

Workforce Development Pathway 5 – Consumer Workers and Carer Workers

A recovery-oriented service values lived experience and focuses on recruiting and supporting Consumer Workers and Carer Workers.



What will you get out of this section?

- ✓ An understanding of the value of employing Consumer Workers and Carer Workers
- ✓ An understanding of remuneration and reimbursement guidelines
- ✓ An understanding of and appreciation for the specific contribution and value Consumer Workers and Carer Workers bring to an organisation
- ✓ The specific needs for Consumer Workers and Carer Workers
- ✓ Clear job descriptions for each of the job roles

From a recovery perspective the impact the hope of others can have on an individual who has given up cannot be underestimated.¹⁰⁶ Hearing from people who have shared similar experiences and recovery journeys can facilitate recovery. From a staff development perspective, staff contact with consumers who have recovered from a mental health problem will help to reduce discrimination towards mental illness. **Consumer Workers and Carer Workers provide hope and a role-model of recovery in action to both those employed within the workforce, and those using the service.**¹⁰⁷ **All organisations can benefit from having Consumer Workers and Carer Workers.** The workforce, in partnership with consumers and carers, is at the heart of achieving a recovery-oriented service system.

As discussed throughout this guide, consumers and carers should be encouraged to participate in service planning, delivery and reform. Participation, however, is a separate process to promoting and maintaining identified consumer and carer positions within the community mental health workforce. To have a Consumer or Carer Worker does not necessarily mean you have consumer and carer participation. Whilst it is acknowledged that there may be a great many Mental Health Support Workers with the lived experience of a mental health problem or Mental Health Support Workers in a caring role who choose to not disclose, this chapter is about an organisational commitment to build an identified consumer and carer workforce.

Just as it is acknowledged that consumers and carers are distinct groups with unique needs, they will also form different workforces which will bring a range of benefits to the community mental health sector and service users.

Following discussion on remuneration and reimbursement, this chapter will be divided into two sections: 1) Consumer Workers, 2) Carer Workers.

It provides options for managers/organisations in building consumer and carer workforces. This can mean incorporating paid roles into the workforce, or establishing a 'pool' of appropriate and diverse consumers and carers who the organisation can connect with on an 'as needs basis'.

Remuneration and reimbursement

The information below is provided to allow managers to realise that it is possible to have Consumer and Carer Workers who are contracted for a specific project, committee or area of work, just as it is possible to have them as part of the paid staff. In fact, creating a 'bank' of Consumer and Carer Workers who cover a range of backgrounds and experience can be very valuable, and allows organisations to draw on the most appropriate people for particular tasks/work. The key for employers 'contracting' Consumer and Carer Workers is to provide adequate remuneration, or reimbursement at the very least, for their expertise and contribution.

There are several reasons for remuneration/reimbursement:¹⁰⁸

- It shows that the organisation values that person's skills and lived experience
- It prevents exclusion of consumer and carer representatives who would otherwise be unable to be involved due to financial constraints
- It improves motivation to do good, consistent work
- It addresses power imbalances and places consumers and carers on an 'equal footing' to all other staff
- It enables consumers and carers to participate in research and evaluation

The National Consumer and Carer Forum in its document "Consumer and Carer Participation Policy – A Framework for the Mental Health Sector"¹⁰⁹ has a set of 'best practice principles' for consumer participation, which include a principle on remuneration, as follows:

4. Principles for employment of consumer and carer representatives.

Consumers and carers will be remunerated for representative duties.

Unless otherwise agreed by consumers and carers, they will receive payment for their representative participation and reimbursement of expenses (e.g. travel and meals) incurred during their recognised active participation in externally organised mental health activities and processes that affect their lives. Consumers and carers should not be required to bear the costs of participation and representation expenses.

Reimbursement for such engagement will be negotiated between consumers and carers and the organisation on a paid or volunteer, part-time or full-time basis. It is important that all conditions regarding payment and expenses for representation be established upfront.

In the absence of established rates of pay, remuneration should follow the rates and conditions for holders of part-time public office set by the Australian Government Remuneration Tribunal, the independent statutory authority established under the Remuneration Tribunal Act 1973 (CWTH). Should funding be insufficient to meet these costs, rates for consumer and carer participation should be negotiated with their organisation, or in the case of independent consumer or carer consultants with the individual concerned.

Remuneration should also take into account the amount of time it may take to prepare for a meeting. This preparation time is often extensive, particularly when considering the amount of paperwork and material expected to be read prior to high-level meetings. There is often minimal recognition of such preparation time for consumers and carers, which may often involve taking time out of their daily business or using outside-work hours to prepare.' (NCCF. 2004).

