



Midlothian Health and Social Care Partnership

**Midlothian
Carers Strategy
2017-2019**

June 2017

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1. Foreword – Jane Cuthbert



In 2012, I was proud to be part of the Strategic Planning Group that created the first Strategic Plan for Midlothian. The Plan focussed on improving the day-to-day lives of Carers living in Midlothian. Since 2012, there have been many changes to the way that Health and Social Care are managed, with the creation of the Joint Health and Social Care Board.

In 2016 The Carers Strategy Group began a programme of work aimed at creating a new Strategic Plan for carers in Midlothian. Again, the plan aims to address the wide spectrum of issues that carers may face.

In creating this strategy, we have listened to carers and paid particular attention to three areas of concern for carers.

1. **‘It’s my partner/parent/child/sibling/friend – it’s my job to look after them!’**

Firstly, we have looked at **Carer Identification**. One of the biggest difficulties can be in recognising that a child, young person or adult is in a caring role. Most people who look after someone, view that this is just something they have to do. Very often carers do not have the time to stop and think about what their lives would be like if they did not have the responsibility of providing care.

The sooner someone themselves recognises, or is identified by someone as being in a caring role, the sooner help can be provided to support them in this role.

2. **‘I used to be able to play sport/go to the cinema/meet friends/work in the garden/walk the dog’**

The strategy has also focussed on helping carers to have a **Life Outside of Caring**.

We recognise that having another person dependant on one carries a huge responsibility, often with few breaks, and often little recognition. A carer may be responsible for the physical and mental needs of the person they look after and the inevitable consequences of tiredness, however, they often have other concerns such as money worries, stress, ill health, managing school and peer groups, loneliness and isolation. Young carers need to have their unique rights as children and young people recognised and supported. Caring responsibilities for young carers can affect opportunities to mix with peers and on school attendance. That is why it is so important to enable carers to continue to have a life outside caring, including enjoying participating in hobbies or just have a little time for themselves.

3. What will happen to the person I care for if I have to go to hospital/go on holiday/can't get away from work?

One of the biggest worries a carer can have is over **planning for an emergency**. We are all human and there can be unavoidable emergencies when a carer simply cannot be there for the person they care for.

There is no 'one size fits all' fix for this but, with careful thought and planning in advance, it is possible to sort out a way of coping with the cared-for person's needs. In the situation of young carers, this might include the needs and care of the young carers themselves, especially if a parent/guardian has an emergency that makes them less able or takes them away from home.

Creating an emergency plan can be as simple as having a note of a neighbour or relative's phone number who would be willing to help out in the short term, to a whole book of telephone numbers of healthcare and social workers, lists of essential medications etc. Once a plan is in place, the carer and the person they care for can have peace of mind.

These three areas are not the only areas covered by the strategy that follows this introduction. I sincerely believe that this new strategy is fit for purpose and hope that it can reassure carers in Midlothian that they are valued and supported.

Jane Cuthbert

Carer and member of Midlothian Carers Strategic Planning Group

2. Introduction

Unpaid carers fulfil a significant and valuable role within our communities and economy; a role that statutory services cannot replicate in terms of actual care provision, or in terms of budgetary availability, approximately 120,000 hours of care per week is provided by unpaid carers in Midlothian¹. This role is likely to become even more critical as Midlothian Health & Social Care Partnership and its two partners NHS Lothian and Midlothian Council face considerable challenges in terms of working within very restricted budgets, whilst attempting to make available high-quality care delivered by suitably skilled and experienced staff.

Within our communities there are an increasing number of people living with long-term health conditions, people are living longer, and mental wellbeing is a challenge for many people. This increased demand alongside reducing budgets means that the current model of service provision is unsustainable. The re-design of health & social care services involves a cultural shift to support more people to be directly involved in their care and decisions that affect their health and wellbeing. The Partnership continues to work towards providing the tools to enable individuals to be more involved in self-management of their long-term conditions' offer and receive Peer Support, tap into Assistive Technology as a resource to assist in the monitoring of conditions; whilst recognising how crucial it is to enable people to receive breaks from caring.

Encouraging a future planning approach to support the best outcomes for service users, patients and carers can be seen in developments such as the promotion of Anticipatory Care Planning, Emergency Planning for Carers, and the uptake of Power of Attorney. These tools have at their core the involvement of service users and carers in how they would like to live their lives. It is necessary that we recognise and respect what unpaid carers do, and we can do this by treating them as equal partners, recognising the impact that their caring role can have on them, whilst also seeking to identify the many hidden carers and offer support to them.

Strategy Development Process

The new Midlothian Carers Strategy aims to recognise and address issues faced by both young and adult carers. As such the Carers Strategic Planning Group met as a larger group, but also contained a subgroup focussing on young carers so that particular attention could be given to their needs. In Midlothian the Health & Social Care Partnership oversee services for Adults, whilst Education and Children & Families Social Work services are the direct responsibility of Midlothian Council. The Carers Strategic Planning Group itself has representative from Health

¹ Number of carers identified from Scottish Household Survey 2012; hours of care provided based on an estimate from 2011 Census data.

and Social Care; VOCAL; carer representatives; and representatives from organisations whose services include carer support. In preparation of the strategy and action plan, a series of themed specific meetings were held with invited specialist workers, aiming to understand particular challenges and identify actions that would be taken forward during the period of the new strategy.

