



PERTH AND KINROSS INTEGRATION JOINT BOARD

Council Building
2 High Street
Perth
PH1 5PH

16/06/2023

Attached is a supplementary agenda for the hybrid meeting of the **Perth and Kinross Integration Joint Board** will be held in the **Council Chamber** on **Wednesday, 21 June 2023** at **13:00**.

If you have any queries please contact Committee Services - Committee@pkc.gov.uk.

Jacquie Pepper
Chief Officer – Health and Social Care Partnership

Please note that the meeting will be streamed live via Microsoft Teams, a link to the Broadcast can be found via the Perth and Kinross Council website. A recording will also be made publicly available on the Integration Joint Board pages of the Perth and Kinross Council website as soon as possible following the meeting.

Voting Members

Councillor Michelle Frampton, Perth and Kinross Council
Councillor David Illingworth, Perth and Kinross Council
Councillor Sheila McCole, Perth and Kinross Council
Councillor Colin Stewart, Perth and Kinross Council (Vice-Chair)
Bob Benson, Tayside NHS Board (Chair)
Martin Black, Tayside NHS Board
Beth Hamilton, Tayside NHS Board
Jacqui Jensen, Tayside NHS Board

Non-Voting Members

Jacquie Pepper, Chief Officer- Health and Social Care Partnership/Chief Social Work Officer, Perth and Kinross Council
Donna Mitchell, Acting Chief Financial Officer, Perth and Kinross Integration Joint Board
Susie Flowers, NHS Tayside
Dr Sally Peterson, NHS Tayside
Dr Lee Robertson, NHS Tayside
Dr Emma Fletcher, NHS Tayside

Stakeholder Members

Sandra Auld, Service User Public Partner
Bernie Campbell, Carer Public Partner
Lyndsay Hunter, Staff Representative, NHS Tayside
Dave Henderson, Scottish Care
Stuart Hope, Staff Representative, Perth and Kinross Council
Ian McCartney, Service User Public Partner
Maureen Summers, Carer Public Partner
Sandy Watts, Third Sector Forum

Perth and Kinross Integration Joint Board

Wednesday, 21 June 2023

AGENDA

- 3(i) MINUTE OF SPECIAL MEETING OF THE PERTH AND KINROSS 5 - 10**
INTEGRATION JOINT BOARD OF 30 MAY 2023 FOR
APPROVAL
(copy herewith)

- 6.6 JOINT CARERS' STRATEGY 2023-2026 11 - 144**
Report by Chief Officer (copy herewith G/23/84)

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PERTH AND KINROSS INTEGRATION JOINT BOARD

Minute of virtual special meeting of the Perth and Kinross Integration Joint Board (IJB) held via Microsoft Teams, on Tuesday 30 May 2023 at 2.00pm.

Present: Voting Members:

Mr B Benson, Tayside NHS Board (Chair)
 Mr M Black, Tayside NHS Board
 Ms B Hamilton, Tayside NHS Board
 Mr D McPherson, Tayside NHS Board (substituting for Ms J Jensen)
 Councillor C Stewart, Perth and Kinross Council (Vice Chair)
 Councillor D Illingworth, Perth and Kinross Council
 Councillor S McCole, Perth and Kinross Council
 Councillor M Frampton, Perth and Kinross Council

Non-Voting Members

Ms J Pepper, Chief Officer / Director – Integrated Health & Social Care,
 Chief Social Work Officer, Perth and Kinross Council
 Dr S Peterson, NHS Tayside

Stakeholder Members

Ms S Auld, Service User Public Partner
 Mr I McCartney, Service User Public Partner
 Mr S Hope, Staff Representative, Perth and Kinross Council
 Ms L Hunter, Staff Representative, NHS Tayside
 D Henderson (Scottish Care Sector)

In Attendance:

S Hendry, K Molley, A Brown and M Pasternak (all Perth and Kinross Council); E Devine (Perth and Kinross Health and Social Care Partnership); D Huband, S Hyman, D McGill, A McManus, L Milligan, D Shaw and A Thomson (all NHS Tayside).

Apologies:

Dr E Fletcher, NHS Tayside
 Dr L Robertson, NHS Tayside
 Ms B Campbell, Carer Public Partner
 Ms M Summers, Carer Public Partner
 Ms D Mitchell, Interim Chief Financial Officer, Perth and Kinross Health and Social Care Partnership

1. WELCOME AND APOLOGIES

B Benson, Chair, welcomed all those present to the meeting and apologies were noted above.

2. DECLARATIONS OF INTEREST

There were no Declarations of Interest made in terms of the Perth and Kinross Integration Joint Board Code of Conduct.

3. DELIVERY OF GENERAL MEDICAL SERVICE AT INVERGOWRIE MEDICAL PRACTICE

There was submitted a report by the Chief Officer (G/23/57) outlining the current position with Invergowrie Medical Practice, and the options available to NHS Tayside for ensuring continuity of care for those patients registered with the practice.

The Chair had agreed to a request from Bailie Alasdair Bailey, local ward member, to make a deputation to the Board on the proposals in the report. Bailie Bailey addressed the Board and answered a number of questions from members.

Board members provided a number of comments as part of their feedback along the themes of retention of premises and multi-disciplinary primary care and treatment services at Invergowrie, delivering for the strategic health needs of the residents for the Carse of Gowrie, process of options appraisal, timing of public reports and consultation; and accessibility of Ancrum Practice for Invergowrie patients, that are detailed in Appendix 1 of this minute.

Resolved:

- (i) The current position with Invergowrie Medical Practice and the termination date of their GMS contract on 23 June 2023, be noted.
- (ii) The options explored for ensuring ongoing care for those patients currently registered with Invergowrie Medical Practice, be noted.
- (iii) The preferred option being recommended to NHS Tayside Board (as set out in Appendix 1 to the report) to disperse the majority of patients to Ancrum Medical Practice and the remaining patients to a small set of practices, local to where they live and which have sufficient capacity to provide a continued good standard of access to healthcare, be noted.
- (iv) It be agreed that the Chief Officer compile a list of the comments provided by board members at this meeting and forward this to NHS Tayside Board as feedback prior to their meeting on Thursday 1 June 2023 to consider the position on Invergowrie Medical Practice (see Appendix 1).

Appendix 1

FEEDBACK FOR NHS TAYSIDE BOARD
Perth and Kinross IJB Special Meeting 30 May 2023

Delivery of General Medical Service at Invergowrie Medical Practice

The IJB was asked to:

- *Note the current position with Invergowrie Medical Practice and the termination date of their GMS contract on 23 June 2023;*
- *Note the options explored for ensuring ongoing care for those patients currently registered with the Invergowrie Medical Practice;*
- *Note the preferred option recommended to NHS Tayside Board to disperse the majority of patients to Ancrum Medical Practice and the remaining patients to a small set of practices, local to where they live, and which have sufficient capacity to provide a continued good standard of access to healthcare and;*
- *Provide feedback for NHS Tayside Board to take into account in their decision-making.*

The meeting heard a deputation from Bailie Alasdair Bailey, Perth and Kinross Council elected member for the Carse of Gowrie ward and a link to a petition which had gathered 566 signatures ("We, the undersigned ask that the NHS gets ready to run the surgery directly in case no new doctors come forward to run it before its planned closure date in June").

In terms of providing feedback to NHS Tayside Board the IJB agreed to provide this by consensus via a collation of all the key points raised by IJB Members. It was agreed that the Chief Officer would collate this and circulate to members for comment and ensure that this was provided to NHS Tayside Board in advance of their meeting in writing. The meeting expressed a substantial frustration in the options available for Invergowrie as the need for achievability and safety restricted the options available to a single pragmatic way forward. There was a sense of working behind the pace of change which arises from the very real challenges for the provision of GP services. However, it was noted that some medical services were to be continuing, and that the potential for re-opening could be looked at in six months' time.

Key themes arising from the meeting:

1. Retention of premises and multi-disciplinary primary care and treatment services at Invergowrie.

- Dundee HSCP provide these services as the practice has been aligned to a Dundee HSCP cluster and the IJB considered that it was crucial that these services continue to be provided for the community from the existing local and easily accessible base. ***Request that P&K HSCP continue to work jointly with Dundee HSCP to secure this.***
- Linked to this was the recognition of the delivery of enhanced pharmacy services in Invergowrie and it was confirmed that the local pharmacy will soon become a

prescribing pharmacy and the premises is to be refurbished and this will enhance the health care options within the community.

2. Delivering for the strategic health needs of the residents for the Carse of Gowrie

- Concern expressed that a strategic health needs assessment has not been carried out for the whole of the Carse of Gowrie and that the geographical area will now only have one GP practice based at Errol and this is located in a temporary building. The data on the practice contained within the report clearly shows an increasing population since 2002 with a requirement for primary care services. ***Request that P&K HSCP work jointly with Primary Care Services to carry this out and to report back on the outcome.***
- Concern expressed that the Errol Medical Practice is located in a temporary unit with no firm plans for securing permanent premises. Concern expressed that NHS Tayside Board approved the removal of capital projects related to the Carse of Gowrie and Bridge of Earn from the Draft 5-Year Capital Plan at its meeting on 27 April 2023. This was despite the fact that the landlord lease for the temporary building is due to expire in Feb 2025 and temporary planning consent will expire in November 2027, and, without the knowledge of the impact of the termination of the contract for Invergowrie Medical Practice. ***Request that this decision not to prioritise these projects in the Infrastructure Investment Plan needed to be reviewed.***
- The IJB noted the need for a more strategic approach to incentivising training practices in the hope of increasing attractiveness & improving recruitment & retention.

3. Process of options appraisal, timing or public reports and consultation

- Strong view that the options could have been brought forward for consideration at an earlier stage and that this would have allowed for more extensive and appropriate consultation and engagement.
- It was a concern for IJB members that consultation had not been comprehensive and that communication via letter was not sufficient in this context. The IJB wished to draw attention to the [Health and social care - Planning with People: community engagement and participation guidance - gov.scot \(www.gov.scot\)](https://www.gov.scot/publications/health-social-care-planning-with-people-community-engagement-and-participation-guidance/pages/1-1-introduction.aspx) and expressed a view that this had not been followed in this instance and that if it had – the community would have been able to consider and provide possible solutions to some of the issues that will arise as a result of the change. Collaboration with the local community needs to be more realistic and meaningful and should be a key consideration for the strategy for primary care across Tayside.
- The late issue of the public papers did not provide IJB stakeholder members with sufficient time to engage with their communities and communities of interest.

- The Perth and Kinross IJB will receive reports for approval of the Primary Care Services Strategy and associated Premises Strategy and there was a view that this should have been considered in advance of the Invergowrie options appraisal.
- Discontent with the options appraisal which lacked detail and did not demonstrate the requisite processes of consultation and engagement as per SG guidance. This also generated discussion about the possibility of a 2c contractual arrangement and had the IJB been able to consider this situation earlier then this could have been a realistic possibility.
- The IJB comments included a view that if there had been earlier consideration of this matter then other alternatives could have been explored and an interim solution provided until such times as a permanent solution could be achieved.
- ***Request that there is a lessons learned exercise in relation to the timing of meetings and decision-making.***

4. Accessibility of Ancrum Practice for Invergowrie patients

- Impact of additional travel and deficit is recognised within the Equalities Impact Assessment and there was a concern that the mitigations and provision of options for vulnerable residents has not yet been set out to assist in decision-making and to allay patient concerns.
- A very strong concern about the need for a strategic assessment of need arising from transport to travel to the GP practices patients would be dispersed to and an offer of examples of how to carry out this assessment using best practice models.
- A request that the use of digital communications such as Near Me is maximised.
- A request that the local Pharmacy provides the full breadth of services for local residents.

Jacquie Pepper
Chief Officer
On behalf of Perth and Kinross IJB



PERTH & KINROSS INTEGRATION JOINT BOARD

21 JUNE 2023

JOINT CARERS' STRATEGY 2023-2026

**Report by Chief Officer
(Report No. G/23/84)**

PURPOSE OF REPORT

This report presents the revised Joint Carers' Strategy, 2023-26, for Young and Adult Carers. This Strategy will also be presented to the Learning and Families Committee of Perth and Kinross Council.

1. RECOMMENDATION

It is recommended the IJB

- approves the revised Joint Carers' Strategy
- requests an update in 12 months' time on the implementation of the strategy.

2. SITUATION/BACKGROUND

The Carers (Scotland) Act 2016 (the Carers Act) was implemented in April 2018 with the intention to provide better outcomes for unpaid carers across Scotland. The Act placed duties on Local Authorities and Health Boards to jointly prepare and publish local Carers' Strategies following consultation with carers and local carer representative groups. Where a Carers' Strategy has been published, review of the strategy must take place by the Local Authority and the Health Board within 3 years of that strategy and a revised strategy produced.

The Joint Carers' Strategy 2019-22 was approved by both Integration Joint Board and Perth and Kinross Council's Lifelong Learning Committee on 6 November 2019.

The strategy was reviewed by the Strategic Leads for both Adult Carers and Young Carers in 2022. The original ambition and seven outcomes remain unchanged as they are still relevant.

Despite the challenges brought about by the Covid-19 pandemic and the many challenges faced by carers, we were able to make good progress in implementing the Joint Carers Strategy 2019-22:

- There have been 2,887 Carer Referrals since the strategy launch in 2019, creating 1,649 Adult Carer Support Plans.
- We were able to provide information about support available for carers across Perth and Kinross using online and hybrid methods, in addition to traditional methods, to ensure that communications continued during the pandemic and during pandemic recovery. This has contributed to a rise in number of carers registered with PKAVS and Perth and Kinross HSCP (1,537 in 2020 increasing to 2470 in 2022).
- Information about anticipatory care planning / emergency planning has contributed to a more than doubled number of Emergency Care Plans being completed (332 in 2020 increasing to 788 in 2022).
- The percentage of people admitted to permanent care due to carer breakdown has reduced from 36% to 16% as of December 2022.
- We invested in a dedicated Learning and Development Officer in 2022 who was able to further the training materials already developed about carers' rights and the support which is available.
- We invested in a Palliative Carer Support Worker and a Social Care Officer to work with our Hospital Link Worker to support carers looking after someone in hospital and family members of those with a terminal illness.
- Perth and Kinross has 15 support groups for carers. We have worked with partners to set up carer cafes in Crieff, Aberfeldy and Blairgowrie as well as supporting PKAVS in developing peer support.
- The Carers' Hub provides social and complementary therapies and grants to enable carers to have breaks. They also provide a telephone befriending service which was increased in 2021 to provide out of hours support. 376 carers are registered for our telephone service, making an average of 126 calls each week.
- In 2021/22 we were able to support 3,512 respite bed nights in Care Homes and 41,806 hours of Home Respite. Our partner, Crossroads, has provided 84,304 hours of sitting service in the three years since the strategy launched.
- Young Carers have been accessing support, including 172 new Young Carer Statements completed in 2022 enabling us to signpost them to support, 173 Young Carers accessing the Education Attainment Service with tutors delivering 1,231 individual tutoring sessions and 200 Young Carers have accessed or applied for funding for respite activities. There are also designated Young Carers' champions in all 11 secondary schools and 48 primary schools who meet quarterly to discuss issues and challenges.

