

# Transition to General Practice Nursing

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## Section B - Working in General Practice

### Chapter 8 - Carer support

The aim of this chapter is to:

- Consider the role of the carer and the legislation relating to the assessment and support that should be available to carers of adults
- Explore the role of the General Practice Team in supporting carers
- Look at ways to enhance the carer experience.

#### The role of the carer

When discussing caring for the adult at home it would be impossible to discuss care without recognising the role of informal carers. Carers provide unpaid care by looking after an ill, frail or disabled family member, friend or partner. Most of us will look after an elderly relative, sick partner or disabled family member at some point in our lives. However, whilst caring is part and parcel of life, without the right support, the personal costs of caring can be high (Carers UK 2012).

Carers act as expert care partners in providing high quality care and make valuable contributions to social services and NHS service providers. There are an estimated 6.4 million carers in the UK today and an expected increase of 40% in the number of carers needed by 2037.

The financial impact and value of this care is estimated at £87 billion per year (Carers UK 2012). Up to 1 in 10 of your patients will be carers. This informal workforce, who provide significant amount of unpaid care, may not be able to meet the demand, leaving a significant 'care gap' (Kings Fund 2012). It is for this reason that the carer and the general practice nurse should develop a partnership to ensure the well-being of the carer as well as the well-being of the patient.

The National Carers' Strategy published in 2008 set five outcomes to be achieved by 2018, so that carers will be:

1. Recognised and supported as an expert care partner
2. Enjoying a life outside caring
3. Not financially disadvantaged
4. Mentally and physically well, treated with dignity
5. Children will be thriving, protected from inappropriate caring roles.

The Care Act 2014 outlines how local authorities should carry out carers' assessments and needs assessments. It is mainly for adults in need of care and support and their adult carers. In April 2015 most of the Care Act came into force. Carers UK has developed a FAQ sheet:

[www.carersuk.org/help-and-advice/practical-support/getting-care-and-support/care-act-faq](http://www.carersuk.org/help-and-advice/practical-support/getting-care-and-support/care-act-faq)

NHS England has also published its commitment to carers to give them the recognition and support they need to provide invaluable care for loved ones: [www.england.nhs.uk/ourwork/pe/commitment-to-carers/](http://www.england.nhs.uk/ourwork/pe/commitment-to-carers/)

It is imperative that important issues such as carer identification, assessment and education and partnership working are acknowledged. Carers have a tendency to not pay attention to their own health needs and are categorised as a high risk group for health problems (Simon 2011).

'Whilst caring is part and parcel of life, without the right support, the personal costs of caring can be high.'

The role of the health and social care professional is to be able to carry out carer assessments in order to fully understand the carers' experiences and then to implement strategies in order for carers to feel supported in care delivery (Chilton et al 2012).

Overall the carer plays a significant role in keeping the patient at home and preventing hospital admissions.

## The role of General Practice Team in supporting carers

Being a carer can impact negatively on the care giver's own health. The role of those working in General Practice is to identify their needs, their own health status and what might be required in order to ensure they are able to continue in their caring role. GPNs are well placed to provide support to carers and there are great opportunities for joint working with social services and other agencies to meet the physical, social and emotional needs of carers.

The Quality and Outcomes Framework includes identification of carers of people with dementia and encourages health screening in this group through an enhanced service. The Royal College of General Practitioners together with The Carers Trust has published 'Supporting Carers - An action guide for General Practitioners and their teams'

[www.rcgp.org.uk/clinical-and-research/clinical-resources/carers-support.aspx](http://www.rcgp.org.uk/clinical-and-research/clinical-resources/carers-support.aspx)

They suggest as a first action that carers registered with the practice should be identified.



### Reflection point

- How many patients do you have on your practice list?
- How many carers would you expect to have on your practice list? (Divide your practice list size by 10 to give an estimate)
- Amongst every 100 patients on your practice list, you would expect 10 to be carers; 3 or 4 to be caring for more than 20 hours a week and 2 to be caring at least 50 hours a week.

### How else could you identify carers?

Possible actions:

- Search for certain conditions for patients who are likely to require a carer e.g. stroke or dementia
- Ask patients who are registering with your practice whether they have caring responsibilities
- Check hospital discharge letters for events that are likely to result in a relative having a caring responsibility.

## General Practice Nurses quotes about carers

'...building up a rapport with patients and getting positive feedback from them and their relatives is very satisfying.'

Nurses recognise that without carers looking after their loved one it would be nearly impossible to carry out their role as well as they do now as there would be a much larger drain on the community nursing workforce. However, there is the danger that nurses can expect too much of the carer, which in turn can lead to ill health in the carer.

Due to the multicultural nature of UK Society you will meet people from diverse communities with varying beliefs and expectations about health. A study carried out in 2007 claimed that 17.5% of carers were of an ethnic minority background. Working with these carers will require sensitivity in planning and sharing the care as many people from a minority ethnic background see caring as their duty and often will not have requested the services of professional nursing. Diplomacy in working with such groups is essential as the aim is to work together to give patient and carer the best possible support.

As mentioned in Chapter 7, the number of young carers in the UK is growing and young carers may spend up to 50 hours a week caring for a member of their family. This will have a significant impact on their social skills as well as their educational needs. This group of carers will require support that is meaningful to them and support offered should promote confidence that those being cared for by them will not be disadvantaged if they take up some additional support. Working with this group of carers will require an element of emotional intelligence which is mentioned in Chapter 10.

