This guide is designed for carers and families of people with schizophrenia to provide you with information about care planning, which is an important aspect of supporting people with mental ill health to access the care and treatment that they need. This is a particularly important process for people with schizophrenia.

If you care for a person with schizophrenia, particularly if they have only recently received their diagnosis, the care planning process can be overwhelming, and difficult to understand and to prepare for. With an effective care plan, the person you care for is more likely to have greater confidence and a greater sense of control over managing their condition.

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1. What is a schizophrenia care plan?

A care plan is an agreement between a patient and health and social care professionals, to help them manage their health on a day-to-day basis.

- The NHS Mandate states that every person with a long-term condition, including mental health problems, should be offered a personalised care plan as soon as possible after diagnosis. This includes people with mental ill health and those living with schizophrenia.

- Since April 2015 all carers are entitled to a carer’s assessment from their local authority. Many mental health trusts provide these too. The carer’s assessment will look into how caring affects your life, including your physical, mental and emotional needs, and whether you are able or willing to carry on caring.

- The care plan should be developed as a collaboration between the person it is being written for, their care coordinator and their carer, with a copy of the plan then sent to the healthcare professional or service who/which made the first diagnosis.

- After your assessment, you can agree a support plan with your local authority which will set out how your needs will be met in the future.

- A carer’s assessment might reveal issues that should be covered in the care plan of the person you care for. If your carer’s assessment shows that the time that you spend caring for the person with schizophrenia is having an impact on your physical or mental health, you might try to reduce this impact through the care plan of the person you care for.
2. Why do I need to prepare for the care planning discussion?

A care plan should set out the support that will be provided to the person you care for, and who will provide it to them. It should be a ‘live document’ shared between you, the person you care for and a care coordinator. Each of you will be able to contribute to the care plan and to share your views of what it should contain.

It can be easy to feel that you might not be listened to in the care planning process. This can particularly be an issue where the person you care for has not given consent for the professionals involved in their care to share confidential information with you. You can discuss this with the person you care for, and they can sign a consent form for the professionals involved in their care to share as much or as little about their care with you as they like. They can also provide an ‘advance statement’, which would explain what they would like to happen, and what information they would consent to being shared, in the event of a mental health crisis or relapse through which they may lose the ability to make decisions for themselves.

Even without this consent, health care professionals should still listen to your concerns or views as a carer, as this information could be valuable in improving the care offered to the patient. As their carer, you play a vital role in their wellbeing and in the management of their condition, and it is important that you are able to contribute to their care plan. The person you care for is able to speak to health care professionals separately if they feel there are things they are unable to say in front of their carer; while a carer can also seek the same advice if they feel there are things they are unable to say in front of the person they care for.

A care plan is a valuable tool to help you to set both the person you care for, and yourself, realistic goals for their recovery and the management of their condition and to plan for what should happen in the event of a crisis. This is why preparing for a care planning session, and thinking ahead to what this might involve, is so important.

3. What should I expect from the care planning discussion?

Care coordinator
The person you care for should have a care coordinator, and this person will work with them to develop a care plan. A care coordinator could be a social worker, community psychiatric nurse or an occupational therapist. The mental health team who support the person you care for can also help you with the care planning process, and may be able to give advice as to what you should try to include.

What could the care planning discussion cover?
The care planning discussion should cover a number of areas, which can range from the symptoms experienced by the person you care for and the history of their illness to their housing and employment needs. The care planning discussion should last around half an hour.

The result should be a care plan which brings together in one place the needs of the ‘whole person’ going beyond their treatment to cover all aspects of their life which are affected by schizophrenia. It should include the different support services which the person you care for may need to access.
4. Things to consider ahead of the discussion

Think about how the person you care for could benefit from a care plan, and what support they most need.

Are there clear, realistic goals that could be set to address these needs?

Have there been any particularly difficult episodes or events recently that you would like to discuss?

Is this your first care planning discussion?
If you have had discussions about care planning before, it will be important to look at what you covered last time so you can review progress and revisit any queries that arose. It might be worth writing down any questions you have that come to mind.

What does the person I care for need from their care plan?
Think about how the person you care for could benefit from a care plan, and what support they most need. Are there clear, realistic goals that could be set to address these needs?

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Does the person I care for need to give consent for their healthcare professional(s) to share information with me?
It is important to know whether the person you care for has given consent for the professionals involved in their care to share information with you. Even without this consent to share information you can still be involved in some aspects of the care planning process, so it’s important to make sure that the care coordinator involves you where they can.

What goals does the person I care for want to work towards, and what goals do I want to work towards?
Consider what goals the person you care for has, and you have for yourself, and how a care plan could help you to reach them. These goals could be related to anything considered relevant, including day-to-day activities, family relationships and employment.

What do I and the person I care for want to happen in the event of a mental health crisis or relapse?
In advance of your care planning session, speak with the person you care for about what they would like to happen if they were admitted to hospital or another care setting at a time of crisis or relapse. Think about whether there are any plans or instructions you can put in place now about how you would both like this to be managed, including who would need to be notified and involved in working out next steps.

Which care services does the person I care for need to access?
Consider whether there are specific care services that the person you care for would benefit from accessing, and ask them the same.
5. How can I ensure the care plan is put into action?

A care plan should empower and inform you so that you feel you are able to make a constructive contribution towards the recovery goals of the person you care for.

A care plan should be reviewed at least once each year and should be a 'living document' that can respond to changes in the needs of the person you care for.

Both you and the person you care for should receive a copy of the completed care plan after a care planning session.

If you feel that you and the person you care for aren’t getting the support you need from your care plan you should speak to your care coordinator. You can then work together to make sure that the care plan provides the help needed.

6. Further information and support

You can find more information about care planning and the support available to you and the person you care for at:

- SANE: www.sane.org.uk
- The Royal College of Psychiatrists: http://www.rcpsych.ac.uk/healthadvice/partnersincarecampaign/checklistforcarers.aspx
- Your local authority website, as they may provide services for carers

In the event of a crisis, you can contact SANEline, which provides emotional support and information to anyone affected by mental illness, including families, friends and carers, between 6.00 and 11.00pm 365 days a year on

0300 304 700
7. My contacts

Please use the section below to add any contact details.

Name:

Phone number:

E-mail address:

Notes:

Name:

Phone number:

E-mail address:

Notes:

Name:

Phone number:

E-mail address:

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Name:

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References


