

# Working with Carers, Family and Kin

A Guide for Healthcare Professionals



Identify and acknowledge the role of carers



Establish open lines of communication



Support understanding of confidentiality



Provide essential information

Funded by



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# Disclaimer

This guide is intended solely for informational purposes and does not provide professional advice or recommendations. The content of this guide has been developed in consultation with healthcare professionals and carers to offer accessible tools and resources that support healthcare professionals in their interactions with carers.

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<sup>1</sup> [https://www.mindaustralia.org.au/sites/default/files/publications/A\\_practical\\_guide\\_for\\_working\\_with\\_people\\_with\\_a\\_mental\\_illness.pdf](https://www.mindaustralia.org.au/sites/default/files/publications/A_practical_guide_for_working_with_people_with_a_mental_illness.pdf)

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# Carers, Family and Kin

‘Carers’ refers to family members, friends and kin, who provide *unpaid* care and support to their loved ones with disability, mental illness, chronic or terminal conditions, substance abuse, or are frail aged.<sup>ii</sup> The term carer will be used throughout the document to refer to any family member, friend or kin who has an unpaid caring role. It is estimated that 2.6 million, or one in eight, Australians are carers.

It doesn’t matter how many hours are spent each week providing support. Carers are people who invest time, energy and support, generally in an unpaid capacity. However, some may receive Centrelink benefits to enable them to continue in their caring role.

Carers may live with the person they are caring for, assisting with daily needs, or may visit the person regularly. The types of caring role could include:

- Continuous care (up to 24 hours support a day) or
- Intermittent roles that support a person with specific tasks (e.g. support for decision-making, attending health appointments etc).

Carers are often ‘hidden’ or do not see themselves as carers. For example, they may believe they are ‘merely doing what a family member should do’. They can become carers in many ways; suddenly, through a recent diagnosis or gradually, through the deterioration of a condition. Often, carers do not get a choice in whether they take on the caring responsibilities, as there simply is no alternative.

Children who become carers face particular difficulties in being recognised and having their needs met. Young people often become carers because a close family member in the household requires care. They are not able to leave the house and by default take on a caring role. The emotional and mental health needs of young carers are often overlooked by family members and healthcare professionals, in favour of the person who requires care. Young carers can be as young as primary school age, and usually don’t have the language and insight to express their own challenges and needs. In areas like mental illness, young carers sometimes choose not to identify their role, because of concerns that



the authorities will remove them from their families. For this reason, young mental health carers are probably the least visible of all carers.

In culturally diverse communities, responsibility for the provision of care may involve the entire community (for example, faith leaders), and may therefore involve additional challenges during the process of identifying who is a carer.<sup>iii</sup>

Carers can be a person's wife, husband, partner, son, daughter, parent, family member, neighbour, friend, child or children. They have unique expertise and knowledge of the situation and needs of the person they support. By recognising, valuing and acting on this knowledge, it's likely that health professionals will provide more timely and efficacious treatment for their patient.<sup>iv</sup>

## Working with carers

Carers can play an essential role in the treatment of the people they care for, and in the overwhelming majority of cases, they want to help.

They can provide valuable collateral information for healthcare professionals, and usually have expertise in recognising:

- early warning signs of change in a person's health
- which management strategies have worked in the past
- the impact of medication or treatment.<sup>v</sup>

Involving carers in planning and discharge discussions allows for a more holistic approach. Carers contribute valuable input regarding the person's preferences, routines, and specific care needs. Their involvement can facilitate a smoother transition during the discharge and planning processes as they often provide support and ongoing care for the person beyond clinical settings.

It can also be beneficial to the wellbeing of the carer to be included in the treatment process.<sup>vi</sup> The more valued and aware of what's going on, the more comfortable carers can be carrying out the crucial care they provide.

## Legal frameworks

Recognising the role carers play is an important aspect of healthcare provision. In Australia, there are several legislative frameworks to ensure the involvement of carers in healthcare settings.

The *Carers Recognition Act of 2010*<sup>vii</sup> serves as cornerstone legislation, emphasising the significance of acknowledging and supporting carers. It is intended to increase recognition and awareness of carers and to acknowledge the valuable contribution they make to society.

