This workshop offered delegates information on identifying those who need more help to care for a family member or friend living with a terminal illness.

For more information on SPICT4-All and Carers Identification please contact:

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A key aspect of this workshop was to group delegates and ask them to work together to discuss a number of questions.

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<tr>
<th><strong>How will you use the tool?</strong></th>
<th><strong>What do you plan to do next after this workshop?</strong></th>
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<tr>
<td>Identify expectations and plan forward</td>
<td>Promote access to support staff when carers need a question answered</td>
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<td>To provide a baseline for continued clear assessment &amp; reassessment</td>
<td>CHAT structure for carers to use when phoning for help</td>
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<td>Language used in the tool will help carers communicate with health professionals</td>
<td>Anxiety is high – how can we reduce?</td>
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<td>SPICT 4All can help carers feel more in control</td>
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<td></td>
<td>Useful tool for nursing/care homes to use when new members of staff to consider patient’s needs</td>
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<td>Energise the team and move forward</td>
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**What are the indicators?**

- 4 admissions to hospital in 12 months
- Lack of continuity - different hospitals
- “Carer” always with patient, not identified as such
- Wheelchair for 4 months
- Dichotomy – diagnosis increase in weight gain, decrease in muscle
- Wife – despite ongoing support never identified as “carer”
- Never entered into palliative care discussion despite deteriorating health
- Description of state of health, variable within hours
- Discussion with “carer” behind closed doors
- Medical professionals did not join up dots (did not need tools)
- Stats available, relate to over 65yrs
- Diagnosis (late in day) – superb support thereafter
- Lack of support with patient and carer - lead to potential crisis (financial, social, marriage)
- Life on hold
- “normalisation” should be everyday practice avoids crisis, use familiar language in conversation
- Carers often ignore own health issues, following transition they are no longer “carer”
- Carers assessment should be formalised, employability issues, peer support

**Key messages and points identified**

- Knowing what to do next after you have the information
- Conversation around diagnosis should be normalised despite tools in place, symptoms not identified
- Peer support is imperative
- Education
- Communication – needs to be early and meaningful
- Language

**Challenges barriers identifying carers**

- They don’t see themselves as carers – wording has been changed to “person you are looking after”.
- There is a drive to encourage patients to attend appointments with a supporter and acknowledging the potential of sharing the burden of information.
- The caring role is very gradual process.
For more information on identification tools please follow the link to view the Identification Tools comparator: