

Carers Policy

Date	Version
January 2014	V6
Purpose	
The purpose of this policy is to outline the guidance and support available for those who have caring responsibilities.	
Who should read this document?	
All Trust employees	
Key messages	
Accountabilities	
Production	Richard Maguire HRBP
Review and approval	Director of Human Resources and Organisational Development
Ratification	Director of Human Resources and Organisational Development
Dissemination	Deputy Director of Human Resources
Compliance	Director of Human Resources and Organisational Development
Links to other policies and procedures	
Leave Policy Parental Leave Policy Maternity Leave Policy	
Version History	
V4.1	14/07/06 JSNC
V4.2	24/06/09 Updated in new format, EIA included
V4.3	March 2011 Trust Commitment to Valuing People amended in line with the Equality Act 2010. Electronic policy paths updated
V5	Feb 2014 Minor amendments to document references
V6	24/01/2014 Updated and Approved at JSNC
Last Approval	
January 2014	
Due for Review	
January 2017	

The Trust is committed to creating a fully inclusive and accessible service. By making equality and diversity an integral part of the business, it will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.

An electronic version of this document is available on StaffNET. Larger text, Braille and Audio versions can be made available upon request.

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1 Introduction

This policy outlines the Trust's commitment to supporting those with caring responsibilities.

2 Purpose and Responsibilities

The Trust recognises that there are times in employees' lives when they may have caring responsibilities. As a Trust that values its employees and the skills they bring to the organisation, we make every effort to support them in balancing their work commitments and caring responsibilities. Thus:

- It is the Trust's intention that anyone with caring responsibilities should feel comfortable in declaring their needs.
- Carers will be treated sympathetically and not discriminated against in any way.
- Any information shared with Managers will be treated confidentially and shared only with those who the Carer agrees may assist in supporting them.

Definition of a Carer: People who look after a relative or friend who need support because of age, physical or learning disability or illness (including mental illness).

3 Process

Managers will, wherever possible support Carers but on some occasions may recommend additional professional assistance such as an Occupational Health assessment, counselling or referral to an external organisation.

Where a Carer is planned to be absent from the workplace for an extended period of time, the Manager will ensure that they keep in touch to ensure consistent support. They will also keep individuals informed of developments within the Trust by sending them Team Brief, Vital Signs or whatever else they consider to be appropriate to their home address. Managers should contact HR for advice after 6 weeks of absence. Such contact will contribute to facilitating the Carer's eventual return to work.

Employees may also wish to refer to other policies to ensure the correct channel is used:

- Leave Policy.
- Parental Leave Policy.
- Maternity Leave Policy.

4 Template Letters

None.

5 Overall Responsibility for the Document

- 5.1 The Director of HR and OD in conjunction with the HR&OD Committee is responsible for ratifying this document. The Director of HR and OD has overall responsibility for the dissemination, implementation and review of this policy.

6 Consultation and Ratification

- 6.1 The design and process of review and revision of this policy will comply with the Development and Management of Trust Wide Documents.
- 6.2 The review period for this document is set as default of five years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.
- 6.3 Non-significant amendments to this document may be made, under delegated authority from the Executive Director, by the nominated author. These must be ratified by the Executive Director and should be reported, retrospectively, to the approving group or committee.
- 6.5 Significant reviews and revisions to this document will include a consultation with named groups, or grades across the Trust. For non-significant amendments, informal consultation will be restricted to named groups, or grades who are directly affected by the proposed changes

7 Dissemination and Implementation

- 7.1 Following approval and ratification, this policy will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process, currently the 'Vital Signs' electronic newsletter.
- 7.2 Document control arrangements will be in accordance with The Development and Management of Trust Wide Documents.
- 7.3 The document author(s) will be responsible for agreeing the training requirements associated with the newly ratified document with the named Executive Director and for working with the Trust's training function, if required, to arrange for the required training to be delivered.

8 Monitoring Compliance and Effectiveness

- 8.1 Monitoring of this policy and its processes will be undertaken within Directorates by Line Managers, to ensure compliance, with any concerns escalated to the HR Directorate. In addition, corporately, the HR&OD Directorate will monitor annually, the level of special paid leave taken, to identify any areas of concern for action by the HR Business Partner and Line manager. This policy will be reviewed every five years or sooner where employment law or practice requires it, by the HR and Organisational Development Directorate and staff side.
- 8.2 The standards and Key Performance Indicators identified with the implementation of this policy are the NHSLA, Standards as determined by the Care Quality Commission.

None.