It includes “The Statement for Australia’s Carers”:

- 1 All carers should have the same rights, choices, and opportunities as other Australians regardless of age, race, sex, disability, sexuality, religious or political beliefs, Aboriginal or Torres Strait Islander heritage, cultural or linguistic differences, socioeconomic status or locality.
- 2 Children and young people who are carers should have the same rights as all children and young people and should be supported to reach their full potential.
- 3 The valuable social and economic contribution that carers make to society should be recognised and supported.
- 4 Carers should be supported to enjoy optimum health and social well-being and to participate in family, social and community life.
- 5 Carers should be acknowledged as individuals with their own needs within and beyond the caring role.
- 6 The relationship between carers and the persons for whom they care should be recognised and respected.
- 7 Carers should be considered as partners with other care providers in the provision of care, acknowledging the unique knowledge and experience of carers.
- 8 Carers should be treated with dignity and respect.
- 9 Carers should be supported to achieve greater economic wellbeing and sustainability and, where appropriate, should have opportunities to participate in employment and education.
- 10 Support for carers should be timely, responsive, appropriate and accessible.

Additionally, various other legislative frameworks, such as the National Safety and Quality Health Service (NSQHS) Standards<sup>viii</sup> and the Health Services Act 1991 (Qld)<sup>ix</sup>, provide guidelines to encourage the active engagement of carers. These legislative measures aim to foster collaboration between healthcare providers and carers, recognising carers’ unique expertise and knowledge of the person they are caring for.

There is a list of relevant laws and policies relating to the involvement of carers in the *References and further reading* section.

# Steps for including carers

This guide outlines four steps aimed at improving collaboration with carers. By following the steps below healthcare professionals can build strong partnerships with carers and improve the health outcomes for the carer and the person who requires care.

## Steps:

**1**

**Identify and acknowledge the role of carers**

**2**

**Establish open lines of communication**

**3**

**Support understanding of confidentiality**

**4**

**Provide essential information**

# 1.

## Identify carers and acknowledge their roles

The first step in effective collaboration is to identify and acknowledge the role of carers. By validating their expertise and understanding their unique perspective, healthcare professionals can foster a collaborative environment built on mutual respect and shared decision-making, resulting in better health outcomes for the people using the service.

### At first contact, or soon after:

- Ask the person you are treating to identify the important people in their life, and the nature of their involvement and relationship\*
- Seek permission to involve those people in their care
- Record the extent to which information can be shared with a carer
- Consider if there are any specific considerations and requirements associated with the carer's age (including children as carers), gender, indigenous status, culture, language, religion, sexual orientation, disability or any other defining characteristics
- Check the best way to contact the carer, e.g. email, phone, interpreter etc.

### When carers attend healthcare visits with the patient, it is a great opportunity to:

- ✓ Connect
- ✓ Acknowledge their role as a carer
- ✓ Provide information about their rights, relevant health conditions, and other relevant information for the carer's wellbeing, including contacts for any Carer Peer Workers
- ✓ Answer any questions they might have and check their understanding of the information provided
- ✓ Explain next steps in treating the person they care for.

Remember, a carer may not identify with the term “carer”, as they are often family members, friends, or kin. It is important to recognise the relationship they have with the consumer first (e.g. daughter, son, partner, friend, aunty, etc.) and aim to use the preferred term(s) relevant to each individual situation.



# 1 Identify and acknowledge the role of carers

## Resources and further reading

- Tips for including carers ..... → Sheet 1
- Conversation starters to identify carers ..... → Sheet 2
- Carers first contact tool: Question guide ..... → Sheet 3
- RACGP accredited professional development courses, via the phn Victorian-Tasmanian Alliance: Carer Awareness in General Practice  
Learn more: [vtphna.org.au/carers](http://vtphna.org.au/carers)



## 2.

## Establish open lines of communication

Establishing and maintaining open communication with carers is crucial for building trust and achieving a shared understanding of the needs of the person they care for. Regular communication can take place through in-person meetings, phone calls or digital platforms. It's important to recognise carers as partners who share responsibilities and possess valuable information that can contribute to the health and wellbeing of the person they care for.

Sustained and regular communication with carers allows for the sharing of insights, updates, and concerns, ensuring that everyone is informed and on the same page.

Open communication also entails respecting confidentiality, ensuring that all personal data is kept confidential and shared only with consent. Maintaining confidentiality is a critical aspect of building trust and protecting individuals' privacy. For more information on confidentiality please refer to Step 3. 'Support understanding of confidentiality'.



