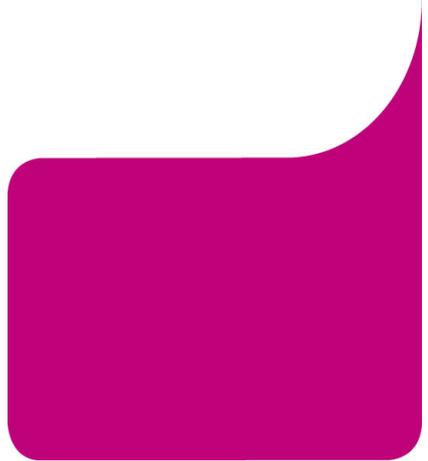




Camden and Islington
NHS Foundation Trust

CARERS WELCOME PACK

RECOVERY AND REHABILITATION



Your partner in
care & improvement



At C&I we are: Welcoming | Respectful | Kind | Professional | Positive | Working as a Team

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What is a carer?

A carer is someone who, without payment, provides help and support to a partner, child, relative, friend or neighbour, who could not manage without their help. This could be due to age, physical or mental illness, addiction or disability.

Anyone can become a carer; carers come from all walks of life, all cultures and can be of any age.

Many carers do not consider themselves to be a carer; they are just looking after their mother, son or best friend, just getting on with it and doing what anyone else would in the same situation.



As a carer you have the right to a carers assessment.

A carers assessment is your right to have your needs assessed by your local authority. It will enable you to tell us what impact caring has on you and your life, and whether you are willing and able to continue to provide this care. It also looks at whether you would like to change anything about your caring role at the moment.

For example, you may find that you have less time to spend with other members of your family, or are finding it hard to have time for yourself.

What support is there for carers?

- Islington Carers Hub – offers advice sessions in venues across Islington as well as by phone or email. You can meet other carers at friendly and informal support groups - 0800 085 1141
- Camden Carers Centre – offers help and advice that carers need, aims to make sure that carers have a voice in planning services - 0207 428 8950
- Carers UK Advice line – 0808 808 7777

What are the Recovery and Rehabilitation Teams?

We are community mental health teams made up of doctors, social workers, nurses, occupational therapists, assistant practitioners and psychologists. Our services are for people over 18 with mental health problems. We provide care in a variety of settings and offer different levels of support to meet individual need. For example we may offer weekly visits or fortnightly visits or daily telephone calls, depending on the individual situation.

Why is the person I am caring for being referred to the Assertive Outreach Team?

If an individual is aged over 18 with mental health problems and in the past they have experienced difficulty in working with other teams or services or had problems getting the right support; they may be referred to the Assertive Outreach Team. We may be able to offer weekly visits or daily phone calls depending on individual circumstances.

Why is the person I am caring for being referred to the Focus Outreach and Street Population team?

If someone is a single homeless person with mental health problems aged 18 or over within the London borough of Camden, they may be referred to Focus. The team work with street homeless people and within the direct access hostels in Camden.

Why is the person I am caring for being referred to a Community Rehabilitation and Recovery Team?

If someone is aged 18 or over with mental health problems, you may be referred to a Rehabilitation and Recovery Team. The team works together to provide a psychiatric review, prescribe medication and provide an assessment for your social care needs. We also monitor your physical health. There are teams covering the North and South of each borough.

Why is the person I am caring for being referred to the Early Intervention Service?

If someone is experiencing a first episode of psychosis and aged 18 or over they may be referred to the Early Intervention Service. The teams aim is to give people the best chance of recovery after a first episode of psychosis and to reduce the severity of further periods of illness.

How can these services help the person I am caring for?

We are interested in all aspects of care and treatment, including education, employment, physical health and social care needs. The team is made up of highly skilled mental health professionals who can help support an individual in all of these areas. We offer home visits and also see people at our community base. We also offer regular telephone contact depending on the individual circumstances. We aim to work closely with carers with the permission of the cared for person and make sure both feel safe and supported.

What is an assessment?

An assessment is a health check carried out by a mental health professional to better understand a person's current mental health state and needs.

What is a care plan?

This is a written plan describing how we will work with someone and what we both want to achieve; you will both receive a copy of this plan unless the cared for person objects.

What is a care coordinator?