Specialist workers included:

- a housing officer to discuss the housing application process, and carer awareness raising for staff
- workers from Midlothian Financial Inclusion Network and Midlothian Council Welfare Rights team to discuss changes to the national insurance and welfare benefits system
- representatives from the Department of Work and Pensions, and Midlothian Lifelong Learning and Employability Team to explore support to get into work and training
- a Health Promotion Specialist to discuss health inequalities and how to support groups of people who may find it difficult to prioritise their own health and the impact of their social situation on their wellbeing
- an Assistive Technology specialist who discussed options to use technology to support health and wellbeing and to provide support to the caring role

In addition other practitioners contributed to widening the understanding of the group.

Making Links

The Action Plan to support the strategy has identified areas of work to take forward with many of the specialists who contributed to the discussions. The next step for the Strategic Planning Group is to promote, highlight, and progress the issues and actions identified. Examples of this work may include promoting carer supportive employment practices within our own organisations and with large scale employers within Midlothian; working with the Housing Department to offer carer awareness training for staff; making connections with services and members of communities that are under-represented in the support services we offer; and finding out what we need to do differently to support people we would identify as providing an unpaid carer role.

How did we construct the plan?

The Carers Strategy and Action Plan have formed around a structure of positive Outcomes for carers. Outcomes are aspirations that we would want to achieve, in this situation aimed at supporting and improving the physical, mental, financial and economic wellbeing of carers. The action plan is formed around the outcomes of:

1. Being Identified and Valued Earlier
2. More Informed and Confident Carers
3. Improved Health and Wellbeing
4. Being More Involved in Support Planning
5. Improved Financial Wellbeing
6. Carer Awareness in Employment and Education

This Carers Strategy is for the period 2017 – 2019 but will be reviewed in light of the new carers legislation following April 2018.

3. Profile of Midlothian Carers

There are two main sources of survey data on unpaid carers in Scotland, the 2011 Census data and the Scottish Household Survey 2012 and the estimates for Midlothian differs in each. The 2011 census outlines that **9.90% of the Midlothian population are carers**, which is in line with the Scottish national average. In the 2015 Scottish Survey Core Questions, which collates identical questions in the Scottish Crime and Justice Survey, the Scottish Health Survey and the Scottish Household Survey, **14.4% of respondents** stated that they provided care. This would equate to approximately **12,000 adult carers in Midlothian**. The national statistics for young carers estimates there to be **29,000 young carers in Scotland** (specific numbers of young carers not specified per local authority within census data).

“Carers are equal partners in the planning and delivery of care and support. There is a strong case based on human rights, economic, efficiency and quality of care grounds for supporting carers. Without the valuable contribution of Scotland's carers, the health and social care system would not be sustained.”

Caring together: The Carers Strategy for Scotland 2010 - 2015

- The 2012 Scottish Household Survey found that **70% of carers did not access any external support**. The most common support sought was help from family and friends (17%), carer's allowance (8%) and advice and information (7%).

I was near mental and physical exhaustion but going to counselling turned my life around and enabled me to cope.

- The majority of carers providing help or care within the home provide care to a parent. This is closely followed by care to other relatives including spouses, children and siblings. For those undertaking a caring role in the household, the Scottish Household Survey (2012) suggests **46% of carers** have been providing care for **over 5 years**.
- In the 2011 Census, **43% of Midlothian unpaid carers** were undertaking **20+ hours of care per week**. Of these, 61% were undertaking 50+ hours of care. This is largely in line with the national figures, which showed that 44% of carers provided more than 20 hours of care, and of this 60% provided more than 50.

I feel guilty leaving my son with someone who doesn't understand his additional needs and I have difficulty finding someone who has experience/ training of looking after children with additional needs.

- **11% of all carers** in Midlothian providing 20+ hours of care per week reported that they were in **bad or very bad health**, which matches the nationally reported statistic, and of this group 13% of carers providing 50+ hours of care per week reported being in bad or very bad health. Again this is in line with the national result of 14%.
- In Midlothian **60% of carers are female** and 40% are male. **10% of carers are over the age of 65**. All data sources indicate that as carers get older they take on more caring responsibility.
- Scottish Household Survey statistics updated in 2012 noted that **9% of unpaid care given by adults was to people not living with them**, which was a 5% drop from the previous collection.

Inequalities

...Carers in more deprived communities provide more hours of care per week...

Across Scotland, the level of the population providing care across data zones was fairly consistent, with 9.4% of people providing care in the most deprived area and 9.3% in the least deprived. However, when considering the intensity of care provided, the 2011 census showed that 47.4% of carers in the most deprived areas provided 35+ hours of care per week compared to 23.9% of carers in the least deprived areas. This is a particular issue in Midlothian where following economic downturn some parts of Midlothian have seen increasing levels of deprivation. Deprivation is most prevalent in the communities of Gorebridge, Mayfield & Easthouses and Woodburn. There are also smaller pockets of deprivation within many other of Midlothian's communities.

The 2011 Census showed that nationally 45% of all people providing care were not in employment, rising to 65% for those providing more than 35 hours of care. For Midlothian, these figures were comparable at 44% and 64% respectively. 25% of people providing care across Scotland are retired, rising to 34% for those providing more than 35 hours of care. Again, for Midlothian carers, this figure is comparable at 24% and 33% respectively.

"I had to get early retirement to look after my husband who was in a wheelchair and had many health problems. After I retired I had to use my own money to supplement my income, as with a works pension I did not qualify for Carers Allowance."