### Steps to establish open lines of communication with carers:

#### 1 Invite and Encourage Communication

Create an environment that welcomes and encourages carers to communicate their thoughts, concerns, and observations. Let them know that their input is valued and essential for providing quality care.

#### 2 Active Listening

Practice active listening when engaging with carers. Pay attention to their words, emotions and non-verbal cues. Demonstrate empathy and understanding, ensuring that carers feel heard and acknowledged.

#### 3 Discuss Confidentiality Boundaries

Engage in open discussions with carers about what information can and cannot be shared, emphasising the importance of respecting confidentiality. Address any concerns or questions they may have regarding privacy, including the carer's privacy.

#### 4 Negotiate Ongoing Contact

Discuss and agree upon the frequency and mode of ongoing contact between carers and healthcare professionals. Determine how updates, progress reports, and queries will be communicated, ensuring that all parties are comfortable with the agreed-upon arrangements.

#### 5 Identify Communication Channels

Identify and establish the preferred communication channels for carers, considering their preferences and accessibility. This may include options such as phone calls, text messages, emails, or face-to-face meetings. Flexibility in communication methods helps accommodate individual needs.

#### 6 Foster Open Communication

Strive to maintain open and transparent communication throughout the care process. Encourage carers to share their perspectives, ask questions, and provide feedback. Create a safe space for open dialogue, promoting collaboration and shared decision-making.

## Practical tips for communication

### 1 Active Listening

Practice active listening by giving your full attention to the carer. Make eye contact, avoid interrupting, and demonstrate empathy. Listening attentively creates a sense of trust and respect, encouraging carers to share their perspectives openly.

### 2 Ask Open Questions

Use open-ended questions that encourage carers to elaborate on their thoughts and experiences. Open-ended questions give people the chance to talk rather than give one-word answers. For example, you could ask “how are you?” rather than “are you ok?” This approach allows for a deeper understanding of the situation, helps to clarify information, and facilitates shared decision-making.

### 3 Summarise

Summarise the main points of the conversation to ensure that you’ve understood the carer’s perspective correctly. Summarising also helps to clarify information, confirm agreements, and demonstrate that you’re actively engaged in the conversation.

### 4 Use Language Carers Understand

Use simple and concise language that is appropriate to the individual’s needs and abilities. Avoid using jargon or acronyms that only make sense to people with specialist knowledge. Adapt your language to suit the carer’s communication style to foster clear and effective communication. This could also mean providing a translator or interpreter where required. In some cases, the role of carer will be taken on by children and adolescents.

### 5 Consider Different Communication Methods

Consider different communication methods based on the carer’s preferences and needs. For example, you may need to use easy or plain English or sign language to communicate effectively. Flexibility in communication methods helps accommodate individual needs.

### 6 Document Conversations

Keep accurate records of conversations, capturing important information, decisions, and action points. Documenting discussions helps maintain clarity, allows for future reference, and ensures that all parties are on the same page. Accurate documentation also helps to avoid misunderstandings and miscommunications.

## Resources and further reading

- Say this, not that:  
A guide to communicating with carers. ....
- OARS approach  
[https://rhntc.org/sites/default/files/resources/rhntc\\_oars\\_model\\_communication\\_skills\\_tpp\\_jobaid\\_4\\_11\\_2025.pdf](https://rhntc.org/sites/default/files/resources/rhntc_oars_model_communication_skills_tpp_jobaid_4_11_2025.pdf)
- Active Listening  
<https://www.verywellmind.com/what-is-active-listening-3024343>
- Open Questions  
<https://pdtraining.com.au/blog/effective-communication-course-2/effective-communication-skills-training-good-questions/>
- Simple language  
<https://www.healthliteracyplace.org.uk/toolkit/techniques/use-simple-language/>

→ Sheet 5





### 3.

## Support all parties' understanding of privacy and confidentiality

Openly communicating with carers and the people they care for about confidentiality and sharing of information is key to avoiding misunderstanding.

Though challenging, it is possible to strike a balance between respecting patient privacy and involving carers in the care process.

When a person provides general consent to share information with those involved in their treatment and care, consent does not need to be sought before every instance of information sharing.

