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PSNC Briefing 001/15: Support for carers – how community pharmacy teams can help

This PSNC Briefing describes the important role that carers play in supporting patients and the NHS and explains how community pharmacy teams can help carers in their work.

Who is a carer?

A carer is a person who provides unpaid care for a family member, partner or friend who cannot cope without their support due to an illness, frailty, disability, a mental health problem or an addiction.

The term ‘carer’ is sometimes confused with a care worker or care assistant; however, the difference is that a carer is unpaid whereas a care worker or care assistant is paid for looking after someone.

The sort of roles and responsibilities that carers provide can vary greatly. It can range from help with everyday tasks such as helping someone get dressed and personal care such as bathing, to emotional support such as helping someone cope with the symptoms of a mental illness or an addiction.

It can be difficult for carers to distinguish their role as a carer as separate from the relationship they have with the person for whom they care, whether that relationship is as a parent, partner, a son or daughter, or as a friend.

Many carers juggle their unpaid caring responsibilities with paid work, education and other family commitments. Some, in particular younger carers, do not make it known that they are carers. They don't tell their family, friends or healthcare professionals about their responsibilities because of reasons such as fear of separation, guilt or pride.

It takes an average of two years for a carer to acknowledge their role as a carer; this means many carers are missing out on local and national support that aims to help and assist them and even then, after they have acknowledged their role, they may not be receiving the recognition and support they need and deserve.

Key facts about carers across the UK



NHS England's Commitment to Carers

In April 2014, [NHS England's commitment to carers](#) was published. This document was published in response to the Department of Health's (DH's) mandate to NHS England, the NHS Outcomes Framework and NHS England's Business Plan and Planning Guidance. All of these documents acknowledged the number of responsibilities that NHS England has towards carers. One notable objective that was stated in the mandate and business plan was:

'to ensure that the NHS becomes dramatically better at involving patients and their carers, and empowering them to manage and make decisions about their own care and treatment'.

NHS England therefore worked with carers' organisations, carers themselves and other key partners to address this issue, which resulted in the development of 37 commitments of action for NHS England to take forward and timescales as to when these should be completed by. The commitments are based on eight priorities:

1. • **Raising the profile of carers** among staff, stakeholders and partners, making them aware of what carers do and how they can be of help.
2. • Improving **education, training and information** for staff, stakeholders and partners, increasing awareness of what it means to be a carer.
3. • **Service development**, with NHS England investigating how carers are involved and where initiatives may be developed to make their role easier.
4. • Providing **person-centred, well-coordinated care** – this includes providing better information, involving carers and patients and giving them more control.
5. • Considering how carers may be helped through **primary care**, working with partners to identify, measure and share best practice.
6. • Evaluating **commissioning support**, assessing the impact of services and policies on the role of carers.
7. • Helping to build, sustain and develop **partnership links** between health, social services, charities and other key partners that will support carers.
8. • **NHS England as an employer** will continue to offer policies on flexible working, leave and employment to support the carers among their staff.

A number of the commitments are ongoing, for example, 'NHS England to raise the profile of what a carer does and how they can be supported with health care staff'. Some deadlines for commitments have already passed and others are due to be met in the first half of 2015. NHS England has also said they will continue to listen to carers and other partners to develop and strengthen how commitments are delivered and to review progress against the delivery of the commitments through feedback from carers and carers' organisations and progress towards the relevant outcomes indicators and mandate objectives.

DH's Carer's Strategy

The DH's [Carers Strategy: Second national action plan 2014-16](#) was published in October 2014 and builds on the previous Government's national Carers Strategy of 2008 and the Coalition Government's update of 2010.

This document provides a brief overview of evidence gathered and the main achievements in recognising and

supporting carers during the last few years. Examples include:

- funding new projects such as the Carers Trust working with pharmacy organisations to identify carers in pharmacy settings – this is discussed in more detail on page 4 of this briefing;
- working with Public Health England and NHS Employers to identify more carers through the 2014-2015 influenza vaccination campaign;
- the [Carers Week Quest](#) during Carers Week (9 -15 June 2014), which has encouraged improved joined-up working in local communities to reach out to the many carers in the UK who are not receiving support;
- the Royal College of GPs (RCGP) creating a [Caring for Carers hub](#), which has information about identification and support for carers for all staff working within primary healthcare, particularly focusing on GPs, clinical commissioning groups (CCG) and Health and Wellbeing Boards. Each CCG can sign up to have their own hub free of charge, which allows nationally relevant content, like national helplines or disease-specific resources, to sit alongside locally relevant content such as local carers support services or groups. This gives the user easy access to everything they need to know, signpost to or print about carers both nationally and locally.