4. Changes in Legislation: Carers (Scotland) Act 2016

The Carers (Scotland) Act 2016 is a key piece of new legislation that promises to ‘promote, defend and extend the rights’ of young and adult carers across Scotland. The Act aims to “ensure better and more consistent support for carers and young carers so that they can continue to care, if they so wish, in better health and to have a life alongside caring” (Scot Gov.).

The Carers Bill passed as law on 4th February 2016 and the Act will be implemented on 1st April 2018. The Scottish Government recognise that implementation will require a significant programme of preparation in the development of regulations and statutory guidance as well as the development of systems to provide monitoring and evaluation of the Act. A Scottish Government Implementation Steering Group involving key stakeholders has undertaken work to look at different areas of the Act and from this work strategic advice and guidance is being developed to support implementation. In addition, subject-specific expert sub-groups are feeding in. The new Act will require local authorities and health boards to prepare for implementation by addressing the new duties and responsibilities placed upon them, but also how supports/assessments are undertaken and delivered.

The Carers Act places new duties and responsibilities on Local Authorities and/or health boards. The duties outlined in the new Act build on previous carers legislation and national strategy documents (*Caring Together: The Carers Strategy for Scotland 2010 – 2015* and *Getting It Right For Young Carers*)

1. Duty to prepare and review Adult Carer Support Plans and Young Carer Statements
2. Establishment of Local Eligibility Criteria for Services for Young and Adult Carers
3. Duty to Provide Support
4. Duty to involve carers in carer’s services
5. Duty to prepare a carers strategy
6. Each local authority must establish and maintain an information service for carers, and produce a short breaks service statement.

In preparation of new duties and responsibilities, The Scottish Government invited a number of Local Authorities to participate in pilot work to test the provisions of the new Act. Midlothian was invited to participate and the area that has been chosen to focus on is Adult Carer Support Plans (ACSP), including the introduction of Emergency and Future Planning as part of these plans.

Implementation of the new legislation

Implementation will require planning and preparation by the Health & Social Care Partnership, Local Authority and Health Board. We will need to work in partnership with the Voluntary Sector, and involve the public. There will need to be consultation with stakeholders regarding some of the new duties and responsibilities before the Act comes into effect. We will form an Implementation Group to plan and undertake this work for both young and adult carers.

5. Outcomes for Carers

The Action Plan to support the Midlothian Carers Strategy is structured around the main outcome themes that have come up repeatedly in conversations with carers and at carer forums. These outcome themes link with the Scottish Government developed National Health and Wellbeing Outcomes. These are high-level statements of what health and social care partners are attempting to achieve through integration and ultimately through the pursuit of quality improvement across health and social care.

This is the link to the National Health and Wellbeing Outcomes:

<http://www.gov.scot/Topics/Health/Policy/Health-Social-Care-Integration/National-Health-WellbeingOutcomes>

Though all of the National Health and Wellbeing Outcomes are relevant to carers living in Scotland, there is a specific Outcome relating to this group.

Outcome 6. People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being

“I took some time away and was able to meet friends and have a lunch with former work colleagues, allowing me to switch of and not worry about mum”

6. Priorities over next 2 years

The next 2 years will see a significant change in legislation as the new Carers (Scotland) Act 2016 is implemented in April 2018, and as policy and practice within Health & Social Care Partnerships, Local Authorities and Health Boards adapts to reflect this. This is an opportunity to work in closer partnership with Voluntary Sector organisations to share learning and resources with the shared objective of providing the best possible support to carers in our communities. Work with Young Carers is subject to influence from ongoing developments related to other legislation and strategies including the Children & Young People (Scotland) Act 2014.

The strategy contains the following key priorities, which we aim to make an impact on over the next 2 years:

- **Increased Carer Identification and Support**
- **Improved Access to Breaks from Caring**
- **Reducing Health Inequalities and Financial Hardship**
- **More systematic approach to Emergency Planning**

7. Contact

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Carers Strategy Action Plan 2017 – 19

1. Being Identified and Valued Earlier

a. Early identification of carers

Progress in 2016 -17

Identification as a carer can come through a variety of routes and experiences. Progress during the period of the previous Carers Strategy was that more carers are now identified through GPs and hospital, whilst self-identification also remains a significant factor as in the VOCAL Carer survey 2015 - over half of carers (51%) said that they realised themselves that they were a carer.

There is a wide range of information and support available, which is increasingly self-directed and person-centred, but there is also recognition that this information and support is not reaching all carers at an early stage which otherwise may help in the prevention of unnecessary crises or lessen the physical, emotional and financial impact of caring.

Education is referred to as a “Universal Service” (all children have access to educational opportunities), and as such can provide opportunities to contact young carers who may not self-identify or come to the attention of statutory services. The voluntary organisation Children 1st was involved in supporting Education staff to implement a strategy to assist in the identification of young carers through the annual information collection form issued to gather information about pupils (SEEMiS). The inclusion of a question about being a young carer enabled parents/guardians to identify if the young person they were completing the form for was a young carer. This information is helpful in highlighting to school any circumstances that pupils may need support with and how these may impact on how they manage at school.

The Wellbeing Service, which is part of the *House of Care* initiative operated through the voluntary organisation Thistle, has seen the establishment of Wellbeing Workers in eight GP practices across Midlothian. These workers are there to support patients with non-medical issues relating to their health and wellbeing; of which carers are a relevant group.