- More detail on the impact of the previous Carers' Strategy can be found in Appendix 1 – Delivery Action Plan 2019-22.

During 2022 we also consulted with unpaid carers, their representatives and the professionals who work to support them through mailshots and open events in Carers' Week 2022. Their responses together with the national Carers' Strategy and findings from a recent inspection by the Care Inspectorate have been used to inform the revised Joint Carers' Strategy 2023-26.

3. JOINT CARERS' STRATEGY 2023-26

The Joint Carers' Strategy's 2023-26 aim is to 'ensure that carers are recognised as equal partners in care in planning the personalised support for themselves and those they care for, to support carers to live in good health allowing for a life of their own alongside caring, to the best of our ability.' The strategy is shown in Appendix 2 and the Equality and Fairness Impact Assessment is in Appendix 3.

The seven outcomes identified in the Joint Carers' Strategy 2019-22 continue to be progressed, working to provide better, more person-centred support to improve the lives of carers in Perth and Kinross. The revised Joint Carers' Strategy for 2023-26 reflects this continuing work and includes new actions to improve the lives of carers.

The strategy supports the HSCP's commitment to enabling adult carers to access support in their communities, using universal and specialist carer services, to direct support for themselves and those they care for and empowering them to be an essential voice in planning and shaping services. The importance of carers accessing a break cannot be underestimated and work will continue to develop services which enables carers to have a break from their caring role.

The impact of the cost-of-living crisis on unpaid carers has compounded the financial impact of taking on a caring role and throughout the period of the strategy work will continue to try and reduce financial exclusion of working-age carers through promotion of Carer Positive which helps local employers support members of their workforce who are unpaid carers

The Perth and Kinross Joint Carers' Strategy 2019-2022 also sets out our vision and commitment to supporting young carers in Perth and Kinross to 18 years. Our vision for young carers is that children and young people will have the best start in life and will be supported to achieve their full potential irrespective of their caring responsibilities.

The vision for carers of all ages remains as relevant for the revised Joint Carers' Strategy 2023-26 as it was in the Joint Carers Strategy 2019-22.

4. Next Steps

The following areas for development have been identified

- Improve awareness of the support available for carers through advertising and community events. More on this can be found in the Carers' Communication Plan in Appendix 4
- More involvement of carers in developing services
- Review of Carers' Support Services commissioned from the Third Sector
- Supporting carers to find or maintain employment as part of the national Carer Positive initiative
- Rollout of a carers' befriending service
- Enhanced bereavement support for carers and support for people caring for someone who is end of life
- Services for people caring for someone who has had a stroke or dementia
- Improve process for carers to access services
- Work with the Third Sector to improve the range of respite options for carers, especially carers who are parents. Perth and Kinross Carers' Project is one of 5 pilots nationally due for evaluation late 2023.

5 CONCLUSION

The refreshed Joint Carers' Strategy 2023 – 26 will build on the achievements of the previous strategy and continue to work with unpaid carers to develop and improve services to support them in their caring role.

Author(s)

Name	Designation	Contact Details
Karyn Sharp	Service Manager, Adult Social Work and Social Care	tay.pkijbbusinesssupport@nhs.scot
Alison Gallacher	Business Improvement Officer	

NOTE: No background papers, as defined by Section 50D of the Local Government (Scotland) Act 1973 (other than any containing confidential or exempt information), were relied on to any material extent in preparing this report.

1. IMPLICATIONS, ASSESSMENTS, CONSULTATION AND COMMUNICATION

Strategic Implications	Yes / None
HSCP Strategic Commissioning Plan	Yes
Transformation Programme	No
Resource Implications	
Financial	Yes
Workforce	Yes
Assessments	
Equality Impact Assessment	Yes
Risk	Yes
Other assessments (enter here from para 3.3)	No
Consultation	
External	Yes
Internal	Yes
Legal & Governance	
Legal	Yes
Clinical/Care/Professional Governance	No
Corporate Governance	No
Directions	Yes
Communication	
Communications Plan	Yes

1. Strategic Implications

1.1 Strategic Commissioning Plan

This report and its proposals relate to the achievement of the following Perth and Kinross Health & Social Care Partnership Strategic Commissioning Plan aims:

1. Working Together With Our Communities
2. Prevention and Early Intervention
3. Person-Centred Health, Care and Support
4. Reducing Inequalities and Unequal Health Outcomes and Promoting Healthy Living
5. Making Best Use of Available Facilities, People and Other Resources

2. Resource Implications

2.1 Financial

Financial implications have been considered and can be delivered within resource.

2.2 Workforce

Finance from the Carers' budget has been allocated for a workforce model to support the plan for 2023-24.

3. **Assessments**

3.1 Equalities & Fairness Impact Assessment

Under the Equality Act 2010, PKC and NHS Tayside is required to eliminate discrimination, advance equality of opportunity, and foster good relations between equality groups. Carrying out Equality Impact Assessments for plans and policies allows the HSCP to demonstrate that it is meeting these duties.

The Equalities & Fairness Impact Assessment undertaken in relation to this report can be viewed (Appendix 2). This report has been considered under the Corporate Equalities & Fairness Impact Assessment process (EFIA) and assessed as relevant and the following positive outcomes are expected following implementation:

Carers with protected characteristics will be supported to have equal access to information and support, and to minimise discrimination.

3.2 Risk

The Carers' Strategic Leads and the Strategy Steering Group have delegated responsibility for the implementation of the Act, to ensure the adequacy and monitoring of the arrangements for Carers and the management of risks.

3.3 Other Assessments

Not applicable.

4. **Consultation – Patient/Service User first priority**

4.1 External

As described in Appendix 2 of this report. A sincere thank you to Zuhair, Tom and Karen for sharing their life stories for inclusion within the Strategy.

4.2 Internal

As described in Appendix 2 of this report.

4.3 Impact of Recommendation

The implementation of the Carers (Scotland) Act 2016 is considered to have had a positive impact on service users, carers and the third sector. The implementation of the Act has been subject to ongoing engagement

throughout, in accordance with the legislation and good practice, as described in Section 3.

5. Legal and Governance

- 5.1 The Carers (Scotland Act 2016) places an obligation on local authorities and Health Boards to prepare and publish a carer strategy at periodic intervals. The proposed draft Carer Strategy ensures compliance with those obligations.

6. Directions

Perth & Kinross Council and NHS Tayside are directed to make the necessary arrangements to implement the actions in the Joint Carers' Strategy 2023-26.

7. Communication

- 7.1 A Communications Plan for the Joint Carers' Strategy 2023-26 has been developed to support the ongoing implementation of the Carers (Scotland) Act 2016.

2. BACKGROUND PAPERS/REFERENCES

Not applicable.

3. APPENDICES

Appendix 1 – Delivery Action Plan 2019-22
Appendix 2 – Joint Carers' Strategy 2023-26
Appendix 3 – Equality and Fairness Impact Assessment
Appendix 4 – Carers' Communication Plan
Appendix 5 – Direction

Joint Carers Strategy Delivery Plan:

<u>OUTCOME 1</u>		
What we will do: Provide clear, reliable, accessible information about local and national support is available across a wide range of locations in Perth & Kinross.		
How we will do this	How we will measure how well we are doing	National Health & Wellbeing Outcomes delivered
1. Review and update information about carer support and services for accuracy and relevance on paper and electronic formats. Electronic formats include PKAVS Carers Hub Website, YourCommunityPK, www.pkc.gov.uk.	<ul style="list-style-type: none"> Number of carers registered with PKAVS and P&K HSCP. PKAVS* 2022 – 2470 2021 – 1875 2020 – 1537 Percentage of carers reporting they feel informed and able to access a range of information and advice. Jun 2022 – 86% Jan 2021 – 78% Jan 2020 – 93% Number of completed Adult Carer Support Plans/Young Carer Statements. 2022 - 627 2021 - 634 2020 - 524 	<p>People who work in Health & Social Care Services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.</p> <p>Health & Social Care Services contribute to reducing health inequalities.</p> <p>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.</p> <p>People are able to look after and improve their own health and wellbeing and live in good health for longer.</p> <p>Health & social care services contribute to reducing health inequalities.</p>
2. Distribute and display information in a range of community and commercial	<ul style="list-style-type: none"> Number of carers registered with PKAVS and P&K HSCP. PKAVS 	

<p>premises, such as supermarkets, pharmacies, hospitals, GP surgeries, dental practices, local grocery shops, schools, libraries, PKAVS, council buildings etc.</p>	<p>2022 – 2470 2021 – 1875 2020 – 1537*</p> <ul style="list-style-type: none"> Percentage of carers reporting they feel informed and able to access a range of information and advice. <p>Jun 2022 – 86% Jan 2021 – 78% Jan 2020 – 93% Carers who feel the information is clear, accessible and helpful Jun 2022 – 81% Jan 2021 – 76% Jan 2020 – 86%</p> <ul style="list-style-type: none"> Number of requests for information and advice. <p>Jan 2022 -17,514 Jan 2021 – 14,918 Jan 2020 – 12,584 (Includes responses for requests for information and advice.)</p>	
<p>3. Provide information about anticipatory care planning/emergency planning to every carer to increase the number of carers having emergency plans in place.</p>	<ul style="list-style-type: none"> Number of Emergency Care Plans completed. <p>Jan 2022 - 788 Jan 2021 - 691 Jan 2020 - 332</p>	

	<ul style="list-style-type: none"> Number of Carer Cards issued by Community Alarms <p>2022*Current numbers not known. New Emergency Carer Card launched November and cards issued recorded.</p> <p>2021 - 2020 - 23</p>	
4. Work with partners to ensure there is relevant information for ethnic minority and gypsy/traveller carers.	<ul style="list-style-type: none"> Number of carers from ethnic minority backgrounds, gypsy/traveller community, etc. engaging with our services. <p>2022 -104 2021 – 81 2020 - 55</p>	

OUTCOME 2

What we will do Promote awareness about the Carers Act in the community and workplaces to improve early identification and support of carers.

How we will do this	How we will measure how well we are doing	National Health & Wellbeing Outcomes delivered
1. Develop information and guidance material to support training to health and social care and wider partners to better identify and support carers as well as to help carers to better	<ul style="list-style-type: none"> Number of carers registered with PKAVS and P&K HSCP. <p>PKAVS 2022 – 2470 2021 – 1875 2020 – 1537*</p>	People who work in Health & Social Care Services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.

self-identify and to seek support.	<ul style="list-style-type: none"> Percentage of carers who feel supported to continue in caring role. Jun 2022 – 82% Jan 2021 – 59% Jan 2020 – 79% Number of professionals completing training. <p>2022 - 146</p>	<p>People who provide unpaid care are supported to look after their own health and wellbeing, including reduce any negative impact of their caring role on their own health and wellbeing.</p> <p>Health & social care services are centred on helping to maintain or improve the quality of life of people who use those services.</p>
2. Develop carer champions and networks to share knowledge about the support available to carers.	<ul style="list-style-type: none"> Number of carer champions/networks within Perth & Kinross. <p>This action was not taken forward due to changed priorities for the wider partnership through the Covid pandemic. All PKC schools now have a Young Carers Champion among their workforce.</p>	<p>Health & social care services contribute to reducing health inequalities.</p>
3. Support employers in Perth & Kinross to recognise carers in the workplace and to gain Carer Positive accreditation.	<ul style="list-style-type: none"> Number of local businesses who have been awarded a 'Carer Positive' accreditation. Jan 2022 - 3 Jan 2021 - 3 Jan 2020 - 3 PKC: Enhanced NHS Tayside: Enhanced PKAVS: Exemplary Percentage of carers who feel supported at work/college/university. 2022 – 62% 	

	2021 – 22% 2020 – 29%	
4. Work with GP practices to improve the early identification of carers at the point of diagnosis of the cared-for person.	<ul style="list-style-type: none"> Number of carers referred by GP to PKAVS. Jan 2022 - 68 Jan 2021 - 56 Jan 2020 - 29 Includes referrals from other Health professionals.	

OUTCOME 3

What we will do: Ensure carers are listened to and have their opinions valued by professionals.

How we will do this	How we will measure how well we are doing	National Health & Wellbeing Outcomes delivered
1. Review hospital discharge planning in relation to involving carers and raise awareness across professionals and carers to increase early identification and involvement of carers.	<ul style="list-style-type: none"> Percentage of carers involved in discharge planning. 2022 – 84% 2021 – 60% 2020 – 60% <ul style="list-style-type: none"> Number of carers referred through hospital discharge. 2022 - 72 2021 - 70 2020 - 69	<p>People who use health & social care services have positive experiences of those services, and have their dignity respected.</p> <p>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.</p>

<p>2. Work with Health, Social Work and Education professionals to involve carers in decisions about the support of the cared-for person, bridging the needs of cared-for person with the support needs of the carer as much as practicable.</p>	<ul style="list-style-type: none"> Percentage of carers who feel that local services are well coordinated for them and the person they look after. 2022 - 83% 2021 - 67% 2020 - 62% Percentage of carers who feel they have a say in services provided for the cared-for person. 2022 - 87% 2021 - 67% 2020 - 64% 	<p>People who work in health & social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.</p> <p>People who provide unpaid care are supported to look after their own health and wellbeing, including reduce any negative impact of their caring role on their own health and wellbeing.</p>
<p>3. Develop and take forward actions from carer feedback obtained from carer consultations, meetings, surveys. Review and revise processes, eligibility frameworks and short breaks services statement where necessary to improve carer experience.</p>	<ul style="list-style-type: none"> Percentage of carers who feel that local services are well coordinated for them and the person they look after. 2022 - 83% 2021 - 67% 2020 - 62% Percentage of carers who have a positive experience of services designed to support them. 2022 - 80% 2021 - 72% 2020 - 81% 	
<p>4. Review how to better support carers who are bereaved or where the cared-for person enters permanent residential care.</p>	<ul style="list-style-type: none"> Number of bereaved carers supported. 2022 – 97 2021 - 35 2020 - 15 	

	<ul style="list-style-type: none"> Percentage of carers who have a positive experience of services designed to support them. <p>2022 - 80% 2021 - 72% 2020 - 81%</p>	
5. Ensure that there is a smooth transition of support for young adult carers.	<ul style="list-style-type: none"> Percentage of carers who have a positive experience of services designed to support them. <p>2022 - 80% 2021 - 72% 2020 - 81%</p> <ul style="list-style-type: none"> Percentage of carers who are satisfied with transition support. <p>2022 – 77% 2021 – 74% 2020 – 86%</p>	

OUTCOME 4

What we will do: Provide opportunities for carers to participate as active partners to the planning and shaping of carer services in their local areas including services for the people who are cared for.

