their primary health care team.

The change agents built on existing good practice to move towards the outcome agreed in consultation with carers and depicted by the picture in Appendix 2. As part of this process they encouraged the whole primary health care team to see identification and support for carers as part of their role.

Carer identification and referral to support continues to grow in the surgeries where the work of the Carer Champions has become embedded in the practice of the primary health care team. Examples of this can be seen in the award to Highview Surgery from the PRTC and RCGP. The judges commented particularly on the practice protocol for identifying carers which has successfully identified 50% of carers. This includes, regularly updated information being available, information of carers included in the new patient registration pack, a notice board that encourages registration and use of computer technology to code cared for patients' records and for them to have carer details in the patient summary that are regularly updated.

Through the work of the change agents, identification and support for carers has become an accepted part of practice in the primary health care teams and the early indications are that this change will continue long after the end of the project. The peer group continue to meet and support each other in new developments and referrals to *Carers in Hertfordshire* from the participating practices continue to be higher than from any other area.

The investment made by all partners in this project, has delivered lasting improvements in the identification and support for carers. Our thanks go to all who supported or participated: Carers, Primary Health Care Teams, Hertsmere Commissioning Ltd, Hertfordshire County Council, Joint Commissioning Team and our staff at *Carers in Hertfordshire*. Particular thanks go to Patricia Joy Watters whose original project with the Hertsmere intermediate care team was the inspiration for this project and who facilitated training and supported the change agents throughout the project.

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## References

- Supporting Carers: an action guide for general practitioners and their teams (Professor Nigel Sparrow, The Princess Royal Trust for Carers [PRTC] and Royal College of General Practitioners [RCGP] 2009)
- Valuing Carers in an Intermediate Care Team (Patricia Joy Watters 2008)
- Identifying and Supporting Carers Through the GP Surgery - What Difference does it make? (Reeve and Baker 2005)
- Carers at the heart of 21<sup>st</sup> Century families and Communities (Department of Health 2008)

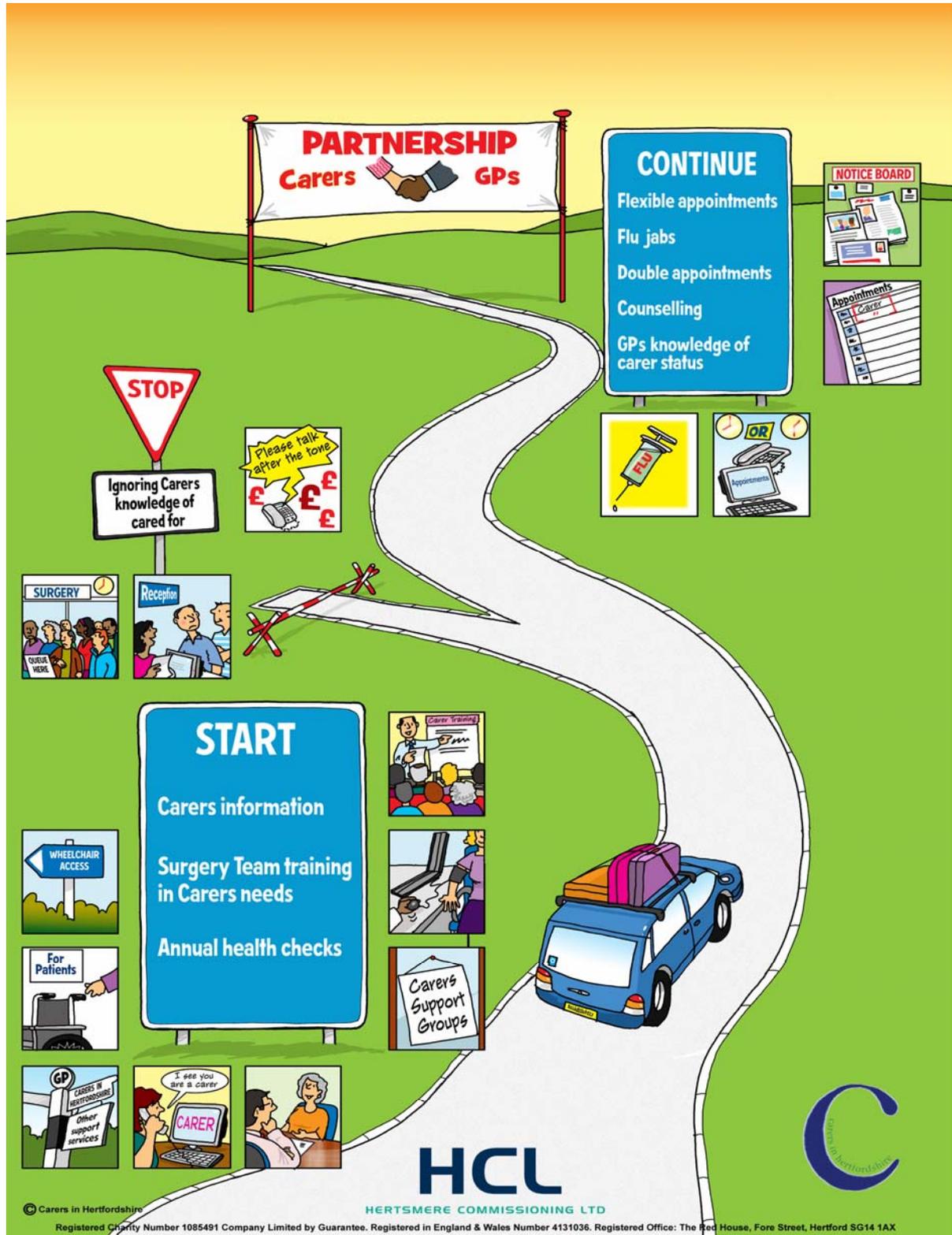
## **APPENDICES**

- Appendix 1**      **Definition of a Carer**
- Appendix 2**      **GPs and Carers in Partnership Road Plan Poster**
- Appendix 3**      **List of Exhibitors at Carers Feedback Event – ‘Moving Forward’**
- Appendix 4**      **Presentation by Project Facilitator, Patricia Joy Watters Carers Feedback Event – ‘Moving Forward’**

