Integrated Impact Assessment Form

Promoting Equality, Human Rights and Sustainability

Title of Policy/ Proposal	Midlothian Carer Strategy
Completion Date	22/03/22
Completed by	Gill Main (integration Manager), Lisa Moodie (Alzheimer Scotland), Priscilla Pratt (Social Worker), Heather Fleming (CLL Officer), Laura Hill (VOCAL Carer Support Service Lead), Shelagh Swithenbank (Carer Planning Officer)
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Type of Initiative:

Policy/Strategy	Strategy
Programme/Plan	New
Project	Updating strategy
Service	Review
Function/Statement of Intent	Produce new Carer Strategy 2022 -25

1. Briefly describe the policy/proposal you are assessing.

Adoption of the HSCP Carer Strategy as strategic statement supporting joint work and priorities in Midlothian. There is a requirement as part of the Carers (Scotland) Act 2016 for each local authority area to produce a carer strategy.

What will change as a result of this policy?

- Priorities in Carers Strategy and HSCP Carer Action Plan will align and guide service commissioning and local work themes.
- Midlothian will have a clear strategic statement and vision for how best to support the best outcomes for carers of all ages based on consultation with HSCP and Third Sector staff, carers, people who receive care, and the public.
- Better understanding of challenges experienced by Midlothian carers and what support/service culture is meaningful to reduce impact and risk of caring becoming unsustainable
- The strategy sets a vision for collaborative networks and services to support carers
- The carer strategy will be updated to include the principles and duties within the Carers Act legislation.

2. Do I need to undertake a Combined Impact Assessment?

Level of relevance	**Yes/no**
High - The policy/ proposal has consequences for or affects people	Yes
High - The policy/proposal has potential to make a significant impact on equality	Yes
High - The policy/ proposal has the potential to make a significant impact on the economy and the delivery of economic outcomes	No
High - The policy/proposal is likely to have a significant environmental impact	No
Low - The policy/proposal has little relevance to equality	No
Low - The policy/proposal has negligible impact on the economy	Yes
Low - The policy/proposal has no/ minimal impact on the environment	Yes

3. What information/data/ consultation have you used to inform the policy to date?

Evidence	Comments: what does the evidence tell you?
Joint Needs Assessment (JNA) Reports on impact of pandemic on carers. Health & Social Care Partnership (HSCP) Carer Consultation (August – September 2020). Health & Care Experience Survey (HACE). Scotland's Carers: Scottish Government report 2015.	• Increasing population overall in Midlothian, this will also proportionally increase the number of carers. • Scottish Government report gives information about inequalities experienced by carers, with highest number of hours and intensity of caring done in communities identified as experiencing the highest levels of social and health inequalities. • Consultation based on priorities in Carers Act, aiming to support service re-commissioning, and the development of the carer strategy. Highlighting: Identification; access to support; health and wellbeing; breaks from caring; finances. Carers recognise that identification is key to accessing a range of services, and that a supportive transition between services is helpful. Speaking to staff and peers who understand the experience of caring is beneficial. Access to services can be helpful to carers understand their rights and entitlements (benefits). Accessing a break from caring is vital to the sustainability of caring.
SEEMiS (Pupil Management Information System)	• Information from information system re number of young carers being identified through school data capture system. Recognition that the number of carers identified through SEEMiS is significantly lower than estimated prevalence
Voice of Carers across Lothian (VOCAL) Carer Survey 2021	• Demographic information recognising the predominance of female carers, with an increase in the number of working age carers in contact with the service. Since previous survey, and increase in the number of carers looking after a child (young or adult). Impact of caring; finances; health & wellbeing; challenges of

Evidence	Comments: what does the evidence tell you?
	balancing work and caring; many carers not getting a break from caring.
Carer Census	• Carer Census data is difficult to interpret at this time due to challenges in capturing the data; submitting the data; reporting accurately from the data available.
Data on service uptake/access	• Service data has driven strategic/action planning. The VOCAL carer survey and carer support service reporting has given information about key areas of service demand: • Parent carers as a subsection of the adult carer population has grown significantly as a group accessing support and seeking access to short breaks from caring. • The age profile of respondents in the VOCAL survey respondents has shifted downwards, with a decreased number aged 65+, and an increase in the number of carers are of working age; this is also reflected in the number of carers who are retired reducing on the most recent return. Information re carers' rights; balancing employment and caring; and income maximisation, are significant issues for support. • Access to breaks from caring are necessary for some carers to continue in their caring role. 79% of respondents live with the person for whom they are caring. This figure is higher for respondents caring for their child (92%) or spouse/partner (97%), caring for someone aged 25 or under (92%), and those providing more than 50 hours of care a week (96%). • Access to this information and feedback from consultation has assisted in shaping the priorities within the carer strategy and action plan.

