

# **NHS LANARKSHIRE CARERS INFORMATION STRATEGY**

**2007 – 2010**

Endorsed by NHSL Board on 28 March 2007, and subsequently by the Chairs of NLCT and SLCN, and Chief Executives of NLC and SLC

**28th March 2007**

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## **Foreword**

*Welcome to NHS Lanarkshire's Carers Information Strategy 2007-2010. As part of our combined efforts to see that all carers have access to targeted information that help them in their caring role, this NHS Carers Information Strategy has been developed to ensure that all carers who come into contact with NHS services are identified and provided with such information properly and effectively.*

*For some time the provision of information for carers has been discussed by the Carers Strategy Groups in North and South Lanarkshire which involve carer organisations, carers, local authorities, voluntary organisations and NHS Lanarkshire partners. This strategy reflects those discussions and builds on these to strengthen the identification and support of carers through signposting them to good information, supporting NHS staff to do this, and supporting carers as key partners in care through relevant training.*

*This Strategy reflects and complements three key documents : - North Lanarkshire's Strategy for Carers 2005-08, Key Partners in Care Agreement in South Lanarkshire(2003) and the Carers Strategy for South Lanarkshire 2007, as well as guidance from the Scottish Executive in HDL (2006) 22.*

*The recommendations in this Strategy will be delivered in an action plan agreed by all partners through the Carers Strategy Groups in North Lanarkshire and South Lanarkshire*

## **Signatories**

<i>NHS Lanarkshire</i>	<i>Chief Executive</i>
<i>North Lanarkshire Carers Together</i>	<i>Chair</i>
<i>South Lanarkshire Carers Network</i>	<i>Chair</i>
<i>North Lanarkshire Council</i>	<i>Chief Executive</i>
<i>South Lanarkshire Council</i>	<i>Chief Executive</i>

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## **1) SUMMARY**

The NHS Lanarkshire's Carers Information Strategy sits in the context of the North & South Lanarkshire's Carers Strategies. It thus deals mainly with empowering carers.

The main aim of an NHS Lanarkshire Carers Information Strategy is to identify carers, including young carers, provide them with information and signpost them to local carer organisations (and if patient confidentiality allows to appropriate national organisations supporting patients and users and carers for specific conditions) who will support them and inform them of their statutory right to a carers assessment. It also identifies a network of NHS Managers to ensure that this strategy is delivered systematically.

An action plan setting out implementation to suit particular opportunities presented by partner organisations in North and South Lanarkshire will be agreed and revised in the light of experience.

Wider aspects of support to carers are addressed in the two broader strategies co-signed with partners.

The costs of implementing the recommendations (excluding the new investment through the General Medical Services Contract), will be contained within the overall sum of £200,000 earmarked within the Board's Financial Plan.

## **2) INTRODUCTION**

### **WHO IS A CARER?**

In the guidance issued by the Scottish Executive, (HDL (2006) 22) a carer is defined as a person of any age, who looks after family, partners or friends in need of help because they are ill, frail or have a disability and need support to live independently. The care provided is unpaid.

Carers can be adults supporting adults, young carers caring for adults or another young person, or carers of children with disabilities whether the carer is a parent or not. The support a carer provides includes moving and handling, helping with feeding, personal hygiene, administering medication, emotional support, assistance with life skills, acting as an advocate or guardian, or helping someone to access leisure and recreation.

The Community Care & Health (Scotland) Act 2002 refers to the entitlement of “regular and substantial” carers to an assessment of their support needs as a carer, and to be signposted onto sources of support and advice. However, carers who are not caring on a “regular and substantial” basis will also have information needs and require information on medical conditions etc because of the impact of the caring role. For the purpose of this Information Strategy it is intended that all carers who need information and support should receive it.

### **STRATEGIC BACKGROUND**

NHS Lanarkshire recognises the valuable role and contribution of unpaid carers, and that their health and well being should be assured. The recent Care 21 Report “The Future of Unpaid Care in Scotland” recommends that the NHS and local partners provide carers with the information and training they need for their caring role and build “Carer Awareness” into professionals’ training.

A carer’s first realisation that they have become a carer is often when a diagnosis is made by the General Practitioner (GP) or when a family member is admitted to hospital for treatment and then discharged.

Carers are “Key Partners in Care” and this was formally recognised in South Lanarkshire when a document “Key Partners in Care” was endorsed by the South Lanarkshire Carers Network, South Lanarkshire Council and NHS Lanarkshire in 2003. As co-providers of care they can often need similar training, education, support etc, as do those who are paid to provide care by the NHS and Local Authorities.

Within NHS Lanarkshire, the issue of carers is highlighted in “A Picture of Health” which proposes providing better support for carers by taking forward initiatives with the voluntary sector, carers organisations and Social Work to: -

Carry out carers’ assessments.  
Involve carers in hospital discharge procedures.  
Provide training for carers.  
Recognise carers as partners in care.  
Build care awareness in to training for health care staff.  
Involve carers in planning services.  
Provide respite and short breaks from the caring role.

NHS Lanarkshire will ensure that there are carer sensitive solutions to health service changes in the 5 main service areas identified under A Picture of Health:-

- Health Improvement.
- Strengthening Primary Care.
- Supporting and Enhancing Local Services.
- Preparing Mental Health Services for the future.
- Modernising Acute Hospital Services.

NHS Lanarkshire’s Carers Information Strategy is set firmly in the context of the North Lanarkshire Strategy for Carers 2005 – 2008 signed by NHS Lanarkshire, North Lanarkshire Council (NLC) and North Lanarkshire Carers Together (NLCT), and in the context of the South Lanarkshire Carers Strategy which will be signed by NHS Lanarkshire, South Lanarkshire Council (SLC), South Lanarkshire Carers Network (SLCN) and the Princess Royal Trust Lanarkshire Carer Centre. Other key organisations involved include Lanarkshire Links, and the Carers Liaison and Support Project in Wishaw. A key organisation concerning young carers in North Lanarkshire is the NCH Young Carers Project. Other relevant organisations such as Alzheimer’s Scotland and Lanarkshire Links are involved through NLCT and SLCN.

North Lanarkshire Carers Together and South Lanarkshire Carers Network have accepted a responsibility to speak on behalf of all carers whether or not they are hidden, from any ethnic group, and looking after any carer whatever their disease or condition. This stance is welcomed and recognised by the statutory agencies including NHSL.

In the South Lanarkshire Carers Strategy Group there has been involvement with the former Rutherglen and Cambuslang Local Healthcare Co-operative and now with the relevant Locality Management Team.

