IMPLEMENTING THE CARERS (SCOTLAND) ACT 2016

Purpose of Report:

The purpose of this paper is to update the IJB on the Adult and Young Carer Strategies consultation process, provide a summary of the responses to the consultation, outline how the issues raised will be addressed and to propose further spend in services to support carers.

Background/Engagement:

The Carers (Scotland) Act 2016 came into force on 1st April 2018 and places additional duties on Integration Joint Boards.

Carers and young carers have been fully engaged and involved in the development of Glasgow Adult and Young Carer Strategies. The Carer Reference Group (CRG) have representation on the Carers Operational Group, city wide operational group and officers attend the CRG meeting.

Quarterly engagement sessions are organised to engage with a wider group of carers across the city.

Young carer engagement has been facilitated through the Young Carer Strategy Group.

Recommendations:

The Integration Joint Board is asked to:

a) note the feedback from the consultation and how this will be actioned;
b) approve the proposals for further investment of funding in services to support carers.
Relevance to Integration Joint Board Strategic Plan:

| Reference to National Health & Wellbeing Outcome: | Directly contributes to early intervention and prevention approach to supporting carers, shifting the balance of care outlined in the strategic plan and to secure better outcomes for every child in Glasgow, with a targeted approach for those most in need. |

Implications for Health and Social Care Partnership:

| Reference to National Health & Wellbeing Outcome: | Outcome 6. People who provide unpaid care are supported to look after their own health and wellbeing including to reduce the negative impact of their caring role on their own health and well-being.  
Outcome 9. Resources are used effectively and efficiently in the provision of health and social care services |

| Personnel: | Contained within this paper are proposals to fund 6 Family Support Workers to support young carers within 3rd sector carer services and 1 Band 3 Health Care Liaison nurse in South Carer Team. |

| Carers: | Adult and Young Carers will directly benefit from the recommendations of this report. |

| Provider Organisations: | Contained within this paper are proposals to invest funding to recruit staff to 3rd sector carer organisations. |

| Equalities: | An EQIA was completed. [https://glasgowcity.hscp.scot/publication/eqia-carers-strategies](https://glasgowcity.hscp.scot/publication/eqia-carers-strategies) |

| Fairer Scotland Compliance: | Unpaid carers are more likely to experience inequality of outcomes. Carers are a third more likely to be in poor health than non-carers. Implementation of the Carers Act will contribute to addressing inequality of outcome and health experienced by carers. |

| Financial: | Contained within this paper are proposals to invest funding of £1,456,000. |

| Legal: | The content of this paper contributes to implementation of the Carers (Scotland) Act 2016 and the additional duties placed on Integration Joint Boards. |

| Economic Impact: | None |

| Sustainability: | Carer Act Financial Framework has been set out for the next 4 years by the Scottish Government. |
## Purpose

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## Background

2.1 The Carer (Scotland) Act 2016 places a duty on each local authority and health board to prepare and consult on carer strategies in relation to adult and young carers.

2.2 The consultation was conducted by GCHSCP between January and March 2019 and summary of the consultation responses is available on https://www.yoursupportglasgow.org/glasgow-homepage/pages/are-you-an-unpaid-carer/consultations/.

2.3 A wide range of stakeholders have been consulted including HSCP health and social work staff, carers and partners from education, housing and key voluntary condition specific organisations.

2.4 The consultation methods included online surveys and face to face sessions with adults and young carers.
3. **Adult Carer Strategy Consultation Summary of Key Issues**

3.1 Feedback on the Adult Carer strategy itself was overwhelmingly positive during face to face engagement sessions.

3.2 Notwithstanding, some carers highlighted that they may be struggling to manage their caring role and looking for a more responsive and understanding response in crisis situations.

3.3 The HSCP Carer Act Learning and Development Plan should help address this issue as operational staff will become more aware of the challenges carers face as well as learning about the supports available to carers.

3.4 Carer services in Glasgow continue to deliver the bulk of preventative supports to carers with a role in reducing the risk of crisis situations occurring.

3.5 Parent carers highlighted the challenges of having a long term caring role and requested consideration be given to emotional support needs of carers, especially in times of transition. Carer Services have also highlighted the capacity challenges of supporting carers with significant caring roles.

3.6 In response to these issues, the intention would be to undertake a review of how the emotional support core service is delivered by Glasgow City Carer Partnership and develop opportunities to improve this core support.

3.7 A frequent theme that emerged during the consultation was the need to improve communication with carers. Some carers highlighted that they didn’t know enough about the impact of the carer strategies and the valuable work that was being done across the city. As a result of this feedback, the intention is to review opportunities to make the performance monitoring reports easier to read and make these more widely accessible for carers including further carer consultation events.

3.8 Some carers expressed that the language in the strategy was ‘too corporate’ and where possible the strategy has been amended in response to this feedback. The intention is to work with carers and managers to produce some easy read information regarding the carer strategies and make these accessible online.