When a person does not provide consent for information to be shared with their support network, it is still possible to share general information without breaching privacy or confidentiality. General information includes non-personal, factual information of the diagnosis or treatment, which builds on the carer's existing knowledge. It is still important to record that the information was discussed, with whom and when.

It is important to regularly check with the person who requires care whether they consent to information being shared or not, particularly with a mental health diagnosis, as people's mental state and their needs and situations change.

Carers have a legal right to be informed and receive information that supports them in their caregiving role. Healthcare professionals can engage with carers by actively listening to their concerns and providing general information about health conditions, treatment plans, medications, and available services.

### Communicating confidentiality, privacy, and consent with the person being cared for

In seeking consent, it is important for healthcare professionals to:

- Explain the purpose and benefits of sharing specific information
- Communicate using clear and concise language
- Assure the person being cared for that they can withdraw their consent at any time
- Ask for consent to include their carer in planning for their care
- Talk through any consequences of not sharing information. There may be some information the person is comfortable to share




- Summarise the shared understanding of what has been agreed to
- Document the agreed outcome of the discussion in the clinical record.

## Communicating confidentiality, privacy, and consent with carers

Ideally, the person being cared for has had the opportunity to discuss and consent to the information that they agree to share with carers. However, if consent has not been provided, for any reason, healthcare professionals can still listen to carers and provide them with general information.

Ask carers for feedback about any difficulties encountered with a new routine or health care plan.

### Resources and further reading

- The consent conversation .....  Sheet 6
- Sharing confidential information .....  Sheet 7
- Confidentiality flyer (for carers) .....  Sheet 8

## 4.

## Provide essential information

Carers often provide support and care when the person they care for returns home after healthcare visits. Giving carers essential information is crucial to their ability to provide appropriate support. Healthcare professionals can contribute to the successful transition home and ongoing health and wellbeing of the person receiving treatment by equipping carers with the knowledge they need to make well-informed decisions.

Carers are better able to support health outcomes if they have:

- Ongoing opportunities to ask questions, give feedback, and discuss concerns
- Information to support them in their caring role
- The opportunity to see a health clinician on their own
- Confidentiality in communication with and to a clinician
- Referrals to additional information and support, if necessary
- An assessment of their own needs and written care plan when required.<sup>2</sup>

It is important to recognise that a carer's own wellbeing and needs can change over time, which can have an impact on their role and the support they require. They may also have significant health problems of their own, and it is not uncommon for them to engage in "co-caring", a situation in which there is mutual support from the person they care for, or another family member. Caring roles can be complex and diverse, making it even more essential to ensure open and clear communication with carers.<sup>3</sup>

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<sup>2</sup>[http://www.chiefpsychiatrist.wa.gov.au/wp-content/uploads/2015/11/Carers\\_Guide\\_Information\\_Sharing.pdf](http://www.chiefpsychiatrist.wa.gov.au/wp-content/uploads/2015/11/Carers_Guide_Information_Sharing.pdf)

<sup>3</sup>[https://www.ranzcp.org/files/resources/college\\_statements/practice\\_guidelines/ppg-20-information-sharing.aspx](https://www.ranzcp.org/files/resources/college_statements/practice_guidelines/ppg-20-information-sharing.aspx)



## Here are some suggested questions to ask carers:

- What has happened since we last met?
- Have you had a chance to look at the information I left with you last time?
- Is there anything you don't understand or want to clarify?
- What effect has the medication/intervention/treatment had from your perspective?
- What would assist or support you and other family members or carers at the moment?

### Resources and further reading

- Carer resources .....



Sheet 9



# References and further reading

## Laws and Policies

- [Carer Recognition Act 2010](#)
- [Carers \(Recognition\) Act 2008 Queensland](#)
- [Hospital and Health Boards Act 2011](#)
- [Health Services Act Queensland](#)
- [National Safety and Quality Health Service Standards \(NSQHS\)](#)

## Privacy and Confidentiality

- [Privacy Act](#)
- [Information Privacy Act 2009 \(Queensland\)](#)
- [Australian Privacy Principles](#)
- [The Health Privacy Principles contained in Schedule 1 to the Health Records Act 2001](#)

## Mental Health

- [The Consumer, Carer and Family Participation Framework](#)
- [National Standards for Mental Health Services \(NSMHS\)](#)
- [Mental Health Act 2016 Queensland](#)