In North Lanarkshire a user and carer participation group has been set up to ensure the direct involvement of service users and carers in the local Health and Care partnership.

The key role of carers has also been set out in Joint Health Improvement and Joint Community Care Plans and Lanarkshire Living has played a key role in helping shape mental health services.

The Strategies for both North and South Lanarkshire identify the significant number of carers – 33,000 in the North and 32,000 in the South. They both identify the provision of appropriate information for carers as a key theme and that carers are “Key Partners in Care” (with a formal agreement to this effect in the South). Carers in Scotland save the NHS £5bn per annum (Finding the Balance – Carers Scotland) and both strategies aim to improve the physical and emotional well being of carers. Both identify the particular issues that face carers under 18.

In a survey of 3528 NHS Lanarkshire staff in 2006 as part of the Staff Governance arrangements, 20% of staff answered that they have day to day care responsibilities for a relative, partner, friend or neighbour who due to illness frailty or disability would otherwise not be able to live independently.

The Health Board’s own “Patient Focus & Public Involvement Strategy 2006-2010” proposes that carers (and users) should be invited to link as stakeholders into the Locality Public Patient Fora as these will be the key drivers of NHS Lanarkshire’s public engagement and will allow engagement with the local councils and community planning partners. Carers and care organisations as key partners in this process must be involved at all levels of planning and development.

Patients and carers are also involved in NHS Lanarkshire’s Managed Clinical Networks and major redesign projects.

### **YOUNG CARERS (and Child Protection)**

Young Carers as any other child may need additional support particularly in relation to their caring role.

Young carers are children first and carers second. Young carers will need particular information recognising their place and role within the family and will need appropriate support that includes:

Recognition of their role

Age appropriate information

Attention to their own health needs

Support within education

Respite

Referrals made (where appropriate) to other agencies including Young Carers Project

Agencies supporting young carers need to be alert to the fact that children in a caring role may be vulnerable and some potentially may be at risk of significant harm because of their circumstances. Referral to Young Carers support in North and South Lanarkshire should be made.

All agencies in contact with children and their families have a responsibility to act if they become worried about a child’s welfare or a parents ability to care for the child safely and adequately. The welfare of the child is the paramount consideration. If a child is at risk of harm this must override concerns about the parent’s wishes or welfare.

All NHS Lanarkshire staff that have contact with children should be alert to signs that a family is under stress or in need of help with bringing up their children. Early support may help the child or family to tackle problems, improve coping and prevent the risk of significant harm. Where professionals suspect a child is at risk of significant harm or is experiencing significant harm they should consult with their line manager, the Child Protection Service or contact the Social Work Service or the Police about their concerns.

A referral should be made to the Social Work Department in line with NHS Lanarkshire's Child Protection Procedures.

Further reference is made to young carers under the section "Training for Carers".

## **CARERS OF PEOPLE AFFECTED BY MENTAL ILLNESS**

The principles set out in this section, although written specifically for carers of people affected by mental illness will often apply more widely.

Patients who experience mental health problems have the same rights to confidentiality and carer involvement as anyone else accessing health services and should be encouraged to participate fully in decisions around their care.

The NHS Quality Improvement Scotland Standards for Schizophrenia (QIS, 2001) set a standard in which carers must be:

- Given information about the illness
- Given the opportunity to be actively involved in discussions about the persons care.

Additionally:

- Information and support should be readily available, provided in a manner acceptable to the carer and updated regularly to reflect the changing needs of both the patient and the carer.

The principles stated above were further embedded in recent mental health legislation (The Mental Health Care and Treatment Scotland Act, 2003).

When a patient is subject to the Act the patient has the right to nominate a Named Person (often a carer) who has the authority to act for the patient in making decisions related to the patients care and treatment.

This entitles the named person and the patient's principal carer (if these are different people) routinely to receive information in relation to the patient's illness and information on any compulsory measures which have been taken or are being sought, to allow them to represent their own or the patient's view on these treatment options.

Lanarkshire Links is an important organisation offering support to carers of those with a mental illness. The “Reach Out” project board in Coatbridge provides support to children and young people affected by a family member’s mental illness.

Comprehensive information for carers in relation to the Care and Treatment Scotland Act is provided on NHS Lanarkshire’s Mental Health and Well-being Information website at

[www.lanarkshirementalhealth.org.uk](http://www.lanarkshirementalhealth.org.uk) and at

[www.scotland.gov.uk/reserve/Dec/150172/0039968.pdf](http://www.scotland.gov.uk/reserve/Dec/150172/0039968.pdf) and

[www.mwcscot.org.uk/web/FILES/Publications/Carers\\_Confidentiality\\_web.pdf](http://www.mwcscot.org.uk/web/FILES/Publications/Carers_Confidentiality_web.pdf)

## **SHARING CLINICAL INFORMATION.**

Sharing of clinical information with carers is recognised as important. NHS Lanarkshire also recognises the need for patient confidentiality, and thus clinicians will seek consent from an individual before their clinical details are shared with their carer.

Information sharing protocols have been developed between NHS Lanarkshire and the Local Authorities.

If a service user does not wish their carer to be given information about them, the carer should nonetheless be offered an explanation of the confidentiality protocol of NHS Lanarkshire, and given information that is not confidential, eg, general information relating to the safeguard of the service users general wellbeing and details of organisations that provide information and support.

Easily understandable, accurate and timely information must be provided by health care professionals and should be made freely available to service users and carers from the onset of any illness and throughout its course, especially relating to the following:-

- The illness.
- Treatment including medication, taking treatments and side effects.
- Their rights eg legal, civil and human rights.
- The availability of services including advocacy and how to access them.
- How to cope with effects of mental illness.
- Help available for any sexual or spiritual problems, diet, smoking and drug and alcohol addiction problems when combined with mental health difficulties.
- Where to obtain information and support in the community eg, benefits, personal finance, housing, employment and voluntary sector.

Important times for service users and carers to be given information include:

- To service users before medication is prescribed.
- To carers as soon as possible after the onset of illness.

- To service users and carers shortly before going into hospital and whilst in hospital, to explain how needs would be assessed and the service user's aftercare planned.
- In preparation for discharge and at the time of discharge from hospital.
- At care plan meetings and appointments.

Service users should be encouraged to share information with their carers to help them understand their treatment eg, the side effects of the medication.

