



Report To: Inverclyde Integration Joint Date: 12 September 2017

**Board** 

Report By: Louise Long Report No: IJB/35/2017/JA

Corporate Director (Chief Officer) Inverclyde Health & Social Care

Partnership (HSCP)

Contact Officer: Joyce Allan Contact No: 01475 715283

**Acting Head of Health and** 

**Community Care** 

Subject: Implementation of Carers (Scotland) Act 2016

## 1.0 PURPOSE

1.1 The purpose of this report is to update the Integration Joint Board on the progress the HSCP is making towards implementing the Carers (Scotland) Act 2016.

## 2.0 SUMMARY

2.1 This paper provides a brief summary of actions that are currently or soon to be live that will work to ensure an effective implementation of the Carers (Scotland) Act 2016.

## 3.0 RECOMMENDATIONS

- 3.1 That the Integration Joint Board notes the content of the report and the progress by partners across Inverciyed to bring about of the successful implementation of the Act.
- 3.2 That the Integration Joint Board advises the Chief Officer to bring a progress report relating to readiness of the implementation of the Carers (Scotland) Act 2016 in April 2018.

Louise Long Corporate Director, (Chief Officer) Inverclyde Health and Social Care Partnership

### 4.0 BACKGROUND

4.1 This report highlights the readiness of the Health and Social Care Partnership for the implementation of the Carers (Scotland) Act 2016 in April 2018.

## 4.2 Readiness for Implementation

Inverclyde HSCP, along with Inverclyde Carers Centre, has undertaken a desktop exercise to ascertain the readiness of the Partnership and outline the work that needs to be done in advance of 1st April 2018. This exercise has highlighted that, whilst the HSCP is in a good position in many areas, there are still key aspects that require attention.

## 4.3 Local Eligibility Criteria

Local eligibility criteria must be developed in consultation with carer organisations and carers and must be published by 31 March 2018. The criteria must include both the information and indicators to be used to assess need and the locally-defined threshold at which a carer would be deemed eligible for support.

The Scottish Government has advised that they will publish early draft guidance on eligibility criteria and related matters in order to help inform the process.

The HSCP is in a good position in this area as the current Outcome Focused Eligibility Criteria is used to prioritise carers' services on need and the risk to carer wellbeing, including breakdown of the caring relationship. This can be potentially reframed to include local carers' eligibility criteria for the purposes of the Act.

The HSCP in consultation with Carers and Young Carers will draft eligibility criteria to be developed by December and for wider consultation in the weeks thereafter.

### 4.4 Adult Carer Support Plans

The Act sets out the requirement to provide an Adult Carer Support Plan (ACSP) for informal carers when requested to do so. The Scottish Government is looking to provide guidance around how personal outcomes and needs for support are to be identified.

There is existing draft guidance around what should be included in an ACSP. It includes information on the impact of caring on wellbeing and day-to-day life, and the adult carer has arrangements in place for the provision of care in an emergency; the arrangements the adult carer has in place for the future care of the cared-for person; and the carer is, or wishes to be, in employment or education.

The adult carer must be provided with a copy of the ACSP and a date when the plan will be reviewed must be agreed.

Assessment and care management processes include outcome based support planning for all adult carers irrespective of level of need. There is a current Carers Assessment, including a self-assessment process that can be adapted to take into account the provisions of the Act. It will be a requirement to ensure paperwork and practice meets the needs before the implementation of the Act in April 2018.

## 4.5 Young Carers

The Act provides for the offering of a Young Carer Statement (YCS) by the responsible authority and the requesting by an individual young carer of a YCS. There are now therefore two ways in which a child or young person can access a YCS.

A YCS must be prepared, even if the young carer is not deemed eligible for support.

Recent practice in Inverclyde was for a locally developed Young Carers Assessment to be undertaken by the young carer and the Young Carers Worker. This practice has now changed and a Wellbeing Assessment will be undertaken. There is a process of benchmarking being undertaken with other local authorities who are developing Young Carers Statements. It is anticipated that the Inverclyde model will develop over the forthcoming weeks in response to this and the process of integration with the Child's Plan.

The YCS will contain information about the extent to which the Local Authority considers that the nature and extent of the care provided by the young carer are appropriate. It will identify where the needs of the young carer are more complex or when their caring responsibilities are inappropriate, for example, when the young carer is very young, has excessive caring responsibilities or is the carer for someone who is terminally ill. Such cases will be allocated to a Social Worker.