How we will do this	How we will measure how well we are doing	National Health & Wellbeing Outcomes delivered
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<p>1. Include carer representatives on relevant steering and working groups so that they can be active partners in the planning and shaping of carer services across Perth & Kinross.</p>	<ul style="list-style-type: none"> Percentage of carers aware that there are opportunities to be involved in planning services.* 2022 - 81% 2021 - 67% 2020 – N/A Percentage of carers who feel that local services are well coordinated for them and the person they look after. 2022 - 83% 2021 - 67% 2020 - 62% Percentage of carers who feel they have a say in services provided for the cared-for person. 2020 – 87% 2021 – 67% 2020 – 64% 	<p>People are able to look after and improve their own health and wellbeing and life in good health for longer.</p> <p>People who use health and social care services have positive experiences of those services, and have their dignity respected.</p> <p>Health and social care services contribute to reducing health inequalities.</p> <p>Resources are used effectively and efficiently in the provision of health & social care services.</p> <p>People who work in health & social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.</p>
<p>2. Provide opportunities for carers to recognise their own contribution in the life of those they care for, to receive updates on current developments, and to give feedback on future changes.</p>	<ul style="list-style-type: none"> Number of carers attending Carers Events (adult/young carers). 2022 – Carer’s Week fun day 65 carers registered Carers Connect – Carers Rights Day – 21 attended virtual Sessions. 2021 – Carers Connect (Carers Rights Day)- 45 carers attended in person and a further 9 virtually. 171 views of the Infomercials. 2020 – Carers Connect – (Carers Rights Day) 41 carers attended virtual Carers Connect event. YouTube Film viewed 203 times. Information Handbook Making Caring Visible and Valued sent 	

	<p>to over 1000 adult carers - Carers Week in June 2020.</p> <ul style="list-style-type: none"> Percentage of carers aware that there are opportunities to be involved in planning services. <p>2022 - 81% 2021 - 67% 2020 – N/A</p> <ul style="list-style-type: none"> Percentage of carers who feel they have a say in services provided for the cared-for person. <p>2020 – 87% 2021 – 67% 2020 – 64%</p>	
<p>3. Work with carers and partners to shape services to ensure they remain meaningful and responsive to demand and explore more holistic forms of support for carers through a working group including carers' representatives and social enterprise providers.</p>	<ul style="list-style-type: none"> Percentage of carers reporting improved outcomes. <p>2022 – 73% 2021 – 53% 2020 – 68%</p> <ul style="list-style-type: none"> Percentage of carers who feel they have a good balance between caring and other things in their lives. <p>2022 - 52% 2021 - 51% 2020 – 50%</p> <ul style="list-style-type: none"> Percentage of carers who are satisfied with opportunities to maintain or improve their health and wellbeing. <p>2022 – 82% 2021 - 67%</p>	

	2020 – 82%	
4. Develop carer satisfaction survey for carers to obtain information about the care they provide, and their experiences of carers services used, to review effectiveness and efficiency of resources used.	<ul style="list-style-type: none"> Percentage of carers who have a positive experience of services designed to support them. 2020 – 87% 2021 – 67% 2020 – 64% <ul style="list-style-type: none"> Percentage of carers who feel supported to be able to continue in caring role. 2020 – 87% 2021 – 67% 2020 – 64%	

* Survey statement changed for clarity to distinguish between being involved in planning services for the person they care for and being involved in the planning of wider services. Statement changed to I am aware that there are opportunities to be involved in the planning of services.

What we will do	How we will do this	How we will measure how well we are doing	National Health & Wellbeing Outcomes delivered
<u>OUTCOME 5</u> Develop wider carer networks to enrich peer support.	1. Provide support in localities and within Care Groups to develop Carer Peer Support Groups to improve the provision of peer support amongst carers.	<ul style="list-style-type: none"> Number of carers who attend carer cafes and other groups. 2022 –PKAVS- 1665 places Crieff Café - approx. 10 –15 regularly attending Aberfeldy Café - approx. 8-10 2021 – PKAVS - 690 places Crieff – 6-10 attending regularly 2020 – PKAVS 93 places <ul style="list-style-type: none"> Increase in number of groups in localities that are regularly attended. 	People are able to look after and improve their own health and wellbeing and life in good health for longer. Resources are used effectively and efficiently in the provision of health & social care services.

		<p>2022 – 198 groups 2021 – 23 groups 2020 – 4 groups</p> <ul style="list-style-type: none"> Percentage of carers who feel supported to be able to continue in caring role. <p>2020 – 87% 2021 – 67% 2020 – 64%</p>	
	<p>2. Support Carers Voice for adult carers and establish Young Carer Forum.</p>	<ul style="list-style-type: none"> Number of members at Carers Voice and Young Carers Forum 2022 - Carers Voice – 132 Young Carers Forum – No data received 2021 – Carers Voice - 108 Young Carers Forum - 12 2020 - Carers Voice – 87 Young Carers Forum – 7 Percentage of carers aware that there are opportunities to be involved in planning services. 2022 - 81% 2021 - 67% 2020 – N/A Percentage of carers who feel supported to be able to continue in caring role. 2020 – 87% 2021 – 67% 	

		2020 – 64%	
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What we will do	How we will do this	How we will measure how well we are doing	National Health & Wellbeing Outcomes delivered
<u>OUTCOME 6</u> Improve provision of flexible and personalised support, to support emotional/ physical wellbeing of carers and to support them to have a life alongside caring	1. Provide a wide range of training opportunities for carers to develop confidence and skills.	<ul style="list-style-type: none"> Number of carers who are accessing training opportunities. 2022 - 182 2021 - 164 2020 - 169 Number of training opportunities made available. 2022 - 52 Sessions 2021 – 37 -Sessions 2020 – 23 Sessions 	<p>Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.</p> <p>People who provide unpaid care are supported to look after their own health and wellbeing, including reduce any negative impact of their caring role on their own health and wellbeing.</p>
	2. Provide opportunities for carers to be active partners in planning and shaping supports that promotes better emotional/physical wellbeing and life balance.	<ul style="list-style-type: none"> Percentage of carers who are satisfied with opportunities to maintain or improve their health and wellbeing. 2022 – 72% 2021 – 52% 2020 – 79% Percentage of carers who feel they have a good balance between caring and other things in their lives. 2022 - 52% 2021 - 51% 2020 – 50% 	<p>Health and social care services contribute to reducing health inequalities.</p>

		<ul style="list-style-type: none"> Percentage of carers who feel the support they received had a positive impact on their health & wellbeing. <p>2022 – 82% 2021- 67% 2020 – 82%</p>	
	3. Work with partners to recognise how to provide culturally specific support to carers of different cultural backgrounds and communities.	<ul style="list-style-type: none"> Number of carers from ethnic minority backgrounds, gypsy/traveller community etc. engaging with our services. <p>2022 -104 2021 – 81 2020 - 55</p>	
	4. Review the range of outcome-focussed support across localities for accessibility, availability, relevance and suitability.	<ul style="list-style-type: none"> Number of carers accessing short breaks/respite. <p>2022 - 404 2021 – 583 2020 – 435</p> <ul style="list-style-type: none"> Number of carers issued with leisure cards. <p>2022 – 308 2021 - 252 2020 - 114</p> <ul style="list-style-type: none"> Number of carers accessing social and complementary therapies. <p>2022 – 380- social therapies</p>	

		<p>698 - complementary therapy vouchers</p> <p>2021 – 111 social therapies</p> <p>559 - complementary therapy vouchers</p> <p>2020 - 113 social therapies - 365 complementary therapy vouchers</p> <ul style="list-style-type: none"> • Number of carers exercising choice and control under SDS. <p>2022 - 463</p> <p>2021 - 354</p> <p>2020 - 255</p> <ul style="list-style-type: none"> • Percentage of carers who report improved outcomes. <p>2022 – 73%</p> <p>2021 – 53%</p> <p>2020 – 68%</p> <ul style="list-style-type: none"> • Uptake of Technology Enabled Care. <p>Technology Enabled Care is an Advisory Service and does not hold data on the uptake of TEC devices. The Smart Flat which enables the demonstration of many devices in a home setting was closed due to Covid but 6 identified carers have visited since reopening in April 2022.</p>	
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	5. Explore further opportunities for social and financial inclusion	<ul style="list-style-type: none"> Number of carers referred to Welfare Rights. 2022 – 132 2021 – Data not held 2020 - 46 Number of “Carer Positive” awards to local businesses. 2022 – 3 2021 – 3 2020 - 3 Number of Carers accessing short breaks 2022 - 404 2021 – 583 2020 – 435 	
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What we will do	How we will do this	How we will measure how well we are doing
<u>OUTCOME 7</u> Young Carers will have the best start in life and will be supported to achieve their potential, irrespective of their caring	1. Complete a Young Carer Statement when requests are made by the Young Carer / parent / guardian.	<ul style="list-style-type: none"> Number of completed Young Carer Statements. Number of Young Carer Statements offered. <p>2022 - 204 completed / 204 offered 2021 – 163 completed / 123 offered 2020 – 114 completed/ 89 offered</p>
	2. Support young carers where their caring role is having an impact on their attainment and work	<ul style="list-style-type: none"> Number of young carers who are supported through schools <p>2022 – 592 2021 - 402 2020 – 123</p>

responsibilities will be supported to achieve their potential	creatively with schools to reduce the attainment gap for young carers.	<ul style="list-style-type: none"> Number of young carers with improved outcomes at school. No data held
	3. Increase a variety of respite opportunities by making funds available for young carers to make choices about their own needs and interests.	<ul style="list-style-type: none"> Number of young carers accessing short breaks. 2022 - 196 2021 – 286 2020 – 223 Number of young carers who feel they have a good balance between caring and other things in their lives. No data held
	4. Work with schools to identify young carers to provide preventative support, as early as possible (Level 1). Increase opportunities to creatively engage with learning and identify what support is needed at home to improve attendance in school.	<ul style="list-style-type: none"> Number of young carers who are identified at level 1. 2022 – Levels no longer used - all identified young carers outcomes supported when YCS completed 2021 – 23 2020 – 22 Percentage of young carers who feel supported in their caring role. No data held.
	5. Support young carers and their families to improve their lives where the caring role is impacting their wellbeing.	<ul style="list-style-type: none"> Improved school attendance rates. Refer to ECS for data. Number of young carers who feel supported in education. Refer to ECS for data Number of young carers being supported at level 2-3. 2022 - 173 Young Carers accessed EASYC 2021 – 211 2020 - 258

	6. Work across services to meet the needs of both the Young Carer and the cared-for person.	<ul style="list-style-type: none"> Number of young carers who feel they have a good balance between caring and other things in their lives. No data held
	7. Support young carers pre-school age.	<ul style="list-style-type: none"> Number of pre-school young carers supported. 2022 – No data held. 2021– No data held. 2020– No data held. NHS Tayside has responsibility for pre-school young carers
	8. Work with young carers over the life of this strategy to make the Service changes required to better meet their identified needs.	<ul style="list-style-type: none"> Number of young carers accessing short breaks of their own choice. 2022 – 46 2021 – 157 2020 - 133 <ul style="list-style-type: none"> Number of young carers who feel they have a good balance between caring and other things in their lives No data held.

APPENDIX 2

CARERS STRATEGY

2023 - 2026

For Young and Adult Carers

A Life Alongside Caring



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CHAPTER 1: INTRODUCTION, OBJECTIVES AND LEGISLATIVE FRAMEWORK

1. Introduction

We are delighted to present our refreshed Joint Adult and Young Carer Strategy 2023 – 2026 underlining our continued commitments to **unpaid carers of all ages**. This strategy will continue to progress and embed the actions from the Joint Carers Strategy 2019-22, while reflecting on significant events of the previous 3 years, the impact of Covid-19 and the cost-of-living crisis on unpaid carers.

Our vision is to fully support all unpaid carers in Perth & Kinross to have a life alongside caring, ensuring that resources are used effectively to meet the gaps identified in support provision. Our vision for young carers is that they are supported to be children first and foremost, having similar opportunities as their peers.

Like our previous strategy, this strategy is shaped by carers, their families, service users, and staff from the Health & Social Care Partnership (Perth & Kinross Council, NHS Tayside, and Third and Independent Sector organisations). Views of young and adult carers and their representatives have been sought via consultation into their needs, challenges, hopes and concerns to ensure that this strategy is relevant and useful. We also listened to what carers told us about continued or new gaps in service provision, ideas for improvements and what works well for them. In Chapter 4 of this strategy, we outline the feedback we received and set out both our commitments and the outcomes we will deliver in response to that feedback.

The strategy will be reviewed annually, in addition to ongoing monitoring, to ensure that it remains robust and meaningful, and will be in place until 2026.

2. Policy Statement

We believe that unpaid carers of all ages play a vital role in the lives of the people they care for and in the wider community. We are committed to supporting carers to ensure they can continue to provide that care for as long as they wish. Our aim is to ensure that carers are recognised and valued as equal partners in care to plan the personalised support they need in their caring role; and to support carers to live in good health and wellbeing, allowing for a life of their own alongside caring, to the best of our ability.