The Australian Government Remuneration Tribunal outlines remuneration for part-time public office positions and in the absence of existing standards or organisational policies for rates of pay for consumer and carer participation, this is generally accepted as best practice for remuneration for consumer and carer participation (as per the Mental Health Council of Australia guidelines). This recognises that consumers and carers have an expertise and valued knowledge, as do any other 'experts' that may be involved in council, committees or consultation. [www.remtribunal.gov.au]

Consumer Workers

This section is about supporting the development of an **identified, paid consumer workforce**. If one of our guiding practices is to deliver consumer-centred services and respond to consumer's changing needs, then **the acquired expertise from people who are living with a mental health problem is an invaluable asset to our workforce. It deserves to be recognised, nurtured and cultivated**. This knowledge and skill, hard won, will provide a truly inclusive and vibrant component of the mental health workforce.¹¹⁰

Some key points about the importance of language

The term 'consumer' is used to refer to anyone who uses, or has used a mental health service - a person with lived experience of a mental health problem. This is the preferred terminology in the Australian Mental Health Consumer Movement.¹¹¹ The term 'consumer' captures the rights and expectations of the individual and the need for regulations and standards to ensure that this group is not misrepresented. It is a personal choice for an individual to use the term 'consumer'. The term 'consumer' can show an individual's commitment to help others through their own lived experience of a mental health problem and a personal commitment to their own recovery. It is up to the individual to choose if/when they cease to identify as a consumer. If a person with the lived experience of a mental health problem does not want to be referred to as a consumer, then the service provider can consult with them as to the preferred language, e.g. client, member, service user, survivor. Preferred terminology is person first language, i.e. the person is placed first, rather than any other characteristics or attributes relating to illness or disability.

From a consumer perspective, the phrase 'case management' also carries negative connotations and is in conflict with the principles and intent of recovery. It suggests a patronising and patriarchal approach. In recovery, consumers are in the 'driver's seat' - consumers are not 'cases' and they do not need 'managing'. Care/service coordination, support and key workers are all preferred terminology in this instance. Language always needs to be sensitive to the individual person.

Who is the consumer workforce?

Some paid consumer roles include:

- Peer support worker
- Independent consumer advocate
- Independent consumer representative
- Consumer trainer/assessor
- Mentor

The consumer workforce may also include volunteers.

It is important that roles and position titles reflect the job being undertaken. Thus, rather than adopting a role to a title, the title should be given based on the roles and responsibilities of the worker. It is imperative that prior to the assigning of a title, a position description and selection criteria be developed. This includes core competencies and guidelines which clearly set out day-to-day tasks and responsibilities. This also applies to Carer Workers.

There is a broad interpretation of what each of these consumer roles mean and a need for clarification of vocational roles. There is no 'one size fits all' approach to job descriptions and related qualifications. However, the essential and desirable criteria outlined are core components of any Consumer Worker's position description, and will ensure that the Consumer Worker is able to undertake their specific role with integrity. This applies equally to Carer Worker roles.

As with recruitment strategies for all staff, some flexibility may be required with job descriptions provided if the organisation is looking to access a broad 'pool' of Consumer/Carer Workers who represent the population, e.g. oral/written communication may not be appropriate as an essential criteria for someone from a non-English speaking/CALD/ATSI background.

What is reasonable adjustment?

From a consumer perspective, it is derogatory to assume that a Consumer Worker, by virtue of the fact that they have the lived experience of a mental health problem, will need special considerations in the workplace, for example, extra supervision. Reasonable adjustment is a provision in the Disability Discrimination Act¹¹² which applies to people with disability, their associates and carers. Whilst accommodations for a physical disability are clear, and perhaps more 'tangible' than for a mental health problem, the same principles of reasonable adjustment apply for Consumer Workers. Consumer Workers have the same legal right to reasonable adjustment as any person with a disability, and the same accountability to expectations placed by the organisation on all other employees. It is the responsibility of the manager to ensure reasonable expectations and responsibilities are implemented for Consumer Workers. All organisational policies, such as staff privacy and confidentiality, apply to Consumer Workers also, no more and no less than any other employee.

Reasonable adjustment is about flexibility which is mutually agreed between employer and the Consumer Worker in accordance with both legislative requirements and workplace policy/procedure. *Flexible and supportive workplace practices should apply to all staff.* It should be made known to all staff how the organisation can support them if they are experiencing difficulties within their job, for example, staff who identify as consumers can request support be provided by an external support person, in addition to that provided by their line manager. If choice is power, then to be able to plan and negotiate reasonable adjustment options not only enhances recovery but effectively ensures the organisation is able to continue to provide the service it is funded for and provide a supportive environment for all staff.

Consumer Workers, as with all staff, need to be provided with adequate, ongoing, specialist training and support to undertake their job role. This ensures they are not set up in a position where they are likely to fail. The same applies for Carer Workers. It is unethical and irresponsible to expect workers to conduct their roles if inadequately trained, and there are a number of courses available for Peer Support Workers and Consumer Advocates.

Managers may wish to review the organisation's current Code of Conduct/Practice policies to ensure Consumer Workers are able to uphold this with full integrity. For example, many Consumer Workers have friends who may be accessing the service (as indeed may Carer workers and Mental Health Support Workers). Whilst they should not be expected to give up their friendships because they become employed within the organisation as a Consumer Worker, relationships of any description between consumers who access the organisation's service and Consumer Workers require careful consideration to ensure there is not a misuse or abuse of 'power' within the relationship.