3.9 Some carers highlighted their frustration at having to repeat their stories, particularly during hospital admission and discharge. As such, carer services will continue to promote emergency planning within the Adult Carer Support Plans, promote Anticipatory Care Plans and ensure these are recorded in GP’s Key Information Summaries.

3.10 NHSGGC have a duty to involve carers in discharge planning and GCHSCP has been working in partnership with acute colleagues to improve staff awareness of carers and ensure processes are in place to fully involve and support carers through discharge planning. This work is likely to increase referral rates for carer support and further justifies the investment to strengthen capacity for preventative support within Carer Services.
3.11 Feedback from health and social care staff highlighted many good examples of supporting carers jointly in the care planning for the service user. Carefirst 6 is currently unable to report this joint support and demonstrate compliance with the carer’s legislation. Work is already underway to address this reporting issue and improve GCHSCP’s ability to demonstrate support provided to carers.

3.12 GCHSCP workers were not fully aware of the amount of services and supports already being provided to carers and wanted to know more about what was available. The HSCP Carer Act Learning and Development Plan will help address this issue as should improve communication with operational staff about available supports for carers.

3.13 It is recognised that many of the GCHSCP workforce, and women employees in particular, will have caring responsibilities and have to balance work with their caring role. The most recent representation of carer numbers in Scotland, the Scottish Health Survey (SHeS), estimates that around 17% of the adult (16+) population has caring responsibilities. If this percentage figure was applied to the HSCP workforce of 11,850 (10,058 WTE) this would equate to approximately 2,014 (1,709) carers working across the HSCP.

3.14 SHeS further estimates that 59% of carers are woman and 41% are men. This would therefore equate to an estimated carer population amongst the HSCP workforce of 1,189 (1,008) female and 825 (701) male carers.

3.15 The HSCP Carer Act Learning and Development Plan will promote Carer Positive workforce policy to support unpaid carers. The service available to carers in Glasgow and recommendations within this paper should support all employees to balance work and their caring role.

4. Young Carers

4.1 Face to face feedback and survey results highlighted overwhelming support for the Young Carer Strategy.

4.2 There was particularly strong support for alleviating the caring role as per this quote below:

‘One childhood one chance, young carers should receive a break and appropriate support from demanding and stressful responsibilities at home to provide a safe, nurturing environment where children can develop their full potential’.

4.3 There was also strong support for a family based approach to supporting young carers:

‘The first visit should include the family, it lets workers see what is going on in the house’.
4.4 Online feedback from former young carers identified concerns around the potential stigma of labelling children with a caring role as young carers:

‘I don’t like the labelling of young people as 'young carers' they are young people first and foremost. They are taken from friends etc. in school to attend support groups for 'young carers'.'

4.5 In response, the Young Carer Strategic group have agreed that young carer worker title be replaced with Family Support Worker with the intention of reducing stigma.

4.6 Training will also be required to support carer services workers to further develop inclusive models of practice. It would also be the intention to develop links with mainstream youth services to create opportunities for children with a caring role to engage with their peers including peer mentoring.

4.7 Young carers highlighted that they didn’t think the Carers Information Line was the best way to help them self-identify or access support, preferring the use of social media. As such the Young Carer Strategy Group will review opportunities to safely use social media to share information, communicate with and in turn identify increasing number of Young Carers.

4.8 Significant work has taken place within Education Services to attempt to increase Young Carer referrals. That work is having an impact on awareness of the impact of caring roles, increasing numbers of young carers being identified from Education Services and also making the school environment more supportive for children with a caring role.

5. Equality Impact Assessment

5.1 The Adult and Young Carer Strategies have been subject to an EQIA. This was completed with the assistance of a 3rd sector organisation Minority Ethnic Carers of Older People.

5.2 The EQIA highlighted that strategies are unlikely to have any detrimental impact on any group of carers with protected characteristics. In order to monitor the uptake of carers with protected characteristics, the intention is to revise and update the Carer Performance Monitoring and Annual Report.

5.3 It is intended to offer carer specific cultural competence training to all Glasgow Carer Partnership staff, including 3rd sector.

6. Proposed Investment 19/20 - Community Support Project

6.1 An additional £428,000 investment in community based services to support older carers and service users in line with shifting the balance of care is proposed.

6.2 The Community Support Project is a directly provided resource in North East Glasgow which is not available in the other localities and the intention of this proposed investment is to replicate the service in North West and South.
6.3 The Project’s main objective is to assist older people to remain living in their own home by offering a range of supports to meet the individual’s needs and support carers at a point of crisis, complemented by HSCP home care services where required.

6.4 This service will provide emergency response in situations where the person cared for is at immediate risk of being admitted to a care home placement. Additionally in line with the assessment at home ethos, the service will provide the opportunity for supported discharge from intermediate care or hospital acute and/or Older People Mental Health (OPMH).

6.5 While it is proposed that this service should be available in each locality, there are opportunities for efficiencies in terms of management structure through a city wide manager to oversee the planning and delivery of the service.