## **ADVOCACY FOR CARERS**

Independent advocacy helps people stand up for their rights and to be heard by people in organisations who have power over them. An independent advocate is loyal only to the person. The advocate gives the person the information needed to make their own decisions, and support the person to speak up on their own behalf or to speak up for them if they are unable to. Independent advocates do not work for any public body. They do not charge for their services.

Carers currently do not have access to paid independent advocacy and there has been considerable discussion as to what if arranged such advocacy might be.

Informal and general advocacy for carers either collectively or individually is available through Lanarkshire Links, NCH North Lanarkshire Young Carers Project, South Lanarkshire Carers Network, North Lanarkshire Carers Together and the Princess Royal Trust Lanarkshire Carers Centre amongst other organisations.

## **EQUALITY & DIVERSITY**

NHS Lanarkshire has worked with North Lanarkshire Carers Together and South Lanarkshire Carers Network to make all endeavours to gain the active involvement of minority ethnic groups. It recognised with these partners that further initiatives should be explored and this will be discussed by all partners with the Lanarkshire Ethnic Minority Action Group.

It is recognised that the information needs of carers from other diverse groups such as gypsy and travelling people, lesbians, gay, bi-sexual and transgender communities, and carers with a disability, will also need to be recognised by the North and South Carer Strategy groups.

In the meantime, NHS Lanarkshire has funded the Princess Royal Trust Lanarkshire Carers Centre to assess how it can become more responsive in the provision of its service to minority ethnic groups by exploring this issue with the Minority Ethnic Carers of Older People (MECOP) from Edinburgh.

The action plan which will be drawn up to implement the strategy will reflect input from carers from Black and Minority Ethnic and other equality groups as these become available through work with the partners represented on the North and South Carers Strategy Groups. It is intended that the action plan would set out a timetable

agreed with partners to address the needs of specific groups on advice from the information sub group of each of the North and South Carer Strategy Groups.

## **REVIEW OF STRATEGY**

Implementation of the strategy will be reviewed in the light of experience to encourage adoption of best practice throughout Lanarkshire, learn from other areas, and to reflect feedback on implementation of the wider carers strategies in North and South Lanarkshire. Carers themselves will be involved in reviewing the effectiveness of the Strategy and its implementation.

### **SUMMARY OF RECOMMENDATIONS FROM INTRODUCTION**

- 1) All carers who need information and support should receive it.
- 2) Carers are “Key Partners in Care”.
- 3) Carers should engage with Community Health Partnerships through the Public Patient Fora; the benefits of existing processes of engagement e.g. Health and Care Partnerships etc., will continue to be recognised.
- 4) Young carers should be referred to young carers projects, and if suspected as being at risk should be protected in line with child protection procedures.
- 5) Easily understandable accurate and timely information must be given by health care professionals to carers and should be made freely available to users and carers whilst observing confidentiality in accordance with published good practice.
- 6) Greater involvement of carers from minority ethnic groups will be pursued through the Lanarkshire Ethnic Minority Action Group, to ensure that information made available from all sources is appropriate.

### 3) OVERALL OBJECTIVES OF THIS STRATEGY

NHS Lanarkshire's overall aim is to empower carers through the provision of targeted information and support to help them undertake their caring role as easily as possible. An action plan will be written with partners to implement the strategy and enable joint monitoring.

The strategy is based on a statement of the following **general principles**: -

- Carers are recognised and treated as key partners in the provision of care. Young carers will be seen as children first and carers second.
- All levels of the NHS work in partnership with carers in line with "A Picture of Health".
- NHS Lanarkshire recognises the statutory duty placed on Boards by the Community Care & Health (Scotland) Act 2002 to inform carers of their right to an assessment.
- Carers must be enabled to play a key part in local involvement fora to actively influence and shape NHS Lanarkshire services, Local Authority services and the direction of travel of Community Plans.

The guidance from the Scottish Executive contained in HDL (2006) 22 "NHS Carers Information Strategy: Minimum Requirements & Guidance on Implementation" has been discussed in both the North and South Carer Strategy Groups. The guidance is seen by both groups as very relevant and most welcome. Thus all partners agree that the overall objectives of NHS Lanarkshire's Carers Information Strategy is that NHS Lanarkshire should continue to work in partnership with carers, patients, NHS staff, Local Authorities, Carer Organisations and relevant voluntary groups to ensure: -

- The identification of carers by NHS staff, and subsequent signposting to information.
- That NHS staff are able to impart useful information to carers, including signposting carers through the free phone help line numbers for North & South Lanarkshire so that carers are effectively informed at every point of their journey through the NHS either as individuals or groups.
- That carers are informed of their potential legislative right under the Community Care & Health (Scotland) Act 2002 to an independent assessment of their support needs as a carer through a carer assessment.
- That patient consent is sought as a first step where appropriate before providing information to carers concerning the patient's clinical circumstances. If consent is withheld by the patient, carers will be provided with as much information as can be shared without breaching patient confidentiality. Shared information will

relate to medication, treatment and practical issues if a tension arises between the needs of the carer and patient, mediation is fully explored.

- That where patients are unable to consent through incapacity, practitioners work with partners and all the immediate family to share information as appropriate within the context of the Adults with Incapacity (Scotland) Act 2000
- General adoption of the principles set out in the NHS QIS Standards for Schizophrenia with regard to the provision of information to carers concerning the cared for.
- Young carers are recognised a distinct group with specific information needs.
- Carer awareness training is embedded whenever appropriate in mainstream training for NHS staff.
- That clear measurable outcomes are delivered for carers in terms of being better informed of how to access appropriate support as a result of targeted NHS information.

#### **4) HOW CARERS ARE INFORMED AND EMPOWERED**

Through the North & South Lanarkshire Carers Strategy Groups there has been significant discussion over the past 3 years concerning what information carers need, and in particular how to contact “hidden carers”. Both North Lanarkshire Carers Together (NLCT) and South Lanarkshire Carers Network (SLCN) recognise that many people who are carers do not wish to be recognised as carers and that the term “carer” is sometimes an impediment.

During the consultation it has become clear that there is relatively low use of the carer information lines. The balance of views seems to be that the carer information lines should continue to be maintained as a key and consistent signposting resource for carers.

#### **FREEPHONE HELPLINE**

Carers will look to frontline staff for helpful information and this should be properly communicated, wherever possible. However, rather than endeavour to ensure that all NHS staff are familiar with the full range of information that any carer might need, it was decided by the Strategy Groups to set up carer freephone information telephone numbers through the carer organisations so that carers needing help of any kind could be signposted to it. On phoning the carer information helpline which is staffed by the Princess Royal Trust Lanarkshire Carers Centre staff, carers are supported to address their individual needs. One of the Board’s professional committees noted that it is difficult for all staff to be aware of all support available for carers and thus it is important that staff and independent contractors have available to them a consistent and reliable way of signposting carers to help.