3. The Legislative Framework

The strategy is underpinned by the Carers (Scotland) Act 2016, and Social Care (Self-Directed Support) (Scotland) Act 2013.

Carers (Scotland) Act 2016

This legislation came into effect from 1 April 2018 and enhances the rights of carers in Scotland. The purpose of the Carers Act is to ensure that unpaid carers, who are able and willing to continue caring, are better and more consistently supported to have a life alongside caring. For young carers, the intention is to ensure that they are children first and foremost, and that any caring role they have is secondary.

This legislation gives carers a right to be offered, or to request, an Adult Carer Support Plan or Young Carer Statement, which supports the carer to identify the advice and support that is needed to reduce the impact of caring on their health and wellbeing and other aspects of their lives. Following the introduction of the Terminal Illness Regulations in July 2021, carers supporting someone with a terminal illness must be offered Adult Carer Support Plans which have to be completed within specific timelines.

The Carers Act also puts a duty on the Health and Social Care Partnership to set local eligibility criteria for supporting carers, to develop the adult carer support plan and young carer statement, to develop a Short Breaks Services Statement, to involve carers in carers' services and in hospital discharge planning, and to maintain advice and information services.

We have worked, and will continue to work, collaboratively with carers, their families and groups who represent carers to implement the changes required under this new law locally across Perth & Kinross.

Social Care (Self-Directed Support) (Scotland) Act 2013

Under this legislation, we will provide information and advice about Self-Directed Support (SDS) options. We have a duty to offer people who are eligible for social care, a range of choices over how they receive their social care and support. SDS allows people, their carers, and their families to make informed choices on what their support looks like and how it is delivered, making it possible to meet agreed personal outcomes.

SDS includes a range of options to ensure everyone can exercise choice and control. Carers have four options in relation to how their budget is controlled, which are:

- Choosing to receive a Direct Payment (also called a cash payment).
- Choosing to have the funding allocated to a service provider of their choice.
- Choosing to have Perth & Kinross Council to arrange a service for the carer.
- Choosing to have a mix of the above options for different types of support.

Carers can use SDS in different ways; for instance, to support the carer to live in their own home. Outside of the home, it could support the carer to go to college/work or enjoy leisure pursuits. It could help the carer arrange for a personal assistant (PA) or be used to help to provide a short break or equipment for the carer.

4. Objectives and Strategic Framework

This Strategy reflects and supports the five commitments of the Strategic Commissioning Plan for the Health & Social Care Partnership (HSCP):

Working together with our communities

Prevention and early intervention

Person-centred health, care, and support

Reducing Inequalities and Unequal Health Outcomes and Promoting Healthy Living

Making Best Use of Available Facilities, People and Other Resources

To meet these goals, we want to provide more opportunities for people to achieve their potential at all life stages, using these themes which underpin the work of the Health and Social Care Partnership.

We will listen to and work with carers along with their families and friends in accordance with the Health and Social Care Standards (my support, my life):

1. I experience high quality care and support that is right for me
2. I am fully involved in all decisions about my care and support
3. I have confidence in the people who support and care for me
4. I have confidence in the organisation providing my care and support
5. I experience a high-quality environment if the organisation provides the premises

Using these standards, we will prioritise and respect people and their choices when they seek support.

The strategy embraces the National Health and Wellbeing Outcomes, in particular Health and Wellbeing Outcome 6: 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.

- ❖ In addition, the strategy embeds the Equal Partners in Care (EPiC) core principles:
- ❖ Carers are identified
- ❖ Carers are supported and empowered to manage their caring role
- ❖ Carers are enabled to have a life outside of caring
- ❖ Carers are free from disadvantage and discrimination related to their caring role
- ❖ Carers are fully engaged in the planning of services
- ❖ Carers are recognised and valued as equal partners in care

The strategy also reflects the Perth and Kinross vision that children and young people will have the best start in life and will be supported to achieve their potential. This is in line with our commitment: Getting it Right for Every Child (GIRFEC) and the ethos of the Carers (Scotland) Act 2016, which places emphasis on young carers being children first, carers second, ensuring that they are supported to achieve the best possible outcomes in life.

The strategy also takes account of the direction and considerations made by the National Carer Strategy and the Care Inspectorate Inquiry into Adult Carers' Experiences of Social Work and Social Care Services, both published in December 2022. We have used these to inform the action/delivery plan.

The Scottish Government published the National Carers Strategy in December 2022 which embeds 89 actions within 5 themes:

1. Living with Covid-19
2. Valuing, Recognising and Supporting Carers
3. Health and Social Care Support
4. Social and Financial Inclusion
5. Young Carers

The Care Inspectorate Inquiry into adult carers' experiences of social work and social care services, highlighting 8 considerations to support continuous improvement in the experience of carers. These are:

1. Develop and improve the accessibility and availability of short breaks available to support carers to continue to care.

2. Promote awareness of the rights that carers, including 'hidden carers', have to an adult care support plan and the benefits of having one in place.
3. Improve carers' experiences of systems and processes including initial access, resource allocation and reviews.
4. Ensure there is refocus on prevention and early intervention, self-directed support, and outcomes-focused practice for carers.
5. Further support social work and social care staff to be more knowledgeable about the Carers (Scotland) Act 2016.
6. Further develop with carers engagement and consultation approaches including evaluation of these approaches and how best to feedback carers' views.
7. Ensure that local carer strategies, short-break services statements and eligibility criteria are up to date and are co-produced with carers and carers' organisations.
8. Ensure there is meaningful and representative inclusion of carers in planning and governance groups that impacts positively on service improvement.

5. Equalities

In accordance with the Public Sector Equality Duty (General Equality Duty), Perth & Kinross Health and Social Care Partnership, and Perth & Kinross Council Education and Children's Services) have a duty to eliminate unlawful discrimination, harassment, and victimisation and to advance equality of opportunity between people who share a protected characteristic. Protected characteristics, under equalities legislation, include age, race, sex, disability, colour, ethnic origin, religion or belief, sexual orientation, or gender re-assignment. Under the Fairer Scotland Duty, we must actively consider how we can reduce inequalities of outcome caused by socioeconomic disadvantage when making strategic decisions. Although not named as having a protected characteristic, Carers are covered under Equalities legislation by their association to the person who they care for who may have one or more protected characteristic.

6. Monitoring, Reviewing and Reporting on the Strategy

The achievement towards meeting the outcomes on this Strategy will be monitored through the Carers Strategy Steering Group and the Carers Strategy Group. For adult carers, reporting is required to the Strategic Commissioning Board, HSCP Executive Management Team and the Integration Joint Board and Audit and Performance Committee and for Young Carers through Learning and Families Committee.

CHAPTER 2: WHO ARE CARERS AND THE IMPACT OF CARING

7. Definition of Young and Adult Carers

The **Carers (Scotland) Act 2016** defines an unpaid carer as an ‘**individual who provides or intends to provide care for another individual (the ‘cared for person’).**’

An unpaid carer can be a child or an adult who gives help and support to someone else who has a disability, illness, health condition, a mental health or substance misuse issue, and/or who is elderly or frail. The person being cared for may be a spouse, parent, child, sibling, a relative, neighbour or a friend of the carer.

Unpaid carers can also be parent carers or kinship carers who provide care to an ill or disabled child to a greater extent than would be expected in a parenting role. Unpaid carers may have paid or voluntary work other than their caring role, be in education, retired, or be unemployed. They may be in receipt of welfare benefits, pensions or be earning wages unrelated to their caring role.

All carers provide a vital contribution to their families and to society. They provide often unseen care and support to relatives within their household and the wider family, without acknowledging the impact on themselves. Additionally, they can often keep families together and reduce the need for organised and formal care services.

This strategy is for carers of all ages:

Young carers, who are under 18 or are 18 and are still at school, who live within Perth & Kinross, even if the cared-for person lives outside of this area.

Adult carers, who are 18 or over, who have left school and are caring for someone who lives within Perth & Kinross, even if the carer lives outside of this area.

8. Young Carers

8.1 The Impact of Caring on Young Carers

Being a carer can be a positive experience for a young person. The caring role can give a sense of responsibility and identity and can build self-confidence and esteem. By making an important and positive contribution to family life, the young carer can feel more valued and included and can enable them to develop important life skills. However, when young people are required to take on too many caring responsibilities, or conduct caring roles that are not appropriate, there can be limiting or adverse effects on their health and overall well-being. This can impact every area of their lives including school, health, community, and home:

- It is important to support young carers to consistently attend school.
- Young carers may require support to complete homework on time and may require additional support in class.
- Without the right support their young carer role can potentially limit the young person's ability to achieve their full potential.
- Young carers often feel different from peers with an increased likelihood of being bullied – [PKC Anti-Bullying Strategy](#).
- The demands of consistently providing intensive physical care for the cared for person can impact on a young carer's physical and emotional wellbeing over time.
- Taking on responsibilities that would normally be conducted by an adult can lead to a young person experiencing mental health and wellbeing issues, such as depression and stress.
- Young carers may not be looking after themselves as their focus is on the cared for person.
- They may be worrying about the cared for person and may have very little free time to socialise so their friendships can be limited. This could lead to increased isolation such as creating barriers to joining after school clubs and/or other groups which normally help build relationships.
- Some young carers may be reluctant to bring friends home due to their home environment and may also experience bullying within their community for being different.
- Financial constraints within the family home can limit the life opportunities of young carers. The effects of a cared for person's disability can add additional costs to the running of a home such as extra heating, specialised equipment or maintaining a special diet, therefore limiting available funds.
- Where there is a barrier to learning, under The Education (Additional Support for Learning) (Scotland) Act 2004 (as amended 2009) schools have a responsibility to identify needs and keep these under review following the PKC staged intervention framework. For most young carers, their needs may be met at a universal level by the class teacher(s).



8.2 Working in Partnership

We recognise that meeting the needs of young carers cannot rest with one organisation alone and that it takes strong partnerships and effective joint working

across a wide range of services, including the Third Sector, to support the varied needs of young carers and their families.

There will be occasions where there will be a need for partnership working across services for adults and children when assessing the needs of the young carer. The relevant professionals from across services will work together with the young carer and the person they give support to, to identify the necessary supports. This may involve drawing on appropriate resources from across services as necessary to meet the young carer and cared for person's needs to prevent breakdown and keep families together.

Zuhair's Story

Zuhair is a young carer for his 2 younger siblings both of whom were diagnosed with a form of ataxia 6 years ago. Ataxia is a progressive degenerative disease that affects balance, control, and eye movement. Caring for his siblings involves the whole family and this became harder following a car accident which left Zuhair's mother temporarily unable to walk.

Zuhair started to care more for his siblings to enable his father to keep working. Like so many young carers, this has at times left Zuhair feeling isolated and struggling with his mental health. Zuhair was referred into PKAVS young carers' service and started receiving support in May 2019. The support worker at PKAVS acts as a lifeline for Zuhair and his other sister Layan, also a young carer for the family. Zuhair and Layan have been offered support through accessing one to one support sessions, attending weekly respite groups during school term time, going on day trips, and having longer residential breaks away during school holiday periods.

Zuhair also attended private tuition lessons through the Educational Attainment Service that the young carers service offers (Easy-c), and his sister Layan will start to access that same service soon. Despite their caring roles at home, both Zuhair and Layan regularly attend PKAVS Young Carers Voice forum which meets regularly so the service is always well informed about the challenges young carers are facing. This commitment to making sure young carers' voices continued to be heard, despite everything else both Zuhair and Layan have going on in their lives, is typical of the caring nature of most young carers.

9. Young Adult Carers

When young carers reach 18 years and are no longer in school, they are entitled to an Adult Carer Support Plan (ACSP). The carer will be offered continued support with an ACSP. This will be completed with the Young Adult Carer Support Worker at PKAVS. It is vital that there is no gap in support for the young person.

Although the Carers Act does not give special definition for young adult carers, we commission services from PKAVS for young adult carers (aged 18 to 24) as we recognise the importance of supporting carers through the transition phase from child to adult.

The impact of caring on a young adult carer can be a varying combination of the impacts on young carers and adult carers. There may be:

- Limited opportunities to socialise, to make or sustain friendships.
- Difficulties in meeting education demands at school, college, or university.
- Challenges in accessing work opportunities or maintaining jobs where employers lack awareness about carers.
- Feelings of guilt, anxiety, stress, worry and isolation.
- Concerns about moving away, leaving their family and the person who needs support.



According to the 2011 Census, young carers and young adult carers are twice as likely to report a mental health condition compared to those without caring responsibilities, and young adult carers are three times more likely to report a mental health condition compared to young carers. While the information throughout this strategy for young and adult carers is also applicable to young adult carers, it is vital to ensure that this age group of carers is also supported throughout this important transitioning stage of life from child to adult.

10. Adult Carers

10.1 The Impact of Caring on Adult Carers

Adult carers may give physical support, help with practical tasks, and provide emotional support such as reassurance and encouragement. Caring can be extremely demanding but also rewarding. Care may be provided throughout the day and night, seven days a week, or may fluctuate depending on the needs of the person they look after. Each carer, and their caring situation, is unique. As such, carers experience varying degrees of positive and negative impacts.

- Sometimes, a caring role can feel very challenging and can lead to:
- Social isolation due to not having time to develop or maintain relationships with friends or family members.
- Stress of coordinating care with wider family responsibilities.
- Having very limited or no opportunity to have 'time out' or a break to recharge.



- Difficulties in maintaining education or employment, leading to the loss of opportunities and income.
- Increased financial pressures due to the caring role.
- Making long-term lifestyle changes.
- Health and wellbeing being impaired due to pressure and stress of the caring role.



10.2 Working in Partnership

The Health and Social Care Partnership works with the Third Sector and other providers to help carers get the support they need at the earliest opportunity.

Our main partners at the Carers Hub based in Perth is run by PKAVS. They provide ongoing support through the telephone befriending scheme, through Time for Me grants, carer peer support groups and other ongoing support.

We also work closely with Crossroads who provide Sitting Services, supporting the carer to take a break from their caring role along with other regulated services across all localities.

Tom's* Story

Tom has provided support for his partner for more than 5 years and is her main carer. Tom's partner has severe and enduring mental health issues and is currently being supported by the mental health team. Tom's partner has had admissions to hospital due to suicidal thoughts and a suicide attempt. Tom is 49 years old and lives in Perth & Kinross. He was a long-distance lorry driver but constantly worried about leaving his partner on her own. He was always on edge and phoned her several times a day to check she was ok. Tom stopped working to become a full-time carer as he found it difficult to provide the care needed by his partner whilst working.