Plans for 2017 – 19

- Aim to increase number of carers identified at point of diagnosis of condition of cared for in primary care
- Address some of the specific challenges faced by ‘hard to reach’ carers (ref: Carers UK, ‘Missing Out: the Identification Challenge, 2016)
- Create and strengthen internal systems that support identification of carers through professional practice, in primary, social and acute care, employment and in local communities.
- Continued awareness raising of young carers issues and systems to support identification
- Development and expansion of connections between the Wellbeing Service and Carer Support Services in Midlothian. Continue to support carers to acknowledge caring role undertaken and encourage early access to support and advice.

Outcomes (Measures)

- Demographic breakdowns – ethnicity, condition of cared for, age of cared for, location - with number of years caring at point of referral (VOCAL)
- Examples of initiatives to address challenges faced by ‘hard to reach’ carers and measurement of success
- Examples of systems used by local agencies, teams and organisations to routinely identify and support carers.
- Number of young carers referred and by whom
- Recording of numbers of referrals received from Wellbeing Service

b. Early identification and awareness of carers receiving services provided by Statutory and Voluntary Services**Progress in 2016 -17**

Identification of carers has been an ongoing challenge and commitment undertaken by Statutory and Voluntary Services in Midlothian. To promote early identification and awareness of carers as both customers and employees, there has been work delivered through NHS Think Carer Awareness training (Allie Cherry, VOCAL). Training and information sessions have been delivered at local hospitals and GP surgeries, and bi-monthly Professional Information events at Midlothian Carers Centre. A well-established link within acute services is the Hospital In-reach support work that is undertaken by VOCAL. A more recent development has been the production of a Professional e-bulletin by VOCAL, which includes links to support and advice for staff working with Unpaid Carers. Services have noted pockets of systematic and consistent referrals from practitioners within health, social care, education and the voluntary sector. Alzheimer Scotland Dalkeith has observed that some of the identification work they have undertaken had come because of contact with the service for the Dementia Friends initiative. Contact with the service relating to becoming a Dementia Friend, enabled some people to recognise that they were a carer themselves, and could receive support if they chose to.

Plans for 2017 – 19

- Continued promotion of Think Carer training locally
- Sustain work with GP surgeries and primary care on early identification
- Embedding legislative requirements (s28 of Carers Act) re hospital discharge in work within acute/hospital settings and NHS and social care staff to identify and involve carers
- Dissemination of tools (e.g. VOCAL professionals e-bulletin, Wee Breaks website, Alzheimer Scotland newsletters; Midlothian Carers News; NHS e-learning) which promote carer awareness amongst professionals
- Continued awareness raising amongst Statutory, Voluntary and Universal Services to enable carers of all ages to be identified and access support. Young carers benefit from a wider range of friendships and relationships, and access a variety of educational and social activities. We must consider how these groups and organisations can help identify young carers and support them to meet Wellbeing indicators and achieve positive outcomes.

- Establish if Young Carer Champion role is still ongoing within schools

Outcomes (Measures)

- Number of Think Carer training sessions delivered in Midlothian (NHS/VOCAL)
- Number of carers referred for support via GP surgery/ acute/hospital settings/education/SW/Third sector/Fire Brigade
- Records and information systems (Mosaic, VOCAL, Children 1st and Alzheimer Scotland)

c. Self identification

Progress in 2016 -17

Encouraging self-identification of carer has been and is ongoing work due to the continual number of people undertaking new caring roles, but also for others the gradual change in their circumstances which changes their own perceptions of the support they provide and how this impacts on their life. Information assisting in enabling self-identification is communicated via publicity in various forms including distribution of posters and leaflets to GP surgeries; information in the local press, articles in the Midlothian Advertiser and Health & Social Care Newsletter; emerging channels such as Social Media – Midlothian Carers Centre Facebook page and Carers@Work group, and Carers Connect group –carers trained to create podcasts, local radio link. Talks and presentations to local community groups are additionally helpful in aiding discussion and recognition.

The inclusion of the question regarding being a young carer through the Education information collection system SEEMiS helps to aid identification and access to support. The introduction of a Young Carers ID card is a tool that has been used by young carers and can be shown to professionals and offers quick explanation of their caring situation.

Health & Social Care staff continue to offer adults Carers Conversations (which will become Adult Carers Support Plans), whilst young carers will have access to support to complete Young Carers Statements, both with the aim of allowing an opportunity to explore the caring role, impact on self and personal outcomes.

Plans for 2017 – 19

- Use of social media to reach a wider network of potential carers and extended family members
- Increased carer awareness through range of local media on – e.g. regular slots on local radio
- Increased multiagency approaches to carers awareness promotion
- Raising awareness to partner agencies and to evaluate the benefit of having a Young Carers identification card
- Investigate possibility of using SEEMiS information to refer to services

Outcomes (Measures)

- Examples of carer awareness campaigns and types of media used
- Children 1st will keep record of how many young carers receiving the ID card and how used.
- Monitor numbers of Carers Conversations (ACSP) and Young Carers Statements (YCS) completed.
- Number of Young Carers referred and by what route.

2. More Informed and Confident Carers

a. Future planning (Emergency, POA, Guardianship)

Progress in 2016 -17

Planning and putting in place arrangements for the future has been consistently raised as a priority by carers in Midlothian. To support this there has been training opportunities, surgeries and promotional campaigns organised by local services covering a range of situations, as future planning is different for each person. Future planning may focus on the care and support needs of the cared for person, either as their condition changes or as they get older and may approach different life transitions. Future planning may also address the needs of the carer and supports they require or decisions that need to be made as the caring role impacts on themselves and their ability to continue in their caring role. There are monthly Power of Attorney surgeries at Midlothian Carer Centre, as well as legal surgeries on Guardianship and long-term planning. There are also training sessions covering planning for an emergency, fire safety and the use of Telecare (Assistive technology in the home) to assist in equipping carers with information and skills to deal with unexpected situations.