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<sup>i</sup> <https://www.families.qld.gov.au/our-work/carers/queensland-carers-advisory-council>

<sup>ii</sup> <https://www.carersaustralia.com.au/about-carers/who-is-a-carer/>

<sup>iii</sup> [https://www.mindaustralia.org.au/sites/default/files/publications/A\\_practical\\_guide\\_for\\_working\\_with\\_people\\_with\\_a\\_mental\\_illness.pdf](https://www.mindaustralia.org.au/sites/default/files/publications/A_practical_guide_for_working_with_people_with_a_mental_illness.pdf)

<sup>iv</sup> [https://www.ranzcp.org/files/resources/college\\_statements/practice\\_guidelines/ppg-20-information-sharing.aspx](https://www.ranzcp.org/files/resources/college_statements/practice_guidelines/ppg-20-information-sharing.aspx)

<sup>v</sup> [https://www.mindaustralia.org.au/sites/default/files/publications/A\\_practical\\_guide\\_for\\_working\\_with\\_people\\_with\\_a\\_mental\\_illness.pdf](https://www.mindaustralia.org.au/sites/default/files/publications/A_practical_guide_for_working_with_people_with_a_mental_illness.pdf)

<sup>vi</sup> [https://www.ranzcp.org/files/resources/college\\_statements/practice\\_guidelines/ppg-20-information-sharing.aspx](https://www.ranzcp.org/files/resources/college_statements/practice_guidelines/ppg-20-information-sharing.aspx)

<sup>vii</sup> <https://www.legislation.gov.au/Details/C2010A00123>

<sup>viii</sup> <https://www.safetyandquality.gov.au/standards/nsqhs-standards>

<sup>ix</sup> <https://www.legislation.qld.gov.au/view/pdf/inforce/2000-11-08/act-1991-024>

<sup>x</sup> <https://www.health.vic.gov.au/sites/default/files/migrated/files/collections/policies-and-guidelines/c/chief-psychiatrist-guideline-working-with-families-and-carers.pdf>

# Practical Templates and Resources

The final section of this guide provides a range of downloadable and printable templates and resources that you can use as they are, or modified to suit your business and needs.

## **You will find the following templates:**

1. Tips for including carers
2. Conversation starters to identify carers
3. Questions to ask carers
4. Your caring role (form)
5. Say this, not that: A guide to communicating with carers
6. The consent conversation (for the person who requires care)
7. Sharing confidential information
8. Confidentiality flyer (for carers)
9. Carer resources



# Tips for including carers

Carers play an important role throughout the healthcare journey. Even if carers are not physically present during healthcare visits, healthcare professionals can still gather valuable information about the carers involved in that person's life. During the initial visit with the person who requires care, healthcare professionals can enquire about the significant people in their life and any caregiving arrangements that support their health and wellbeing.

Early discussions about consent and seeking permission to include carers in the treatment and ongoing care are important, both for continuous care and in potential crisis situations. The individuals closest to the person who requires care are likely to possess valuable insights and information that can contribute to a more comprehensive and effective medical response.

It is important to revisit the topic of consent regularly since people's preferences may change over time. This can facilitate better collaboration and more personalised and responsive care.

## Initial Visit

- Identify carers
- Clarify their role
- Seek permission to involve them
- Record consent
- If consent not given, make a note to revisit later

## Ongoing Care

- Confirm carers, role, and consent preferences
- Update patient records to reflect their wishes
- Involve carers in developing and implementing care/treatment plans

## Consumer Crisis

- Ask carer about events leading up to the crisis
- Enquire about health and wellbeing of the carer
- Provide information to support carers

## Carer Crisis

- Provide information on supports and resources for wellbeing
- Discuss potential referrals

## Patient Referral

- Include carer details with referral



# Conversation starters to identify carers

These are example questions you could ask to help identify carers



## Who is in your life questions

- Who are the most important people in your life?
- Who worries about you the most?
- Who do you hang out with on weekends or during the week?



## Family members as carers

- Do you have any children?
- Does anyone in your family provide care for you?
- What do your family do?



## Help provided questions

- Do you rely on anyone to do things like shopping, banking or other tasks?



## Who would you go to for help if you needed it?

- Do you have any family or friends you would feel comfortable asking for help?
- Who do you rely on?
- Who would you go to help if you needed it?