The document also identifies four priority areas for the DH over the next two years:

Priority area	Key issues
1. Identification and recognition <i>“Supporting those with caring responsibilities to identify themselves as carers at an early stage, recognising the value of their contribution and involving them from the outset in designing local care provision and in planning individual care packages”</i>	<ul style="list-style-type: none"> • Supporting people with caring responsibilities to identify themselves as carers so they can access the information, advice and support that is available • Carers feeling their knowledge and experience are valued by health and social care professionals • Involving carers in planning individual care packages and in developing local strategies
2. Realising and releasing potential <i>“Enabling those with caring responsibilities to fulfil their education and employment potential”</i>	<ul style="list-style-type: none"> • Support for young carers and young adult carers • Support for carers of working age
3. A life alongside caring <i>“Personalised support both for carers and those they support, enabling them to have a family and community life”</i>	<ul style="list-style-type: none"> • Personalising support for carers and the people they support • Availability of good quality information, advice and support
4. Supporting carers to stay healthy <i>“Supporting carers to remain mentally and physically well”</i>	<ul style="list-style-type: none"> • Impact of caring on health and well-being • Prevention and early intervention for carers within local communities • Supporting carers to look after their own health and well-being

NHS England’s Commissioning for Carers

The [Commissioning for Carers: Principles and resources to support effective commissioning for adult and young carers](#), was published in December 2014 by NHS England. It is a practical tool and forms part of a suite of products that will help commissioners to deliver what carers say is important to them in ways that have been shown to work effectively and efficiently in practice. The ten principles are based on the latest research, case-studies and best-practice and are the vital and common ingredients to deliver better outcomes for carers, patients, commissioners,

practitioners and local communities. They are:



The Commissioning for Carers Principles form part of NHS England’s Commitments to Carers and the [RCGP Supporting Carers in General Practice Programme](#), to help in identifying, supporting and recognising the vital roles that carers play to support them to provide better care and to stay well themselves.

Carer support organisations

There are two main charities that support carers, [Carers Trust](#) and [Carers UK](#). Both organisations provide expert advice, information and support; connect carers with groups and volunteers; campaign on behalf of carers and work with local authorities and organisations to improve services throughout the UK. Both organisations also have a section on their website for professionals where information and resources can be viewed.

The [NHS Choices](#) website also has lots of information on caring for carers, which may be another useful resource to signpost carers to.

Young carers

In the UK, there are over 290,000 carers who are aged 16-24 and 13,000 of these young carers provide care for over 50 hours a week.

As part of the care they provide, a child who is a young carer may visit their local pharmacy to collect medicines for the person for whom they care. On each occasion, the pharmacist would need to make a decision on whether it is appropriate to make a supply. There is no legal age that a child must be in order for them to collect medicines from a pharmacy; however, each case should be dealt with on an individual basis. The Royal Pharmaceutical Society (RPS) has issued guidance on this topic, [Children collecting medicines from a pharmacy](#), which provides a list of some of the factors to consider when deciding whether it is appropriate to make a supply.

The Carers Trust has lots of information on their website aimed at young carers and last month they launched [Babble](#) – a new online community for carers aged under 18. Babble allows young carers to chat, share their experiences and access information and advice. For other young carers aged 16-15 there is [Matter](#) an online space also created by the Carers Trust, which allows young carers to connect, share stories and exchange trusted support.

How can pharmacy get involved?

Community pharmacy teams have always provided support for carers via the wide range of services they provide. This support, such as practical assistance to order and collect prescriptions from GP practices, delivery of medicines to people's homes and helping people to manage their medicines use, via multi-compartment compliance aids, as well as signposting to support organisations, has often been provided, without consideration of whether a person is a carer; these are simply services that are offered to those with a need for support. However, these are services that can have a massive impact in assisting carers, therefore, the need to identify carers and tell them about the services available in the pharmacy and signpost them to support organisations is extremely important.