There has been a Power of Attorney promotional campaign funded through Midlothian Council Small Grants Scheme and undertaken by MVA/MFIN aiming to increase the uptake of POA to Midlothian residents. The campaign sought to increase the knowledge of POA in residents, but also promote the uptake of Legal Aid to facilitate putting a POA in place (reducing barriers to uptake).

Midlothian Health & Social Care Partnership in conjunction with local Voluntary Sector partners, were invited to participate in Scottish Government pilot work re the implementation of the new Carers legislation. The local pilot work set to test the development of Adult Carer Support Plans, including emergency and future planning.

Plans for 2017 – 19

- Encourage and provide support to carers to make emergency and future plans; aiming to improve decision-making and the response/action initiated, and the impact these have on the carer and cared for in a crisis. Increase number of emergency plans produced and POA/Guardianships applied for.
- Development/use of tools to support carers in reflection and planning for use in one to one or group settings. Outcomes focused approach of ACSP and YCS will assist with this.
- Up skilling workforce in supporting carers to have difficult conversations with wider support network, and initiating carers to start making plans for the future
- Ongoing promotion of POA through range of initiatives using multiagency approaches
- Development of system for local agencies to be aware of existence of an emergency plan
- Identification mechanism (card) for carer and cared (including aim to include mechanism to highlight existence of emergency plan)

Outcomes (Measures)

- Number of carers with; Emergency Plans; POA; Guardianship; Adult Carer Support Plan or Young Carers Statements

b. Advocacy

Progress in 2016 -17

Having their voice heard is of significant importance to carers in developing confidence in their role and ability to manage. Carers can access self-advocacy training courses at Midlothian Carer Centre to develop skills to assist in their caring role, but in also confidence in expressing their own needs.

Plans for 2017 – 19

- Establish what advocacy services are available to young and adult carers
- Explore opportunities to further develop self and peer advocacy for carers.

Outcomes (Measures)

- Carers express confidence in being able to articulate their needs and confidence in dealing with providers. Explore possibility of measured outcomes via survey at end of training or period of involvement?)

c. Training/Learning Skills

Progress in 2016 -17

Having the skills, knowledge and support to undertake a task or role is helpful in developing confidence and resilience. Carer services in Midlothian provide training opportunities in response to feedback from carers around what might be helpful to them both in their role as a carer in supporting the cared for person, but also for themselves in managing the decisions and impact that role has on them. Training opportunities are available locally and in Edinburgh, and are publicised via posters, newsletters, email and contact with Carer Support Workers. Support from a Voluntary sector organisation offers Young carers and their families the opportunity to gain support and undertake work together, but in addition offers support to young carers solely to participating in group work, receiving tailored input to support particular identified needs.

Plans for 2017 – 19

- Diversify range, format and timing of training, based on carer feedback and in response to local need
- Increase learning opportunities in areas of palliative care; condition specific courses; economic well-being; emotional issues; personal development activities
- Increase accessibility to courses at weekends and evenings and increase range of formats, e.g. online, via social media
- Increasing confidence and ability to cope in caring role.

Outcomes (Measures)

- Number of carers attending formal training sessions

3. Improved Health and Wellbeing

a. Short Breaks/Respite/Respite for Carers

Progress in 2016 -17

The importance of Short Breaks from caring was recognised in the National Strategy for Carers and Young Carers 2010 – 2015 and is included in the new Carers (Scotland) Act 2016. In Midlothian, VOCAL operates the Short Breaks Bureau for Midlothian Council and Wee Breaks Scheme facilitating access for carers to personalised short breaks. Alzheimer Scotland also provide opportunities for carers to access funding to arrange short breaks or buy equipment to enable a break. Following promotion and pilot support from the Scottish Government, Respite has been an area of development over the past few years, and there has been an increase in the number of local carers engaging in these opportunities. VOCAL have secured increased availability of funding for short break opportunities through existing and new funding streams.

Plans for 2017 – 19

- Widen promotion of Wee Breaks Scheme within the local community
- Further develop Respite concept to support carers and families to access mainstream provision
- Increase number of carers accessing support to plan, manage and fund breaks from caring
- Increase access and opportunities for young carers to have a break from caring

Outcomes (Measures)

- Number of community groups engaged with by Wee breaks staff
- Number of applications to Short breaks Fund
- Number of carers supported through Wee Breaks
- Number of Respite breaks being offered and used
- Number of grants for Short Breaks given
- Monitor reports of increased access to break opportunities within the community
- Number of Short Breaks being accessed by young carers

b. Supporting a life outside caring

Progress in 2016 -17

Midlothian carers identified in the VOCAL 2015 survey identified factors contributing to barriers to a life outside caring as including issues such as restrictions on time; flexibility and availability of respite; finances; and, inability to relax. Contact with support services can assist carers to look at their own needs and the personal outcomes they want to achieve, and 77% carers reported improved social well-being following support in 2016-17 (VOCAL). Children 1st provide a service to Midlothian Young Carers aged 7 – 18 yrs and seek to provide support and opportunities to Young Carers, including opportunities to support some of the SHANARRI Wellbeing Indicators.

