

*WE ARE BETTER*

**TOGETHER**

The Oxfordshire Mental Health Partnership  
**Supporting recovery, hope and ambition**

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FAMILY, FRIENDS  
& CARERS REPORT



# Beyond the Rhetoric

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**I cannot praise staff enough for the support they gave my son in difficult circumstances."**

OMHP Survey Monkey (Oct 2017)

We believe family, friends and carers play an invaluable role in helping people recover from severe mental illness and they should be acknowledged, listened to, included, valued and supported. We know that supporting a loved one can feel lonely and create some degree of worry and anxiety. We are here to support you too and we know this will provide better results for those people who use our services. One of the Partnership's objectives over the forthcoming year is to continue to improve our work with family, friends and carers. This work not only spans the Partnership but all of Oxford Health's services and links to the new 3-year strategy 'I Care, You Care'. By continuing to using the Triangle of Care to inform and develop our work, we know we can achieve better outcomes.

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**Carers, family and friends are unsung heroes who tirelessly go about providing valuable care and support for our patients and service users, and we want to make sure we are doing all we can for them."**

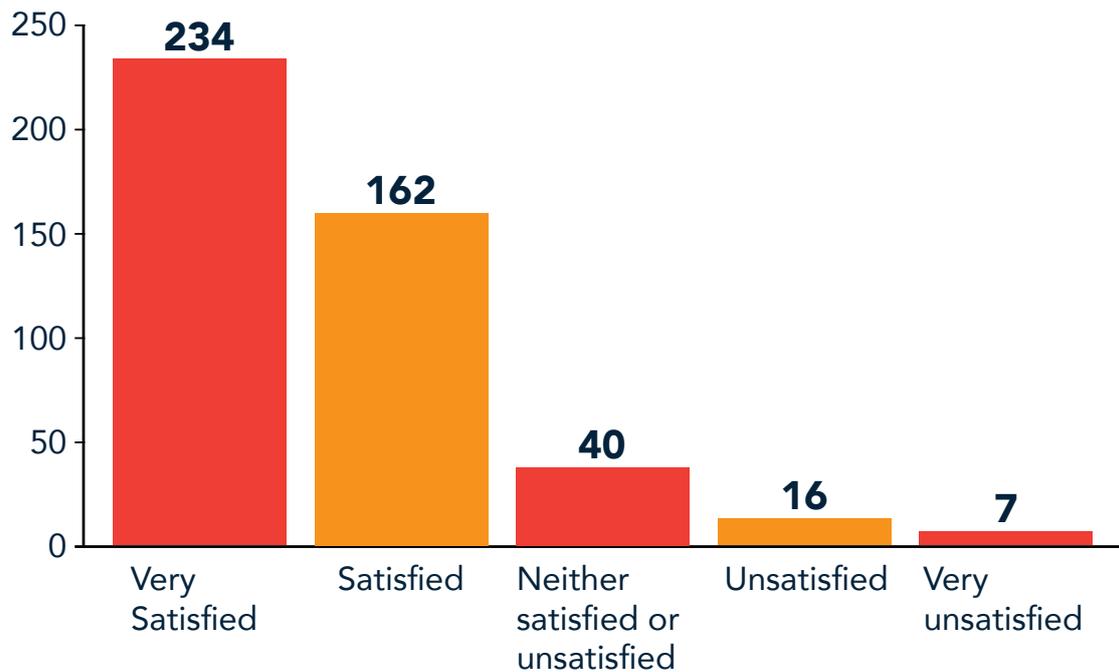
Dominic Hardisty, Chief Operating Officer, OHFT  
(June 2017)