Barnardos and the Young Carers Worker from the HSCP run weekly evening groups for young carers when such a service is indicated following the completion of the YCS. There is a group for those aged 8 to 12 years and a group for those aged 12 to 18 years.

The Carers Centre has recently started a transition group for young carers over 16 years of age. There are well established links between the Young Carers Worker, Barnardos and the Carers Centre.

## 4.6 Duty to provide support to carers

This section provides for a duty on the responsible local authority to support carers who have eligible needs. There is also a power to support carers to meet needs which do not meet the eligibility criteria.

A carer's needs for support must be assessed within the framework of the ACSP/YCS scheme. The Act defines eligible needs for support as those which cannot be met through the provision of services available generally and/or by information and advice services, and/or by services provided to the cared-for person (with the exception of replacement care). As referred to, the local authority must also deem eligible needs according to local eligibility criteria.

Where a carer is deemed eligible for support, this may take the form of a personal budget and offer of self-directed support options.

Currently carers in Inverclyde receive support if eligible as part of the supported persons care plan; there is a requirement to change processes and paperwork in line with the ASCP and Young Carers Statement to ensure compliance with the Act.

The current prioritisation process needs to be re-visited and reframed in line with the proposed carers eligibility criteria.

#### 4.7 Information and advice service

Inverclyde Carers Centre was established in 2001, it is a user led organisation whose Directors are drawn from existing membership which is open to all carers or former carers.

Inverciyde Carers Centre provides information, advice and support to unpaid carers aged 16 and over, who look after relatives or friends or who could not manage alone due to illness, disability, addiction or frailty.

The Centre provides advice across a range of social media and dedicated website as well as a drop-in service at the Centre Office in Greenock. The Carers Centre provides carer outreach services at Inverclyde Royal Hospital, Health Centres, public places and community bases. These services are welcomed by partners within a health setting and carers who have provided positive feedback on the support they have received.

The Centre leads on the Equal Partners in Care programme in Inverclyde.

The Centre also provides access to short breaks including a sitter service to carers.

The Centre worked alongside the HSCP to design and introduce the Carers Self-Assessment Tool which has been successfully operating in Inverciyde for several years.

This service meets the requirement to offer all carers support and advice including those who may not meet any local eligibility criteria or do not wish to access statutory services.

## 4.8 Local Carers and Young Carers Strategy

Each local authority and relevant health board must jointly prepare a local carer strategy. It must contain, amongst other things, plans for identifying relevant carers and plans for helping relevant carers put arrangements in place for the provision of care in emergencies.

Inverciyde launched a Carers and Young Carers Strategy in June 2017 as part of the national carers week. This is a partnership document and draws upon extensive consultation with carers and young carers to identify the key priorities and action.

The Strategy was drafted with the provisions of the Act in mind and means that Inverclyde is fully compliant with this aspect of the Act in advance of the implementation date. The Strategy will inform how Inverclyde implements the provisions of the Carers Act.

#### 4.9 Provision of short breaks statement

Inverclyde HSCP along with its Strategic Partner, Inverclyde Carers Centre, offers a range of short breaks including sitter service, domiciliary respite, short breaks and respite in a care home setting.

We also have an in-house Short Breaks Bureau which coordinates bookings as well as supports carers to devise bespoke short breaks, acting as a broker that meets their outcomes.

The Carers (Scotland) Act 2016 has renewed emphasis on offering short breaks to informal carers. Inverclyde has had a Short Breaks Strategy since 2013 and a timely review of this will ensure it meets the requirements of the Act with the publication of a revised short breaks statement in December 2017.

#### 4.10 Financial Framework

Inverclyde HSCP has been allocated £34,000 by the Scottish Government to support the work that is required to be done in preparation for the Act's commencement over the coming year.

The Scottish Government has identified keys area where the funding can support the implementation of the Act:

Communications and engagement with practitioners and with adult and young

carers about the Act's provisions and what it means for carers;

- preparation of model Adult Carer Support Plans and Young Carer Statements;
- preparation for establishing and maintaining the information and advice services for carers;
- preparing the short breaks services statements under section 35;
- preparation of local eligibility criteria, including consultation arrangements;
- Work with the third sector and within the statutory sector on local practitioner awareness-raising and training.