The main person in the team that discusses someone's needs, or the person who visits the individual most frequently. The care coordinator is also the person responsible for overseeing and reviewing an individual's care plan.

What happens when the service user is discharged?



Discharge from one of the mental health teams will be planned with the clinical team. If appropriate, some patients will be referred to other services within the rehabilitation and recovery division. Some discharged patients will be referred to new community teams within other divisions.

Some discharged patients will be discharged to the care of their GP, if they become unwell again within six months they can be referred back to their community team.

If someone needs more support after this time, the GP can refer them to the appropriate community team.

Confidentiality and information sharing for carers, friends and relatives

You might find that professionals won't talk to you about your relative's treatment or care. This might make you feel frustrated and less able to support them.

Generally, professionals can only share information with you or other people if your relative 'consents' (tells them that they can.) This is even with close family. It is because professionals have to work in a confidential way.

If your relative does give consent, then professionals can talk to you about their care or treatment. Your relative may decide to only share certain things about their care or treatment. Professionals should regularly ask whether your relative wants information to be shared and keep a record.

A professional can sometimes share personal information without consent, but only in very limited situations. This is called 'breaching confidentiality' when it can be in the public's interests. For example a doctor may decide to share information with the police if the person might be a risk to other people or if it is through a court order or other legal obligation. If this happens to your relative,

the professional should let them know that they are doing this and why.

If a professional shares information without consent and it is not under exceptional circumstances, your relative could take legal action. This means that most professionals are very careful about sticking to the rules.

If you would like to know more, there is a link to the confidentiality statement on the carers page on the Trust website. Staff can print it off for you.

Feedback and complaints

If you have concerns about a friend or relatives care and treatment, please talk to a member of staff or contact our Advice and Complaints Service.

Phone number: **020 3317 3117**

Email address: **complaints@candi.nhs.uk**

Office address: Advice and Complaints Service, Camden and Islington NHS Foundation Trust, 4 St Pancras Way, London, NW1 OPE

We may need to seek your friend or relative's consent, for confidentiality reasons, before we can reply to you.

If you need help and support in making a complaint you can contact the NHS Complaints Advocacy Service which is provided by Voiceability. This is an independent body that can help you to make a complaint.

To contact the service please call: **0300 330 5454** or email **nhscomplaints@voiceability.org**

Further information can be found on their website:
<http://www.voiceability.org>

Diagnoses

Schizophrenia

- A diagnosis of schizophrenia does not mean 'split personality', or indicate that someone will swing wildly from being calm to being out of control.
- Sensational stories in the press tend to present people with schizophrenia as dangerous, even though most people diagnosed with schizophrenia don't commit violent crimes.
- Schizophrenia is a mental illness that affects the way an individual thinks. They may become upset, anxious, confused and suspicious of other people, particularly anyone who doesn't agree with the person's perceptions. The individual may be unaware or reluctant to believe that they need help.
- The symptoms can be divided into 'positive' and 'negative' symptoms.
- Positive symptoms include experiencing things that are not real (hallucinations) and having unusual beliefs (delusions).
- Negative symptoms include lack of motivation and becoming withdrawn. These symptoms are generally more long-lasting.
- Someone's genes, circumstances and stress may all play a role in developing schizophrenia.
- The symptoms of schizophrenia can be disruptive and have an impact on someone's ability to carry on with day-to-day tasks, such as going to work, maintaining relationships with other people, being able to care for yourself or for others.
- Medication and therapy can help treat symptoms of schizophrenia.

Bipolar disorder

- Bipolar disorder also known as bipolar affective disorder, can cause someone's mood to swing from high (mania) to low (depression)
- Symptoms of mania can be: increased energy, excitement, impulsive behaviour and increased belief in your own powers.
- Symptoms of depression can be: lack of energy, feelings of worthlessness, low self-esteem and suicidal thoughts.
- Someone's genes, circumstances and stress may all play a role in developing bipolar disorder.
- An individual can be offered medication and psychological treatment for bipolar disorder.

Diagnoses cont'd...