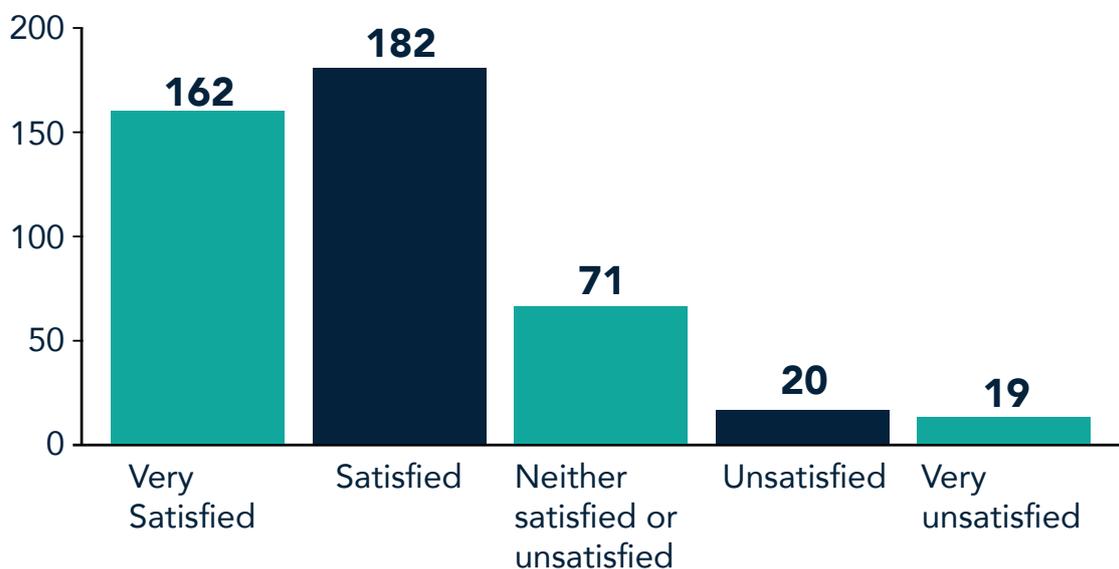
Carers Reference Group Nov 2017

## OMHP: the work achieved so far (Year 2)

**How satisfied are you with the level of support that has been offered to your friend/family member?**



**How satisfied are you with the level of support that has been offered as a carer?**



## Carer Network – A testimonial

I have been a carer for my son for over 20 years and things have been difficult at times. It is hard not knowing where to go to look for help and sometimes I felt no one knows what you go through. I never wanted to talk to others about my son, how can people understand and I thought that he was ill because of something I may have done. I didn't think of myself as a carer – I wasn't there looking after my son on a daily basis as he was in a shared house where a support worker helped him

I heard about the carer's network several years ago and went once, but didn't think it was for me. Everyone seemed to know each other and their family history – I am not someone who likes to share too much. One of the staff working with my son contacted me and asked, along with lots of other things, if I would like to attend. He said it was a network that could be a real support to me as I had been going through some difficult times with my son. I thought I would try again, as it had been so long.

I was very surprised when I went, there were so many different people of all ages, who had relatives they were looking out for. People seemed so friendly and it took a while for it to sink in that everyone has struggled at some point just like I had. I have been able to talk to people who have at times also not known who to turn to, and it's so nice to hear that it's not just me!

I look forward to going if I can now – not each time, but I get the minutes and feel included if I can't.



**My family have been involved with 5 hospitals over the last 25 years. This one, is by far the best. You would be doing a great service to all mental health patients if your example could be rolled out to cover the whole country. Thank you all."**

—OMHP Survey Monkey (June 2017)

## Being a family again

Miss A struggled with family dynamics and she was separated from her twin after they both became unwell. She would not engage with staff or family and the father would leave the food outside the bedroom door. The situation became extremely fraught and both sisters went into hospital.

When I met Miss A for the first time she hardly spoke and would walk around with her arms crossed not touching anything, I met with her parents and they gave me lots of background information so that supporting Miss A was made possible.

Miss A was housed with Oxfordshire Mind for 2 years and in this time, she learnt how to trust staff and her parents. By working together, she met her sister after not seeing her for over a year.

She has now returned home to live with her parents after a long spell in hospital. Miss A seemed to be ok with this, as we had several meetings about the discharge and what this would mean for her. It was agreed she would go back to the family home as well and this was done as a phased return with the support from her family. I met with the parents several times during the transition and will also continue to support them until we are sure that she is managing.

On our last meeting, I was told by her father that this would not have been possible without our services and my support. They said that Miss A had done so much more than they would have dreamt, and the coping strategies that Miss A has gained has given her so much more with regards to her anxiety and living skills. Her father said they could not wait to be a family again.

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**Very grateful for the prompt responses to emails and phone calls. We live two hours away by car from our daughter and although we go regularly every two weeks to see her, it is so comforting to know there is someone on hand who is caring and professional and who will help promptly in emergencies."**

—OMHP Survey Monkey (Oct 2017)

## Working Together

During the time that Miss B has been living in supported housing I have worked closely with her parents; it has been essential as they are such a strong source of support for Miss B. Miss B has given consent for me to discuss the support we provide with both her mum and dad and mum has been present at meetings with other agencies too such as SEQOL (Autism Assessment) and the AMHT.

There was a situation where Miss B's parents suggest she take more voluntary work on and she felt is too much at the time. As I have a good rapport with her parents and I feel confident to talk to them, I could support Miss B to explain to them about how she feels.