NHS England's Commitment to Carers stated that 70% of carers come into contact with health professionals yet health professionals only identify one in ten carers and that 66% of carers feel that healthcare staff do not help to signpost them to relevant information or support. When information is given, it comes from charities and support groups. This shows there is a big opportunity for pharmacy teams to contribute to identifying carers and signposting them to the information and support they need.

The Carer-Friendly pharmacy pilot – 3rd November 2014 to 28th February 2015

The [Carer-Friendly pharmacy pilot](#), led by Carers Trust and PSNC, is part of a programme of work funded by the DH and forms part of the 'Supporting Carers in General Practice Programme' involving Carers Trust, the RCGP and Carers UK. The aim of the project is to increase the identification and support of unpaid carers within primary care and community settings so that carers receive support before they reach crisis point.

Carers Trust and PSNC identified the following nine Local Pharmaceutical Committees (LPCs) who are working in partnership with local carers services/centres and other stakeholders on this project:-

1. Bury and Rochdale LPC
2. Community Pharmacy West Yorkshire
3. Devon LPC
4. Kent LPC
5. Gateshead and South Tyneside LPC
6. Northamptonshire and Milton Keynes LPC
7. East Sussex LPC
8. Lancashire LPC
9. Community Pharmacy Humber

A total of 44 pharmacies are involved across the different LPC areas.

The project tests the concept of a 'Carer-Friendly Pharmacy', which pharmacies participating in the project will seek to become. A Carer Friendly Pharmacy is one where:

1. all staff are trained to be carer aware, sensitive to carers' needs and the challenges they face and have developed enhanced communication skills to enable them to engage effectively with carers;
2. all staff are pro-active in identifying, referring and supporting carers;
3. the pharmacy identifies a member of the team who takes on the role of Carers Champion along with a deputy – their role is to lead and facilitate carer referrals, act as a contact point for external agencies such as the local carers centre and GP practices to support a multi-disciplinary approach and to maintain stocks of resources;
4. posters and/or related materials make it clear to the customer that the pharmacy is carer-friendly and encourage them to self-identify; NB. It is acknowledged that displaying materials will be easier in larger pharmacies and Healthy Living Pharmacies where there is a dedicated notice board to display such information;
5. the pharmacy offers a range of services, such as Medicines Use Reviews (MURs) and prescription collection and delivery, in a manner that is relevant to the carer; and

6. with the carer’s consent, the pharmacy will refer the carer to their local carers services and/or their GP. In the pilot the PharmOutcomes system is being used to make these referrals and capture information on the referrals to allow evaluation of the service.

The core model may, in some localities, be augmented by add-ons such as pharmacy delivery driver engagement with carers, pharmacy-based carers’ health checks and free flu vaccinations for carers where the pharmacy has been commissioned to do so.

There are many benefits to carers if pharmacy teams can identify them and if they are referred to the local carers service or their GP. These are summarised in the table below:

	Benefits to carers
Identified to pharmacy team	If the pharmacy team knows someone is a carer, they can offer them a range of services such as prescription collection, home delivery and repeat dispensing, depending on the carer’s individual needs. They could also offer a Medicines Use Review to the person they care for while the carer is present, disposal of unwanted or out-of-date medicines, and advice on minor ailments and injuries.
Referred to local carers service	Local care services can: <ul style="list-style-type: none"> • provide carers with information and advice on a wide range of topics including benefits, breaks, respite and support services, carers assessment and aids and adaptations; and • offer the carer emotional support and the opportunity to talk through their concerns, both individually and in group sessions, with staff, trained volunteers and carers who understand their situation.
Referred to their GP	<ul style="list-style-type: none"> • GPs can: <ul style="list-style-type: none"> - ‘tag’ their medical records so that everyone in the practice team will know that they are a carer. Some practices may then offer the carer more flexible appointments (or home visits if the carer struggles to attend appointments); - along with other healthcare workers at the practice will also be able to take into account the particular stresses and strains that being a carer might have on the person’s health. - offer them a yearly flu jab if they are the main carer of someone whose health would be at risk if the carer was too ill to look after them. Some GP practices also offer carers regular health checks. • If the carer becomes seriously unwell and is no longer able to provide care, it’s important that the practice is aware that the person is a carer so that alternative support can be put back in place for the person they look after as well. • Carers should also be included in putting together a care plan for the person they look after, so knowing who the carer is can be helpful in this respect as well.