Tom's partner's mental health has deteriorated recently, and he is really struggling. He was not getting any support for himself although he had been told that he seems to be managing.

Tom has two brothers but, as he does not have a good relationship with his family, he does not receive any support from them.

Tom spends all his time providing support to his partner including, helping with food and fluid intake, helping with medication, and offering her a lot of emotional support. Most of his time is spent caring for his partner, round the clock.

Tom said that his caring role changed his entire life. He is not able to see his old friends or have any kind of social life. His caring role leaves him isolated and lonely.

Tom stated that in the last five years he has only been on holiday once with his partner. He thought that this was the best time of his life, and he really enjoyed it.

Until he discovered the Carers Hub, Tom had not received any support while caring for his partner. Without support he had become tired, stressed and quite lonely because of his commitments. Tom felt it difficult to find the right type of support for himself.

Tom would like to have more information regarding his partner's mental health condition to enable him to provide better support to his partner and help him understand more what his partner is going through.

Tom feels confident and supported due to input from the Support Worker at the Carers Hub and knows that he can contact him for support, advice, and information. Tom wants to engage and be an active part of future activities and groups as he feels this may help maintain his own mental health and help sustain his caring role and to have some respite.

Tom now knows he is not alone in his caring role, and he can get support from peers in a similar situation.

Karen's* Story

Around May 2022, Karen and her husband moved from a different local authority area to Crieff, to be nearer their daughter. Karen's husband had a head injury 24 years ago which meant Karen became an unpaid carer. Over the years Karen's husband's needs changed, and he has now been diagnosed with vascular dementia. He also has frontal lobe epilepsy and several other issues.

During Covid, Karen found lockdown a very isolating and worrying experience. The couple didn't have a social worker at that time, and Karen didn't have any support.

The week they moved to Crieff, Karen was told about the Carers Hub and the assessment process. They attended their first Carers Cafe where she met one of our Carer Support Workers and she became Karen's support worker. Her support and help have turned Karen's life around.

Karen hadn't ever asked for help for herself before and has had mental health issues. She didn't realise that she could have had a support worker for her own support.

In a very short time, with the Carer Support Worker's help and support, Karen now has respite for her husband at Parkdale Residential Home in Auchterarder. Karen has used this service 4 times, one of which was a funeral with very little notice. Karen noted that the friendly staff make Karen's husband very welcome which reduces her worry.

Karen also has a Crossroads carer for 3 hours a week while she attends a pottery class.

Karen has made new friends through the Crieff Carers Café; and believes that peer support is very important. People who have knowledge of her situation and can offer a listening ear and support. She also has been given vouchers for complementary therapies from the Carers Hub.

The move to Crieff has been very positive and because of support from Social Work Services and the Carers Hub Karen feels valued as an unpaid carer.

* Names changed to protect anonymity.



CHAPTER 3: IDENTIFYING CARERS AND ASSESSING SUPPORT NEEDS

11. Carer Support in Perth & Kinross

At the time of writing, National Census for Scotland statistics have not yet been published. Link to Carer statistics on Carers Pages on pkc.gov.uk when available.

12. Identifying Carers

We estimate that approximately 2800 adult carers are registered across PKAVS, Perth & Kinross Health & Social Care Partnership and at the Perth & Kinross Carers Support Project at Change Mental Health (formerly Support in Mind), which is an increase since our last Strategy. This suggests that up to 80% of adult carers might be missing out on preventative support, information and advice that might assist them in reducing the impact of their caring role. Whilst this likely includes a proportion of carers who do not feel they need or want support, there is still a disparity between the number of carers in the 2011 census and the number of carers registered for support in Perth & Kinross. At the time of writing, we do not have information from the most recent National Census, but we anticipate that there will be a greater number of carers identified, not least following the Covid pandemic where many people took on caring roles or increased the amount of unpaid care they provided. Statistics will be available on the Supporting Unpaid Carers pages of pkc.gov.uk when published.

13. Timescales for Completing Young Carer Statements and Adult Carer Support Plans

When we receive a referral from a carer or third party on behalf of the carer to receive information, advice and/or support, we will consider the priority and urgency of each situation. When it is brought to our attention that urgent support is required, we will prioritise this. Demand for services is generally high and may be subject to external factors which are out of our control. However, we aim to provide carers with:

Young Carer Statements within 12 weeks of their request.

Adult Carer Support Plans within 10 weeks of their request.

These timelines will be kept under review to ensure that we are meeting needs appropriately.

14. Current Support Available in the Local Area

14.1 Short Breaks Services Statement

Perth & Kinross HSCP's Short Breaks Services Statement (viewable at <https://bit.ly/2UOPewX>) contains a more extensive list of the short break's services available for carers locally and nationally. This has been reviewed as part of the

refresh of the Strategy. The list below provides information about support currently available to carers from commissioned services and other bodies.

Local Resources for Young and Adult Carers

PKAVS Carers Hub has three separate services to support carers from school age upwards. It provides a range of information, advice, and support to carers. Types of support include respite and activity groups for young and young-adult carers, social (massage) therapies, carer cafes, training opportunities, short breaks, day services for people with long term conditions or disabilities, telephone befriending service, 1-2-1 support from dedicated carer support workers, Self-Directed Support advice, and up-to-date information about different resources available in their local community. Information and support in completing emergency plans can also be provided, as well as peer support for unpaid carers whose role has changed due to bereavement or when the cared for person enters long-term residential care (the 'Bridge Project').

Crossroads primarily aims to provide respite care for carers in the community, with home-based respite and domiciliary care service for adults with any of the following: mental health issues, dementia, physical disabilities, learning disabilities, or other serious health conditions.

MECOPP (Minority Ethnic Carers of People Project) works with Gypsy/Traveller carers of any age across Perth & Kinross who live in housing, on sites and in roadside camps. The support includes outreach work, community-lead research, filmmaking, limited case work and training.

Change Mental Health is a Mental Health Organisation providing information and support for people who have mental health problems or mental illness and for their families and carers. It runs a Carer Support Project in Perth & Kinross, providing individual support, as well as a range of information and advice.

Alzheimer's Scotland is the local point of contact for people living with Dementia, family members, carers, and communities.

Independent Advocacy Perth & Kinross provides information and advocacy support when needed by carers.

There is also a range of universal services available such as leisure centres, libraries, support groups and emotional support.

14.2 Statutory Services Support for Young and Adult Carers

Perth & Kinross Health and Social Care Partnership can provide a range of services to meet the carer's identified needs in their Support Plans. Perth & Kinross Council's Education and Children's Services can support with access through the Carers Hub for young carers with a Young Carers Statement and access to appropriate services. These include arranging care for the cared-for person, day care services, short breaks/respite, telecare support, emergency carers card, and rapid response.

Health Services will provide support at the point of diagnosis, along a health pathway, for the ongoing care and treatment and with discharge from hospital. Hospital discharge planning is also supported by a dedicated hospital link worker, social care officer and palliative carer support worker.

Social Prescribers offer signposting and support for people to access and use community-based activities, to help address influences which contribute to health problems, with the aim of improving health and wellbeing.

Perth & Kinross Council Welfare Rights Service offers advice and information on benefit entitlements when circumstances change, when carers are struggling financially or when they have been turned down for a benefit or are unhappy about a benefits decision. Under Carers (Scotland) Act, Carers have a right to information about income maximisation to ensure they receive the benefits they are entitled to. Carers may also find it helpful to speak to Citizens Advice who can help with form filling as well as providing advice on benefit entitlement and any other help they may be able to receive locally.

15. Progress Summary

15.1 External Context

COVID 19

Progress on our Carers Strategy 2019-22, which was approved by our Integration Joint Board and Lifelong Learning Committee on 6 November 2019 was soon impacted by the Covid 19 pandemic and the restrictions placed on all of us to reduce the spread of the virus.

These restrictions had an immediate effect on carers and the people they care for, from the reduction in availability of support for the people they care for, access for medical appointments, and the requirements around protective coverings. Many carers were rightly worried about the risks of introducing Covid 19 to the home of the person they care for and there continues to be concerns around this. Some people who had not been carers prior to the pandemic became carers as they looked to support more vulnerable members of their families, during the initial lockdowns when normal activities like shopping and moving outdoors were restricted.

In partnership with the Carers Hub, we initially responded by increasing the telephone contact with unpaid carers, following this, the Carers Hub was a point of contact for PPE (Personal Protective Equipment) for unpaid carers including deliveries to carers who could not travel. We also set up a short-term sitting service to enable carers to have a break from caring whilst their loved ones were looked after. This service ended in September 2020 as commissioned services were able to re-establish cover.

We appreciate that some carers remain concerned about Covid 19 as it continues to circulate in the wider community, and whilst most of the population have received

vaccination cover, vaccinations may not be available to all due to health conditions. Ongoing support is available to carers from Scottish Government and through Scottish National Health Service.

COST OF LIVING CRISIS

The cost-of-living crisis is an ongoing concern to many carers. Prior to this, carers were still subject to financial insecurity due to the costs associated with looking after someone with a disability, such as heating, power for equipment, special dietary needs etc. This may also have been exacerbated by restrictions on carers' earning if they are in receipt of Carer Allowance and the likelihood of them having to reduce hours of work or stopping work due to their caring responsibilities. Some of the costs have been mitigated by government interventions however, carers have recently reported taking out loans and getting into debt due to the increased costs of daily living. Scottish Government funds through Shared Care Scotland were made available through a hardship fund in early 2022 which was administered by the Carers Hub locally.

15.2 Progress on our Outcomes

Despite the challenges we faced due to the Covid-19 pandemic, and the many challenges faced by carers we were able to make good progress on our Joint Carers Strategy 2019-22.

Outcome 1: Provide clear, reliable, accessible information about local and national support which is available across a wide range of locations in Perth & Kinross.

We used a variety of methods to provide information to carers about the support that is available for them. The restrictions brought about by the pandemic made it necessary for us to provide information in new and innovative ways including online and hybrid presentations for Carers Connect and Carers Weeks. We also promoted support for carers with banners and advertising at the Vaccination Centres set up in Perth and Kinross throughout the pandemic. We used digital advertising, podcasts and had a takeover of the Perth & Kinross Council's Facebook page for Carers Weeks. We also revised our core information with assistance from Carers Voice to create a single booklet which we promoted across Perth & Kinross, working with Culture PK. We also worked with Perthshire Welfare Society to improve the support available to carers from the global ethnic majority. All this work is ongoing to ensure that as many carers from all backgrounds and communities as possible know how to access support to enable them to continue caring.

Outcome 2: Promote awareness about the Carers Act in the local community and workplaces to improve early identification and support of carers.

We developed training materials for professionals about carers' rights and the support which is available which we commenced in November 2021, investing in a dedicated Learning and Development Officer in 2022 to embed and progress this training. Individual locality and community support teams and our volunteer support agencies are all carer champions.

We worked with Carer Positive to engage with employers in the area however, we were unable to increase the number of employers with Carer Positive accreditation. We will however continue to engage with local employer groups and individual employers to promote Carer Positive to ensure the early identification of working carers, and provide better support to working carers, in line with the Scottish Government's Fair Work agenda.

Outcome 3: Ensure Carers are listened to and have their opinions valued by professionals.

We have worked to provide support to carers looking after someone in hospital with our Hospital Link Worker and invested in a Palliative Carer Support Worker and Social Care Officer to improve the identification of carers to involve them in the discharge process and provide support to them. Our investment in a dedicated Palliative Carer Support Worker has enabled us to meet the timelines for carers who support people with a terminal diagnosis in accordance with the Terminal Illness Regulations, introduced in July 2021 to provide immediate support for the carer when facing a life-changing situation. Alongside our locality Carer Support Workers, we also have dedicated Carers Support Workers in I-Dart, Older People's Services and in the SCOPE team supporting families as young people with complex needs transition from school.

Training has been provided to Social Work professionals in both the Health and Social Care Partnership and Education and Children's Services to ensure that they involve carers as much as possible in planning the support for those who they care for. We will further develop this training to widen the scope and include healthcare professionals. We developed the Carer Experience Survey so that we can be sure that the health and wellbeing of carers is supported and to highlight areas for improvement.

Outcome 4: Provide opportunities for carers to participate as active partners to the planning and shaping of carers' services in their local areas including services for the people they care for.

We have listened to carers' suggestions on how to improve support for carers over the lifetime of the previous Strategy, involving carer representatives as equal strategic members in our Strategy Group, working groups, and in the Strategic Planning Group. Carer representatives are also non-voting members of the Integration Joint Board, ensuring carers' perspectives are represented across the Partnership. Carers and their representatives have been involved in the development of the refreshed Strategy.

We were also part of the Carers Trust pilot training programme to give carers an insight in to how they can represent the views of carers in their area to improve services. We have identified Parent Carers as a care group who are often overlooked and have engaged with local Parent Carers as part of the Promoting Variety project to improve the support they use through co-production. We have listened to carers through consultations and working together alongside national initiatives through the lifetime of the Strategy, however we will continue to explore better ways of supporting carers.

Outcome 5: Develop wider carer networks to enrich peer support.

We have worked with Richmond Community in Crieff from June 2021 and Dementia Friendly Aberfeldy from February 2022 to establish local carer cafes and enable improved peer support. Our café in Blairgowrie in partnership with Elder Voice commenced in April 2023. We have continued to support PKAVS in developing online and offline peer support for carers across the area including the establishment of a Carers' Choir 'Gie it Laldy', which meets weekly at Perth Theatre and is open to carers and those they care for. We worked with Carers Voice to listen to the concerns of carers and to ensure those concerns are addressed with information and support.

Outcome 6: Improve provision of flexible and personalised support, to support the emotional/physical wellbeing of carers and to support them to have a life alongside caring.

The wellbeing of carers is supported through the Carers Hub which provides Social and Complementary therapies, Time for Me grants which enable carers to have a short break and the telephone befriending service in which we further invested in from 2021 to provide out of hours support. Training opportunities, which give carers the skills and tools to support themselves and those they care for, are provided through services commissioned from the Carers Hub and at New Rannoch Older People's services. These were delivered as in-person and online sessions to cover a wide range of topics including Legal Must-Dos and Power of Attorney, Adult Support and Protection, Moving and Handling, Self-directed Support and Technology Enabled Care. Self-directed Support is key to improving personalisation of support to carers and we have been working with other local authority areas to see how we can improve to make this easier for carers.