Evidence	Comments: what does the evidence tell you?
Data on quality/outcomes	• Data relating to Midlothian adult carers is available within the Joint Needs Assessment produced to accompany the Midlothian HSCP Strategic Plan. Information re Young Carers would be available from the Young Carer Service and is captured through an annual information return through the SEEMiS system used within Education. Information relating to carer outcomes can be found within Adult Carer Support Plan and Young Carer Statement documents. There are duties upon the local authority to consider support towards these outcomes; reducing the impact of caring, and making caring more sustainable. This information is within the Midlothian Carers Eligibility criteria and is available on the Midlothian Council website. • Establishing an accurate number of carers within Midlothian, or any area, is challenging. The two main national approaches that have undertaken to do this have given different results, in part due to the method of gaining the information (self-completed assessment vs. interview), and also the bandings used to assess the amount of caring undertaken. Scottish Health Survey (SHeS) 2012/2013 indicated approximately • 17% of the age 16+ adult population were carers, and 4% of the under 16 child population were unpaid carers. Carers do not always recognise and identify themselves as carers, and also caring roles change (gradually building up, or ending).
Research/literature evidence	• There is a requirement within the statutory guidance to support the Carers Act that a local carer strategy requires to be produced. The guidance refers to the information that a local strategy should contain

Evidence	**Comments: what does the evidence tell you?**
Service user experience information • Carer Consultation 2020, evidence for Carer Support & Service Review • HACE • VOCAL survey 2021	Carers tell us that often people do not realise they are carers, as what they do might feel quite normal (caring for a relative or child), or things have changed over time. Access to information about their rights and supports is valuable. Caring has an impact on economic wellbeing (ability or balancing of work, and also physical and mental health and wellbeing. Speaking to people who understand what caring is, is helpful (peer or staff support). Carers do not have a lot of time, and sometimes say that making sure that the person that they care for gets the support they need, can help to take the pressure of them, and that is what they want. Carers do not want to repeat their story, or go through complicated referral signposting/referral processes. Comparing reports, it would appear that carers who we know are carers and access supports feel more supported and able to continue in their caring role, than respondents we do not have confirmation of their caring role or access to any support. The Young Carer Service have initiated attempts to gather feedback on the YC service and this will be fed back into strategic and service planning in due course.
Consultation **and involvement** findings	Carer representative opportunities on the Integration Joint Board (IJB) and Strategic Planning Group (SPG) are vacant, but opportunities for recruitment are being explored by VOCAL (carer services). Recent agreement from an unpaid carer to take on a role linking Carers Action Midlothian (CAM) group meeting and the Carers Strategic Planning Group.

Evidence	Comments: what does the evidence tell you?
	Carer involvement in the carer consultation 2020 (report produced and can be accessed on HSCP web pages). Carers told us that often people do not realise they are carers, as what they do might feel quite normal (caring for a relative or child), or things have changed over time. Access to information about their rights and supports is valuable. Caring has an impact on economic wellbeing (ability or balancing of work, and also physical and mental health and wellbeing. Speaking to people who understand what caring is, is helpful (peer or staff support). Carers do not have a lot of time, and sometimes say that making sure that the person that they care for gets the support they need, can help to take the pressure of them, and that is what they want. Carers do not want to repeat their story, or go through complicated referral signposting/referral processes. Attempt to involve carer in service re-commissioning process (could not participate due to change in circumstances). Carers Action Midlothian (CAM) are used as a reference group when developing new carer policies or plans.
Good practice guidelines	Future services to be underpinned by the priorities, duties and responsibilities within the Carers (Scotland) Act 2016. The Strategic document considered within this IIA is reflective of these priorities: carer identification; access to support, information and advice; health and wellbeing; breaks from caring; carer involvement in services and planning; and additional carer financial welfare.
Other (please specify)	Scottish Government guidance on local carer strategies.
Is any further information required? How will you gather this?	None.

4. How could we ensure that the policy meet the different needs of and impact on groups in the community?

Equality Groups	Comments – positive/ negative impact
Older people, people in the middle years,	**Positive** The strategy is supportive of identification and access to support for carers of all ages. **General comments:** VOCAL Survey (2021) highlights increasing number of working-age women within the survey responders. A priority within the strategy is for the Financial Support of carers, including maximising income and balancing employment and caring.
Young people and children	**Positive** The strategy is supportive of identification and access to support for carers of all ages. The strategy references the importance of Young Carers being supported to plan for key life transition moments, such as primary to secondary school, and secondary school onwards. Strategy details access to support. **General Comments:** There will be a separate Action Plans developed to take forward work for Adult and Young Carers.