Possible reasonable adjustment can include, but not limited to:

- Job restructuring - reduced responsibilities/modified duties within the position for the period only in which the Consumer Worker needs this type of support
- Part-time or modified work schedules - flexible work hours, which ensures the Consumer Worker undertakes the overall weekly hours they are employed to work
- Leave, which could include leave without pay, for a specified period
- Modified workplace policies
- Job reassignment
- Access to external support and/or supervision from experienced Consumer Workers

Whilst managers have a responsibility to provide duty of care to all staff, they are not in the role of health practitioner providing a clinical response if/when a worker becomes unwell. Management need to clearly understand their focus is that of the 'employer' of the Consumer Worker. To facilitate a clinical role towards Consumer Workers might also interfere with the privacy and confidentiality of the Consumer Worker.

‘How can I best meet your needs?’

The key question for managers to ask any staff disclosing they have a mental health problem is, **‘How can I best meet your needs?’** This can extend to asking if the individual intends to inform any other staff of his/her mental health issues, and how to make adjustments to the workplace so that they can fulfil the core requirements of the job. There is no reason for managers to know the details of diagnosis or medications unless the individual chooses to disclose this information. In a consumer designated or peer identified role, self-disclosure as a person living with a mental health problem is automatic, but disclosure of mental health problems in mental health/support/clerical or other worker role is at the full discretion of the individual. An open door policy with staff will allow individuals to provide information at their own pace.

Managers need to be flexible and responsive to all staff’s needs. **The behaviour and attitudes of an organisation’s management is known to ‘flow’ down to all levels of staff and influence the culture of the organisation.** For example, management that provides mentoring and support promotes the transfer of this approach and sensitivity to all staff in their interactions with each other. Education and promotion of non-discriminatory practice does demonstrate sensitivity but it needs to be seen and maintained as part of an organisation’s culture in order to retain Consumer Workers. For example, whilst there are many reasons why Consumer Workers resign, it can be the case that they resign if they become unwell rather than be seen to let down the team/organisation, and managers need to be sensitive to the rationale behind their resignation. This may include considering the reason for the resignation, providing unpaid leave, or reducing duties to avoid losing competent and worthwhile staff. Knowing staff well and looking for signs that staff may be finding it difficult to fulfil the core requirements of the job will also help staff retention.

Affirmative action

Managers may consider affirmative action policies to promote the inclusion of Consumer Workers or workers who happen to identify as consumers, and further developing the consumer workforce. **A person with the relevant experience and qualifications is given priority for the advertised position if, in addition, they have the lived experience of a mental health problem.** This lived experience alone is not sufficient to successfully perform a job role; it is something they bring to the role. The core abilities and training required for the position are the same for anybody in a Mental Health Support Worker role.

Committing to responsive and compassionate management

The nature of mental illness is such that there may be times when Consumer Workers become unwell. If management adopts a responsive approach to the well-being of employees then they can accommodate and manage episodes of unwellness in the consumer workforce, just as they would if any staff member experienced a time of specific health or social need. Clear guidelines (i.e. policies and procedures) must be in place to know when and how to respond to a worker who appears to becoming unwell - functionality at work being the key. This can be done in advance in collaboration with staff, but ultimately the manager needs to assert authority when it becomes clear that the worker’s capacity to work safely and effectively is at risk.

Importantly, managers need to work with other staff in educating them on mental health issues in the workplace, including respecting boundaries, changes in behaviour, conflict of interest, how the organisation will cope with prolonged absences, complaints mechanisms, and non-discriminatory practices. This will help break down any preconceived ideas about staff that identify as consumers, for example, looking at any behaviour as symptomatic of their mental health problem(s). Some managers reported that staff ‘read into’ any behaviour change (e.g. irritability, tiredness, sadness) as a ‘sign’ that the staff person who has disclosed a mental health problem is becoming unwell. As with any member of staff, behaviour changes may or may not indicate a mental health problem, and it is the managers’ role to educate staff on mental health issues and well-being in the workplace. Staff within the organisation need to receive training about consumer designated roles.

Job descriptions

The following job descriptions are for paid Consumer Worker roles, although the same roles can occur in a casual or consulting capacity, with the appropriate remuneration.

Peer Support Worker:

Essential criteria

- Lived experience of a mental health problem
- An approachable and non-judgemental manner and attitude
- Genuine commitment to supporting people with mental health issues or problems
- Demonstrated knowledge of recovery and recovery pathways
- Demonstrated knowledge of the core precepts, principles and philosophies of the Australian Mental Health Consumer Movement
- Practical experience of working with consumers
- Ability and willingness to develop relationships with and network across community and mental health organisations, the wider health and disability sector, carers and families
- Excellent communication and active listening skills
- Demonstrated capacity to relate with dignity and respect, and as a unique person rather than as a 'person with a mental health problem'
- Proven commitment to the principles and practice of EEO, Ethical Conduct, Cultural Competence, etc.
- Good organisational and administration skills
- Commitment to ongoing professional development
- Good computer skills

Desirable criteria

- Relevant Peer Support Worker qualifications and experience (Note - there are no nationally recognised qualifications at this time)
- Ability to respect and relate to a range of people from CALD backgrounds, including ATSI communities
- Understanding of a human rights focus
- Practical knowledge of local services
- Current drivers licence
- Knowledge of relevant legislation
- Ability to critically reflect on one's own practice and performance

