

Being a Carer and Being a Governor

Billie Critchlow

The 'C' word - A bit about the term 'Carer'

“I don't need a carer. I need a family, who do all the usual stuff that families do for people. 'Having a carer' makes it sound like I can't do anything for myself. It makes me sound disabled. You're not my carer; you're my mum.”
Fran Critchlow

“I also agree about the 'c' word - many years ago (in my old Trust), I did a survey in which we spoke to patients about carer involvement and the first thing almost every person said is "I don't have a carer", while at the same time being very comfortable identifying someone close to them who provided help or support!”
Team Leader, Sheffield CMHT



Sheffield Health and Social Care

NHS Foundation Trust

Carers and Young Carers Strategy

[https://www.shsc.nhs.uk/sites/default/files/2019-12/Carers and Young Carers Strategy.pdf](https://www.shsc.nhs.uk/sites/default/files/2019-12/Carers%20and%20Young%20Carers%20Strategy.pdf)

The Absolute Minimum

The Basics:

- Has a carer been identified?
- Has this person been offered a carer's assessment and if so has this been carried out?
- Has the identified carer been offered information (eg about out of hours numbers etc) to support them in their role?
- Has the carer been offered information about the best way to care for their loved one?
- Does the carer have a way of contacting the right person to offer further support?

Always:

These questions should **always** be asked

Information should **always** be reviewed annually to make sure it is current.

The Trust should **always** review and update information following any crisis or hospital admission

Moving Toward the Gold Standard

Do the carers understand the implications of a condition? Do they understand what to do if a person is experiencing severe symptoms or difficulties. Where to get support or help?

Are carers fully informed about medication regimes, possible side effects of medication etc. Do they know where to find this information?

Are carers being signposted to support groups? Both for themselves and for the person they care for?

Does the person's condition have financial implications for the family? Loss of earnings, loss of benefits etc? Is support and advice being offered here?

Has a family discussion about risk assessment and confidentiality taken place?

Are the family involved in care planning?