Equality Groups	Comments – positive/ negative impact
Women, men and transgender people (includes issues relating to pregnancy and maternity)	**General comments:** Within carers known to services, a predominance are female. Strategy doesn't specify ways to reach out to carers based on gender. Important to make sure our strategic approach and support opportunities are as inclusive as possible, e.g. not just opportunities that suit women. Experience of changes in encouraging self-identification in male carers. No specific actions or approach highlighted to support trans or non-binary carers. Questions? Is gender bias towards women accessing services reflected across age range? Are men less likely to engage in support, or is this as a consequence of the services/supports that are available?
Disabled people (included physical disability; learning disability; sensory Impairment; long term medical conditions; mental health problem)	**Positive:** No specific reference. Carer health and wellbeing supported within the strategy. Carer ability to care is taken into account within Adult Carer Support Plans (ACSPs). **General comments:** Future Inclusive Communications Bill? Important that all material that goes out is assessed for Easy Language. Need to remain aware of literacy within communities. Awareness of different cocaring relationships, e.g. parent and child supporting each other. Increase within services of more than one carer within a household registered – may have different caring responsibilities and needs.

Equality Groups	Comments – positive/ negative impact
Minority ethnic people (includes Gypsy/Travellers migrant workers non-English	**General comments:** Strategy is for all members of Midlothian's communities. See further notes in the section referring to opportunities to promote strategy and supports. Gypsy traveller identification. Could be an opportunity to engage in early intervention with people that may be less represented within services. Lower than Scottish average, so does this need particular focus? Postcode pockets of populations, e.g. some resources are situated in particular locations (consider this in any actions).
Refugees and asylum seekers	No specific impact. **General Comments:** The Red Cross is beginning work linking with communities and carers, including community groups and centres. Children's Services have a specific team for work supporting Refugees and Asylum Seekers (give info to staff in these teams, could highlight the offer of information). HSCP and partners working together to ensure wider staff and community have awareness raising. Local events? Communications round robin info to wider staff groups.
People with different religions or beliefs (included people with no religion or belief.	No specific impact. **General comments:** May be opportunities to engage with faith based groups in Midlothian re carer awareness and supports.

Equality Groups	Comments – positive/ negative impact
Lesbian; gay bisexual and heterosexual people	No specific impact. **General comments:** HSCP awareness of use of language to describe and illustrate caring relationships. Strategy attempts to reflect inclusivity in language and imagery Maintaining relationships is featured within the carer strategy, Section 3: could reference to this priority be an opportunity for outreach or to raise the profile of the diversity of caring relationships? Does the strategy explore accessibility around sexuality within caring relationships?
People who are unmarried; married or in a civil partnership	**Positive:** Reference to caring and relationships in carer strategies and services usually refers to a variety of circumstances, and are included as a range of examples, e.g. caring for a spouse; partners; child; neighbour; friend, etc. **General Comments:** HSCP awareness of use of language to describe and illustrate caring relationships.

Equality Groups	Comments – positive/ negative impact
Unemployed	No specific reference, though strategy does recognise that employment can be impacted by caring, and balancing care can be challenging. VOCAL survey identified an increase in the proportion of working age people completing the survey. **Positive:** Strategy recognises need to support carers in employment; balancing caring and employment; and combining caring and employment. **General comments:** Working age women identified as an increasing group within the VOCAL survey. Focus on financial wellbeing as a priority within the strategy. Helpful to financial wellbeing; supporting wellbeing; choice and control. Reference in the strategy to planning for emergencies; this is helpful to people who have a number of other commitments, including balancing employment and care. Strategy has a section on finance and caring.
People on Benefits	As above.
Single Parents and vulnerable families	As above. **General comments:** Strategy discusses tailoring supports and services to personal needs and outcomes.
Pensioners	As above. **General comments:** As per first section relating to Older People.

Equality Groups	Comments – positive/ negative impact
Looked after Children	No specific impact. **General Comments:** Need to highlight through-care and after-care workers. May be returning to family which involves a caring relationship.
Those leaving care settings ((including children and young people and those with illness)	No specific impact.
Homeless People	No specific impact. **General comments:** Adult Support & Protection (ASP) issues may arise; carer stress; caring can impact on experience of coping; important to continue to recognise caring role and impact.
Carers (including young carers)	**Positive:** Unpaid carers are the focus of the strategy.
Those involved in the criminal justice system	No specific impact. **General comments:** Carer services accessible by all members of the community. Opportunity to expand knowledge of carers within Justice Services.
Those living in the most deprived communities (bottom 20% Scottish Index of Multiple Deprivation (SIMD) areas). SIMD is a relative measure of deprivation across called data zones. If an area is identified as 'deprived', this can relate to people having a low income but it can also mean fewer resources or opportunities. SIMD looks at the extent to which an area is deprived across seven domains: income, employment, education, health, access to services, crime and housing.	No specific reference. **General comments:** Majority of Midlothian population live in SIMD 1 & 2. Local understanding and knowledge of what's available and what assets are present. Recognition that around 50% of people experiencing deprivation do not live in areas identified as deprived.