Psychosis

- Psychosis (also called a psychotic experience or episode) is when someone perceives or interprets events differently from people around them.
- Psychosis is a medical term used to describe hearing or seeing things, or holding unusual beliefs that other people do not share.
- Common examples include hearing voices or believing that people are trying to do you harm.
- An individual can experience psychosis for a wide variety of reasons. For example it can be due to having a mental illness such as schizophrenia or bipolar disorder. It can also be caused by drug use, brain injury or extreme stress.
- There is no one single cause of psychosis but researchers believe that genes, biological factors and environment may play a part.
- If someone is experiencing very severe psychotic symptoms they may need more urgent help such as going to hospital, for example attending a local A & E department.

Schizoaffective disorder

- The word schizoaffective has two parts: 'schizo' refers to psychotic symptoms, 'affective' refers to mood symptoms.
- Schizoaffective disorder has some symptoms of schizophrenia and bipolar disorder.
- Symptoms can be mania, psychosis and depression.
- Genes, circumstances and stress may all play a role in developing schizoaffective disorder.
- An individual can be offered medication and talking therapies for help with schizoaffective disorder.
- Someone with a diagnosis of schizoaffective disorder may have times when they struggle to look after themselves, and when doctors consider someone lacks insight and understanding into their behaviour or how they are feeling. They may be quite well between episodes.
- Everyone is different, and episodes vary in length. Some people have repeated episodes, but this does not necessarily happen, and it may not be a lifetime diagnosis.

Medication

A doctor may offer someone medication if they have a mental illness. Sometimes an individual may feel that they do not want to take it because it is not right for them. Several medications may need to be tried before the right one is found. If someone has a problem with their medication, they should discuss it with their doctor. They could bring a friend, relative or advocate with them if they find it hard to talk to their doctor.

There are many medications in mental health, below are a few examples.

Antidepressants – are often used to treat depression and anxiety. A doctor may offer someone antidepressants if they have very low mood or symptoms of depression. They can also help with anxiety.



Antipsychotics – if an individual experiences psychosis as part of an illness, they may be offered antipsychotic medication. These drugs are generally used to treat psychosis, but are also used to treat mania, hypomania or depression.

Benzodiazepines – are medications sometimes used to treat anxiety. An individual can become addicted to benzodiazepines, therefore they are not offered over a long period of time.

Mood stabilisers – can prevent someone's mood from swinging from high to low. They are often used to treat bipolar disorder. There are a number of different mood stabilisers that can suit people differently and can have side effects.

Drugs, alcohol and mental health

When someone with a mental illness also uses drugs, doctors call this 'dual diagnosis'. Drugs mean recreational drugs, alcohol or prescription drugs. Drugs can make the symptoms of someone's mental illness worse. Some drugs may make it more likely for someone to get a mental illness. There are many reasons why someone may use drugs. Some people use them to try and deal with their symptoms. This is called 'self-medication'. Drugs can make someone's mental illness worse. They can make someone's illness harder to treat.

Drug and alcohol services

Integrated Camden Alcohol Service (ICAS) – for people who have developed a problem with alcohol and are in need of specialist treatment - 02032274950

Camden Specialist Drug Service

North Camden Drugs Service (Response) – for people living in North Camden who have substance misuse problems - 02033176400

South Camden Drugs Service – for people concerned about their use of drugs - 02033176000

Islington Specialist Drug Service

Islington Drug and Alcohol specialist service (IDASS North) – for Islington residents with drug issues - 02033176240

Islington Specialist Alcohol Treatment service (IDASS South) - for people living in Islington with complex alcohol misuse problems - 02033176650

Safeguarding

All our teams work with service users and carers to make sure they feel safe and are not being hurt by others. This is called safeguarding. If you are worried about yourself or the person you care for, please talk to your care coordinator or contact one of the numbers of the back page.

Community treatment orders

If someone you care for is in hospital, they could be under a section of the Mental Health Act 1983.

If they are on a Section 3, the responsible clinician (the person who is in charge of someone's care, usually the psychiatrist) can arrange for them to have supervised community treatment instead of complete discharge.

Someone can also have supervised community treatment if they have been on a section 37. This is a section of the Mental Health Act where you get a hospital order instead of a prison sentence. You cannot be put on a CTO if you are on a section 2 or a voluntary patient.

