Whole-family support for young carers affected by parental mental ill health

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Who does it benefit?

Young carers under 18 living with a parent with mental ill health in Gloucestershire.

What does it do?

The partnership improves systems and practice within inpatient mental health services and community mental health teams, which then promotes mental health professionals to enquire about patients’ children and family situations and improves information sharing between all the professionals who work with these families. The project ensures that no child or young person takes on the majority of care for an adult once they are discharged from mental health services.

When did it start?

September 2012.

Why was it started?

The project is a culmination of the long-term relationship between Gloucestershire Young Carers and 2gether NHS Foundation Trust and their learning from a Winston Churchill Travel Fellowship to Australia.

Previously, few adult mental health workers were taking up the opportunity of training on the impact of parental mental ill health on children. Instead mental health workers tended to refer to Gloucestershire Young Carers rather than address the impact of
mental health problems on their client’s parenting and dependent children themselves. Therefore, Gloucestershire Young Carers felt it was necessary to emphasise the importance of taking into account the whole family when working with mental health patients. A project was needed to tackle the identification of mental health patients who are parents, the identification of children at risk of excessive or harmful caring roles and to embed sustainable whole-family approaches into adult mental health practice.

Good practice for integrating young carer support with adult mental health services was known of in Australia, thanks to the pioneering work of Dr Adrian Falkov who Gloucestershire Young Carers knew through their involvement in Crossing Bridges training. The knowledge gained of the Australian Children Of Parents with a Mental Illness (COPMI) model and the practice of COPMI Co-ordinators in New South Wales underpins this project.

What are the aims and objectives?

Aims:

• To deliver a sustainable whole-family approach to mental health.
• To increase family resilience to prevent or reduce excessive or harmful caring.
• To develop the knowledge, skills and resources of professionals working with parents with mental ill health and young carers affected by parental mental ill health.

Objectives:

• To identify and address the needs of parents and their dependent children when parents are admitted, treated and discharged from mental health hospital wards.
• To empower Community Adult Mental Health Workers to address the needs of both parents and their children.
• To support inpatient staff on mental health wards to meet the needs of their patients who are parents.
• To give access to comprehensive information about the support available to young carers and their families to both professionals and families.
• To better inform education, health and social care teams about young mental health carers and the benefits of a whole-family approach.

How is it funded?

This partnership site is predominantly funded via the Integrated Interventions programme, managed by Carers Trust with funding provided by the Department for Education towards the delivery of the Government’s Carers Strategy. A contribution covering 50% of the Project Worker’s salary comes from 2gether NHS Foundation Trust.

What has it achieved?

“I really like the idea of this project and I wish that it had been around when I needed that kind of support.”

Young carer
“I think that what the Project Worker is offering me will be really helpful.”

Parent on inpatient ward

“This project will really help to fill in some of the gaps in how we identify and support young carers and the Project Worker will be the link that we need.”

Mental Health Nurse

The Family Mental Health Empowerment Project is a strategic project which aims to shift the client engagement of mental health practitioners from an individual approach to one which considers the needs of the whole family. As it is a long-term project, the number of young carers and families reached has been small in the initial months but will grow over a period of time. However, within less than six months of starting there have been some significant achievements.

The hospital Discharge Policy has now been amended to include specific reference to patients’ children, so that when a patient is discharged it will be known if they are a parent and support, either from extended family or therapists or social services, can be put in place so that no child will become the principle carer of that adult. Attention has been paid to the audit systems within the trust so that staff all record patients with dependent children in the same way. Plans to identify and train Young Carer Champions within every mental health team are also progressing.

As a result of these changes within adult mental health services, there has been an increase in the awareness of staff about the impact of mental ill health on the whole family and an increase in the identification of parents using mental health services. The Project Worker, who is on secondment from 2gether NHS Foundation Trust, visits the wards on a weekly basis and has observed changes in the number of identified parents. Now she is updated every week of the number of patients on the ward who are parents.

Interest in this approach from other organisations has been apparent from the start, with invitations to present at several conferences around the country. A knock on effect of the established partnership has been the development of positive links with the hospital’s occupational therapy team. Occupational therapists are in a prime position to identify adults who are nearing discharge and as professionals to have informal discussions with parents about the impact of mental ill health on parenting and their dependent children.

How have young carers been involved in planning and delivering this work?

Gloucestershire Young Carers Forum and other Gloucestershire young carers interested in mental health were consulted by 2gether NHS Foundation Trust in the first instance. All young carers are consulted about specific aspects of the delivery of the project and families who have experienced the whole family intervention are also asked for feedback. Some of this feedback is used by the Project Worker to write summaries of how the project is working in practice.

Young carers presented their own presentation to the trust’s Board of Governors and included a Truth or Myth game about mental health which proved hugely powerful in
winning hearts and minds to the project’s cause. At present, Young Carer Champions are being coached to help deliver training to staff employed by 2gether NHS Foundation Trust. Two young carers and one parent also currently sit on the steering committee of the Family Mental Health Empowerment Project as ‘experts by experience’. Gloucestershire Young Carers has negotiated with the trust that the young carers be reimbursed the same amount as their adult peers on the steering committee.

