

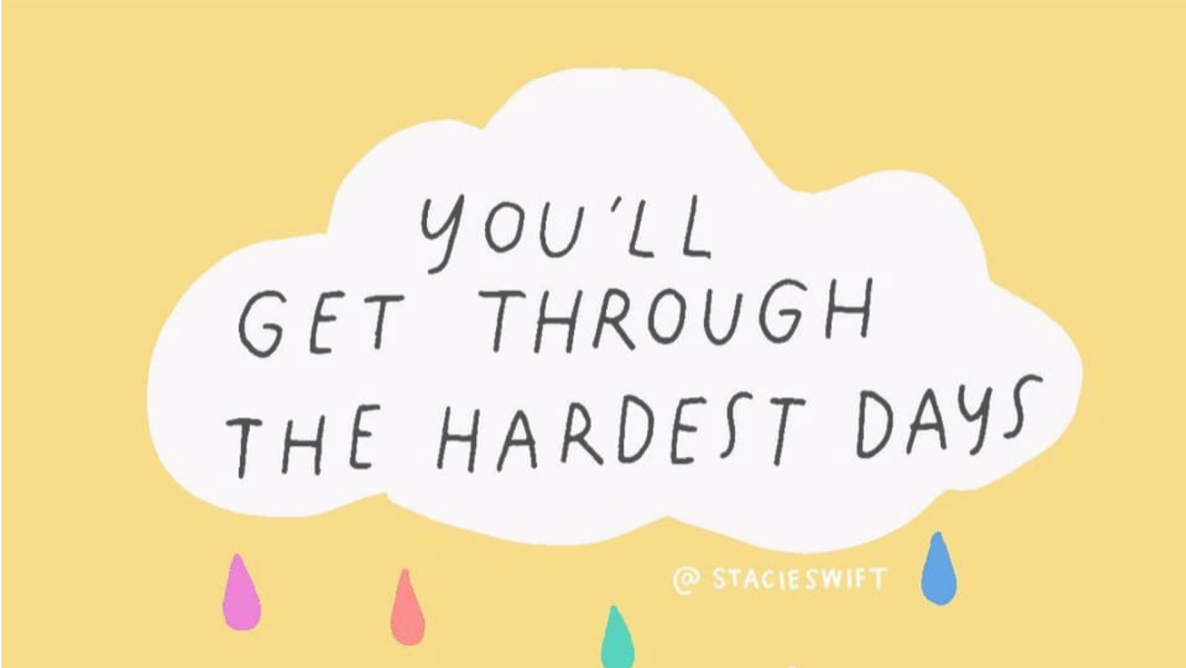
‘Connecting with Carers in Covid’: Listening to carers and family members, identifying what helps

Developed jointly by people with lived experience of family caring, BASW, the RCN and RCPsych



6 May 2020

“My son is really struggling with the lockdown and the current COVID-19 situation. We have had lots of phone calls weekly from CAMHS Social Workers and school, but no one has sent any info, even after saying they would on the call. My son has become so overwhelmed he has run away and gone into crisis several times.”



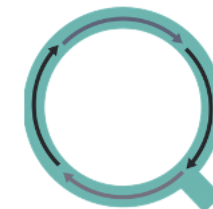
YOU'LL
GET THROUGH
THE HARDEST DAYS

@ STACIESWIFT



**IMPROVING MENTAL
HEALTH SAFETY**
COVID-19 Mental Health
Improvement Network

“My close relative was recently discharged from the inpatient unit, this is because the wards are to be used for COVID-19 patients. Unfortunately my close relative is still not so well and as a carer this is increasing my anxiety levels. I am too scared to send them back to the ward, because of risk of infection.”



**IMPROVING MENTAL
HEALTH SAFETY**
COVID-19 Mental Health
Improvement Network

“I am currently at university and caring for my mum, my brother has also moved back in with us because of the lockdown and space is tight. I am struggling to keep up with my university work and afraid to go out for walks due to the fear of catching the virus.”