Based on feedback from carers we have supported the introduction of the Community Tipi – a large mobile Tepee with a wood-burning stove, which is available for use by community groups supporting carers. This will continue to be rolled out in the next few months. We are also seeking to establish volunteer befriending interventions to improve support where regulated services are, or are not involved.

Through the Carers Hub and our Social Prescribers, we are involved in supporting community groups to ensure that our services and support are sensitive to cultural differences. Through provision of support in the community we have reduced the percentage of admissions to long term care due to carer breakdown from 30% to 16%. We have reviewed current supports to assess their adequacy for support to

carers and we will continue to look for ways to improve the support for carers, particularly in rural areas, through the life of this strategy.

Outcome 7: Young carers will have the best start in life and will be supported to achieve their potential irrespective of their caring responsibilities.

As at March 2023 there are 613 registered Young Carers with the Young Carers Service. During 2022, 172 Young Carers Statements, which identify the Young Carers' needs outcomes, were completed for newly identified Young Carers, enabling us to signpost them to the appropriate agencies for support. There is, however, a backlog of Young Carers Statement Reviews as completion of Statements have had to be prioritised.

173 Young Carers accessed the Education Attainment Service, with tutors delivering 1231 individual tutoring sessions. There have been 30 weekly primary tutor groups with an average of 15 Young Carers in attendance and 30 weekly nurture groups provided.

All 11 secondary Schools and 48 feeder Primary Schools have a designated Young Carers champion who have quarterly meetings with PKAVS/Young Carers Social Worker to discuss issues, challenges, share information and best practice.

150 Young Carers have accessed alternative respite funds for respite opportunities within their communities and 50 Young Carers applied for Time4me funding for short breaks through Shared Care Scotland. We also supported day trips, drop-in sessions and outcome focussed groups. Over 250 young carers and their families attended the PKAVS Christmas Extravaganza.

Mental well-being support has been provided through partnership working with Mindspace, Saints in the Community and All-Strong Scotland.

Pre-school age young carers are the responsibility of the NHS for young carers support.

Young Carers Voice forum meets every 2 weeks to discuss challenges being faced by young carers and any additional support they may require. The Young Carers Voice Forum will be establishing a sub-group around mental health for young carers.

The Young Carers' Social Worker is available for advice and guidance to the Social Work teams and has attended Team Meetings to share information. More widely, the PKAVS Young Carers' Service is first point of contact for all agencies who have enquiries or wish to discuss referrals.

CHAPTER 4: DEVELOPING OUR 2023-26 STRATEGIC OUTCOMES AND COMMITMENTS

16. Carer Consultation and Feedback

Timeline of how the strategy was developed

Embracing our vision that carers should be equal partners in care and be involved in shaping the services that are designed to support them, the development of this strategy was undertaken through engagement and consultation with young and adult carers, their families, and the professionals who support them. Across Perth & Kinross, carers were able to provide their views through the survey and at direct events in the community. These gave us valuable opinions and insight into carers' experiences. We have based this new strategy on what carers have told us matters to them.

This was what the consultation process looked like:

From January 2019: Ongoing consultation and dialogue

Through strategy and programme board meetings, we have continued to seek the views and experiences of carers, including Carers Voice, professionals and our third sector partners, to inform and shape this strategy and the Action Plan.

March 2022 – May 2022: The consultation survey was created with carers

The consultation survey was developed through several discussions held with key stakeholders, including separate interest groups with adult carers, parent carers and young carers.

June 2022 - August 2022: The consultation

We consulted with carers using the finalised survey. This was done through social media, letter, email, focus groups, consultation stalls and events.

Consulting with professionals

Various professionals from within the HSCP and from our Third Sector and commissioned services were interviewed for their views about the support available for carers and the challenges they face.

Consultation with Carer Representatives

We consulted with carer representatives and heard their views on the support that carers receive and their experience of being carer representatives with the Health and Social Care Partnership.

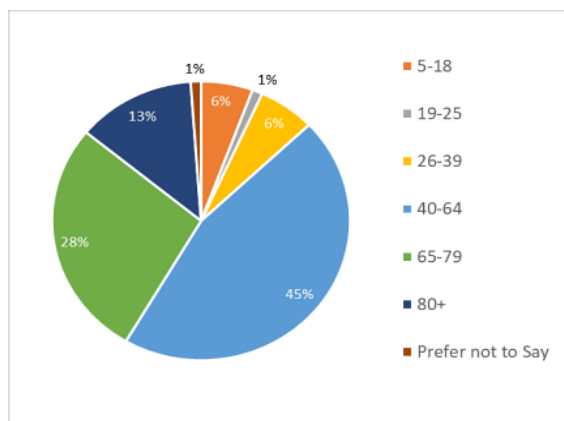
Risk events

In December 2022 and January 2023, we held two risk events to ensure that the risks to carers were identified. The purpose of the workshops were to ensure that the Health and Social Care Partnership, identifies actions to mitigate the risks and further inform our delivery plan going forward.

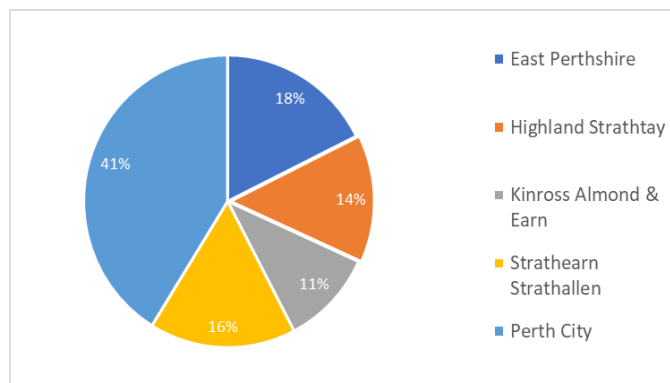


Summary of the results from the consultation – 207 respondents

Age groups of carers who responded

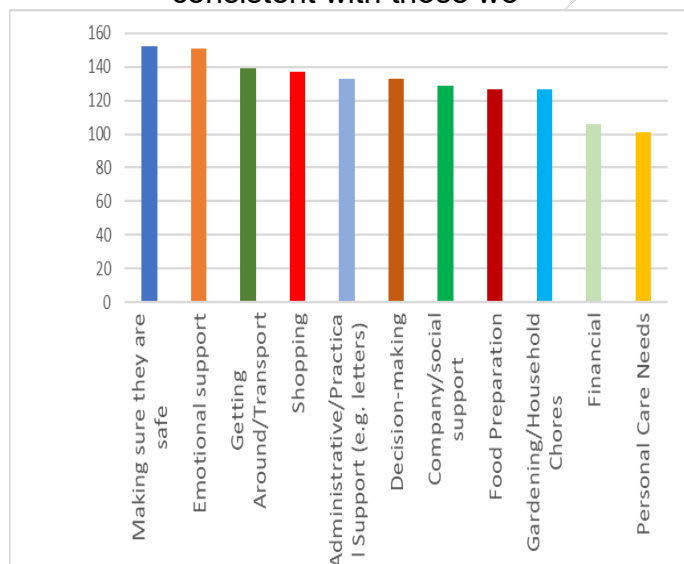


Where carers are from



Type of care carers provide.

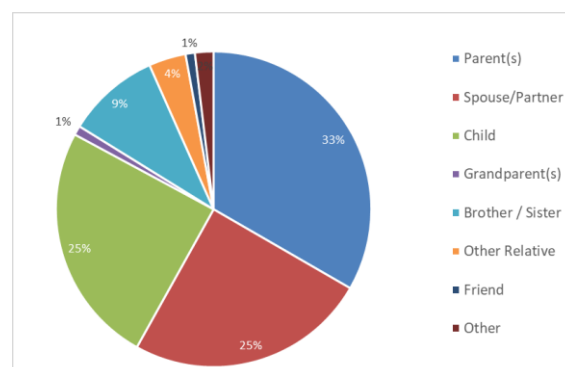
Carers provide a range of support to the people they care for; most said they kept the person they care for safe followed by providing emotional support. These responses are consistent with those we



received from our previous Strategy.

Who do Carers Support?

The largest proportion of carers who responded provide care and support for parents, a spouse or partner followed by caring for their child.

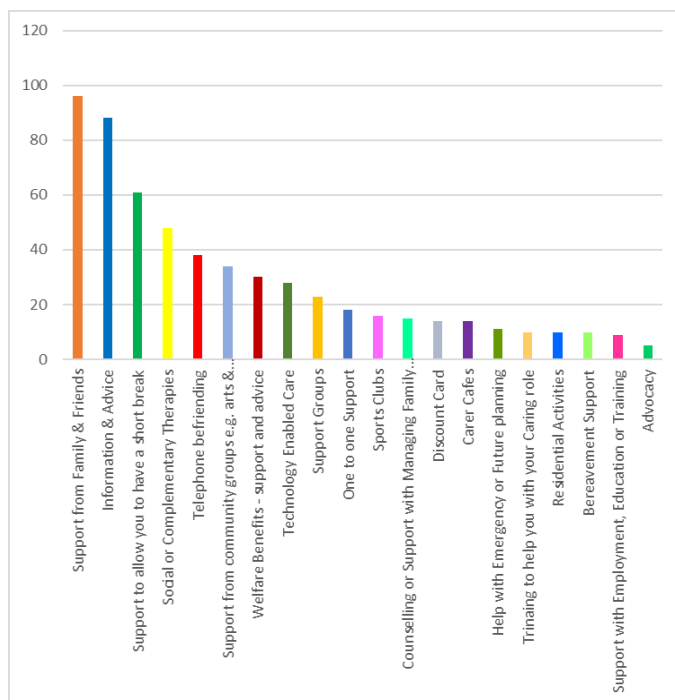


The impact of Caring

Carers reported the greatest impact on them to be with their health and wellbeing and their life balance.

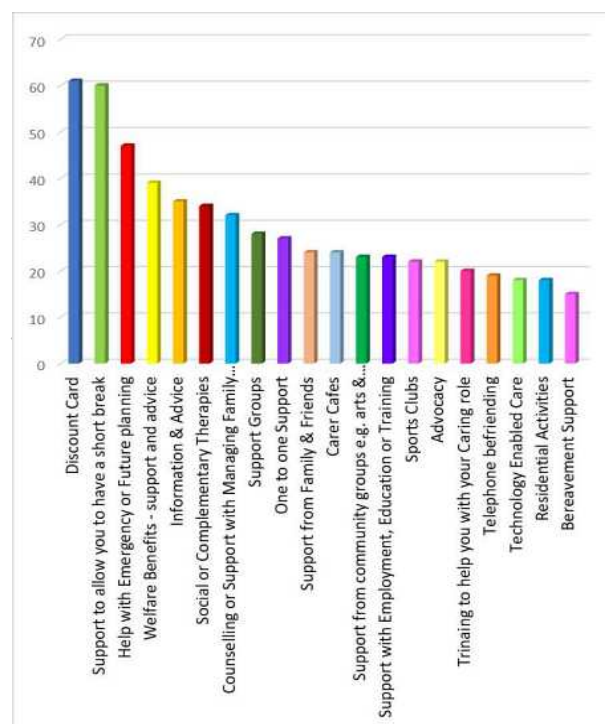
Support Carers Use

Carers said the support they used the most came from friends and family followed by Information and advice.



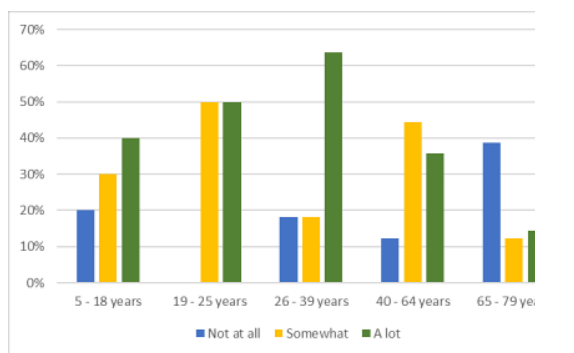
Support Carers would like to have.

The types of support carers said they would most like to have include, firstly a discount card, secondly support to enable them to have a break from caring, help with emergency and future planning and help with welfare benefits and advice.

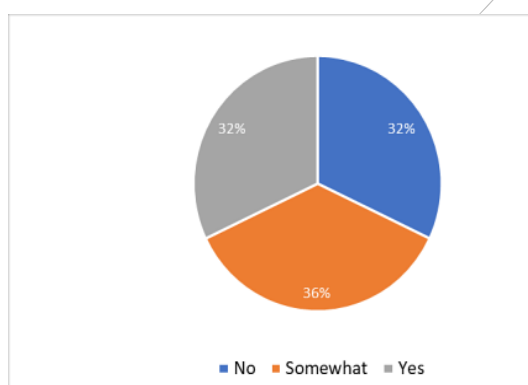


Work Education and Training

Whilst support for Education, training and employment did not score highly overall, carers of working age experienced the most impact on their work, education, and training.

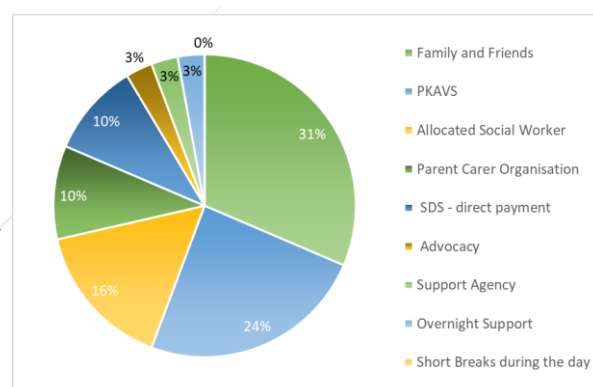


In addition, 32% of Carers who work said they did not feel supported by their employer.