The intention is to appoint a Carers Act Implementation Officer to coordinate the implementation process and take forward issues raised in this report and support the key areas identified by the Scottish Government.

COSLA is continuing discussions with the Scottish Government around the proposed Financial Memorandum which will accompany the proposed regulations. A finance group has been established to profile demand and unit costs of assessment and support for carers. Once this work is completed, it will inform discussions around the spending review and settlement covering the period when the Act will be enacted which will be from April 2018 onwards.

### 5.0 PROPOSALS

5.1 The content of this report is mainly for noting, and to ensure that IJB Members are informed about the business of the HSCP.

To appoint a Carers Act Implementation Officer, initially for 6 months, to support the HSCP to become ready for the implementation of the Act in April 2018.

#### 6.0 IMPLICATIONS

#### Finance:

6.1 The additional costs outlined within the report are fully funded by one off additional in year funds

## Financial Implications:

#### One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
N/A					

## Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From (If Applicable)	Other Comments
N/A					

## Legal:

6.2 The Carers (Scotland) Act 2016 imposes new duties and powers upon the local authority, the HSCP and Health Boards.

#### **Human Resources:**

6.3 There are no human resources implications in respect of this report at this time.

## **Equalities:**

6.4 Has an Equality Impact Assessment been carried out?

	YES (see attached appendix)
<b>√</b>	NO - This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or Strategy. Therefore, no Equality Impact Assessment is required □

## 6.4.1 How does this report address our Equality Outcomes?

a) People, including individuals from the protected characteristic groups, can access HSCP services.

The Carers Act is inclusive of people with protected characteristics, and also has elements within it to ensure the HSCP takes an equalities-sensitive approach to practise.

b) Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.

Not applicable.

c) People with protected characteristics feel safe within their communities.

Not applicable.

d) People with protected characteristics feel included in the planning and developing of services.

The Inverciyde Carers Strategy includes an equalities-sensitive approach to including all groups in the planning and development of services.

e) HSCP staff understand the needs of people with different protected characteristics and promote diversity in the work that they do.

Services to Carers and Young Carers are inclusive of people with protected characteristics, and also have elements within them to ensure that services and practitioners take an equalities-sensitive approach to practise.

f) Opportunities to support Learning Disability service users experiencing gender based violence are maximised.

Not directly applicable, although the general equalities dimensions of carers' support services will relate to this client group as well.

g) Positive attitudes towards the resettled refugee community in Inverciyde are promoted.

Not applicable.

## **CLINICAL OR CARE GOVERNANCE IMPLICATIONS**

6.5 There are no clinical or care governance issues within this report.

#### 6.6 NATIONAL WELLBEING OUTCOMES

How does this report support delivery of the National Wellbeing Outcomes?

a) People are able to look after and improve their own health and wellbeing and live in good health for longer.

Carer and Young Carer services are committed to ensuring high-quality services that support individuals and maximise independence.

b) People, including those with disabilities or long term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.

Implementation of the Carers Act will ensure high-quality services that support individuals and maximise independence.

c) People who use health and social care services have positive experiences of those services, and have their dignity respected.

The Carers Act implementation is an essential element to ensuring high-quality services that support individuals and maximise independence. These principles are important in ensuring that dignity and self-determination are respected and promoted.

d) Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.

The Carers Act implementation is an essential element to ensuring carers and young carers maintain a quality of life that supports their caring role in a way that they wish to be supported.

e) Health and social care services contribute to reducing health inequalities.

The equalities-sensitive nature of the Carers Act supports the outcome of reducing health inequalities.

f) People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.

The Carers Act imposes a duty on the HSCP and partners promote the health and wellbeing of informal carers.

g) People using health and social care services are safe from harm.

The HSCP has as its priority to safeguard all service users including Carers and Young carers.

h) People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.

Staff are part of a programme of ongoing training and awareness based on the Equal Partners in Care programme.

## 7.0 CONSULTATION

7.1 This report has been prepared by the Chief Officer, Inverclyde Health and Social Care Partnership (HSCP) after due consultation with relevant senior officers in the HSCP and partners in Inverclyde Carers Centre.

# 8.0 LIST OF BACKGROUND PAPERS

8.1 None.