## Who supports you?

- Who supports you when you need it?
- Who is your main support person now?
- Who were other support people in your past?
- What do they do to support you?
- Do you have anyone who provides care for you?
- Is there anyone in your life who you would call a carer?



→ Sheet 3

# Questions to ask carers

## Questions to explore the caring role:

- What sort of things do you do for the person you support?
- Do you feel able to continue to provide these supports?
- What concerns, if any, do you have about the person you support when they are on their own?
- How has your caring role affected your life, for example, work, finances, housing, emotions and relationships?

Ask open ended questions that help to identify the carer's role

## Questions to explore what the carer knows about the health and wellbeing of the person they care for

- What has the person you support told you about their condition/illness, treatment, medication?
- Do you have any questions about their condition/illnesses, treatment, medication etc?
- What would lead you to feel more informed to provide care for the person?



# Your caring role

This form helps us understand the support you provide and how we can better assist you and the person you care for.

**Name of the person you care for:**

**Your name:**

**What is the best way for us to contact you?** *(Provide details of phone, email address)*

**Do you need an interpreter?** ☐ Yes ☐ No

**Important things about me:**

**What do you do regularly for the person you support?** This may include shopping, cleaning, transport, paying bills and making appointments.

**What do you do occasionally when they need it?**

**How does your caring role impact on your life and relationships?** This could include emotional and financial impacts, including on your ability to work and sustain secure housing.

**What else would you like us to know about you and your caring role?**



# Say this, not that:

## A guide to communicating with carers



### Say this



What do you do to support "person's name"?



I'm not able to provide you with all the details, but I can let you know.....

or



Perhaps we could discuss that with [person's name]



What is it that you would like the care team to know?



### Not that



Are you a carer?



I don't have consent to speak with you/provide you with that information



I can't speak with you



You could ask them yourself





# The consent conversation (person requiring care)

The consent conversation should be an ongoing conversation.

1. Gain an understanding of what kinds of information the person is comfortable sharing with others
2. Factor in time to discuss consent and answer questions
3. Share information clearly, without jargon, in a way that a non-medical person can readily understand
4. Explain to consumers why giving consent can be helpful for them

## Conversation starters

"I noticed you have quite a lot of contact with (carer). They seem to care about you a lot. Would it be okay if I gave them an update on how you are going? We could all meet together so you can know everything that is being talked about."

"We've talked a lot about your health and what's next today, I'm wondering if you would like me to give (carer) an update. We could ring them now while you are here, or perhaps I could write down a few points for you to share with them."

"Are there parts of what we discussed today that you would like me to share with (carer)?"

"Let's quickly check your consent documents and see if there are any changes that you would like to make?"

"Do you have any concerns about me sharing what we discussed today with (your carer)?"

"What's the best way for us to get this information to (your carer), so they know what to change in the way they are supporting you?"



# Sharing confidential information

## Health Information

### Legislation and Rules

- Privacy Act
- Information Privacy Act
- Hospital and Health Board Act
- Mental Health Act 2016 (Qld)

### Health and Personal Information

Information about a person's:

- health or disability
- wishes for their future healthcare.

and

Personal Information:

- Name
- Address
- Signature
- Electronic records
- X-rays
- CT scans
- Videos
- Photos
- Audio recordings

## What can be shared



### Consent to share is given

- Information consented to by the patient.



### No consent is given

- General information about supporting the person, health conditions, treatment plans, medication and available services.
- Carer Support Resources.



### Special circumstances

- Information to support the caring role.



# Confidentiality flyer (for carers)

## Understanding confidentiality

Confidentiality refers to a person's right to prevent personal information from being disclosed to others without their express informed consent.

### What is personal information?

Personal information is information or an opinion that could identify a person. Examples of personal information collected by healthcare professionals include a person's name, address, contact details. All personal information collected during the provision of health services is considered health information under the Privacy Act 1988 .

Health Information is defined in schedule 5 of the Information Privacy Act 2009 (QLD) as:

- a) Personal information about the individual that includes any of the following -
  - I. The individual's health at any time;
  - II. A disability of the individual at any time;
  - III. The individual's expressed wishes about the future provision of health services to the individual
  - IV. A health service that has been provided, or that is to be provided, to the individual; or
- b) Personal information about the individual collected for the purpose of providing, or in providing, a health service; or
- c) Personal information about the individual collected in connection with the donation, or intended donation, by the individual of any of the individual's body parts, organs or body substances.