**How is the initiative run?**

The Family Mental Health Empowerment Project is led by Gloucestershire Young Carers, with strategic management undertaken by a steering committee comprised of senior representatives from both organisations, including two young carers and one parent.

A Project Worker has been seconded from the 2gether NHS Foundation Trust to the project for two days a week over a period of 16 months. As the project works across both organisations, the Project Worker generally splits her time 50/50 between the Gloucestershire Young Carers offices and the trust’s hospitals, clinics and community mental health teams. Working alongside the Gloucestershire Young Carers team, the Project Worker can absorb a great deal about young carers’ issues which she can then impart to her colleagues at the trust. Working on the frontline of mental healthcare she can also observe how the project is being implemented. In addition, staff at Gloucestershire Young Carers provide one day a week of additional family support hours.

Referrals are made either by 2gether NHS Foundation Trust or Gloucestershire Young Carers staff directly to the Project Worker. The Project Worker then visits the parent at an appropriate time, when they are relatively well, to begin the process of talking over the additional challenges of parenting with mental ill health and identifying what support may be needed for the whole family to help them upon discharge and to communicate better about mental health issues. This may be carried out on the inpatients wards or in the community. Children and other adults in the patient’s family are also approached by either the Project Worker or nurses to inform them of how they can be supported. The Project Worker is skilling up nurses and therapists at the trust to talk about patients’ needs as a parent and the support available to families with dependent children. The aim is that considering patients’ needs as parents becomes sustainable, standard practice.

When parents, young carers or other family members are first approached by the project they are given general information about the support services the project facilitates. At the point of discharge, parents are given a letter offering them support at any time they need it. Furthermore, parents are only discharged if they are returning to a home where children will not be taking on the primary responsibility of caring for them. A range of therapy, social care services and support from family and friends is put into place so parents return to a situation in which no young person will undertake the majority of care for them. Support offered to families includes advice about how to broach the subject of mental health, instruction on coping strategies and deployment of the crisis plan Safe, Sorted and Supported.

Young Carer Champions and Link Workers have been identified in all the mental health teams in Gloucestershire. The Project Worker is currently developing sustainable links between these practitioners and Gloucestershire Young Carers in order to cascade knowledge, skills and information. These Young Carer Champions
will be offered annual refresher training. The aim is to embed consideration of parent-child relationships in mental health care, making this sustainable beyond the life of the project.

In addition, Gloucestershire Young Carers and the Project Worker are developing a new web resource for any professional working in families impacted by mental health. Together with the local Roses Theatre in Tewkesbury, the Project Worker is co-ordinating a programme in which they work directly with young carers and raise awareness among multi-agency practitioners.

**What methods have been particularly successful?**

Developing the partnership through close links of several years standing with senior managers in the mental health trust has been hugely beneficial. Their commitment to the project has driven things forward and given assurance to sustaining the progress beyond the life of the project. Having a focus on sustainable integrated interventions has shifted the balance so that the NHS trust now really owns its commitment to young carers.

Liaising with the occupational therapy team has proved to be effective for the Project Worker since this team is in a good position to evaluate when a patient is near to discharge and can sustain contact with the parents in the community.

**Have there been any challenges along the way?**

The two partner organisations needed to co-ordinate approaches to service user confidentiality and their independent approaches to recruitment – especially as the NHS trust’s Project Worker position had to be in line with NHS nationally agreed banding. Likewise, the working practicalities around line management, annual leave and overtime had to be agreed and a unified approach to external communications.

Agreeing banding for new job descriptions, clarifying organisational recruitment processes, and agreeing a common media strategy have all taken longer than it would have if only one organisation was involved. Although a greater lead-in time would have been helpful before launching the project, the partners feel they have learned a lot from each other and always recognise good practice to reach their shared vision of a more connected and involved approach for young carers and their families.

**What hints and tips might get me started?**

- Build on long-standing links with key personnel and include young carers when influencing those with power. Perhaps get young carers to deliver their own presentation to senior executives as this can be very effective in winning hearts and minds.

- Know your stuff. Understand the evidence that this intervention is needed and how it will improve outcomes. Consult the website [www.copmi.net.au](http://www.copmi.net.au) for a wealth of the information in one place.

- Understand the pressures on frontline NHS staff in order to get them on board.

- Ensure you have the resilience, determination and confidence to bring about behaviour change.
Are there any useful documents or resources that could assist me?

- Find a comprehensive range of mental health resources on the COPMI initiative’s website.
- Access parental mental health research and evidence from the COPMI hub.
- See 2gether NHS Foundation Trust’s Young Carers Charter.
- Read the article ‘Parental mental ill health is a family matter’.
- Read the good practice guidance from SCIE’s Think Child, Think Parent, Think Family website.

Where can I get further information?

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