Signposting as well as informing carers of their statutory right for an assessment will be a part of the training made available to NHSL staff and visiting contractors.

Posters and cards to promote use of the carer information lines have been widely circulated within NHSL in Acute Hospitals, Community Hospitals, General Medical Practice surgeries, community pharmacies and other health locations. In North Lanarkshire this distribution has been followed up by carers who have been employed by North Lanarkshire Carers Together. Use of the carer information lines are routinely monitored by the Princess Royal Trust Lanarkshire Carers Centre and reports made routinely to the North and South Carer Strategy Groups. NHS Lanarkshire will continue to work with its partners to ensure wide spread availability of the helpline telephone number.

The two carer information line numbers were promoted during 2004/2005 through carer awareness briefings of team leaders (of District Nurses, Health Visitors and School Nurses) in Primary Care, Ward Managers in the three Acute Hospitals, and General Medical Practice Managers. Feedback from the exercise in Primary Care suggested that practice team briefings should be pursued and these were offered in 2005/2006. Awareness of the lines will be increased amongst general medical practices who offer the directed enhanced services for carers (described later).

With regard to young carers, Public Health Nurses play a particular role in providing information to young carers at school through school assemblies, informal aware-raising sessions to youth groups, drop-in clinics, health fairs and through teaching and guidance. They also provide information to young carers through pre-arranged visits at Health Centres, through home visits and by supporting other colleagues.

The National Children's Homes Young Carers project in North Lanarkshire has offered a particular opportunity to offer interactive sessions with young carers to offer practical help advice and support, information on carers' health to alleviate anxieties and on how to access health services.

### **HOME FROM HOSPITAL DISCHARGE PACK**

Again working with partners around the North and South Carer Strategy Groups, a "Home from Hospital" information pack for families and carers was produced and has been made widely available throughout NHS Lanarkshire's hospitals. NHS Lanarkshire and its partners are grateful to "Voice of Carers in Lothian" for sharing their work.

The Home from Hospital Pack has been particularly promoted at Monklands Hospital through a Carers Co-ordinator. A proposal to explore strengthened carer awareness with discharge managers is being explored at Hairmyres using short term funding offered by the local branch of Crossroads.

Feedback on the pack from carers has been limited, but a review will be undertaken to ensure the pack remains current. Any review of the home from hospital discharge pack will in particular consider carer identification, targeted information, signposting and integrating the right of carers to an assessment within hospital discharge procedures. It will also reflect on the needs of carers of those with a mental illness.

## **CARERS' HEALTH**

In the wider context of promoting carers health and wellbeing, a health needs assessment will be included as part of the Director of Public Health's programme of work by 2010. This will help inform the range of information available for carers, and consider the particular needs of young carers and carers from minority ethnic groups.

In addition discussions are underway between NHS Lanarkshire and North Lanarkshire Council to design a project together to explore specific carers health needs, how carers can be better equipped to ensure their health and wellbeing, and develop positive partnership working between GPs and other clinicians. This will be a pilot project to North Lanarkshire and if successful it is hoped to set up a similar project with South Lanarkshire Carers Network.

South Lanarkshire Carers Network are promoting use by carers of a "crisis" card which encourages carers to think through how the care they give would be continued in the event that they were suddenly unavailable, and would be used if found by A&E staff to take action to assure the attending carer that the cared for would be safe.

The provision of free flu vaccinations for carers in Lanarkshire was introduced before the rest of Scotland.

## **CARERS SUPPORT & TRAINING TEAM**

NHS Lanarkshire recognises that carers will be in contact with all parts of the service; thus it is proposed to set up a Carers Support Team which will support staff in primary and secondary care to be more responsive to carers, and be a point of contact for carers and carer's organisations. The team will be able to learn from lessons already highlighted and from those which will emerge and would link with the carer liaison contacts in general medical practices. The remit of the team will include ensuring that the generic skills of all staff include identifying, recognising, supporting and signposting carers, and that there is a co-ordinated overview of all carer related developments.

Feedback from consultees suggest that carer co-ordinators should be provided in each of the three acute hospitals, that carers in primary care who do not need support from secondary care, should also be recognised, that there should be a strong link across primary and secondary care to support carers, that carers organisations should be involved in training NHS staff in carer awareness and that the needs of those carers for those with a mental illness should be included. This helpful feedback will help inform the action plan.

**SUMMARY OF RECOMMENDATIONS FROM HOW CARERS ARE INFORMED AND EMPOWERED**

- 1) Ensure NHS staff are aware of the Carers Freephone Information Helpline and use it to signpost carers
- 2) Set up a Carers Support & Training Team to support NHS staff empower carers.
- 3) Continue to develop and provide Home from Hospital Discharge Pack.
- 4) Pursue a project or secondment in 2007/8 with North Lanarkshire Carers Together as a pilot to explore how best to support carers look after their own health. Consider a similar pilot in South Lanarkshire thereafter.

## **5) CARER AWARENESS TRAINING FOR NHS STAFF**

The challenge for NHS Lanarkshire is to ensure that all staff recognise carers as key partners in care and inform them how to make best use of the NHS by supporting and assisting them in their role as a carer.

There has been significant effort put into carer awareness briefings of key frontline staff. More in-depth carer awareness training was offered to NHS staff jointly with North Lanarkshire Council Social Work staff in a series of one day events undertaken in partnership with Carer Scotland and North Lanarkshire Carers Together. Joint training in South Lanarkshire has also been undertaken around single shared assessment.

Discussions within the North and South Joint Human Resources (NHSL, NLC, SLC) fora will agree carer awareness training, priorities and a timetable. A detailed action plan to train staff over the three year life time of this strategy will then be agreed to reflect opportunities, practicalities and competing training priorities. The training will look at carer awareness, carer identification, provision of information to carers, advising carers of their right to a carers assessment, carer signposting and support, and working with carers as key partners. It will be in keeping with standards set by NHS Quality Improvement Scotland and other relevant bodies.

Recognising competing training priorities, it is proposed to develop a simple leaflet for all staff to set out headline messages about identifying carers, NHS Lanarkshire's statutory obligations, a reference to helpline numbers and how to incorporate carer awareness into Personal Development Plans.