6.6 This investment of £428,000 will provide each locality with 120 hours direct support per week.

7. **Investment in New Family Support Models**

7.1 In the context of increasing demand in older people’s services, diminishing resources and a range other factors, an investment of £467,000 is being proposed to allow the HSCP to consider opportunities to increasingly shift the balance of care to support more older people at home maximising support for unpaid carers. Carer breakdown is a key factor in admissions to long term care from community or through hospital discharge.

7.2 Overall research confirms that unpaid carers are the main provider of help to older people in the community. Essentially these are made up of older people caring for partners and spouses and adult children caring for parent/s which highlights the kinship nature of caring.

7.3 Spouses are the fastest growing group of informal care providers and over half of older carers are providing 35+ hours of care a week.

7.4 It is often difficult to identify in older couples who is the carer and who is the cared for given more multiple conditions, including age-related conditions themselves and these are often more mutual caring relationships with two people caring for each other.

7.5 Also they are less inclined to identify as carers given these spousal relationships and be accepting of support. Without support they will reach crisis point and struggle to carry on in the caring role resulting in admission to care.

7.6 It is also estimated that 50% of those caring for older people are mostly adult children of working age or retired with the majority being women though not exclusively.
7.7 The HSCP is actively engaged in an exercise to look at demand on older people’s services seeking to shift to a model of early intervention and prevention through a carer/family support model and to consider opportunities around shared care and kinship carer models of care.

7.8 There are 3 key areas which provide real opportunities to drive this agenda forward with additional investment.

7.9 The Glasgow Carer Strategy’s contribution to shifting the balance of care through support the individuals/families in their caring role at critical times to prevent or delay admission to care by long term care, underpinned by early intervention and preventative approach to preventing crisis in care. The Carer Act financial provisions will provide resources to provide targeted personalised supports to sustain the caring role and improve carer health and well-being.

7.10 The older people’s system of care, neighbourhoods, integrated service planning and delivery and the required shift in health and social care practice to deliver better outcomes for older people and their families and carers.

7.11 Further developments within older people commissioning in respect of the increased availability of telecare, responders service and new models of supported living both housing based and core and cluster.

7.12 As part of the wider Older People and Adults plan to shift the balance of care there will be broad engagement with service users, carers, third sector and other stakeholders on the development of the new models.

8. Proposed Investment 19/20 3rd Sector Family Support Workers

8.1 In order to strengthen capacity to deliver on young carer statements, an additional investment for 3rd sector Carer Centres of £210,000 is being proposed to fund 6 Family Support Workers to support families and alleviate any inappropriate caring roles being undertaken by children.

8.2 This will be in addition to the £1,663,000 annual investment in 3rd sector following the carer support services tender. The contract to deliver the Carer Support Services is for 3 years 2019-2022.

9. Proposed Investment to Increase Anticipatory Care Plans

9.1 Glasgow HSCP currently funds two band 3 Health Care Liaison Workers. This paper seeks to fund an additional band 3 Health Care Liaison Workers Post costing £26,000. This additional investment will increase the number of carer health reviews being completed and increase the number of Anticipatory Care Plans being offered to carers or the person they care for.
10. **Proposed Investment in Carers Act Development Budget**

10.1 In June 2018 the IJB agreed a development budget of £15,000 to be managed by new Principal Officer Carer Strategy. This proposal seeks approval to increase this budget by £25,000 to cover costs of print runs of Adult Carer Information booklets and Young Carer Statement materials, 3rd sector databases and to facilitate the Carer Act Learning and Development Plan.

11. **Proposed Short Breaks Investment**

11.1 The investment proposals in this paper will lead to increased demand on carer services and budgets. A £300,000 budget is required for carer short breaks. The additional budget should be equally split across children and family, adult and older people teams giving each sector an annual budget of £100,000.

11.2 Funds could be provided as Self Directed Payments to carers. The additional short break spend would be used to respond to crisis situations and support carers to continue caring in the community for as long as they are willing and able to do so.

11.3 In keeping with the Carer Act, carers will be offered 4 Self Directed Support options in respect of short breaks and give Direct Payments through new pre-payment card. This additional short break spend would be used to respond to crisis situations and support carers to continue caring in the community for as long as they are willing and able to do so.

12. **2019/20 Funding Summary**

12.1 A summary of the proposals to be funded is detailed below. An allocation for the cost of the IT and equipment is included in the funding request for the posts.

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<th>Funding 2019/20</th>
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<tr>
<td>Community Support Project</td>
<td>£428,000</td>
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<tr>
<td>Investment in New Family Support Model</td>
<td>£467,000</td>
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<td>Family support workers 3rd sector</td>
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<td>Band 3 Health Liaison worker</td>
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<td>Development funding</td>
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<td>Carer Short Breaks</td>
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<td><strong>Total</strong></td>
<td><strong>£1,456,000</strong></td>
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13. **Recommendations**

13.1 The Integration Joint Board is asked to:

a) note the feedback from the consultation and how this will be actioned; and
b) approve the proposals for further investment of funding in services to support Glasgow’s carers.
DIRECTION FROM THE GLASGOW CITY INTEGRATION JOINT BOARD

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