Peer Support Worker Job Description Example 1:

- Work collaboratively with consumers accessing the organisation's services
- Provide practical support to consumers
- Provide peer support, relevant information and referral as required
- Liaise with consumers, community organisation and health workers at all levels
- Inform, encourage and support consumers to access other services provided by the organisation
- Provide written reports as required
- Participate in all practice supervision sessions as determined by the line manager
- Refer all consumer advocacy issues to relevant advocacy organisations and supports
- Uphold the consumers' rights focus at all times

- Identify own ongoing education and training needs and participate on a regular basis in any education and training opportunities provided
- Conform to organisation's policies and procedures and any reasonable directions from management

Consumer Advocate

The goal of advocacy is the 'empowering of people to formulate, voice and achieve individual needs and wants'.¹¹³ Consumer Advocates have had a very positive influence on staff attitudes in many services when they are treated as an integral part of the team and their recommendations to enhance service quality are listened to and acted upon.¹¹⁴

One approach to advocacy is for the Board to employ an independent Consumer Advocate who then reports directly to the Board, avoiding any issues that may arise due to conflict of interest. The Board will need to be accessible and available to give support to the Consumer Advocate.

Essential criteria

- Personal experience of mental health problem
- Communicate effectively orally and/or in writing
- Commitment to work with mental health service providers, community organisations and the wider disability sector
- Demonstrated knowledge of human rights
- Understanding of consumers' rights and responsibilities
- Active listening skills
- Demonstrated capacity to be empathetic
- Proven commitment to the principles and practice of EEO, Ethical Conduct, Cultural Competence, etc.

Desirable criteria

- Ability to respect and relate to a range of people from CALD backgrounds, including ATSI communities
- Consumer Advocacy course/training Certification(s)
- Ability to critically reflect on one's own practice and performance

Consumer Advocate Job Description Example 1:

- Train, support, educate and/or resource, i.e. enable consumers to speak on their own behalf (Self Advocacy)
- Advocate for policy reforms surrounding systemic issues of concern that have or may have an unwanted impact on consumers receiving or trying to receive a service (Systemic Advocacy)
- Provide Individual Consumer Advocacy to a consumer if and when they are unable to advocate on their own behalf, for whatever reason, when they give consent for you to do so
- Promote and uphold rights of consumers in the service, without fear or favour
- Refer consumers to a more appropriate service if circumstances requires a different form of advocacy or an advocate with more capacity to act
- Write timely reports whilst maintaining confidentiality at all times. Only share confidential information with media, staff, consumers, etc. with permission of management

Consumer Representative

This role involves a process of nomination/voting by the group of people to be represented, that is, it is an elected role.

Essential criteria

- Personal experience of mental health problem
- Capacity to attend and actively participate in regular committee meetings, forums and workshops
- Demonstrated knowledge & understanding of the core precepts, principles and philosophies of the Australian Mental Health Consumer Movement, including consumer participation and partnership
- Demonstrated knowledge and understanding of human rights and the rights and responsibilities of consumers accessing services
- Demonstrated written and/or verbal communication skills, e.g. record-keeping at committee meetings
- Ability to use negotiation skills when liaising with relevant parties, including consumers, other agencies and community services
- Ability to be empathetic, and provide appropriate support and information to consumers
- Proven commitment to the principles and practice of EEO, Ethical Conduct, Cultural Competence, etc.

Desirable criteria

- The ability to respect and relate to a range of people from different CALD backgrounds, including ATSI communities
- Relevant Consumer Representation training/course Certification(s)
- Basic computer skills
- Ability to critically reflect on one's own practice and performance

Consumer Representative Job Description Example 1:

To do the following¹¹⁵:

- Uphold the rights and interests of consumers, service users and potential service users
- Provide consumers' feedback and input to relevant committees
- Uphold the right of consumers to be heard at relevant committees and present their ideas, issues and concerns to be tabled and discussed
- Report the activities of the committee to consumers
- Ensure accountability to consumers
- Ensure the committee acknowledges consumer concerns
- Provide information about any relevant issues affecting consumers

Consumer Trainer/Assessor

Essential criteria

- Demonstrated understanding of working with mental health services, including the NGO sector
- Excellent oral and written communication skills
- Good computer skills
- Demonstrated knowledge/experience of recovery-oriented approaches to mental health work
- Demonstrated knowledge & understanding of the core precepts, principles & philosophies of the Australian Mental Health Consumer Movement
- Flexible work practices
- Certificate IV in Training & Assessment or Assessment & Workplace Training (in order to work for an RTO)

Desirable criteria

- Personal experience of mental health problem
- Current drivers license
- The ability to respect and relate to a range of people from different CALD backgrounds, including ATSI communities
- Community services training & assessment experience
- Ability to critically reflect on one's own practice and performance

Mentor

This is someone who the Consumer Worker can look to for guidance and inspiration to in a professional and personal capacity.