## No consent, what can you tell me?

General information can be shared even without consent from the person. It refers to non-personal, factual information that builds on the carer's existing knowledge. It is still important to record the information that was discussed, with whom and when.



# Carer resources

We recognise that you play an important caring role for someone using our service/clinic/practice. Here are some resources specifically for carers.

## Carer Services and Supports

<b>Arafmi</b> 24/7 support for mental health carers in Queensland	<a href="http://www.arafmi.com.au">www.arafmi.com.au</a>	1300 554 660
<b>Autism Connect</b> National autism helpline	<a href="http://www.autismwhatnext.com.au/autism-connect">www.autismwhatnext.com.au/autism-connect</a>	1300 308 699
<b>Butterfly Foundation</b> Support for eating disorders and body image issues	<a href="http://www.butterfly.org.au">www.butterfly.org.au</a>	1800 334 673
<b>Carer Gateway</b> Free carer support from the Australian Government	<a href="http://www.carergateway.gov.au">www.carergateway.gov.au</a>	1800 422 737
<b>Carers Queensland</b> Support for unpaid carers in Queensland	<a href="http://www.carersqld.com.au">www.carersqld.com.au</a>	1300 747 636
<b>Cancer Council Queensland</b> Support for those impacted by cancer	<a href="http://www.cancerqld.org.au">www.cancerqld.org.au</a>	13 11 20
<b>Culture Care</b> Support for carers from multicultural backgrounds	<a href="http://www.worldwellnessgroup.org.au/culture-care">www.worldwellnessgroup.org.au/culture-care</a>	1300 079 020
<b>Dementia Australia</b> National dementia helpline	<a href="http://www.dementia.org.au">www.dementia.org.au</a>	1800 100 500
<b>Eating Disorders Queensland</b> Support for recovery from eating disorders	<a href="http://www.eatingdisordersqueensland.org.au">www.eatingdisordersqueensland.org.au</a>	07 3844 6055
<b>Family Drug Support</b> Support for families of people who use substances	<a href="http://www.fds.org.au">www.fds.org.au</a>	1300 368 186
<b>Open Arms</b> Support for veterans and their families	<a href="http://www.openarms.gov.au">www.openarms.gov.au</a>	1800 011 046
<b>PalAssist</b> Support for people with life-limiting illnesses and their carers	<a href="http://www.palassist.org.au">www.palassist.org.au</a>	1800 772 273
<b>Roses in the Ocean</b> Lived-experience of suicide organisation	<a href="http://www.rosesintheocean.com.au">www.rosesintheocean.com.au</a>	1800 777 337
<b>13 YARN</b> 24/7 crisis support for Aboriginal and Torres Strait Islanders	<a href="http://www.13yarn.org.au">www.13yarn.org.au</a>	13 92 76
<b>Little Dreamers</b> Supporting young carers and their families	<a href="http://www.littledreamers.org.au">www.littledreamers.org.au</a>	1800 717 515
<b>Kookaburra Kids</b> Supporting young people impacted by family mental illness	<a href="http://www.kookaburrakids.org.au">www.kookaburrakids.org.au</a>	1300 566 525

## Funding and Support Options

<b>My Aged Care</b> Access to Australian aged care information and services	<a href="http://www.myagedcare.gov.au">www.myagedcare.gov.au</a>	1800 200 422
<b>NDIS</b> National Disability Insurance Scheme	<a href="http://www.ndis.gov.au">www.ndis.gov.au</a>	1800 800 110
<b>QCSS</b> Queensland Community Support Scheme	<a href="http://www.qld.gov.au/community/getting-support-health-social-issue/community-home-care-services/queensland-community-support-scheme">www.qld.gov.au/community/getting-support-health-social-issue/community-home-care-services/queensland-community-support-scheme</a>	1800 600 300

## Finances

<b>Centrelink</b> Carer Payment, Allowance and Supplement	<a href="http://www.servicesaustralia.gov.au/carers-payment">www.servicesaustralia.gov.au/carers-payment</a>	13 27 17
<b>Carer Business Discount Cards</b> Providing discounts on goods and services at participating businesses throughout Queensland	<a href="http://www.qld.gov.au/community/support-for-carers/carers-card/applying-carers-card">www.qld.gov.au/community/support-for-carers/carers-card/applying-carers-card</a>	13 74 68