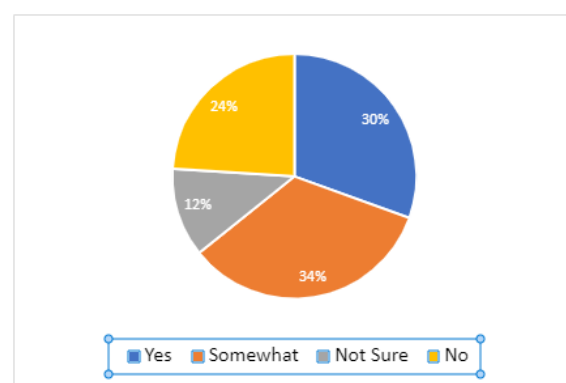


Parent Carers said they felt undervalued and were not often able to get support for themselves as their child may not meet the criteria for support.

44 carers who responded to our survey said that they were looking after their child. Most get support from Family and friends followed by PKAVS.

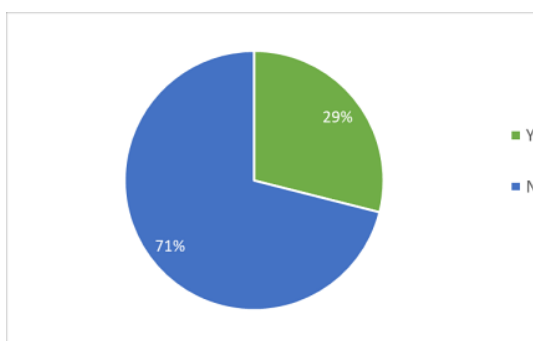


However, over 65% of carers generally said they are satisfied with the support they receive as carers.

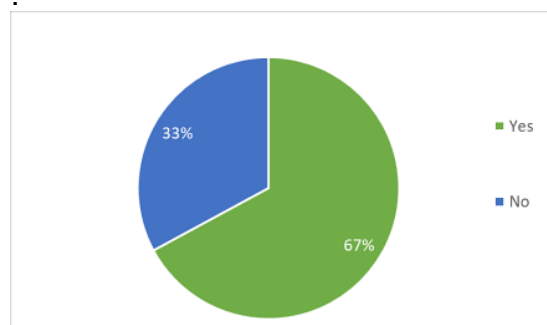


In addition, 76 Young Carers told us about the support they receive and the things they would like to have:

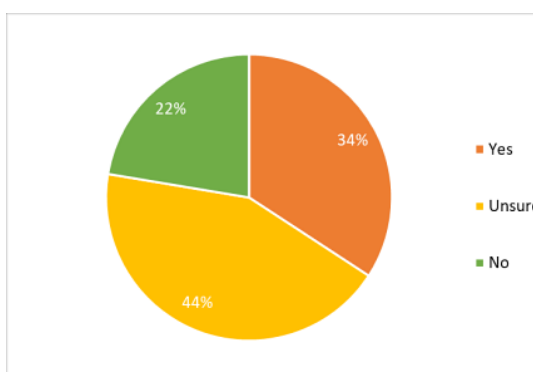
29% said they got enough breaks from their caring role but 71% said they did not.



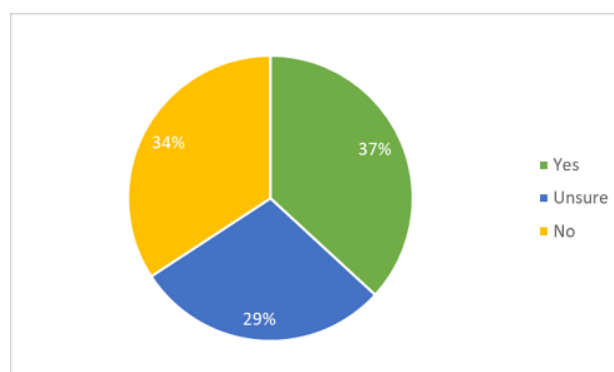
67% said they attended PKAVS Young Carers Service and 33% said they did not attend the service.



34% of Young Carers believed they have been offered a Young Carers Statement. However, 44% were unsure.



37% of Young Carers felt they had enough support as a Young Carer, 29% were unsure and 34% said they did not.



For those young carers who said they had a Young Carers Statement in place the benefits they identified included:

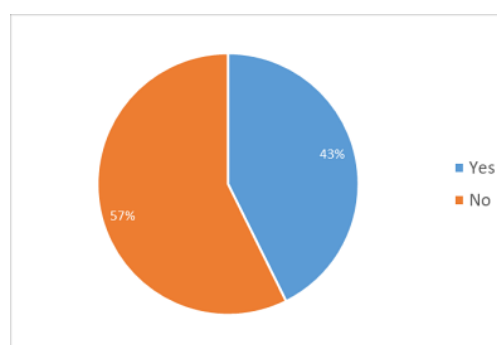
I'm listened to and supported with worries and have had education support.

I sometimes get some money to do something away from my carer role.

I get 1-1 support from someone that truly cares.

Better understanding from school. Increased opportunities for extra activities

43% of Young Carers said they felt supported as a young carer by their school or college and 57% said they did not.



Examples of the kind of breaks that the young carers identified demonstrate the impact of caring on the young carers' lives and the need for them to be supported to be children first and foremost:

A break away from my caring duties. Relaxing, having fun.

Going to pictures or go karting.

A break away from being responsible for my family just being me would be great with no stress.

Doing no chores.

A day out at a museum or activity like horseback riding or laser tag.

Some time away from helping with my brother and having fun. Making new friends.

Basketball and a McDonalds.

Something distracting and interactive.

A day out somewhere.

Camping would be really fun.

Away from my sister. She's really hard work and I struggle sometimes.

Time away doing fun things with others.

Love being in a caravan. It's like an adventure.

Break away.

Museum in relation to transport and military in the UK.

What Adult carers said matters most to them:

These are the key themes from the feedback of carers in the consultation, and what carers told us matters most to them:

- I want support for the person I care for and to be more involved in the discussions around their care.
- I want to be supported to have a break from caring.
- I want to be updated when there are changes that affect my support or the support for the person I care for.
- I want professionals to listen to me more.
- I want the process for my support to be simpler.
- I want there to be a variety of support options in rural areas of Perth & Kinross.
- I want more specialist support for the person I care for.

We used these to develop our key strategic outcomes (set out in Section 18) to support carers of Perth & Kinross over the next three years, which will be delivered by the Action Plan (set out in Section 19).

17. Our Strategic Outcomes: What Carers Can Expect

Our response to the consultation feedback by carers, is that by 2026, all unpaid carers can expect:

			
Clear, reliable, accessible information about local and national support.	Promoted awareness about unpaid carers and their rights to improve early identification and support.	To be listened to and have their opinions valued.	To have opportunities to participate as active partners to the planning and shaping of carer services in their local areas.
			
The development of peer support opportunities across the area	Improved provision of flexible and personalised support, to support their emotional and physical health and wellbeing and to have a life alongside caring.	In addition, young carers will be supported to achieve their educational potential, to have similar opportunities as their peers, and to enjoy their childhood.	

Young Carers in particular can expect:



We will support the growth of local support for young carers.



We will work with young carers over the life of this strategy to make the service changes required to better meet their identified needs.



We will support young carers and their families to improve their lives where the caring role is impacting their wellbeing.



We will work across services to meet the needs of both the young carer and the cared-for person.



We will ensure support is in place to help identify and support young carers as early as possible. We have invested in a Young Carer Support Worker to work with our schools to raise awareness about the needs of young carers.



We will enhance resources to allow schools to work creatively to reduce the attainment gap. Expanding opportunities for young carers to achieve their full potential.



We will increase a variety of respite opportunities by making funds available for young carers to make choices about their own needs and interests.

18. Our Commitments and Delivery Plan

Our commitments, which are based on the EPiC principles and developed with carers to support the delivery of our strategic outcomes (set out in the previous section and in our delivery plan below), are:

1. Carers will be supported with clear information about consistent and flexible support to empower them to manage their caring role.
2. Everyone will have the information, opportunities, and support to be identified as a carer.
3. Carers' voices will be critical to influencing the planning, development, and improvement of supports.
4. Carers will be supported to actively participate in developing a course of supports within the local community to enable them to have a life alongside their caring role.
5. Carers will be valued, listened to, and empowered to share their experiences.
6. We will provide specialist and person-centred support to avoid disadvantage to carers of all ages.

Commitment: CARERS WILL BE SUPPORTED WITH CLEAR INFORMATION ABOUT, CONSISTENT AND FLEXIBLE SUPPORT TO EMPOWER THEM TO MANAGE THEIR CARING ROLE

Outcome 1: Carers can expect: Clear, reliable, accessible information about local and national support.

How we will do this	What will we do	Responsibilities and timescales	How we will measure how well we are doing	National Health & Wellbeing Outcomes delivered
1. Maintain accurate reliable information across a range of digital and traditional media to ensure that carers have the information they need on a timely basis.	<p>Continue to ensure that information is accurate and relevant. Carers pages on pkc.gov.uk will be updated and refreshed. PKAVS Carers Hub website updated with news regularly.</p> <p>Explore the potential for use of digital screens in medical and commercial settings and the use television advertising to inform carers about accessing support.</p> <p>Ongoing promotion in other community premises.</p>	<p>Lead Professional: Service Manager Strategic Lead Carers</p> <p>Target date: May 2023 with ongoing 6 monthly review</p> <p>Target date: March 2024</p> <p>with ongoing 6 monthly review</p>	<ul style="list-style-type: none"> • Number of carers supported by PKAVS and P&K HSCP. • Percentage of carers reporting they feel informed and able to access a range of information and advice. • Number of completed Adult Carer Support Plans/Young Carer Statements. • Percentage of ACSP outcomes met. • Number of responses to requests for information and advice. 	<p>People who work in Health & Social Care Services feel engaged with the work they do and are supported to continuously improve the information, support, care, and treatment they provide.</p> <p>Health & Social Care services contribute to reducing health inequalities.</p>

				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.
2. Provide information about anticipatory care planning/ emergency planning to every carer to increase the number of carers having emergency plans in place.	Continue to offer Emergency and Anticipatory Care Planning to Carers to ensure that carers and those they care for are supported through changes in circumstances,	Lead Professional: SW South Locality Team Leader – Crieff Target date: Currently implemented with ongoing quarterly review.	<ul style="list-style-type: none"> • Number of Emergency Care Plans completed. • Referrals for POA/Training sessions on Power of Attorney • Number of Carer Cards issued by HSCP 	People can look after and improve their own health and wellbeing and live in good health for longer.
3. Work with partners to ensure there is relevant information about support for carers in minorities including (but not limited to) ethnic minorities, LGBT+.	Continue to work with local communities and partners to ensure that all carers are aware of their rights.	Lead Professional: Carers Hub Manager: Target date: September 2023 implemented with quarterly review.	<ul style="list-style-type: none"> • Number of carers from ethnic minority backgrounds and other, minority groups. engaging with our services. • Translations available 	Health & Social Care services contribute to reducing health inequalities.

Commitment: EVERYONE WILL HAVE THE INFORMATION, OPPORTUNITIES AND SUPPORT TO BE IDENTIFIED AS A CARER

OUTCOME 2: Carers can expect: promoted awareness about unpaid carers in the community and workplaces to improve early identification and support of carers.

How we will do this	What will we do	Responsibilities and timescales	How we will measure how doing	National Health & Wellbeing Outcomes delivered
1. Develop information and guidance material to-support induction & training to health and social care and wider partners to better identify and support carers as well as to help carers to better self-identify and to seek support.	We will continue to roll out training to wider Health and Social Work professionals as well as external partners and carers.	Lead Professional: Learning and Development Officer – Carers: Target date: June 2023 and 6-month review	<ul style="list-style-type: none"> • Number of carers supported by PKAVS and P&K HSCP. • Percentage of carers who feel supported to continue in caring role. • Number of professionals completing training. 	<p>People who work in Health & Social Care Services feel engaged with the work they do and are supported to continuously improve the information, support, care, and treatment they provide.</p> <p>People who provide unpaid care are supported to look after their own health and wellbeing, including reduce any negative impact of their caring role on their own health and wellbeing.</p>
2. Develop carer champions and networks to share knowledge about the support available to carers and the benefits of having an	We will promote the value that unpaid carers bring to our communities and the support available for carers through awareness raising	Lead Professional: Learning and Development Officer – Carers:	<ul style="list-style-type: none"> • Number of carer champions/networks within Perth & Kinross. 	

adult carer support plan.	across Health and Social Care.	Target date: Commenced - Review date December 2023.		<p>Health & Social Care services are centred on helping to maintain or improve the quality of life of people who use those services.</p> <p>Health & Social Care services contribute to reducing health inequalities.</p>
3. Support employers in Perth & Kinross to recognise carers in the workplace and to gain Carer Positive accreditation.	We will continue to engage with local employer groups and individual employers to promote Carer Positive. We recognise that individual employers are supportive, but others are less so and carers report having to give up work to support those they care for.	Lead Professional: Carers Hub Manager: Target date: June 2023 and quarterly review	<ul style="list-style-type: none"> • Number of local businesses who have been awarded a 'Carer Positive' accreditation. • Percentage of carers who feel supported at work/college/university. 	
4. Consolidate and improve on the support available to unpaid carers working for the Partnership.	We will initially work with HR (Human Resources) departments and employers to explore ways to embed the support we give to our colleagues who are unpaid carers to support retention and recruitment.	Lead Professional: Service Manager Strategic Lead Carers Target date: December 2024 and 6-month review	<ul style="list-style-type: none"> • No. of carers working for partnership identified. • Percentage of those carers employed by partnership who feel supported by their employer. • Number of employees undertaking the e-learning modules on 	

			supporting unpaid carers at work.	
5. Work with GP practices and other health settings to improve the early identification of carers at the point of diagnosis.	We will continue to work with our Social Prescribers and health colleagues in GP surgeries and other settings to improve the early recognition of carers.	Lead Professional: Senior Service Manager Health – Older People, Palliative and Urgent Care Target date: April 2024	<ul style="list-style-type: none"> Number of carers referred to PKAVS by GPs/Health professionals. 	

Commitment: CARERS VOICES WILL BE CRITICAL TO INFLUENCING THE PLANNING, DEVELOPMENT, AND IMPROVEMENT OF SUPPORTS.

OUTCOME 3 Carers can expect: that they are listened to and have their opinions valued by professionals.