Essential criteria

- Personal experience of mental health problem
- Demonstrated capacity to be a mentor
- Practical experience of developing a trusting and mutual relationship with mentee
- Excellent communication and active listening skills
- Approachable and acceptable manner and attitude
- Demonstrated ability to support consumers to develop their talents and skills
- Commitment to recovery and peer support core precepts, principles and philosophies
- Ability to provide respectful, constructive and meaningful feedback to the mentee
- Ability to support the mentee to further develop positive work practices and systems
- Knowledge of the boundaries and limitations of the role as mentor, including confidentiality principles

Desirable criteria

- The ability to respect and relate to a range of people from different CALD backgrounds, including ATSI communities
- Demonstrated knowledge and practical implementation of the core precepts, principles and philosophies of the Australian Mental Health Consumer Movement
- Demonstrated knowledge of all relevant legislation, i.e. Privacy Act, Anti-Discrimination Act, Mental Health Act, etc.
- Ability to critically reflect on one's own practice and performance

Consumer Mentor Job description Example 1:

- Develop positive and mutual relations for the enhancement of self esteem mentoring and personal development
- Meet individually with person once a month (or as agreed)
- Be a sounding board for mentee's ideas, needs or concerns
- Develop a relationship built on trust and mutual respect
- Provide positive and non-judgemental feedback
- Support the mentee to develop creative solutions to issues and concerns that require to be addressed
- Support the mentee to develop an individual work plan which best meets the needs of their employed role



Workplace example - Consumer Activity Network (CAN) Mental Health Inc.

The Consumer Activity Network (Mental Health) Inc. is the only independent, fully consumer run organisation in NSW and is based at Brookvale, Northern Beaches Sydney. CAN (Mental Health) also manages and runs Pitane Recovery Centre, the first and only consumer run recovery centre in metropolitan Sydney.

The organisation provides peer support services and recovery activities for mental health consumers locally, state-wide and nationally. For example: Phone Connections, a national telephone peer support line for consumers across Australia; Hospital to Home which provides practical assistance and peer support to consumers within the first 28 days of discharge from 2 Sydney psychiatric inpatient units; hosting the NSW Mental Health Consumer of the Year Awards to acknowledge and celebrate the achievements of consumers and their contributions to Australian society.

CAN's vision is: "We CAN - We CARE - The Future is in Our Hands". Pitane's core philosophy is "Hopes and Dreams Can Come True." Both the vision and philosophy underpin all peer support services, recovery activities and special events hosted. The organisation encourages and enables consumers to get out there and have a go, with the core ethos being: "If you don't have a go, then how will you know?"

The core precepts, principles and philosophies of recovery, consumer participation and social inclusion provide the impetus which firmly places the organisation at the forefront of developing and implementing innovative consumer run services and recovery activities. The organisation's commitment to these core precepts strongly highlights mental health consumers can run their own show, make their own decisions, have full control over their lifestyles of choice, and utilise their many talents and skills to achieve their hopes and dreams.

Some of the organisation's activities hosted are:

- Women's Coffee Club at a local community café.
- Social activities, i.e. visiting art galleries, going to the movies, walks etc.
- Special luncheons with international consumer guests.
- Hosting conferences.
- Providing consumer advocacy training.
- Hosting Busting Out of the Welfare & Poverty Cycle Courses.
- Hosting Self Esteem courses, working with the media workshops etc.
- WRAP (Wellness Recovery Action Plan) Groups

The partnerships and linkages CAN (Mental Health) Inc. and Pitane Recovery Centre have fostered highlight that "Recovery is about action. Action is about Recovery".

Carer and Family Workers

This section is about supporting the development of a **paid carer workforce**. A carer, as defined for the purpose of this guide, is a person whose life is affected by virtue of a family or close relationship and caring role with a consumer, or person with a lived experience of a mental health problem.¹¹⁶ This role is generally unpaid and involves a significant level of support and sacrifice. There can be prolonged periods of emotional and physical strain at the same time as great personal and family growth, for example, families may be drawn closer together and provide each other with solace and support.

One of the guiding principles for Carer Workers in mental health is the close working relationship they have with consumers of the services, in addition to carers and families.

Perhaps the best way to view Carer Worker roles is as promoting 'family-inclusive practice'.

Whilst it is important to promote carer identified roles, feedback from managers and others is that it may not always be feasible or realistic to recruit people with lived experience of being a carer. Instead, it may be more appropriate and valuable to the sector, consumers, and carers, to seek Carer Workers who are able to demonstrate 'family-inclusive' approaches to support and care. This means involving family members and significant others from the individual's social environment to participate and engage in services, as well as support the individual's recovery journey.¹¹⁷ Together with the unique set of relationships between Carer Workers, consumers, carers and families, this family-inclusive approach is an invaluable asset to the workforce. The workforce, in partnership with consumers and carers, is at the heart of achieving a recovery-oriented service system.