Plans for 2017 – 19

- Increase range of interventions to support carers health outcomes; including counselling, courses, groups, emotional support, and fundraising for breaks.
- Increased emphasis on supporting carers to think about their own health and the implications of an improvement or deterioration
- Increased awareness of Wee Breaks and opportunities to access breaks from caring
- Promotion of support for Young Carers and listening to what supports they need

Outcomes (Measures)

- Number of young carers referred to support services
- Number of Adult Carer Support Plans and Young Carers Statements (content relating to Health and Wellbeing)
- Number of Emergency Plans and Power of Attorneys completed
- Number of carers attending courses and training opportunities

c. Support to maintain and improve health and recognising impact/issues relating to Health Inequalities in our communities

Progress in 2016 -17

The duration and intensity of caring is seen at its highest levels within some of our most disadvantaged areas in Midlothian. Issues associated with poverty become compounded by the impact of the caring role. The adaptation and response of local services and strategies recognising and targeting some of the issues associated with health inequalities are addressed within courses, training and support from local carer support services including VOCAL and Alzheimer Scotland. The pilot and subsequent roll out of the Wellbeing Service within local health centres recognises the complexity of social and economic situations (in addition to caring) and the impact that these can have on the lives of families and individuals within our communities.

Plans for 2017 – 19

- Initiatives to identify carers living in areas of multiple deprivation
- Support initiatives developed specifically for carers living in areas of multiple deprivation
- Increased identification and support of carers where:
 1. Their caring role may not be immediately apparent to them (e.g. subjective perception of normality of what they are doing, or lack of awareness/recognition within culture of caring role)
 2. There may be challenges/barriers to accessing support (e.g. Perception that particular services do not, or will not meet their needs; lack of identification with service as a source of support)
- Increase referrals to support services from health and social care workers.

Outcomes (Measures)

- Data formatted to represent visual map
- Increase referrals received
- Number of carers by postcode

d. Building resilience and confidence**Progress in 2016 -17**

Building resilience and confidence are assets to draw on by carers in undertaking their caring role. Local carer support organisations offer training courses to develop these strengths aiming to provide tools and opportunities to explore the impact of stress and anxiety; looking at coping strategies such as mindfulness; and exploring thoughts and feelings including those associated with changing relationships (VOCAL).

Within the services offered by carers organisations carers are offered asset and strength-based conversations with support staff (80% carers reported improved confidence in caring 2016/17 - VOCAL); access to a carer counselling service; and practical support, including access to breaks from caring and funding via Wee Breaks.

Work undertaken with young carers is embedded in building resilience and confidence, and the family, individual and group work undertaken has been focussed on these strengths as outcomes for the young people involved.

Links have started to be developed with Midlothian Council's Lifelong Learning and Employability Service, seeking to identify links with carer services and opportunities for carers to participate in programmes either generally open to the public, or bespoke for carers.

Plans for 2017 – 19

- Further strengthen carer resilience by expanding emotional health and wellbeing support for carers
- Encourage asset and strengths-based approaches during early carer conversations with information and resilience building to strengthen carer confidence and reduce likelihood of a breakdown in circumstances
- Expand opportunities and accessibility to Lifelong Learning and Employability programmes

Outcomes (Measures)

- Number of training courses being offered
- Number of ACSP and YCS being completed
- Number of attendees at Community Health Improvement Team appointments

e. Suitable Housing for Long Term Need**Progress in 2016 -17**

Health and wellbeing is contributed to and impacted on by many factors, both physically and mentally. Suitable housing and adaptations have been a recurrent topic raised by carers. A suitable physical environment can have a significant impact on independence and the level of support someone might need within that environment. To gain insight into some of the practical challenges associated with caring and aim to promote independence and ability, there has been carer involvement in building redesign and development for one of the local authority care homes. There has also been the introduction of a section on the local housing to include information about carers; information which is helpful in understanding need and finding housing to meet those needs.

Plans for 2017 – 19

- Workforce development and training.
- Working more closely with housing to involve carers, and work in partnership to provide training to housing staff regarding carers

Outcomes (Measures)

- Number of housing staff participating in training

f. Isolation

Progress in 2016 -17

Local carer services are aware of the potential impact caring can have in causing isolation for both adult and young carers. Reduced opportunities to engage in social activities, sometimes leaving employment, and reduced financial capacity can all impact on carers not engaging in regular social contacts and lead to becoming isolated. Young carers have received support to access community resources and activities with other young carers, and engaged in support that seeks to maintain normal social activities for that age group. Adult carers have access to the Wee Breaks website and support workers; peer support groups; monthly drop ins; Midlothian carers newsletter twice a year; Monthly SMART recovery group; Partnership work (e.g. Braw Blether); Carers@Work FB group; and training courses. There are various mainstream and carer specific projects ongoing in Midlothian that has reducing isolation as one of their main aims.

Plans for 2017 – 19

- Carers are supported to fully participate and access mainstream services to achieve personal outcomes/goals
- Collate and disseminate peer support options, including group and one to one options.
- Increased use of social media to link carers with time or location constraints
- Encourage employers to participate in the Carer Positive initiative with the aim of enabling more carers to remain (or take up) paid employment

Outcomes (Measures)

- Number of employers engaged in dialogue re the Carer Positive initiative.
- Demonstrate range of social media options available.
- Information leaflet on availability and range of peer support opportunities for carers in Midlothian

4. Being More Involved in Support Planning

a. Carer and wider family involvement in assessments and support planning for Cared For Person

Progress in 2016 -17

Self Directed Support (SDS) has moved on from a change in national legislation, to the norm of how assessments and support are routinely carried out in Midlothian. Information and advice regarding SDS for carers has been developed through partnership between the Carer Centre and Midlothian Council. This partnership led to the development of information pathways and booklets explaining the options and supports available to find personalised solutions using SDS. Workshops between local services and the Lothian Centre for Integrated Living have seen to push boundaries and limits of what arrangements and forms of support are possible. Scottish Government funding supports local specialist SDS Carer Support Worker availability for carers until March 2018.