## Enhancing the carer's experience

Five key ways for GPs and primary care teams to support carers have been identified:

- Listen to the carer
- Think of depression and other ill health
- Tactfully ask about finances
- Signpost to appropriate services
- Plan for emergencies.

General Practice Nurses should be alert to the possible effects of the stress and worry of having caring responsibilities and have a role in screening carers for signs of depression and self harm behaviour



such as the misuse of alcohol. Practices are encouraged to identify carers and maintain good records of contact details and nominated carers so that they can be included in care planning.

It is important to know where to refer carers for further assessment or support if necessary. Consider a local directory of resources and services such as local support groups, community mental health teams or Citizens Advice Centres for financial advice.

- The Carers Trust, [www.carerstrust.org](http://www.carerstrust.org), is a charity which is the merger of Crossroads Care and The Princess Royal Trust for Carers. There is a wealth of information on the site about how carers can apply for respite care as well as information on education and finance
- [www.hscic.gov.uk](http://www.hscic.gov.uk) This site will give you information on topics related to health and social care.
- There may be local organisations that you can access. These may be voluntary, private or charitable organisations, your team can guide you with this.
- The QNI has developed a resource to enable General Practice Nurses to support carers [http://qni.org.uk/supporting\\_carers/general\\_practice\\_resource](http://qni.org.uk/supporting_carers/general_practice_resource)

#### **Case scenario - Patient and Carer Focus**

Margaret has Dementia and has been referred by home care with a skin tear due to a fall. She is cared for by Henry, her 75 year old husband, who has diabetes and reduced mobility. While assessing her Henry asks if Margaret should have a urinary catheter as she has started to become incontinent and he is finding it difficult to manage.

- Explore issues such as carers needs – does Henry need an assessment himself?
- What support is in place for carers?
- Are there any ethical implications?
- Risk assessment

#### **Possible actions :**

- You could refer Margaret to the District Nurse for assessment for a urinary catheter
- Refer to continence service for an opinion as better continence aids could resolve this
- You could arrange for Henry to have some social support in the form of extra help in the morning and evening which would reduce the amount of times that Henry would have to deal with Margaret's toileting
- Referral to local memory clinic via GP
- When considering ethical implications what are you looking at? Are you thinking of what is the best action for Margaret or Henry? Should both needs be considered?

Some areas to be considered when carrying out a risk assessment are as follows:

- Is Margaret able to recognise when she needs to go to the toilet?
- Is Margaret capable of making her own way to the toilet?
- Is the home environment suitable for a commode?

## 'Without carers there would be many more hospital admissions.'

- Where would you place the commode in the home?
  - What amount of fluid intake is Margaret having daily?
  - What times of the day does she drink?
  - Is there a particular time of day when Margaret is incontinent?
  - Is Henry able to monitor his own diabetes?
  - What is Henry's nutritional status?
  - What are the restrictions to Henry's mobility?
  - Is Henry's restricted mobility a danger to both Henry and Margaret?
- QNI GPN carers resource [http://qni.org.uk/supporting\\_carers/general\\_practice\\_resource](http://qni.org.uk/supporting_carers/general_practice_resource)
  - [www.rcgp.org.uk](http://www.rcgp.org.uk)
  - [www.carersuk.org](http://www.carersuk.org)
  - [www.ageuk.org.uk](http://www.ageuk.org.uk)
  - [www.youngcarers.net](http://www.youngcarers.net)
  - [www.macmillan.org.uk](http://www.macmillan.org.uk)
  - [www.carersinthecommunity.org.uk](http://www.carersinthecommunity.org.uk)
  - [www.healthknowledge.org.uk](http://www.healthknowledge.org.uk)
  - [www.communitycare.co.uk/articles/16/08/2011/46026/carers.htm](http://www.communitycare.co.uk/articles/16/08/2011/46026/carers.htm)
  - [www.crossroadscare.co.uk](http://www.crossroadscare.co.uk)
  - [www.nhs.uk/CarersDirect](http://www.nhs.uk/CarersDirect)
  - [www.gov.uk/government/organisations/](http://www.gov.uk/government/organisations/)
  - [www.gov.uk](http://www.gov.uk)

These are just some of the risk factors to consider. Can you think of more?



### Chapter Summary

This chapter has looked at the important role that carers play in supporting the primary care and community service teams to look after a large number of vulnerable people being cared for at home. The partnership between the carer and the General Practice Nurse is essential if care is to be ongoing. However, it was also recognised that often carers could be taken for granted and therefore there must be acknowledgement of the amount of work that carers do in preventing hospital admissions. The diversity of patient needs due to cultural diversity was also addressed.

It is mainly District Nurses who highlight issues in the home and problems those carers and patients may be facing. But patients who are able to get to the surgery require the GPN to have an awareness and ask appropriate questions to help establish if there is any unmet need.

Some carers will become quite agitated if they have to wait for their appointment in the surgery, as they are anxious that their loved one is coping at home without them. This is particularly so in the case of carers for patients with Dementia. This anxiety often alerts GPN, or GP, to the problems at home.

Overall this chapter has highlighted that without carers there would be many more hospital admissions, as there are limited community resources to maintain care in the community without the addition of these numerous unsung heroes.

### Web resources