Many carers of workforce age face difficulties in balancing work and care responsibilities. To assist carers who want to participate in the workforce they require¹¹⁸:

- Affordable, quality alternative care arrangements for older people and people with disabilities
- Carer friendly workplace policies to assist carers in balancing work and care responsibilities
- Affirmative action programs to assist carers to re-enter the workforce

The mutual benefits of having a balanced working relationship with employees who have caring responsibilities are¹¹⁸:

- The organisation attracts and retains qualified, committed staff
- There is lower absenteeism and sick leave
- Improved staff morale and performance
- Increased profitability
- Increased flexibility of staffing arrangements to meet the needs of consumers or the organisation
- The working carer is better able to juggle paid employment with unpaid caring, feels supported and knows their rights in the workplace
- Public image of the organisation as a supportive working environment is improved

Work can be a protective factor for well-being of Carer Workers - something that provides an important focus in their lives and 'time out' for them. The decision to maintain work is a personal decision for the Carer Worker, but one that can be very empowering and provide the carer with a professional identity. Support from management is an integral part of this process.¹¹⁹ Managers need to utilise the options that exist for Carer Workers so that they can meet the needs of carers who are looking for permanent, casual or contract work. Not all carers will be looking for full-time paid work, just as not all carers will want only casual work.

Some key points about the importance of language

The distinction between carer and family member needs to be understood, as it is important to recognise that there will be different relationships that exist within a family. Not all carers will identify themselves as such, and may see themselves more in a family role. Many carers would argue that caring is not a choice, but a situation they find themselves in, whereas other carers will identify strongly as carers by choice. Preferred terminology will need to be discussed with the organisation/service provider as part of the orientation to the services.

Who is the carer workforce?

The carer workforce is not as developed as the consumer workforce in terms of clear positions and roles. At this stage, the paid carer workforce consists of:

- Carer Advocate
- Carer Representative

Another role that has been proposed as a possible direction for the carer workforce is:

- Carer Support Worker

The focus in all Carer Worker roles is frequently around enhancing quality outcomes for consumers, as well as carer-focused activities. This is very important because at no time should a Carer Worker lose sight of consumer rights or lived experience. Consulting with consumers and family is important at all times - a hand-in-hand relationship. Family-inclusive practice (see text box at the end of this chapter) should be promoted across all job roles so that it becomes part of the culture of the organisation.

Carer Support Workers are in a unique position to liaise and build relationships with consumers, carers, family and service providers. As people with the personal experience of being in a caring role for someone with a mental health problem, they can assist promotion of positive family relations and keeping the family together. Consumer and carer's quality of life will reflect the quality of these relationships. **Carer Support Workers see the family as an important 'unit' and are in a position to support, educate and advocate for families from the early stages of mental health problems onwards.** This holistic approach to recovery goes beyond a mere focus on the consumer by incorporating the social context and relationships which support the consumer. This perspective is critical to the Carer Support Worker role. They are also in a position to 'link' carers and families to other services and support networks. This is where Carer Support Worker roles 'fit' within an organisation and how they can contribute in a unique way to recovery-oriented services. Carer Support Workers can provide 'hands-on' or frontline support to consumers, carers and their families. The workforce, in partnership with consumers and carers, is at the heart of achieving a recovery-oriented service system.

What are the specific needs for Carer Workers?

Usually employees are able to provide care and assistance outside normal working hours, except there will be times when they are required to provide more assistance and support - such is the nature of mental health problems¹²⁰. This is when carer responsibilities may impact the employee's work responsibilities and it is during these times that it becomes particularly important that community mental health organisations have created 'carer friendly' workplaces that offer flexible opportunities for workforce participation and re-entry into the workforce for carers. Clear, accessible policies and procedures need to be established which outline to all staff how the organisation can support them, if they are experiencing difficulties within their job.

What is reasonable adjustment?

Reasonable adjustment is about flexibility mutually agreed between employer and the Carer Worker in accordance with both legislative requirements and workplace policy/procedure. **Flexible and supportive workplace practices should apply to all staff.** It should be made known to all staff how the organisation can support them if they are experiencing difficulties within their job, for example, staff who identify as carers can request additional support be provided by an external support person to that provided by their line manager. If choice is power, then to be able to plan and negotiate reasonable adjustment options not only enhances recovery but effectively ensures the organisation is able to continue to provide the service it is funded for and create a supportive environment for all staff.

Carer Workers, as with all staff, need to be provided with adequate, ongoing, specialist training and support to undertake their job role. This ensures they are not set up in a position where they are likely to fail. It is unethical and irresponsible to expect workers to conduct their roles if inadequately trained and there are numerous courses available for carer identified roles.

'How can I best meet your needs?'

Similar to Consumer Workers, managers will achieve best results if they discuss flexible working arrangements and reasonable adjustment with Carer Workers. Carer Workers will be in the best position to advise managers of what they would find most helpful in order to be able to fulfil their core work responsibilities. This also enables Carer Workers to feel they have some control over their lives and autonomy over their workload. This is something that many carers feel they have lost during the course of their caring role, the nature of which is unique to each individual; cultural and family influences posing different demands on carers, particularly young carers.¹²¹ **A flexible approach to work practices will have the most benefit to both the employer and Carer Worker.**

All organisational policies apply to Carer Workers, no more and no less than any other employee.

