



CLAHRCBITE

Brokering Innovation Through Evidence

May 2019

Use of the Carer Support Needs Assessment Tool (CSNAT) intervention to support carers at hospital discharge



The National Institute for Health Research Collaboration for Leadership in Applied Health Research and Care (NIHR CLAHRC) Greater Manchester is a partnership between providers and commissioners from the NHS, industry, the third sector and the University of Manchester.

We aim to improve the health of people in Greater Manchester and beyond through carrying out research and putting it into practice.

What is the CSNAT intervention?

The CSNAT intervention has been developed, validated and implemented in practice as part of a programme of research on carer assessment and support led by Professor Gunn Grande at the University of Manchester and Dr Gail Ewing at the University of Cambridge. The intervention comprises two components: (1) an evidence based, comprehensive tool for assessment of the support needs of family members/friends who are in a caregiving role for someone with a life limiting illness and (2).

The five stage person-centred process is the CSNAT Approach. So you have:

The CSNAT tool + the CSNAT Approach which = the CSNAT intervention.

The process is led by the health care professional rather than by the carer.

What did we do?

A further stage of the programme of work of the CSNAT research team which we supported. We examined the feasibility of using the CSNAT intervention in a hospital setting to support carers at discharge.

A hospital palliative care team, and a community nursing team, used the CSNAT intervention to assess and support carers before and after hospital discharge. We provided training and support to these teams to help them implement the CSNAT intervention as part of their routine practice. We used qualitative methods to explore the teams' experiences of using the intervention in practice.

Why was it important?

The majority of people wish to die in their usual place of residence. Discharge of patients from hospital at end-of-life relies heavily on family carers' ability and willingness to help care for the patient. However, carers often feel uninvolved and unsupported in the discharge process, and palliative care patients are often re-

admitted to hospital following discharge because of a breakdown in carer support at home.

The CSNAT has been shown to help carers,



but so far it has been used mainly within hospice care and community settings. We want to examine the feasibility of using The CSNAT intervention to support carers before and after hospital discharge. This will enable us to identify factors that support successful implementation and also implementation challenges in this setting.

Who did we work with?

[Manchester University NHS Foundation Trust](#)
[University of Manchester](#)
[University of Cambridge](#)

What next?

The hospital and the community teams intend to continue to work with the CSNAT intervention for a second phase. It is anticipated that the CSNAT intervention will continue to be used between the two clinical teams to support carers around hospital discharge, but it will also be implemented separately in the hospital and community settings.

Findings for this project can be found on the CLAHRC website including an interim report.

For more information on the CSNAT Approach, please visit <http://csnat.org/>

What is NIHR CLAHRC GM?

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Find out more

www.clahrc-gm.nihr.ac.uk/projects/csnat-discharge

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