A video produced by the team at Regent Pharmacy, who are taking part in the pilot, explains the work they are doing to help and support carers. The video is available on [YouTube](#).

A training package for pharmacy staff involved in this project was developed in partnership between Carers Trust and the Centre for Postgraduate Pharmacy Education (CPPE). This was delivered by the local carers service and focused on awareness of the issues facing carers, as well as strategies for identifying and talking to them.

The Centre for International Research on Care, Labour and Equalities (CIRCLE) at the University of Leeds has been commissioned to carry out an evaluation of the service. The evaluation will take place throughout the month of March 2015 and a report will be produced in May 2015.

Devon Carers – Carers Health and Wellbeing Checks

Pharmacy teams are involved in another service in Devon, the Carer Health and Wellbeing Check service. This service is offered in a number of participating pharmacies and GP surgeries and is particularly aimed at adult carers between the ages of 40-74 and carers at risk of admission to hospital (or if they are caring for someone at risk of admission to hospital).

The Carer Health and Wellbeing Check service, which offers carers an hour of protected time, provides a free and confidential check-up covering elements of the NHS Health Check, where appropriate, and a wider review of the carer’s health, wellbeing and home environment. It also offers the carer the opportunity to raise any worries or concerns they may have about their health.

If a carer is unable to visit the pharmacy or GP as they cannot leave the person they care for, it may be possible to arrange for the Health and Wellbeing Check to be carried out in the patient’s home. Alternatively, there is money available to pay for someone to look after the person being cared for while the carer has their check.

A plan is developed with the carer and this will incorporate referral to other services where required. A follow up review is then offered to the carer six months later.

The service ran as a pilot during 2010-11 before being commissioned by NHS Devon in 2011. The evaluation of the pilot scheme can be viewed on the [Devon County Council](#) website.

Other community pharmacy support for carers

There is a wide range of existing community pharmacy services that carers could be made aware of in order to support them in their work. There are also services such as MUR which may be of benefit to carers, but which would need to be modified to suit their specific needs.

The table below details a range of options that community pharmacies can or could provide to support carers and the people they care for. These could be developed into a variety of support tools both for carers and community pharmacy teams.

Options
<ul style="list-style-type: none"> Ordering and collecting repeat prescriptions / Repeat Dispensing service
<ul style="list-style-type: none"> Prescription delivery services
<ul style="list-style-type: none"> Giving medicines to patients <ul style="list-style-type: none"> Label instructions When to give How to give What to do if a patient has difficulty taking medicines Dealing with devices – inhalers, eye drops etc.
<ul style="list-style-type: none"> MUR – Currently MURs cannot be delivered to carers, unless the patient is also present. A version of an MUR could be developed to support carers.
<ul style="list-style-type: none"> New Medicine Service (NMS) – Currently NMS cannot be delivered to carers, unless the patient is also present. A version of NMS could be developed to support carers.
<ul style="list-style-type: none"> How to store medicines safely
<ul style="list-style-type: none"> Using OTC medicines safely
<ul style="list-style-type: none"> Out of date medicines and disposing of medicines safely
<ul style="list-style-type: none"> Flu vaccinations

Training for pharmacy teams

CPPE has carer-awareness learning resources on their [Learning Pharmacy](#) website, a free online learning environment which provides learning activities for the whole community pharmacy team. It has fun and interactive bite-sized learning challenges that can be accessed by everyone without the need to log in.

CPPE also has a number of other training programmes, on certain conditions and diseases, for example, dementia which may allow pharmacists and their teams to gain better background knowledge and give a higher level of support to carers. A list of programmes and assessments can be viewed on the [CPPE](#) website. Please note you will need to be registered with CPPE to access these.

The Carers UK website offers a '[Carer Awareness: supporting frontline practice](#)' e-learning course, which covers topics such as how to identify carers; defining what it is to be a carer; and the impact of caring and how to identify when carers need more support.

Both the Carers Trust and Carers UK websites also contain a wealth of useful information for pharmacy teams to learn more about the role of a carer and the support available to them.

If you have any queries on this PSNC Briefing or you require more information, please contact [Rosie Taylor, Pharmacy and NHS Policy Officer](#).