Managers need to be aware of their responsibility and obligation to employees with caring responsibilities under **the Anti-Discrimination (Carers' Responsibilities) Act 2000 (NSW)**¹²². There are many practical strategies that can be used to assist employees balance their work and care responsibilities¹²³:

- Implement flexible work arrangements, such as Flexi-Time, part time work, job-sharing, flexible rostering, flexible start and finish time, and Time-In-Lieu
- Implement leave provisions such as paid family, personal or carers' leave, allow flexible use of recreation leave and offer unpaid leave for single days or block periods
- Job sharing
- Allow working from home on a temporary or long-term basis
- Inform supervisors of employees' entitlements and options, and encourage them to promote flexibility
- Provide information on community services that can assist carers and the person they support. This could be done through an identified contact person, a lunchtime seminar, staff newsletters and/or a bulletin board
- Arrange access to free or subsidised counselling services
- Ensure that carers have access to a telephone so that they can check that all is well at home

Affirmative action

The same principles for Consumer Workers apply here also. See page 50.

Committing to responsive and compassionate management

As with all staff, Carer Workers are expected to fulfil the core requirements of the job. When carer responsibilities affect employees' functionality at work, managers will need to carefully consider with staff members the most appropriate short and long term plans. This will ensure that the organisation is able to continue to provide the service it is funded for and create a supportive environment for all staff.

Job descriptions

The following job descriptions are for paid Carer Worker roles, although the same roles can occur in a casual or consulting capacity, with appropriate remuneration.

Carer Advocate

Essential criteria

- Understanding of, and ability to demonstrate 'family-inclusive practice'
- Knowledge of local mental health services in the area, or willingness to acquire such knowledge
- Communicate effectively orally and/or in writing
- Commitment to work with mental health service providers, community organisations the wider disability sector, consumers, carers and families
- Understanding of carers' rights and responsibilities
- Understanding of consumers' rights and responsibilities
- Active listening skills
- Demonstrated capacity to be empathetic
- Proven commitment to the principles and practice of EEO, Ethical Conduct, Cultural Competence, etc.

Desirable criteria

- Personal experience as a carer or family member of a person with a mental health issue(s) or mental health problem
- The ability to respect and relate to a range of people from different CALD backgrounds, including ATSI communities
- Carer Advocacy course/training Certification(s) (Note - there are currently no nationally recognised qualifications for this job role)
- Ability to critically reflect on one's own practice and performance

Carer Advocate Job Description Example 1

- Train, support, educate and/or resource, i.e. enable carers to speak up their own behalf (Self Advocacy)
- Advocate for policy reform surrounding systemic issues of concern that have or may have an unwanted impact on carers and consumers (Systemic Advocacy)
- Provide Individual Advocacy service to a carer if and when they are unable to advocate on their own behalf, for whatever reason, when they give consent for you to do so
- Promote and uphold rights of carers in the service, without fear or favour
- Refer carers to a more appropriate service if circumstances require a different form of advocacy or an advocate with more capacity to act
- Write timely reports whilst maintaining confidentiality at all times. Only share confidential information with media, staff, consumers, etc. with permission of management

Carer Representative

Essential criteria

- Understanding of, and ability to demonstrate 'family-inclusive practice'
- Ability to attend and participate in regular committee meetings, forums and workshops
- Strong interest in carer participation

- Demonstrated written and/or verbal communication skills, e.g. record-keeping at committee meetings
- Ability to use negotiation skills when liaising with relevant parties, including carers, consumers, other agencies and community services
- Ability to be empathetic, and provide appropriate support and information to carers
- Proven commitment to the principles and practice of EEO, Ethical Conduct, Cultural Competence, etc.
- Knowledge of carers' and consumers' rights and responsibilities

Desirable criteria

- Personal experience as a carer or family member of a person with a mental health issue(s) or mental health problem
- The ability to respect and relate to a range of people from different CALD backgrounds, including ATSI communities
- Relevant Carer Representation training/course Certification(s)
- Basic computer skills
- Ability to critically reflect on one's own practice and performance

Carer Representative Job Description Example 1

The Carer Representative can reasonably be expected to do the following:

- Uphold the rights and interests of carers, young carers, Carer Workers, and consumers;
- Provide carers' feedback and input to relevant committees;
- Uphold the right of carers to be heard at relevant committees and present their ideas, issues and concerns to be tabled and discussed;
- Ensure the committee acknowledges carer concerns;
- Report the activities of the committee to carers;
- Ensure accountability to carers; and,
- Provide information about any relevant issues affecting carers.

Carer Support Worker

The Carer Support Worker role is **not** a counselling role. As it is a relatively new type of role, Carer Support Workers may be required to spend some time orienting other staff to their role and how they are able to assist/support staff, consumers and carers. This will help to build trust and break down any barriers which may exist between staff, for example, staff may feel threatened by this new type of role.