If someone has supervised community treatment, they will leave hospital under a community treatment order (CTO). A CTO means that an individual has to keep to certain conditions to remain in the community, for example engaging with their community team. It also means that the person's responsible clinician can make them come back into hospital. This is called CTO recall. The doctor could do this if someone breaks a condition of their CTO or if they feel the

person has become unwell again.

A responsible clinician and an Approved Mental Health Professional (AMHP) must both agree to make a CTO. An AMHP is someone who has had special training on the Mental Health Act.

An AMHP and a responsible clinician can only put someone on a CTO when they are still in hospital on a Section 3 or 37. If someone has been discharged from their section, they cannot be put on a CTO.

If a responsible clinician is thinking about a CTO for someone, a carer or relative can be involved in the discussion if that person is in agreement with this. That person can also have an Independent Mental Health Advocate (IMHA) to support them during the discussion. They can let the person know what their rights are and help put their views across.

A first CTO can last for up to six months. After this the person's responsible clinician has to renew it. If they renew it, they can only renew it for another six months. If they want to renew it again, they can then renew it for a year at a time. An AMPH must agree to continue the CTO.

If someone does not agree with their CTO they can appeal the decision in two ways.

They can apply for a Mental Health Review Tribunal. They can apply within the first six months of the CTO and once during each renewal period. The same rules apply if they want to appeal a CTO being revoked. (This may happen after someone has broken their conditions and been recalled back to hospital.)

If someone is on a CTO and wants to appeal, they can appeal to the hospital managers of the responsible hospital at any time. This is the hospital that they would most likely be recalled to. The hospital manager can discharge someone from their CTO.

If someone is on a CTO, they are entitled to legal representation if they would like to challenge their CTO in a Mental Health Review Tribunal. They are also entitled to an Independent Mental Health Advocate (IMHA). An IMHA can help someone understand their rights and put their views across.

If a person's CTO comes to an end without being renewed, they are no longer under a CTO and cannot be recalled to hospital.

If a person is admitted to hospital via CTO recall, the community team will still work with that person after discharge.

Community activities and routes back to work

The Recovery College – offers a range of recovery focused educational courses across health, mental health, recovery, self-confidence and wellbeing.

- Available to everyone and all courses are free.
- To enrol call – 020 3317 6904 / recovery.college@candi.nhs.uk

Islington MIND – 0203 301 9850

admin@islingtonmind.org.uk / www.islingtonmind.org.uk

- There is also a crisis line Monday to Saturday including bank holidays, 5pm – 10pm 0845 123 23 73.

Twining Enterprise – 0208 840 8833 info@twiningenterprise.org.uk

www.twiningenterprise.org.uk

- Aims to improve mental wellbeing through helping people into work. Aims to increase confidence by providing practical support to individuals, employers and our community.

Remploy – 0300 456 8035

Caledonianroad.branch@remploy.co.uk

- Aims to improve the lives of disabled people through work. Job matching with carefully chosen employers and long term support and advice.

Hillside Clubhouse – 0207 700 6408

www.hillsideclubhouse.org.uk

- Staff members and members work together in all aspects of running the clubhouse, sharing duties and responsibilities.
- It enables it's members to participate in mainstream employment, education, social and leisure activities by building confidence, preparation for work and ongoing support.
- Open to Camden & Islington service users.
- Can self-refer or referral from a professional.

Key Changes – 0207 549 8172

www.keychanges.org.uk

- Music engagement for young people and adults experiencing mental illness.
- Open to all.
- Funding through a Personal Budget that can be arranged through an individual's care co-ordinator.

Clean Break – 0207 482 8600

www.cleanbreak.org.uk

- Women's theatre company, for ex-offenders, women at risk of offending due to mental illness and substance misuse issues.
- Referral taken over the phone, initial assessment followed by outreach worker from Clean Break.

Street League – 07785620889

London@streetleague.co.uk

- Aim to engage young people from disadvantaged backgrounds in a structured football and education programme, with two hours in the classroom and two hours on the pitch each day.
- This intensive 10-week programme develops vital employment skills such as communication, team work and goal setting.

Core Arts – 0208 533 3500

www.corearts.co.uk

- Promotes positive well being through creative learning.
- Access to 60 plus creative classes a week under five departments: Arts, Music, Multimedia, Horticulture and Sport.
- Core Arts are open to new referrals from all London Boroughs.
- Funding through a Personal Budget that can be arranged through a person's care coordinator

Smoking cessation support

Camden and Islington is a no smoking Foundation Trust. Smoking is not permitted anywhere on site. Smoking cessation support is offered.