All opportunities will be taken to embed carer awareness training into other training, reflecting current pressures on staff to support each other with daily clinical workload. For example, carer awareness training is already part of the Single Shared Assessment Training, and will be part of the Care Management Training in the pilots at East Kilbride, Clydesdale and Coatbridge running from September 2006-7. This training also includes a reference to carers assessments.

Carer awareness for general medical practices is being influenced through the high take-up of the directed enhanced service for carers: this is described later under "Delivery and Accountability".

Discussions will be held to embed carer awareness in other aspects of staff training within NHS Lanarkshire. The part of the action plan setting out embedding care awareness will be determined in consultation with those who lead professional education amongst the clinical disciplines within NHSL.

Notice boards will be provided in all significant NHS premises for carers information provided by the carer organisation.

**SUMMARY OF RECOMMENDATIONS OF CARER TRAINING AWARENESS FOR NHS STAFF**

- 1) Agree priorities, training approach and timetable for carer awareness of Local Authority and NHS staff through Joint Human Relations Fora in Lanarkshire.
- 2) Ensure carer awareness embedded in all appropriate mainstream training.
- 3) Produce Carer Awareness Leaflet for all staff.
- 5) Ensure carer's notice boards are provided in all hospital and health centres

## **6) TRAINING FOR CARERS**

Carers as co-providers of care benefit from understanding the nature of the condition of the person for whom they are caring. Training e.g. around moving and handling results in fewer injuries associated with their caring role. Sustaining carers to maintain their caring role, results in fewer NHS and Social Care interventions and fewer incidents of the caring role breaking down.

In Lanarkshire training for carers is provided principally by the Princess Royal Trust Lanarkshire Carers Centre. The Centre is jointly funded by North Lanarkshire Council, South Lanarkshire Council and NHS Lanarkshire through a three year funding agreement.

Training for carers is funded by North Lanarkshire Council and South Lanarkshire Council from ring-fenced carer monies, and is supported in kind by NHS Lanarkshire through support from clinicians.

The Princess Royal Trust Lanarkshire Carers Centre develops its carer training programme through views fed back by carers. NHS Lanarkshire makes the programme widely known to NHS staff through the email system. The training offered includes moving and handling, stress reduction and more clinical issues. NHS Lanarkshire clinicians participate on health aspects.

However training for carers is provided, it is important to ensure that the topics offered continued to be relevant to carers, clinical input is used where appropriate, training is accessible to all carers and that the training is validated.

The action plan will address:

- How NHS Lanarkshire and partners gain reassurance that training for carers is appropriate, accessible, relevant and validated
- How local priorities for developing carer training are ascertained
- Whether existing training includes advice on specific conditions and is regularly reviewed

The “Doing Well by People with Depression” project has had useful liaison with the Carers Centre in facilitating self-help groups for carers and there are other opportunities to link with organisations such as Alzheimer’s Scotland and PAMIS to strengthen training for carers.

### **EXPERT CARERS**

The Scottish Executive has responded to the recommendation concerning “expert carers” in the Care 21 Report: Future Unpaid Care in Scotland. The report advises that early results from the Coalition of Carers in Scotland study of training provision show good practice in some areas, however the overall picture is very patchy. The Scottish Executive will look carefully at the final study and will discuss with stakeholders the development of a national expert carer programme.

NHS Lanarkshire will work with its Local Authority and Carer Organisation partners to develop the “Expert Carer” model to suit local needs. It is expected that this will build on training already provided for carers in Lanarkshire.

## **YOUNG CARERS**

In addition, in North Lanarkshire, the NCH Young Carers Project offers support for young carers. NHS Lanarkshire is exploring the benefits of clinical involvement (by nurses) in the project to assist young carers become more aware of their own health and wellbeing as well as those for whom they care. This work has been highlighted as an area of good practice by NCH and NHSL.

NHS Lanarkshire will work with colleagues from South Lanarkshire Council’s Education and Social Work department and carer organisations to ensure that young carers are not disadvantaged as a result of the caring role, and to raise awareness of their information needs. In South Lanarkshire the Young Carers project managed by SLC is extending its capacity to provide support to young carer both individually and in activity groups.

### **SUMMARY OF RECOMMENDATIONS FROM TRAINING FOR CARERS**

- 1) Continue to provide clinical input to the Princess Royal Trust Lanarkshire Carers Centre training for carers and continue to fund the core cost of the Lanarkshire PRT Carers Centre.
- 2) Explore model of “Expert Carer” with partners to suit local needs.
- 3) Continue to support clinical involvement with young carers in North Lanarkshire to improve support for young carers.

## **7) DELIVERY AND ACCOUNTABILITY**

As described above, carer awareness and carer signposting will be delivered systematically throughout NHS Lanarkshire by using the existing carer information free phone signposting numbers agreed with North and South Lanarkshire Carers Strategy Groups, by continued briefing of key frontline staff and through a growing understanding of carers' needs (and the evidence base underpinning this) and how carers as well as clinical staff can respond.

The Modernisation Director will have overall responsibility for achieving the strategy which will be delivered by NHS Lanarkshire's two Community Health Partnerships and its Acute Division. Locality General Managers in primary care and Discharge Managers in secondary care will ensure systematic delivery of the Carers Information Strategy in their particular areas. This network of managers will be facilitated by the Modernisation Directorate to learn from each other, share good practice and keep up to date with respect to carers' issues. The Carer Support Team (see Recommendation 2 in Section 4) will be a part of the network and will work directly with carers.

Members of the network will be kept in touch with the North & South Lanarkshire Carer Strategy Groups and will also keep their relevant CHP and Acute Division Management Teams informed and aware of carers' issues.

The carer information helplines have been promoted in all community pharmacies and periodically NHSL will seek to repeat this. It was helpful in North Lanarkshire that North Lanarkshire Carers Together information line workers visited community pharmacies.

The Area Pharmaceutical Committee has pointed out that promotion of the carer information lines has been on a goodwill basis. The Committee notes the important role that Community Pharmacies can play in identifying carers and suggests that this could be further addressed through the public health services element of the new Community Pharmaceutical Care Services contract in negotiation between NHSL and the pharmacy contractors committee.

Carer awareness amongst General Medical Practitioners is being strengthened through the Directed Enhanced Service for carers during 2006/7. When a practice elects to adopt this DES it is obliged to compile and maintain a register of the carers on its list, appoint a liaison person for carers within the practice, agree referral protocols to signpost carers to help from Carer Organisations and Social Work, and produce an Annual Report. Guidance has been produced by NHS Lanarkshire to help practices implement the DES in partnership with Local Authorities and Carer Organisations systematically and effectively. The opportunity will be explored to use the liaison contacts in each practice to identify better carers health needs, and the opportunities for carers and clinicians and others to respond more pro-actively.