We hold regular meeting with friends, family, carers but for Miss B and her family, this has not been possible as they both work Monday-Friday 9-5. We have a more informal arrangement whereby her parents call/email me if there is something they want to discuss; I usually speak to them once a fortnight. If they are going on holiday they inform me as Miss B may require a little more support. I also let them know if I am going to be on leave and they have details of the other members of the team who will be providing support in my absence.



**A remarkable, professional and caring service delivered by incredible people. The level of support given and prompt treatment has led a very successful outcome."**

—OMHP Survey Monkey (Sept 2017)

## **What family, friends and carers have asked for:**

- **FREQUENT CONTACT**
- **BE SENSITIVE TO MY SON'S PACE OF LIFE**
- **CONSISTENT CARE WORKER**
- **MORE INFORMATION**
- **ADVICE AND GUIDANCE TO HELP FAMILIES**
- **TO RECEIVE MINUTES FROM MEETINGS**
- **EXPLAIN STAFF ROLES**
- **CLARITY ON THE SYSTEM**
- **MADE TO FEEL WELCOME**
- **OFFERED A CARERS ASSESSMENT**
- **FAQ WEBSITE**
- **CARERS PACK**
- **PAPER COPIES OF INFORMATION**
- **MORE PEER SUPPORT**
- **COMMUNICATION BETWEEN TEAMS**
- **STAFF MEMBER SPECIFIC FOR CARERS**



**This has been a difficult time for us as a family and our son's mental health has been very distressing for him and us. The ward staff have all been excellent, very friendly and approachable. The ward round was initially intimidating with so many people but the matron quickly put us at ease and explained everybody's role and how they are all helping our son. The Doctor was so gentle and kind, I immediately felt our son was getting good care and felt hopeful for his recovery."**

—OMHP Survey Monkey (Oct 2017)

## Challenges

Carers of service users in the OMHP are generally satisfied with their family members support. The greater challenge for the partnership is how we support family, friends and carers. Carers of people with mental health problems experience specific challenges that mean that they often go unidentified and unsupported for longer. One of the challenges for some services has been identifying carers, family and friends and then encouraging feedback.

The trauma of mental illness can cause tension in families which may mean that the person with mental health problems states they don't want their family involved. Or, due to their illness have delusions that involve their family. The challenges of mental illness can therefore mean that:

**Carers, family and friends are excluded at certain points of the care pathway**

**They are not listened to or informed of important information they require to help them support the person they care for**

**They are not informed of support for themselves**

**Professionals miss out on vital information that can inform treatment and care**

**Carer exclusion can lead to key information being missed by professionals that can have a detrimental impact on the care of the person with mental health issues**

## Learning

### Analysis of Carer Complaints to Patient Advice and Liaison Service (PALS) 2017

Type of complaint	Number of complaints	Upheld?
Inappropriate care plan	1	1 upheld
Insufficient care	7	3 upheld 3 part upheld 1 not upheld
Poor communication	2	2 part upheld
Kept waiting	1	1 part upheld
Service not provided/lack of provision of service	2	2 open
Breach of confidentiality	1	1 open
<b>Total</b>	<b>14</b>	

Themes from the above complaints consist of better communication, effective transfer of information between services and improved engagement with carers. Carers want a clear explanation of decisions, to not be passed from service to service when seeking advice, to receive consistent messages, to be part of the care planning and offered a carers assessment.

## New Roles to Support Our Work

In November 2017, a new role was created for a Patient and Carer Involvement Lead. The Lead works across the Partnership and has a focus on improving family, friend and carer experience, supporting cultural change in the way we work with carers, ensuring feedback is used to change and improve service and engages with carers in service transformation.

The Early Intervention Service currently employs a part time Carer Lead who is seconded from Rethink, The Oxfordshire Carers Support Service. A second part time post is going to be developed in the City Adult Mental Health Team.

## Triangle of Care

Over the next few months the Partnership will be carrying out further Triangle of Care audits across the teams to help improve carer engagement. The Adult Carer Involvement Lead and Partnership Manager will be organising a workshop in April 2018 to share learning and good practice from the audits.

## OMHP Objectives 2018

Family, friends, carers and the Triangle of Care is a priority for OMHP and has been identified as one of the four objectives for the Oxfordshire Mental Health Partnership in 2018:

- 1. Deliver agreed outcomes linking with 'The Five Year Forward View for Mental Health'**
- 2. System review of services**
- 3. Improve our work with service users, friends, families and carers**
- 4. Develop our workforce**

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**Someone listened, that was enough."**

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**I feel that my views are valued."**

—OMHP Survey Monkey (March 2017)

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