Core Information				
Document Title				
Date Finalised				
Dissemination Lead				
Previous Documents				
Previous document in use?				
Action to retrieve old copies.				
Dissemination Plan				
Recipient(s)	When	How	Responsibility	Progress update
All staff		Email	Document Control	

Review		
Title	Is the title clear and unambiguous?	Yes
	Is it clear whether the document is a policy, procedure, protocol, framework, APN or SOP?	Yes
	Does the style & format comply?	Yes
Rationale	Are reasons for development of the document stated?	Yes
Development Process	Is the method described in brief?	Yes
	Are people involved in the development identified?	Yes
	Has a reasonable attempt has been made to ensure relevant expertise has been used?	Yes
	Is there evidence of consultation with stakeholders and users?	Yes
Content	Is the objective of the document clear?	Yes
	Is the target population clear and unambiguous?	Yes
	Are the intended outcomes described?	Yes
	Are the statements clear and unambiguous?	Yes
Evidence Base	Is the type of evidence to support the document identified explicitly?	Yes
	Are key references cited and in full?	Yes
	Are supporting documents referenced?	Yes
Approval	Does the document identify which committee/group will review it?	Yes
	If appropriate have the joint Human Resources/staff side committee (or equivalent) approved the document?	Yes
	Does the document identify which Executive Director will ratify it?	Yes
Dissemination & Implementation	Is there an outline/plan to identify how this will be done?	Yes
	Does the plan include the necessary training/support to ensure compliance?	Yes
Document Control	Does the document identify where it will be held?	Yes
	Have archiving arrangements for superseded documents been addressed?	Yes
Monitoring Compliance & Effectiveness	Are there measurable standards or KPIs to support the monitoring of compliance with and effectiveness of the document?	Yes
	Is there a plan to review or audit compliance with the document?	Yes
Review Date	Is the review date identified?	Yes
	Is the frequency of review identified? If so is it acceptable?	Yes
Overall Responsibility	Is it clear who will be responsible for co-ordinating the dissemination, implementation and review of the document?	Yes

Core Information	
Manager	Richard Maguire
Directorate	HR & OD
Date	February 2015
Title	Carer's Policy
What are the aims, objectives & projected outcomes?	<p>The Trust recognises that there are times in employees' lives when they may have caring responsibilities. As a Trust that values its employees and the skills they bring to the organisation, we make every effort to support them in balancing their work commitments and caring responsibilities. Thus:</p> <ul style="list-style-type: none"> ▪ It is the Trusts intention that anyone with caring responsibilities should feel comfortable in declaring their needs. ▪ Carers will be treated sympathetically and not discriminated against in any way. ▪ Any information shared with Managers will be treated confidentially and shared only with those who the Carer agrees may assist in supporting them. <p>Definition of a Carer: People who look after a relative or friend who need support because of age, physical or learning disability or illness (including mental illness).</p>
Scope of the assessment	
Collecting data	
Race	<p>There is no evidence to suggest there is a disproportionate impact on race regarding this policy.</p> <p>Data collected from Internal HR processes and workforce data reporting will ensure this is monitored.</p>
Religion	<p>There is no evidence to suggest there is a disproportionate impact on religion regarding this policy.</p> <p>Data collected from Internal HR processes and workforce data reporting will ensure this is monitored.</p>
Disability	<p>There is no evidence to suggest there is a disproportionate impact on disability regarding this policy.</p> <p>Data collected from Internal HR processes and workforce data reporting will ensure this is monitored.</p>

Sex	There is no evidence to suggest there is a disproportionate impact on sex regarding this policy.			
Gender Identity	Data for this protected characteristic is not currently collected. Data collected from Internal HR processes and workforce data reporting will ensure this is monitored.			
Sexual Orientation	There is no evidence to suggest there is a disproportionate impact on sexual orientation regarding this policy. Data collected from Internal HR processes and workforce data reporting will ensure this is monitored.			
Age	There is no evidence to suggest there is a disproportionate impact on age regarding this policy. Data collected from Internal HR processes and workforce data reporting will ensure this is monitored.			
Socio-Economic	Data for this protected characteristic is not currently collected. Data collected from Internal HR processes and workforce data reporting will ensure this is monitored.			
Human Rights	Carers will be treated sympathetically and not discriminated against in any way.			
What are the overall trends/patterns in the above data?	No gaps have been identified at this stage but this will be monitored via Internal HR processes and workforce data reporting.			
Specific issues and data gaps that may need to be addressed through consultation or further research	Data is not currently collected for gender identity and socio-economic			
Involving and consulting stakeholders				
Internal involvement and consultation	JSNC Deputy Director of HR & OD Director of HR & OD			
External involvement and consultation				
Impact Assessment				
Overall assessment and analysis of the evidence	Carers will be treated sympathetically and not discriminated against in any way.			
Action Plan				
Action	Owner	Risks	Completion Date	Progress update
Monitoring of workforce data	RM		Ongoing	

Appendix 1

Carers Direct

0300 123 1053

www.nhs.uk/carersdirect/Pages/CarersDirectHome.aspx

Citizens Advice Bureau

08448 269 717

www.citizensadvice.org.uk

Age Concern

01752 665424

www.ageconcern.org.uk

Plymouth Guild

01752 201766

www.plymouthguild.org.uk

Care Direct

0845 1551 007

www.devon.gov.uk/caredirect.htm

Carers UK

0808 808 7777

www.carersuk.org

PHNT Occupational Health, Health and Wellbeing

01752 437222

(Internal – 37222)

Staff Counsellor

01752 437233

(Internal – 37233)

Staff Reps

01752 439276

(Internal 39276)