Young carer services have changed their model of support to include family work; seeking to work within the family to make changes and raise awareness of the impact of caring on the young person.

Plans for 2017 – 19

- Workforce development and training in relation to carer involvement
- Awareness raising of SDS and support planning options with carers
- Carer involvement and representation in development of future commissioning plans (e.g. Home care, review of services)
- Identifying wider family support during assessment and support planning through Family Group Conferencing.

Outcomes (Measures)

- Train Health and Social Care staff in Carer Awareness
- Provide staff access to Emergency Planning training
- Evaluation of Scottish Government pilot work focussing on ACSP and YCS
- Evaluate new ACSP and YCS in respect of quality and effectiveness.

b. Carer Support Plans/Statements and Reviews

Progress in 2016 – 17

Early identification offers carers the opportunity to access advice services and support at an early point in their caring journey, aiming to adopt a preventative approach and reduce the impact of the caring role on their finances, health and wellbeing, and reducing burn-out and crisis situations. Both statutory and voluntary services work with carers to identify needs, and offer the opportunity to identify personal outcomes that are important and personal to individual carers. Support plans develop out of conversations intended to provoke thought and discussion about what is important to people, their strengths, and limits to their capacity. The implementation of the Carers (Scotland) Act 2016 will introduce a duty on the local authority to provide and produce Adult Carer Support Plans and Young Carers Statements, replacing “Carers Conversations”. Midlothian Council are one of the

Scottish Government pilot areas in relation to Adult Carer Support Plans; work that will be done in partnership with local Voluntary Sector Carer organisations.

Plans for 2017 – 19

- Participation in Scottish Government pilot work for Adult Carer Support Plans and Emergency and Future Planning for implementation of Carers (Scotland) Act 2016
- Development of Adult Care Support Plan and Young Carers Statement tools and guidance and associated staff training

Outcomes (Measures)

- Outcomes from Scottish Government pilot work

c. Carer involvement in Hospital Discharge and with Primary Care

Progress in 2016 -17

The care and treatment that is given following the discharge from hospital of someone who has been, or continues to be unwell is of huge significance. Who, when and how this treatment is provided can be complex and the meaningful involvement and partnership working with carers is vital in hoping to achieve a positive outcome. Carers have a wealth of information and experience in providing support to the cared for, and this information can be lost or missed if not involved in decisions or support planning. Within Midlothian, there is a Hospital In-reach Carer Support Worker working with staff and carers to ensure this link is made and maintained. The significance of carers being involved in hospital discharged is highlighted by its inclusion in the Carers (Scotland) Act (2016).

Plans for 2017 – 19

- Ensure that services are coordinated to have regard to Carers Legislation – guidance and requirements
- Reflect on learning from Scottish Government Hospital Discharge pilot and support training to NHS and Social Care staff regarding carer involvement. Explore processes and perceived barriers around information sharing and confidentiality
- Promote uptake of Power of Attorney so carer involvement and decision can be made to ensure quick delivery of support and best outcomes achieved
- Promote carer involvement in hospital discharge as per carers legislation
- NHS Lothian anticipating recruitment of worker to support S28 work
- Ensuring carer involvement is included in local primary care policy

Outcomes (Measures)

- Number of sessions delivered around carer awareness
- Report on carer involvement from NHS systems

5. Improved Financial Wellbeing

a. Establishing and sustaining positive links with the DWP

Progress in 2016 -17

Carers are at risk of financial poverty. Some carers can find that they require to rely on welfare benefits for financial income. This can be for a variety of reasons including: having to give up work or reduce hours; not being entitled to full state pension due to reduced National Insurance contributions due to caring restricting ability to work; inability to take up work or training after school due to caring; and, one or both parents unable to work due to ill health and impact of low income on household including a young carer. Local carer services have established links with the Department of Work and Pensions (DWP); Midlothian Council Welfare Rights Team; and access support from advice organisations to provide surgeries to maximise income both within and out of employment. These links have helped raised awareness amongst DWP staff to carer issues and of the support schemes and initiatives to support people back into and within work (relevant to carers). Support for carers to maintain employment can also come from within the organisations they work for. The Carer Positive initiative is operated by Carers Scotland on behalf of the Scottish Government and has the aim of 'making life better for carers' who are in employment. Support services for young carers recognise the impact of reduced income on households with children, and have a positive working relationship with Midlothian Council Welfare Rights Team.

Plans for 2017 – 19

- Support to systematically identify carers via local Job Centres and increase referrals for support within the DWP and to carers support services via this route
- Maintaining links with DWP and services seeking to maximise the income of carers
- Developing options which support carers to gain entry or return to employment

Outcomes (Measures)