Equality Groups	Comments – positive/ negative impact
People misusing substances	No specific reference. **General comments:** From the carer consultation strong feeling that those caring for people who are affected by drugs and/or alcohol don't necessarily see themselves as carers. This may be a unique group of carers. Highlights the importance of peer support.
People with low literacy/numeracy	No specific reference. Access to support is encouraged by a supportive referral from a service that a carer may be in contact with. Seeking to minimise replication of information. ACSP/YCS (Young Carer Statement) is completed during a good conversation with a trained worker, minimising paperwork and forms on the part of the carer.
Others e.g. veterans, students	No further information to add.
Geographical Communities	
Rural/ semi rural Communities	No further information to add. Services to be accessible.
Urban Communities	No further information to add. Services to be accessible.
Coastal Communities	N/A

5. Are there any other factors which will affect the way this policy impacts on the community or staff groups?

Supporting working carers to balance employment and caring. Supportive of health & wellbeing.

6. Is any part of this policy/ service to be carried out wholly or partly by contractors?

The strategy supports how the HSCP and Third sector partners deliver services, and will be bound by Midlothian Council contracts detailing legislative requirements and limits.

7. Have you considered how you will communicate information about this policy or policy change to those affected e.g. to those with hearing loss, speech impairment or English as a second language?

Information regarding the new strategy will be published on the Midlothian Council website. Accessibility features to enable text to be read (Read Aloud) etc. are available via the Council website. The strategy will not automatically be translated to other languages, but can be considered upon request as per normal council processes. Other alternative formats will be considered on request as per normal council processes.

8. Please consider how your policy will impact on each of the following?

Objectives **Equality and Human Rights**	**Comments**
Promotes / advances equality of opportunity e.g. improves access to and quality of services, status	Carer service specification discusses barriers to identification and access to services, recognising that within our population there may be carers who are marginalised from mainstream carer services. **Positives**: Enable people to have more control of their social/work environment. Advance equality of opportunity e.g. improve access / quality of services.

Objectives Equality and Human Rights	Comments
Promotes good relations within and between people with protected characteristics and tackles harassment	**No differential impact:** Foster good relations within and between people with protected characteristics. Reduce differences in status between different groups. Eliminate discrimination and harassment.
Promotes participation, inclusion, dignity and self- control over decisions	**Positives:** Promote participation, inclusion, dignity and control over decisions.
Builds family support networks, resilience and community capacity	**Positive:** Build family support networks, resilience and community capacity.
Reduces crime and fear of crime	We have not established if there is an impact in this area.
Promotes healthier lifestyles including Diet and nutrition Sexual Heath Substance Misuse Exercise and physical activity Life Skills	**Positive:** Health and wellbeing are priorities core to the strategy, and training opportunities are focussed on carers feeling more in control of these aspects of their lives. Reducing the impact of caring and increasing sustainability in caring relationships underpin the specification and guidance from the Scottish Government.
Environmental	
Reduce greenhouse gas (GHG) emissions in Midlothian (including carbon management)	NA.
Plan for future climate change	NA.
Pollution: air/ water/ soil/ noise	NA.
Protect coastal and inland waters	NA.
Enhance biodiversity	NA.
Public Safety: Minimise waste generation/ infection control/ accidental injury /fire risk	NA.

Objectives Equality and Human Rights	Comments
Reduce need to travel / promote sustainable forms or transport	NA.
Improves the physical environment e.g. housing quality, public and green space	NA.
Economic	
Maximises income and /or reduces income inequality	Income maximisation and financial security are priorities within the strategy.
Helps young people into positive destinations	Impact of caring and sources of support are highlighted within the strategy.
Supports local business	NA.
Helps people to access jobs (both paid and unpaid)	The strategy is supportive of managing the balance of care for carers in employment, and also carers accessing employment.
Improving literacy and numeracy	No specific reference.
Improves working conditions, including equal pay	No specific reference.
Improves local employment opportunities	No specific reference.

9. Is the policy a qualifying Policy, Programme or Strategy as defined by The Environmental Impact Assessment (Scotland) Act 2005?

No.

10. Action Plan

No specific negative impacts.

11. Sign off by Integration Manager

Signature
Name: Gill Main
Date 21/10/2022