## Legal, Rights and Advocacy

### Basic Rights Queensland

Free advice, advocacy and legal services

[www.brq.org.au](http://www.brq.org.au)

1800 358 511

### Elder Abuse

Elder abuse helpline

[www.eapu.com.au/elder-abuse-helpline](http://www.eapu.com.au/elder-abuse-helpline)

1300 651 192

### Independent Patient Rights Advisors

Advocates for patient rights and family/carer rights and supports communication with clinical teams

[www.health.qld.gov.au/public-health/topics/mhaod/for-healthcare-providers/treating-patients-under-the-mental-health-act/patient-rights/contact-an-independent-patient-rights-adviser](http://www.health.qld.gov.au/public-health/topics/mhaod/for-healthcare-providers/treating-patients-under-the-mental-health-act/patient-rights/contact-an-independent-patient-rights-adviser)

### Legal Aid

Legal assistance for financially disadvantaged Queenslanders

[www.legalaid.qld.gov.au](http://www.legalaid.qld.gov.au)

1300 651 188

### Law Right

Pro bono legal help

[www.lawright.org.au](http://www.lawright.org.au)

(07) 3187 4379

### Women's Legal Service Queensland

Women's statewide legal advice helpline

[www.wlsq.org.au](http://www.wlsq.org.au)

1800 957 957

## Housing

### Homeless Hotline

Support for people experiencing or at risk of homelessness

[www.qld.gov.au/housing/emergency-temporary-housing/homeless-persons-information-qld](http://www.qld.gov.au/housing/emergency-temporary-housing/homeless-persons-information-qld)

1800 474 753

### Q Shelter

Peak body working to influence solutions to housing need and homelessness

[www.qshelter.asn.au](http://www.qshelter.asn.au)

(07) 3831 5900

### HOWSS

Housing Older Women's Support Service

[www.howss.org.au](http://www.howss.org.au)

1800 366 877

## Child, Youth and Family

### Emerging Minds

Advancing Australian children's mental health

[www.emergingminds.com.au](http://www.emergingminds.com.au)

### Kids Helpline

Phone counselling service for children

[www.kidshelpline.com.au](http://www.kidshelpline.com.au)

1800 551 800

### MyTime

Supporting parents and carers of children with disability

[www.mytime.net.au](http://www.mytime.net.au)

### Play Matters

Supports children and families to build relationships, skills and confidence through play

[www.playmatters.org.au](http://www.playmatters.org.au)

1800 007 529

### Parentline

Free counselling and support for parents and carers

[www.parentline.com.au](http://www.parentline.com.au)

1300 301 300

### Reach Out

A safe place to chat anonymously, get support and feel better

[www.au.reachout.com](http://www.au.reachout.com)

### Raising Children Network

The Australian parenting website

[www.raisingchildren.net.au](http://www.raisingchildren.net.au)

## LGBTIQ+

### Q Life - LGBTIQ+

Anonymous and free LGBTIQ+ peer support and referral

[www qlife.org.au](http://www qlife.org.au)

1800 184 527

### Queensland Council for LGBTI Health

Support and advocacy for Queensland's LGBTI community

[www.qc.org.au](http://www.qc.org.au)

(07) 3017 1777

## Crisis Lines

### MH Call: Mental Health Access Line

24/7 confidential mental health telephone triage service

[www.qld.gov.au/health/mental-health-and-wellbeing/how-to-get-help/1300-mh-call](http://www.qld.gov.au/health/mental-health-and-wellbeing/how-to-get-help/1300-mh-call)

1300 642 255

### Lifeline

24/7 Crisis support and suicide prevention services

[www.lifeline.org.au](http://www.lifeline.org.au)

13 11 14

### Beyond Blue

24/7 Support for anxiety, depression and suicide prevention

[www.beyondblue.org.au](http://www.beyondblue.org.au)

1300 224 636

## Contact Us

PO Box 248  
New Farm QLD 4005  
07 3254 1881  
[info@arafmi.com.au](mailto:info@arafmi.com.au)  
[arafmi.com.au](http://arafmi.com.au)