## **Appendix 1 – Definition of a Carer**

A carer is someone who, without payment, provides support to a partner, child, relative, friend or neighbour, who could not manage without their help. This could be due to age, physical or mental illness, addiction or disability. (Supporting Carers: an action guide for general practitioners and their teams - Professor Nigel Sparrow, The Princess Royal Trust for Carers [PRTC] and Royal College of General Practitioners [RCGP] 2009)

Appendix 2 – GPs and Carers in Partnership Road Plan Poster (by Ian West)



### **Appendix 3 – Exhibitors at Carers Feedback Event - ‘Moving Forward’**

Affinity Sutton  
Age Concern (Age UK)  
Alzheimers Society,  
Crossroads (Crossroads Care)  
Caring with Confidence  
*Carers in Hertfordshire* - Young Carers Project  
*Carers in Hertfordshire* - Carer Support Workers  
Herts County Council Adult Care Services  
Herts County Council Children Schools and Families  
Herts County Council Money Advice Unit  
Jewish Care  
Job Centre Plus  
Mencap  
Mind  
PALS  
Parkinson’s Society

**Appendix 4 - Presentation by Project Facilitator, Patricia Joy Watters  
Carers Feedback Event – ‘Moving Forward’**



**Hertsmere Carers Innovation Project**

April 21<sup>st</sup> 2010

A slide with a green decorative shape on the left side. The title 'Hertsmere Carers Innovation Project' is in pink. Below it, the date 'April 21<sup>st</sup> 2010' is also in pink. A dark blue horizontal bar is positioned below the date.

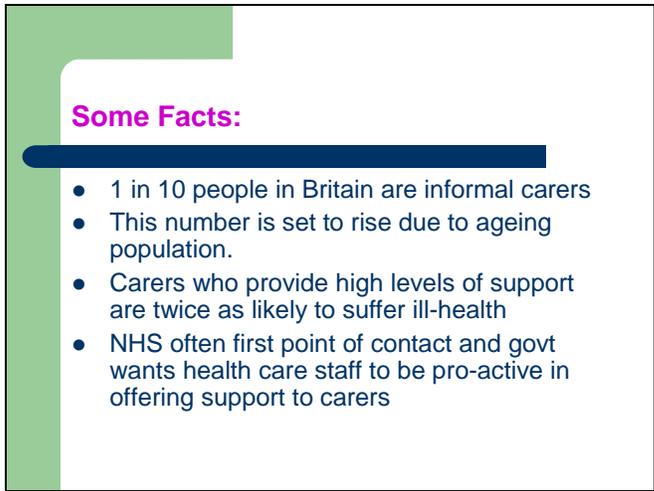


**Innovation Project funded by Hertfordshire Joint Commissioning Partnership:  
Mental Health Services – Innovations Fund**

6 GP surgeries in HCL (Hertsmere Commissioning Limited) agreed to take part in project.

- Therefore possibility of co-operation and support between surgeries.
- Aim is that all of the staff within the GP surgery will take a pro-active approach to identifying carers and offering them appropriate support

A slide with a green decorative shape on the left side. The title is in pink. Below it, a dark blue horizontal bar is present. The text describes the project's scope and aims.



**Some Facts:**

- 1 in 10 people in Britain are informal carers
- This number is set to rise due to ageing population.
- Carers who provide high levels of support are twice as likely to suffer ill-health
- NHS often first point of contact and govt wants health care staff to be pro-active in offering support to carers

A slide with a green decorative shape on the left side. The title 'Some Facts:' is in pink. Below it, a dark blue horizontal bar is present. The text lists four facts about carers.

## Research shows difficulties

- Health staff spoke of lack of time
- Of it being someone else's job
- Of only reacting when a problem had arisen
- Of their focus being the patient
- Of having no training
- Carers feel that their role is not recognised by health care professionals. 1 in 5 stated this was most important factor for them. (Carers UK, 2007a)

## How to bring about change?

- Key has been to use the right approach
- Already tried in Hertsmere ICT with good results
- Therefore used the same models
- **Appropriate choice of change models crucial to project**

## Change models used

- **Bridges Transition Model**-focus on transition that people need to make to bring about change in behaviour and 4P approach (Plan Purpose Picture Part for all)
- **Appreciative Process**-aim is to identify existing good practice and encourage amplification rather than focus on what needs to be changed

## Other important Factors

- Change agent should be from within team
- Choice of the change agent is crucial
- Change agent needs training in carers
- Change agent needs outside support
- Reduce workload of change agent
- Each surgery needs a plan
- Carer's views taken into account

## Moving Forward

- Project is continuing – important to remember transition –takes time
- Could be a model for other areas and GP practices
- Royal College of GPs working with Princess Royal Trust for Carers produced an action guide booklet for GPs and their teams called Supporting Carers-lots of ideas.

## Positive Developments for the Future

- Working with Appreciative Process-results in people feeling positive –theybring about new changes
- Carers Group in PB
- GP proposal of training

## Hope for the Future

Health Care  
Professionals

Experts in medical  
conditions and  
treatment

Working  
Together

Carers

Experts in knowing about  
the people they care

In Partnership