- End of year report to Midlothian Carers Strategic Planning Group to capture progress in areas covered in plans

b. Tackling poverty through access to specialist income maximisation support

Progress in 2016 -17

The financial and economic wellbeing of carers can be significantly impaired by undertaking a caring role. Carers can find that their income is reduce through changes in the amount they are able to work, but also that their outgoings are increased through issues such as: being at home more to support someone who is ill and cannot go out, and additional costs of travelling to GP/hospital appointments, or extra journeys to pick up prescriptions etc. Carer support services within Midlothian have sought out new funding and opportunities to provide specialist support to maximise income but also run surgeries and workshops to support carers to get the best value and economic benefit from the money they have coming in. The Carer Centre successfully hosted a pilot project focussed on Advocacy Support for Personal Independence Payments and Universal Credit, which highlighted the need and subsequent establishment of a Money Matters Carers Support Worker post. Carer Information strategy funding from the Scottish Government supports weekly Citizens Advice Bureau surgeries at Midlothian Carer Centre, enabling carers to access professional advice and guidance in a familiar and carer-focussed environment. A Carer Support Worker represents carer interests at Midlothian Financial Inclusion Network; this representation enables information gathering about local and national developments in the areas of

financial inclusions and poverty, and an opportunity to feed in a carer perspective to any local initiatives. Services in Midlothian supporting young carers within families signpost on to income maximisation and financial advice services. This organisation also campaigns on behalf of families and feeds back information to DWP, Scottish Government etc regarding the welfare of children and the impact of poverty.

Plans for 2017 – 19

- Carers issues will continue to be represented through MFIN; enabling a multiagency approach to the sharing and dissemination of information relevant to carers (e.g. pensions)
- Increase access and delivery of support in targeted areas (areas of multiple deprivation)
- Strengthening fundraising for breaks from caring and other items related to caring.
- Increase access to benefits and financial support related to employment

Outcomes (Measures)

- Number of carers from areas of multiple deprivation supported (link to outcomes for individuals)
- Feedback from CAB and Money Matters work
- Number of carers supported with benefits/financial advice who are working (VOCAL)

6. Carer Awareness in Employment and Education

a. Promoting carer friendly workplaces

Progress in 2016 -17

The personal and financial costs to an individual and organisation when a carer decides they need to leave work can be considerable. An article in HR Review in 2014 suggested that from the perspective of an employer “The costs of replacing staff that leave an organisation are estimated to be approximately £30,000*. Given that carers are likely to represent an experienced staff group, it makes economic sense to retain carers in the workforce. In addition, there would be losses to the wider economy because of lost tax revenue and potentially increased costs. (*There are two main factors that make up this cost: The cost of lost output while a replacement employee gets up to speed; the logistical cost of recruiting and absorbing a new worker”.) NHS Lothian has worked to progress the organisation as ‘Carer Positive’ and have recently been awarded Carer Established (the middle of 3 award levels). This has been achieved through ongoing initiatives, e.g. staff road shows; NHS Lothian e-learning for staff who are carers; and work with managers re the benefits of employing carers and offering flexible work opportunities where possible.

Other organisations support different schemes to support carers and the DWP offer a carer passport scheme (Dalkeith Job Centre).

Plans for 2017 – 19

- As resources and capacity allows, promotion of carer awareness training and advice for employers to identify and support employees who are carers (e.g. links with other Midlothian employers, opportunities to share learning)
- Encourage and promote the Carer Positive Scheme throughout employers in Midlothian

Outcomes (Measures)

- The number of awareness raising sessions with large employers within Midlothian
- The number of large employers in Midlothian gaining Carer Positive recognition
- The number of Midlothian employees supported re Carer Positive

b. Advice and support for employees who are unpaid carers

Progress in 2016 -17

There are many recognised benefits to being in employment where possible, though this can be a struggle for some carers. Some carers may require assistance with calculations (Better Off Assessments) to gain further information to enable them to make informed decisions about reducing hours or leaving employment for a period. One opportunity for support for working carers is via the Carers @ Work Facebook group set up for carers across Lothians (VOCAL/Marie Curie). The Midlothian Carer Centre has seen an increase in the number of carers who are working seeking support from the carers service.

Plans for 2017 – 19

- More opportunities to access carer support at weekends and evenings (to offer flexibility in accessing support out with “office hours”)
- Opportunities to access support in the workplace (e.g. carer surgeries/training delivered in conjunction with the employer)

Outcomes (Measures)

- Number of opportunities available at weekends and evenings (VOCAL)
- Number of carer support activities delivered in Midlothian Council

c. Promoting support for carers seeking to gain entry/return to employment and/or education**Progress in 2016 -17**

Caring responsibilities and personal circumstances shape and inform the decisions carers make about employment and education. Young carers may need to consider their options about whether they can manage study and caring, or if they need to bring additional income in to the home. Older carers may find that they have to return to work after a long absence and a change in their caring circumstance. Local connections have resulted in the sharing of training between the local DWP and carers support service, increasing awareness of the barriers that carers face in re-entering work. The DWP have progressed an initiative to raise awareness amongst their staff through up-skilling staff events, talks etc. These initiatives aim to improve the experience of customers seeking employment and more successfully enter sustainable employment.

Newly established links with Midlothian Council’s Lifelong Learning and Employability Service (LLE) suggest the potential for positive partnership working with the DWP and carer support services. Some people may experience barriers or difficulties in participating in educational or employment related activities or training, however the LLE service are actively pursuing more partnership work, and are seeking to further expand their accessibility to mainstream opportunities which can be enjoyed by any member of the public. LLE are also interested in developing opportunities specifically to address identified carer needs and issues where necessary.

Plans for 2017 – 19

- Develop a range of options in partnership with DWP, LLE, VOCAL and other providers to support carers into work/education
- Improved and routine identification and referral of carers through local job centres / education providers
- Developing options that support carers to gain entry or return to education, e.g. LLE/DWP.

Outcomes (Measures)

- Number of partnerships/initiatives
- Number of carers referred from Job Centre, local colleges, higher education providers (VOCAL)