Wendy Minnhett, founder of Roller Coaster Family Support, shares her experience of keeping connected with families during COVID-19.

To learn about other change ideas being tested and discuss with others, join our COVID-19 Mental Health Improvement Network.



#MHSIPCV19

1. What problem were you trying to solve?

To maintain connection with parents & carers of children & young people experiencing emotional or mental health difficulties. Parents and carers would normally have access to 2 face to face groups each month.

2. What did you do?

We set up weekly virtual support sessions using Zoom and Facebook Live. We also organised additional workshops based on needs and themes that were arising e.g. sleep, behaviour



3. How did it go?

Overall, really well. Each session lasted 1 - 1.5 hours, with a structured agenda, chance to talk to a mental health professional and free time for peer support. We encouraged people to get prepared with some of the usual stuff we have in a face to face support groups (mainly a cuppa & chocolate!) and offered support if people wanted help to access the digital platforms. Every session ends with positive quotes and a group song, which goes down really well

4. What was the main learning from your intervention?

- Facilitators need to run practice sessions to familiarise themselves with how everything works.
- Creating a virtual ethos helps people feel safe to share
- It's a fantastic way to offer support and connection during this difficult time, but digital sessions are not for everyone. Ensuring other options are available is really important e.g. text, telephone and email support.
- Digital support will now always be offered as part of the service as it has helped to reach people who could not attend face to face sessions.

Former carer, **Matthew Mckenzie**, shares his experience of connecting with other carers during COVID-19.



1. What problem were you trying to solve?

I wanted to connect with other carers when my mother was seriously unwell. It was at the beginning of the COVID-19 pandemic and many contacts such as carer networks were drifting away. I began to feel more isolated. I felt other families & carers probably felt the way same too. The problem this time was, that the support networks were more fragmented. The challenge was to keep those networks open & find ways with other carers to cope with a challenging environment.

2. What did you do?

I ran carer support groups and forums in South London, but the problem was the carer centres were closing due to the lock down. So, I used technology to continue to form networks from WhatsApp groups, Zoom and other communication apps. With the support of a carer peer network, it was made easier to cope with the outcome of grief.



3. How did it go?

The understanding and support of many carers helped with the problem of isolation. We learnt from each other though; coping with fear, loss and understanding of how COVID-19 is affecting carers. There are, of course, many challenges for both carers, carer advocates and carer leads.

4. What was the main learning from your intervention?

Technology is key, due to the COVID-19 crisis, it has sped up other means of connecting with each other. Many carers are using the means of smart phones, although some communication application is not free, it is a lot safer than being out in public. There are benefits, but technology is not perfect, there are also problems, especially in advertising carer network groups.

#MHSIPCV19



**IMPROVING MENTAL
HEALTH SAFETY**
COVID-19 Mental Health
Improvement Network



Communication skills

A parent from South West London and St Georges Mental Health NHS Trust shares their experience of communicating with their son, who is experiencing mental health difficulties during COVID-19.

1. What problem were you trying to solve?

My son doesn't listen to me! Professionals seem to get through to him. What's their secret?

2. What did you do? I asked the community nurse to explain the skill she was using. She provided information about psychosis and explained that his unusual thought patterns may be a reason he is misinterpreting or misconstruing what I was saying or trying to do. She encouraged me to take a step back and broke listening down into steps:

- Concentrate on what is said
- Encourage them, by nodding your head
- Ask a clarifying question to check you understand what they are saying
- Summarise what you have heard



Source: Centre for Creative Leadership

3. How did it go? I thought I was good at listening – in fact I thought I did too much of it, but clearly my son didn't agree. It's taken a lot of practice. As a family we have a tendency to talk over each other and never give each other time to speak. Using this listening skill takes time, but it's reducing the number of arguments.

4. What was the main learning from your intervention?

Setting aside a 'good' time and not jumping in with my own ideas is essential. Praising and complimenting the positive things my son is doing has helped too. I have gained a new perspective and found that I get less irritated.



Questions?