People often think they need to keep smoking to manage stress levels, but addiction to nicotine actually causes stress and causes low mood. Stopping smoking improves anxiety, stress levels and improves depressed mood.

For people leaving hospital, or moving between services during an attempt to stop smoking, they will continue to be offered support in their new service.

On inpatient wards, all smokers will be assessed at the point of admission, provided with nicotine replacement therapy, and will be offered a referral to a smoking cessation advisor. If someone wants to use an e-cigarette, a member of staff will be able to give further information on where this is allowed.

There are also specialist services available for people we see in the community, so if someone is working with community services, please ask a member of staff about how to access support with stopping, or reducing their

smoking.

What does this mean for carers and visitors?

If your friend or relative is in hospital, we ask you to support them by not bringing tobacco products or lighters to any C&I premises.

If you wish to bring in e-cigarettes, please ask a member of staff for information about which types are allowed.

If you are caring for someone that would rather see someone outside the Trust, please contact their local smoking cessation service.



Smokefree-life Camden
St Pancras Hospital, Ground Floor,
West Wing, 4 St Pancras Way,
London, NW1 OPE
Tel: 0800 107 0401
Email: smokefree.camden@nhs.net

Smokefree Islington
Finsbury Health Centre, Pine
Street, London, EC1R OLP
Tel: 0800 093 9030
Email: stop-smoking.whittington@nhs.net

Jargon buster

Talking therapies - this involves talking about problems with a trained professional.

Talking Therapies try to work out what may have caused problems in the first place and help people learn ways of managing them.

Talking Therapies include, Cognitive Behavioural Therapy (CBT) – this focuses on the here and now and looks at how automatic thoughts can affect how an individual feels and aims to change these.

Psychotherapy is another type of talking therapy. Psychotherapy focuses on someone's early relationships and experiences and how they may impact on current relationships.

Recovery – this is the idea that people can define for themselves how they will recover from their mental distress, and what this will look like when it has happened. For some people with enduring mental health conditions, this might not mean having no medical symptoms of mental disorder, but rather being able to manage these and participate in daily life as the person wishes.

Care coordination - a care coordinator will be the first person to speak to if you have worries about the person you care for. There may also be a duty worker who you can speak to, if you cannot speak to their care coordinator. A care coordinator is a person who works for a mental health team, usually a nurse, occupational therapist or social worker, who supports a service user to create a care plan. They then make connections with the people and services identified in the care plan to support the person to recover from their current difficulties. Everyone under CPA has a care coordinator.

Intervention – this is the treatment or service which is offered by a team. We are interested in all aspects of care and treatment, including education, employment, physical health and social care needs. The teams are made up of highly skilled mental health professionals who can help support an individual in all of these areas. We offer home visits and also see people at our community bases. We also may be able to offer regular telephone contact. We aim to work closely with carers with the permission of the cared for person. The Care Act 2014 brings a statutory duty for carers to be offered a carers assessment, regardless of their needs for support or their financial resources, or those of the adult that they care for. Interventions are based on the recovery model and aim to help individuals build their skills, confidence and self-esteem.

In a crisis

If you or someone else is in immediate danger or risk of harm, dial 999.

Contact the police if the person you are caring for is violent or you do not feel safe with them because they may become violent. The police are experienced at dealing with this sort of situation. Do not feel reluctant to contact them.

These agencies can also help:

Men's Advice Line: 0808 801 0327

Solace Women's Aid: 0808 802 5565

In an emergency, you can always attend the accident and emergency department at your local hospital. They will be able to access someone's mental state and treat accordingly. In most accident and emergency departments a psychiatric liaison team is available.

Contact our crisis teams, referrals accepted by phone only.

Islington – 0207 561 4278

North Camden – 0203 317 6333

South Camden – 0203 317 2914/5

Out of hours service – 0800 988 2149

This information can be made available in alternative formats, such as easy read or large print, and may be available in alternative languages, upon request. Please contact Shabir Abdul at equalityanddiversity@candi.nhs.uk or on **020 3317 7170**.