Essential criteria

- Understanding of, and ability to demonstrate 'family-inclusive practice'
- An understanding of issues and concerns for carers of people who have mental health issues/access mental health services
- Knowledge of carer's and consumer's rights and responsibilities
- An approachable and non-judgemental manner and attitude
- Genuine commitment to supporting carers and families, and people with mental health problems
- Demonstrated knowledge of recovery, recovery pathways and respite services
- Practical experience of working with carers, consumers and families
- Ability and willingness to develop relationships with and network across community

and mental health organisations, the wider health and disability sector, consumers and families

- Proven commitment to the principles and practice of EEO, Ethical Conduct, Cultural Competence, etc.
- Excellent communication and active listening skills
- Good organisational and administration skills
- Commitment to professional development
- Good computer skills

Desirable criteria

- Personal lived experience as a carer/family member of a person with a mental health issue(s) or a mental health problem
- Relevant Carer Support Worker Certification(s)
- The ability to respect and relate to a range of people from different CALD backgrounds, including ATSI communities
- Practical knowledge of local services
- Current driving licence
- Ability to critically reflect on one's own practice and performance

Carer Support Worker Job Description Example 1

- Work collaboratively with carers, consumers and families accessing the organisation's services
- Provide practical support to carers and families
- Provide peer support, relevant information and referral as required
- Liaise with carers, consumers, community organisations and health workers at all levels
- Inform, encourage and support carers and families to access other services/respite provided by the organisation
- Participate in all practice supervision sessions as determined by the line manager
- Refer all carer advocacy issues to relevant advocacy organisations and support services
- Uphold carer and consumer rights at all times
- Identify own ongoing education and training needs, and participate on a regular basis in education and training opportunities provided
- Conform to organisation's policies and procedures and any reasonable directions from management
- Advocate on behalf of carers as required, e.g. accompany carers to talk to health staff to put forward their concerns, assisting carers to make a complaint about the service or the service the person they care for is receiving, providing information, providing support and understanding
- Maintain carer and consumer confidentiality at all times



Workplace example for Carer Advocate Role - Carer Assist - Well Ways Program

Carer Assist works in partnership with families and carers using the Well Ways mental illness education program. This program is owned by the Mental Illness Fellowship of Victoria and is used by Carer Assist under licence. Carer Assist has run 58 programs since June 2003, involving 568 participants from all over NSW.

It is a group based, peer-to-peer family education program which has two main objectives – the delivery of up-to-date information about mental illnesses, medication, the mental health system and carer support systems; and the provision of support for families, including guiding participants as they examine some of the complex emotional and practical issues in loving and caring for someone with a mental health problem, and the development of ongoing support mechanisms.

Research conducted affirms families of people with a mental health problem are more socially isolated than their peers. Well Ways attempts to decrease this isolation by utilising a peer-to-peer model of education delivery, complemented by the establishment of a well-informed social network. Community development and mentoring / peer principles are essential in guiding the structure of the program.

Well Ways is delivered by two trained facilitators who have undergone training and accreditation with the Mental Illness Fellowship of Victoria. The two facilitators may be carers, or a combination of a carer and a Carer Advocate. The program is conducted over a 12 month period in three phases. An initial engagement phase occurs, where potential participants are connected with Carer Assist and are assessed for their suitability for joining Well Ways. The second phase is the development phase, an intensive, structured eight session component which aims to increase participant's knowledge of mental illness, develop social networks, and develop problem solving skills. The third phase is a consolidation phase, which is designed to further develop skills in some important areas. A workshop is presented every two months on a particular topic and provides a formal structure for the group to stay connected. Groups are encouraged to remain in social contact between sessions to strengthen and create sustainable support networks. Leadership of the group is driven by carers who emerge from the process as natural leaders.

Carers who are identified as potential co-facilitators are also identified during this process and are offered training to become facilitators. To date, 12 carers have chosen to become co-facilitators in the program. Several support groups emerging from the Well Ways program have developed into sustainable and invaluable support groups, driven by proactive carers, servicing the community and expanding their initial membership.



**Workplace example -
Uniting Care Mental Health:
Family and Carer Mental Health Program – Family-Inclusive Practice**

The Family-Inclusive Practice Training is provided to workers working with consumers and/or their families and carers. The intended outcome of this training is to provide the foundations for support workers to work with families and carers of people with mental health problems, by raising awareness of family and carer needs, and provide education and the knowledge base to work with families and carers of people with mental health problems. The principles which underlay the family-inclusive practice training are: whole-of-family approach, holistic approach, Carer Life Course Framework and the Recovery Model. The assumption is that the relationship with the family and/or carer may influence the consumer's recovery journey and a positive relationship between consumer and family/carer will hopefully result in benefits for both consumer and their families and carers.

The training course is 4 hours and is designed to engage workers in collaborative learning relevant to their work practice.

Family-inclusive Practice training aims:

1. To educate workers about the role of families and carers of people with mental health problems and their needs.
2. Explore worker's attitudes, knowledge and experience in working with families and carers of people with mental health problems.
3. To provide knowledge and understanding of family-inclusive practice and the benefits of this approach to consumers and their families and carers.
4. To explore ways of integrating family-inclusive practice in the workplace by considering professional, departmental and organisational context.
5. To identify barriers to family-inclusive practice in the workplace and explore ways of addressing these.
6. To explore ways for support workers to transfer knowledge gained from the training into practice.
7. Provide an opportunity for support workers to critically reflect on their own practice in relation to working with families and carers of people with mental health problems.