



# ORGANIZING YOUR PRACTICE TO SUPPORT FAMILY CAREGIVERS

A Toolkit for Doctors

# Organizing Your Practice to Support Family Caregivers

## Step One - Identifying Caregivers

Within each practice, there may be a number of opportunities to identify family caregivers (referred to as “caregivers” from this point forward). The activity of identifying caregivers is not solely the responsibility of physicians.

Rather, all practice team members, including medical office assistants (MOA), can play key roles in identifying caregivers. Suggested actions for identifying caregivers include:

- For newly registered patients, include questions in new patient questionnaires such as “Do you look after a sick, disabled, or frail relative or friend without payment?” or “Is there a child or young person in the family who helps to provide care or support to another family member?”
- Ask a patient to identify any relatives or friends providing them with care or assistance.
- Put up posters, notices or leaflets (in English and/or other languages) in the reception or waiting area to invite caregivers to self-identify or patients to identify their caregivers.
- MOAs can make note of who requests repeat prescriptions, appointments, and/or home visits for chronically ill or disabled patients.
- MOAs can make note of who brings the patient to medical appointments and inquire into their caregiving responsibilities (if any).
- Make note of who is present during a home visit and ask if they are caregivers.
- Record caregivers in complex planning documents.
- Ensure that you know who is the Temporary Substitute Decision Maker (TSDM) or healthcare representative for the patient as it may not be the caregiver.
- Maintain a registry of identified caregivers.

It is important to note that some caregivers do not regard themselves as caregivers, or may dislike the label “caregiver,” believing that it can detract from their identity as a parent, child, partner, sibling, or friend to the person that they care for. It is also important to not confuse caregivers with paid health care workers.



### ABOUT THIS TOOLKIT:

This Toolkit is a supplementary resource produced as a part of a Doctors of BC Policy paper titled “Circle of Care: Supporting Family Caregivers in BC”.

## Step Two - Involving Caregivers in Patient Care

Caregivers often have valuable knowledge about the people they care for that can be very useful in the planning and implementation of patient care plans. However, physicians involving caregivers in patient care must do so in a manner that respects a patient's right to privacy. Moreover, physicians may be placed in a position of navigating disagreements between caregiver and patient. A number of suggested practices to facilitate information sharing between patient and caregiver are below:

- Talk to patients about issues surrounding information sharing and seek permission to give caregivers appropriate information about the patient's care and treatment.
- If caregiver is the TSDM, you can take the opportunity to encourage patient and caregiver to discuss future medical decisions in order to prepare them for such eventualities.
- During patient care planning, where possible ask caregivers about any problems they may be experiencing and ask for their input on best course of action to support patient.
- If a patient is reluctant to share information with their caregivers, discuss with patient the possible consequences of his or her decision, particularly if a caregiver is a TSDM.
- If a patient does not want to share any information with caregivers, ensure that caregivers are at least provided with general information on relevant health conditions, treatments, and/or medications.
- Make note of information sharing agreements in patient notes so that other members of the practice team are made aware of them.
- Ask caregivers to provide feedback on any difficulties encountered once a new care plan has been implemented.
- Facilitate group visits where physician can meet with patient and caregivers at the same time to discuss common issues, such as advance care planning.

## Step Three - Monitoring Health of Caregivers

Due to reasons such as the lack of time or the lack of attention to self-care, caregivers may neglect their own health. Moreover, many caregivers (particularly seniors) may suffer from their own physical or psychological conditions. Some suggested practical actions include:

- Ask caregivers about their physical and mental health and/or how much time they spend providing care.

- Consider using formal caregiver assessment tools, such as Zarit Burden Interview to assess caregiver burden. This can be administered by clinical or non-clinical staff and completed by caregivers themselves. Assessments should occur periodically, particularly when there is a change in health condition; or when the patient is transitioning to a new care setting.
- Consider screening caregivers annually for depression.
- Provide flexible appointment times for caregivers.
- Invite caregivers for annual flu vaccinations.
- If appropriate, and if the caregiver is not your patient, consider seeking permission from caregiver to share information with the caregiver's primary health care provider.

## Step Four - Provide Information and Support to Caregivers

Once a caregiver has been identified and assessed, a physician will be in a better position to provide appropriate information and supports to caregivers. Some suggested practical actions include:

- Encourage caregivers to access community resources and apply for financial benefits if eligible - provide them with a copy of the tear-off sheet Doctors of BC has supplied.
- Encourage caregivers to maintain a social life aside from caregiving.
- Suggest caregivers/patients plan ahead for a time when caregiver is unable to provide care or assistance to patient.

### FOR MORE INFORMATION:

For more information on supporting family caregivers, and access to resources mentioned in this toolkit, please refer to the full policy paper on our website - [doctorsofbc.ca](http://doctorsofbc.ca).