**SUMMARY OF RECOMMENDATIONS FROM DELIVERY AND ACCOUNTABILITY**

- 1) Set up network of existing managers to ensure systematic delivery of good practice to support carers.
- 2) Continue to promote the Carer Information helplines in community pharmacies and consider implications for the new community pharmaceutical care services contract.
- 3) Use the opportunity presented by the General Medical Services Directed Enhanced Services for carers to promote carer identification and support in general practice and to learn more of the practicalities of meeting carer's information needs from this network of liaison people.

## 8) MONITORING

It is crucial to ensure that the direction of travel and recommendations in this strategy are implemented consistently throughout NHS Lanarkshire with its partners, thus improving the experience of carers and the people they care for.

Better uptake of carers' assessments would enhance information available on the experience of carers: Monitoring reports show currently a low uptake of carers assessments.

Carer outcomes are currently monitored through the Joint Performance Information and Assessment Framework/local improvement targets, NHS Quality Improvement Scotland Indicators and feedback from the Quality Outcomes Framework associated with the General Medical Services Contract.

Appendix 2 lists the indicators which cover carer issues.

NHS Lanarkshire will work with its partners in the North & South Carers Strategy Groups to assess feedback from existing monitoring systems and set an action plan for the following year to assess that: -

- Carers are identified early at first point of contact with the NHS.
- Carers are informed of their potential rights and assessment of their support needs as carers under Section 12 of the Social Work (Scotland) Act 1968 or in the case of young carers under Section 24 of the Children (Scotland) Act 1995.
- Carers are well informed of the process and procedures of hospital admission and discharge and are fully involved in decisions taking at these key stages.
- Carers are provided with targeted information based on the information needs of other local carers.

As mentioned in the introduction, carer sensitive solutions to implementing A Picture of Health work streams will be ensured through overall monitoring of the implementation of the programme of work arising out of the Picture of Health by the Modernisation Director, through the Stakeholder Engagement Group.

### **SUMMARY OF RECOMMENDATIONS FROM MONITORING**

- 1) Work with North and South Lanarkshire Carers Strategy Groups to assess feedback from existing indicators (local improvement targets Quality Improvement Scotland, general medical services, quality outcomes framework) to assess both how this strategy is being delivered, and secondly the relevance of the indicators.

## 9) SUMMARY OF RECOMMENDATIONS

This section brings together the individual recommendations noted at the end of each preceding section. Priorities will be determined and managed through the development of an action plan, and costs will be contained within the overall sum of £200,000, which is earmarked within the Board's Financial Plan.

### 2) **Introduction**

1. All carers who need information and support should receive it.
2. Carers are "Key Partners in Care".
3. Carers should engage with Community Health Partnerships through the Public Patient Local Fora; the benefits of existing processes of engagement will continue to be recognised
4. Young carers should be referred to Young Carers projects, and if suspected as being at risk should be protected in line with child protection procedures.
5. Easily understandable accurate and timely information must be given by health care professionals to carers and should be made freely available to service users and carers whilst observing confidentiality in accordance with published good practice.
6. Greater involvement of carers from minority ethnic groups will be pursued through the Lanarkshire Ethnic Minority Action Group to ensure that information made available from all sources is appropriate.

### 3) **How Carers are Informed and Empowered**

1. Ensure NHS staff are aware of the Carers Freephone Information line.
2. Set up a Carers Support and Training Team to support NHS staff empower carers.
3. Continue provision of Home from Hospital Discharge Pack.
4. Pursue a project or secondment with North Lanarkshire Carers Together as a pilot to explore how best to support carers look after their own health. Consider a similar pilot in South Lanarkshire thereafter

### 4) **Carer Awareness for NHS Staff**

1. Agree priorities and training approach for carer awareness of Local Authority and NHS staff through Joint Human Relations Fora in Lanarkshire.
2. Ensure carer awareness embedded in all appropriate mainstream training..
4. Produce Carer Awareness Leaflet for all staff
5. Install Carers notice boards in all hospitals and health centres

**5) Training for Carers**

1. Continue to provide clinical input to the Princess Royal Trust Lanarkshire Carers Centre training for carers and continue to fund the core cost of the Princess Royal Trust Lanarkshire Carers Centre.
2. Explore model of “Expert Carer” with partners to suit local needs.
3. Continue to support clinical involvement with young carers in North Lanarkshire to improve support for young carers.

**6) Delivery and Accountability**

1. Set up network of managers to ensure systematic delivery of good practice to support carers.
2. Continue to promote the Carer Information Helplines in community pharmacies and consider implications for the new community pharmaceutical care services contract.
3. Use the opportunity presented by the General Medical Services Directed Enhanced Services for carers to promote carer identification and support in general practice and to learn more of the practicalities of meeting carers’ information needs from this network of liaison people.

**7) Monitoring**

1. Work with North and South Lanarkshire Carers Strategy Groups to assess feedback from existing indicators (local improvement targets, QIS and the general medical services quality outcomes framework) to assess both how this strategy is being delivered, and secondly the relevance of the indicators.

## **10) REFERENCES**

North Lanarkshire Strategy for Carers 2005- 2008

Carers Strategy for South Lanarkshire Strategy for Carers (Draft) 2006 – 2009

A Picture of Health 2006

Key Partners in Care (signed by South Lanarkshire Carers Network, NHS Lanarkshire and South Lanarkshire Council 2003)

HDL (2006) 22 NHS Care Information Strategies Minimum Requirements and Guidance on Implementation

Scottish Executive Circular CCD2/2003: The Community Care & Health (Scotland) Act 2002: Carers – Guidance on Sections 8 – 12

Kerr 21 Report: The Future of Unpaid Care in Scotland, Delivering for Health & Changing Lives. (November 2005)

Building a Health Service Fit for the Future by Professor Kerr

Delivering for Health. The Scottish Executive's Response to Professor Kerr. (November 2005)

Scottish Executive's Strategy for Carers in Scotland published November 1999

Community Care in Health (Scotland) Act 2002

Partnership for Care Scottish Executive February 2003

Getting it Right for Every Child

Race Relations Act 1976, Race Relations (Amendment) Act 2000

Fair For All (Scottish Executive 2002)

Adults with Incapacity (Scotland) Act

Mental Health (Care & Treatment) (Scotland) 2003

General Medical Services Contract Quality & Outcomes Framework

Direct Enhanced Services Directions 2006

A Good Practice Guide on Consent for Health Professionals in NHS Scotland – HDL(2006) (34)

Confidentiality in Mental Health – A Guide to Good Practice in Information Sharing produced by the Director of Family Care Services, Suffolk Carers and Others

Finding the Balance (Carers Scotland)

**Equality & Diversity Impact Assessment**

*Equality & Diversity*

*Impact Assessment*

**R** - *Rapid*

**I** - *Impact*

**C** - *Checklist*

Equality & Diversity Impact Assessment

**Rapid Impact Checklist**

<b>Health Improvement Section?</b>	
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**Which groups of the population do you think will be affected by this proposal?**

*What positive and negative impacts do you think there may be?*

*Which groups will be affected by these impacts?*

		<b><u>Supporting Evidence</u></b>
<ul style="list-style-type: none"> <li>•</li> </ul>		
<ul style="list-style-type: none"> <li>• minority ethnic people</li> </ul>	<p>This strategy seeks to ensure that the importance of Carers as “Key Partners in Care” is incorporated within all of the activities, strategies and policies within NHS Lanarkshire can demonstrate how implementing this strategy has empowered carers in their caring role.</p>	<p>Carers will be signposted by NHS Lanarkshire staff to a carers’ information telephone line. This will be manned by staff from the Princess Royal Trust’s Lanarkshire Carer Centre. NHS Lanarkshire has funded the PRT LCC to work with MECOP (from Edinburgh) to ensure that PRT is culturally competent.</p> <p>Also NHS Lanarkshire has now contracted with the Local Citizen’s Advice Bureau to help all citizens of Lanarkshire make a complaint if they wish.</p>
<ul style="list-style-type: none"> <li>o gypsy/travelers</li> </ul>	As above.	
<ul style="list-style-type: none"> <li>o refugees</li> </ul>	As above.	
<ul style="list-style-type: none"> <li>o asylum seekers</li> </ul>	As above.	
<ul style="list-style-type: none"> <li>• women and men</li> </ul>	As above/	
<ul style="list-style-type: none"> <li>• people in religious/faith groups</li> </ul>	As above	
<ul style="list-style-type: none"> <li>• disabled people</li> </ul>	As above	
<ul style="list-style-type: none"> <li>• older people, children and young people</li> </ul>	As above.	<p>NHS Lanarkshire is working particularly closely with the National Children’s Home Young Carers project in North Lanarkshire to support young carers. Lessons from this will be available to South Lanarkshire Council colleagues (who run an equivalent service).</p>
<ul style="list-style-type: none"> <li>• lesbian, gay, bisexual and transgender people</li> </ul>	As above	

• people of low income	As above.	
• people with mental health problems	As above.	NHS Lanarkshire funds Lanarkshire Links so that patients with a mental illness and their carers can be appropriately involved and represented.
• homeless people	As above.	
• people involved in criminal justice system	As above.	
• staff	As above.	
• any other groups	As above.	

**What impact will the proposal have on lifestyles?**

• Diet and nutrition?	This strategy will impact on the lifestyles of carers and the cared for throughout Lanarkshire.	Guidance is available in the Home from Hospital pack and the carer information line.
• Exercise and physical activity?	As above.	
• Substance use: tobacco, alcohol or drugs?	As above.	
• Risk taking behavior?	As above.	
• Education and learning, or skills?	As above.	

**Will the proposal have any impact on the social environment?**

• Social status	As above.	
• Employment (paid or unpaid)	As above.	
• Social/family support	As above.	
• Stress	As above.	
• Income	As above.	

**Will the proposal have any impact on:**

• Discrimination?	An aim of the strategy is that carers should be supported wherever and whoever they are and whoever they are caring for.	The Home from Hospital pack is available in different languages and Braille.
• Equality of opportunity?	As above.	
• Relations between groups?	As above.	

**Will the proposal have an impact on the physical environment?**

• Living conditions?	This strategy should empower carers to enjoy a better quality of life as well as the cared for.	This strategy may empower carers with knowledge to enjoy a better quality of life as well as the cared for, by decreasing stress.
• Working conditions	As above.	Indirectly.
• Pollution or climate change?	Indirectly.	
• Accidental injuries or public safety?	Yes. The risk to carers in delivering their caring role should be reduced.	
• Transmission of infectious disease?	As above.	

**Will the proposal affect access to and experience of services?**

• Health care		
• Transport		
• Social services		
• Housing services		
• Education		

## SUMMARY

<b>1. Positive impacts (note groups affected)</b>  It is the aim that this strategy empowers all carers in Lanarkshire both as individuals delivering their caring role, and as a group of knowledgeable people to influence the shape of NHS Services	<b>2. Negative impacts (note groups affected)</b>  In order to involve carers, carers need to temporarily give up their caring role; substitute care will be reimbursed.
<b>3. Additional information and evidence required</b>  The delivery of the strategy will be monitored through Governance Reports presented to the North and South Lanarkshire Carers Strategy Groups.	
<b>4. Recommendations</b>  It is recommended that the Board's Equality & Diversity & Spirituality Committee is formally consulted on the NHS Lanarkshire's Carers Information Strategy and that soundings are also taken through the Lanarkshire Ethnic Action Group in partnership with other agencies and carer organisations.	
<b>5. From the outcome of the RIC, have negative and positive impacts been identified for race or other equality groups? Has a full EQIA process been recommended? If not why not?</b>  The application of this strategy in the context of other relevant strategies should have a positive impact for race and other equality groups.	

## **INDICATORS**

Indicators concerning carers are noted below from:

- NHS Quality Improvement Scotland.
- South Lanarkshire Local Improvement Targets.
- North Lanarkshire Local Improvement Targets.
- General Medical Services Contract: Quality & Outcomes Framework.

### **NHS QUALITY IMPROVEMENT SCOTLAND**

NHS Quality Improvement Scotland “Clinical Governance and Risk Management Self Assessment” as part of the core evidence has a number of relevant criteria:

1. Information on Services provided by the NHS Boards is available to patient’s carers and public.
2. Care and services are provided that reflect the needs of those using them and there is a system in place to ensure accessibility that gives consideration to such factors as an individual needs, waiting times, response times, geographical location and availability.

2.a.5 How do you identify and assess the needs and requirements of carers in relation to the care and services you provide.

ARTD 15

ARTD 16

How do you consult with carers, advocates, patients and the public in the development of your carer’s policies, strategies and action plans?

ARTD 18

How do you incorporate the views and requirements of carers when planning services?

ARTD 19

How do you ensure staff are fully aware of and trained to respond to the needs and requirements of carers and advocates?

2.a.6 Patients and with their consent carers are provided with a range of information about the condition, treatment, options, outcomes, risks, side effects and rights on an on going basis.

**SOUTH LANARKSHIRE JOINT PERFORMANCE INFORMATION & ASSESSMENT FRAMEWORK:  
LOCAL IMPROVEMENT TARGETS**

1. National Outcomes	2. Local Improvement Targets	3. The Baseline	4. The definition of how your targets are being measured	5. The Improvement Achieved
	Reduce to zero the number of patients whose discharge has been delayed for 1 year or more from the date they were assessed ready for discharge	<b>NHS Lanarkshire</b> <b>Baseline</b> April 2005 = <b>2</b> <b>Target</b> April 2006 = <b>0</b> Figure at Sept 2005 = <b>1</b>  <b>NHS Greater Glasgow</b> <b>Baseline</b> April 2005 = <b>0</b> <b>Target</b> April 2006 = <b>0</b> Figure at July 2005 = <b>0</b>		
Better involvement and support of carers	<b>Respite/Short Breaks</b> – Increase by 2.5% the number of residential respite care nights provided to people aged 65+	<b>Baseline</b> 2004/2005 = <b>8288</b> <b>Target</b> 2005/06 = <b>8495</b> <b>Mid-Term</b> figure = <b>5002</b> <b>Final</b> figure = <b>9626</b>	Total number of respite nights provided to people aged 65+ in Residential places in Care Home provision over a 12 month period	Final figure is 13% above the target set. Figures are now all reported from D11, the service delivery module on SWiSplus
	Increase by 5% per annum the numbers of carers receiving an assessment	<b>Baseline</b> Jan-Mar 2005 = <b>17</b> <b>Target</b> 2005/06 = <b>72</b> <b>Mid-Term</b> figure = <b>19</b> <b>Final</b> position = <b>36</b>	Total number of carers' assessments completed during a 12 month period	The current recorded take-up of carers' assessments is disappointingly low. Other factors should be taken into consideration such as the reluctance of carers to take up the assessment as they see it as an assessment of their ability to care. We have been working closely with South Lanarkshire

				<p>Carers Network to identify and address reasons for the limited uptake. This has included further training/information for staff. Also some carers may opt to be assessed jointly with the cared-for person.</p> <p>The reporting system has been altered to enable staff to record reasons why assessments have been refused</p>
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**South Lanarkshire Joint Future Partnership – Local Improvement Targets (April 2006 – March 2007)**

National Outcome	Local Improvement Target	Definition/Baseline/Performance Measure	Process
<p><b>Better involvement and support of carers</b></p>	<p><b>Respite/Short Breaks-</b></p> <ul style="list-style-type: none"> <li>• <b>Increase by 2.5% the number of residential respite care nights provided to people aged 65+</b></li> </ul> <p><b>Carers Assessment</b></p> <ul style="list-style-type: none"> <li>• <b>Increase by 50 % per annum the numbers of carers receiving an assessment</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Total number of respite nights provided to people aged 65+ in Residential places in Care Home provision over a 12 month period</b></li> </ul> <p><b>Baseline 2005/2006 = 9626</b> <b>Target 2006/2007 = 9819</b></p> <ul style="list-style-type: none"> <li>• <b>Total number of carers assessments completed during a 12 month period</b></li> </ul> <p><b>Baseline 2005/2006 = 36</b> <b>Target 2006/2007 = 54</b></p>	<p><b>Collection: Annual audit by Social Work of care home respite provision</b> <b>Reporting: Annually to Joint Future Management Group, Joint Future Older Peoples Group and Scottish Executive</b></p> <p><b>Collection:SWiSplus</b></p> <p><b>Reporting: Quarterly to Joint Future Management Group and to all Community Care Joint Future Implementation Groups</b></p>

**NORTH LANARKSHIRE JOINT PERFORMANCE INFORMATION & ASSESSMENT FRAMEWORK:  
LOCAL IMPROVEMENT TARGETS**

1. National Outcome.	2. Local Improvement Targets.	3. The baseline.	4. The definition of how your targets are being measured.
4) <u>Better involvement and support of carers.</u>	4.1 To identify hidden carers via telephone information line; approximately 12 new carers per month are expected to be identified by this route	<b>12 per month</b>	Statistics collected by Princess Royal Trust Lanarkshire Carers Centre
	4.2 Carers receiving training; target around impact of training to be finalised		Source: Princess Royal Trust Lanarkshire Carers Centre
	4. Increase number of carers' assessments; target figure to be agreed	<b>Note: Agreement on target increase will be reached when recording system has been fully developed and baseline has been established. We are awaiting completion of work to develop and programme the carer's assessment. This was originally expected to be in place by the end of 2005 and is now expected by end June 2006.</b>	

	4.4 A target needs to be established for respite.	<b>Note: there is difficulty in accurately reflecting respite due to different interpretations of what constitutes respite for carers and how this is recorded. We need to clarify this and be in a position to develop meaningful figures and agree targets by the end of year 2006-7.</b>	
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**GENERAL MEDICAL SERVICES CONTRACT: QUALITY OUTCOMES FRAMEWORK**

Annual report from practices participating in the Directed Enhanced Service for Carers.

## Delivery & Accountability Network

### CHP South

Hamilton.	Geoff Sage	General Manager.
East Kilbride	Craig Cunningham	General Manager
Clydesdale	Marilyn Aitken	General Manager
Rutherglen/Cambuslang	Robert Peat	General Manager

### CHP North

Coatbridge (With support from Paul Campbell, Public Health Practitioner)	Jim Wright	General Manager
Motherwell (With help from Marian McParland, Public Health Practitioner)	Eleanor Wilson	General Manager
Bellshill (Mental Health)	Tom Bryce	General Manager
Airdrie (With help from Anne Docherty, Public Health Practitioner)	Owen Watters	General Manager
Wishaw (With help from Karen McVittie)	Richard Burgon	General Manager
Cumbernauld	Stephen Kerr	General Manager

### Acute Division

Wishaw	Karen Malone	Integrated Service Manager, Early Supported Discharge.
Monklands	Joan James (Gina Muir)	Associate Director of Nursing
Hairmyres	Georgie Madden	Health Discharge Manager

The Local Managers will ensure that there is an understanding of carers' issues, and an awareness of the carers' information strategy throughout all premises and settings.