How we will do this	What will we do	Responsibilities and timescales	How we will measure how well we are doing	National Health & Wellbeing Outcomes delivered
1. Review hospital discharge planning in relation to involving carers and raise awareness across professionals and carers to increase early identification and involvement of carers in discharge planning, as appropriate.	Work with HIS (Healthcare Improvement Scotland) to improve the discharge planning process, ensuring that carers are listened to involved in the discharge planning process of those who are cared for, as appropriate.	Lead Professional: Interim Service Manager MFE Target Date: October 2023 and quarterly review	<ul style="list-style-type: none"> Percentage of carers involved in discharge planning. Number of carers referred through hospital discharge. 	<p>People who use Health & Social Care services have positive experiences of those services, and have their dignity respected.</p> <p>People, including those with disabilities or long-term conditions, or who are frail, can live, as far as reasonably practicable independently and at home or in a homely setting in their community.</p>
2. Work with Health, Social Work and Education professionals to ensure the involvement of carers in decisions about the support of the cared-for person, including (but not limited to) carers for	We will ensure that carers views are considered when planning the care of the people they care for, as far as we are able, with ongoing training.	Lead Professional: Service Manager Social Care: Target Date: March 2024 with quarterly review	<ul style="list-style-type: none"> Percentage of carers who feel that local services are well coordinated for them and the person they look after. 	<p>People who work in Health & Social Care services feel</p>

Mental Health and Substance Use and neurological conditions such as Autism, Learning Disability and Dementia.			<ul style="list-style-type: none"> Percentage of carers who feel they have a say in services provided for the cared-for person. 	engaged with the work they do and are supported to continuously improve the information, support, care, and treatment they provide.
3. Use carer feedback obtained from carer consultations, meetings, surveys, improving our consultation and engagement approaches to inclusion of wider communities of carers.	We have established a process to ensure the ongoing collection of the views of carers both for the experience survey and from April 2023 we will be taking views and responding to the views of carers about Services for Carers through Care Opinion.	Lead Professional: Service Manager Strategic Lead Carers Target Date: April 2024 with 6-month updates	<ul style="list-style-type: none"> Percentage of carers who feel that local services are well coordinated for them and the person they look after. Percentage of carers who have a positive experience of services designed to support them. No of Carers using Care Opinion to feedback on Carers Services. 	People who provide unpaid care are supported to look after their own health and wellbeing, including reduce any negative impact of their caring role on their own health and wellbeing.

4. Review how to better support carers who are bereaved or where the care for person enters permanent residential care.	Provide a structured, immediate bereavement support service for carers and explore the potential for the development of a support service for those whose family members have been admitted for permanent care.	Lead Professional: Team Leader Older Adult/ Learning Disability Services Target Date: July 2024	<ul style="list-style-type: none"> • Number of bereaved carers supported. • Percentage of carers who have a positive experience of services designed to support them. 	
5. Ensure that there is a smooth transition of support for young adult carers.	We will work with PKAVS to ensure that young carers are fully supported as they leave school	Lead Professional: Service Manager Children Young People & Families Target Date: Jan 2025 and 6-monthly review	<ul style="list-style-type: none"> • Percentage of carers who have a positive experience of services designed to support them. • Percentage of carers who are satisfied with transition support. 	
6. Work with partners and carers to improve carers experience of systems and processes including	We will review our processes to ensure that a streamlined process is in place to support carers.	Lead Professional: Policy Officer:	<ul style="list-style-type: none"> • Percentage of carers who have a positive experience of services 	

initial access and ongoing support.		Target Date: December 2024 and annual review	designed to support them.	
7. Ensure that carers looking after someone with a terminal illness receives support in accordance with the timescales of the Terminal Illness Regulations.	Working with our partners we will ensure the early identification of carers looking after someone with a Terminal Illness to listen to the carer and provide early support and to meet their outcomes.	Lead Professional: Team Leader Older Adult/ Learning Disability Services Target Date: Currently implemented subject to review from December 2023 and 6-month review.	<ul style="list-style-type: none"> Percentage of carers looking after someone with a terminal illness who are offered and are provided with an Adult Carer Support Plan in accordance with the Terminal Illness Regulations. Percentage of Adult Carers Support plan outcomes met. 	

Commitment: CARERS WILL BE SUPPORTED TO ACTIVELY PARTICIPATE IN DEVELOPING A COURSE OF SUPPORTS WITHIN THE LOCAL COMMUNITY TO ENABLE THEM TO HAVE A LIFE OUTWITH THEIR CARING ROLE.

OUTCOME 4 Carers can expect: opportunities for them to participate as active partners to the planning and shaping of carer services in their local areas including services for the people who are cared for.

How we will do this	What will we do	Responsibilities and timescales	How we will measure how well we are doing	National Health & Wellbeing Outcomes delivered
<p>1. Include carer representatives on relevant steering and working groups so that they can be active partners in the planning and shaping of carer services across Perth & Kinross.</p> <p>By ensuring there is meaningful and representative inclusion of carers in planning and governance groups and supporting carers through training to contribute and including carers with protected characteristics in plans, policies, and procedures</p>	<p>We will continue to embed the recommendations highlighted in the Carers – Equal, Expert & Valued report to embed good practice across all areas of planning support in the HSCP.</p> <p>We will work alongside Community Engagement to improve our collaboration with carers across the area including carers with protected</p>	<p>Lead Professional: Service Manager Strategic Lead Carers</p> <p>Target Date: January 2024 and subject to annual review across HSCP.</p>	<ul style="list-style-type: none"> Percentage of carers aware that there are opportunities to be involved in planning services. No. of Strategic and working groups with carer representation. Percentage of carers who feel that local services are well coordinated for them and the person they look after. Percentage of carers who feel they have a say in services provided for the cared-for person. 	<p>People can look after and improve their own health and wellbeing and life in good health for longer.</p> <p>People who use Health and Social Care services have positive experiences of those services, and have their dignity respected.</p> <p>Health and Social Care services contribute to reducing health inequalities.</p>

to promote equality and inclusion.	<p>characteristics in developing the support they can use to promote their health and wellbeing.</p> <p>We will also work with PKAVS to ensure surveys are consistent with strategic considerations.</p>			<p>Resources are used effectively and efficiently in the provision of Health & Social Care services.</p> <p>People who work in Health & Social Care services feel engaged with the work they do and are supported to continuously improve the information, support, care, and treatment they provide.</p>
2. Review our carer satisfaction survey for carers to obtain information about the care they provide, and their experience of carers' services used, to review effectiveness and efficiency of resources used.	<p>Review carer experience survey for carers to ensure it is fit for purpose. We will work with commissioned services to be part of the Care Opinion roll out.</p>	<p>Lead Professional: Service Manager Strategic Lead Carers</p> <p>Target Date: June 2023 (Experience Survey) April 2023 (Care Opinion)</p>	<ul style="list-style-type: none"> Percentage of carers who have a positive experience of services designed to support them. Percentage of carers who feel supported to be able to continue in caring role. Number of Carers using Care Opinion for stories about Carer Services. 	
3. Support Parent Carers project in partnership with Promoting Variety, PKAVS, Parent Carers	<p>We will support this project to understand the needs of Parent</p>	<p>Lead Professional: Carers Hub Manager</p>	<ul style="list-style-type: none"> Percentage of carers who have a positive experience of services 	

and their representatives to co-produce better consistent support for Parent Carers.	Carers and how their support can be improved.	Target Date: December 2023 and ongoing with 6-month review.	designed to support them. <ul style="list-style-type: none">• Percentage of carers who feel supported to be able to continue in caring role.	
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Commitment: CARERS WILL BE VALUED, LISTENED TO AND EMPOWERED TO SHARE THEIR EXPERIENCES.

OUTCOME 5: Carers can expect: more opportunities for carer peer support.

How we will do this	What will we do	Responsibilities and timescales	How we will measure how well we are doing	National Health & Wellbeing Outcomes delivered
1. Work with communities to provide support in localities and within Care Groups to develop Carer Peer Support Groups to improve the provision of peer support amongst carers.	We will continue to identify local community groups as the basis for ensuring peer support groups can be developed organically within communities to improve the support that carers can share with one another.	Lead Professional: Service Manager Strategic Lead Carers Target Date: February 2024 and ongoing with 6-month review.	<ul style="list-style-type: none"> Number of carers who attend carer cafes and other groups. Increase in number of groups in localities that are regularly attended. Percentage of carers who feel supported to be able to continue in caring role. 	<p>People can look after and improve their own health and wellbeing and life in good health for longer.</p> <p>Resources are used effectively and efficiently in the provision of health & social care services.</p>
2. Support Carers Voice for Adult Carers.	We will continue to listen to the carers representatives who participate in Carers Voice and will implement the recommendations in the Equal, Expert	Lead Professional: Service Manager Strategic Lead Carers Target Date:	<ul style="list-style-type: none"> Number of members attending Carers Voice Percentage of carers aware that there are opportunities to be involved in planning services. 	

	and Valued Report in our practice.	June 2023 and ongoing with annual review	<ul style="list-style-type: none"> Percentage of carers who feel supported to be able to continue in caring role. 	
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Commitment: WE WILL PROVIDE SPECIALIST AND PERSON-CENTRED SUPPORT TO AVOID DISADVANTAGE TO CARERS OF ALL AGES.

OUTCOME 6: Carers can expect: improved provision of flexible and personalised support, to support emotional/ physical wellbeing of carers and to enable them to have a life alongside caring.

How we will do this	What will we do	Responsibilities and timescales	How we will measure how well we are doing	National Health & Wellbeing Outcomes delivered
1. Provide a wide range of training opportunities for carers to develop confidence and skills.	We will continue to roll out a programme of training to carers and in particular work with charities to give carers the training they identified to support the person they care for.	Lead Professional: Learning and Development Officer – Carers Target Date: June 2023 with programme under 6-month review.	<ul style="list-style-type: none"> • Number of carers who are accessing training opportunities. • Number of training opportunities made available. 	<p>Health and Social Care services are centred on helping to maintain or improve the quality of life of people who use those services.</p> <p>People who provide unpaid care are supported to look after their own health and wellbeing, including reduce any negative impact of their caring role on their own health and wellbeing.</p> <p>Health and Social Care services contribute to</p>
2. Provide opportunities for carers to be active partners in planning and shaping supports that promotes better emotional/physical wellbeing and life balance.-	Support carers to be active partners in planning supports to enhance their health and wellbeing.	Lead Professional: Wellbeing Support Team Coordinator Target Date:	<ul style="list-style-type: none"> • Percentage of carers who are satisfied with opportunities to maintain or improve their health and wellbeing. • Percentage of carers who feel they have a good balance between caring 	

		December 2023 ongoing with annual review	<p>and other things in their lives.</p> <ul style="list-style-type: none"> Percentage of carers who feel the support they received had a positive impact on their health & wellbeing. 	reducing health inequalities.
3. Work with partners to recognise how to provide specific information and support to carers inclusive of different protected characteristics, cultural backgrounds, and communities.	We will continue to work alongside local community groups to ensure that culturally specific support for carers is available, as required	Lead Professional: Carers Hub Manager: Target Date: December 2023 and ongoing with annual review	Number of carers from minority backgrounds, etc. engaging with our services.	

<p>4. We will work on the learning from Promoting Variety programme to develop and improve accessibility and availability of short breaks to support carers to continue to care and to develop supply of locally available, tailored short breaks that meet the identified needs of carers. within Perth & Kinross.</p> <p>Build on our approach to self-directed support to enable carers to meet their outcomes (what matters to them).</p>	<p>We will also take learning from the programme for other projects completed across Scotland to identify proven successful new supports for carers.</p>	<p>Lead Professional: Service Manager Strategic Lead Carers</p> <p>Target Date: December 2023</p>	<ul style="list-style-type: none"> • Projects taken forward from Promoting Variety 	
<p>5. Explore further opportunities for social and financial inclusion</p>	<p>For Social Inclusion we will continue to support and develop with local community groups based on the feedback from our consultation we have identified Carers Card UK which provides a</p>	<p>Lead Professional: Service Manager Strategic Lead Carers</p> <p>Target Date: Social Inclusion February 2024 with 6-month review Financial Inclusion</p>	<ul style="list-style-type: none"> • Number of carers referred to Welfare Rights. • Number of “Carer Positive” awards to local businesses. • Number of Carers accessing short breaks through Time 4 Me and respite. 	

	multi-functional card for carers which provides online discounts and can be developed with discounts for local businesses.	December 2023 with annual review.	<ul style="list-style-type: none"> • Number of people with caring responsibilities who are supported by Citizen's Advice. • No of discount cards taken up by Carers (Carers UK) 	
6. TEC – Work to promote the TEC Strategy Outcomes and improve the wellbeing of carers through use of TEC through promotion and demonstration	We will continue to embed and enhance this activity to demonstrate the benefits of digital devices to support the needs of carers.	Lead Professional: Team Leader TEC Strategy Target Date: December 2023 and 6-month review	<ul style="list-style-type: none"> • No of presentations and roadshows • Visits to the Smart flat/room 	
7. Work alongside Suicide Prevention and Mental Health services and charities to reduce the impact of caring on carers' mental health and wellbeing.	We will work together with the Suicide Prevention Coordinator to reduce the impact of caring on carers' mental health to reinforce recommendations in the National Strategy.	Lead Professional: Suicide Prevention Coordinator/ Senior Service Manager - Mental Health Target Date: Plan to be in place by December 2023	<ul style="list-style-type: none"> • Percentage of carers who feel the support they received had a positive impact on their health & wellbeing. • Percentage of carers who feel supported to be able to continue in caring role. 	

		with ongoing 6-month review		
8. Explore the development of a volunteer Befriending Service for Carers to support them when regulated care is not required.	We will explore the potential to use community volunteers to support carers.	Lead Professional: Team Leader Older Adult/ Learning Disability Target Date: March 2024	<ul style="list-style-type: none"> Percentage of carers who feel the support they received had a positive impact on their health & wellbeing. Percentage of carers who feel supported to be able to continue in caring role. 	

Commitment: WE WILL PROVIDE SPECIALIST AND PERSON-CENTRED SUPPORT TO AVOID DISADVANTAGE TO CARERS OF ALL AGES.

Outcome 7: Young Carers will have the best start in life and will be supported to achieve their potential, irrespective of their caring responsibilities.

How we will do this	What will we do	Responsibilities and timescales	How we will measure how well we are doing
<p>1. Complete a young carers statement when requests are made by the young carer/parent and/or guardian or professional.</p> <p>These statements will be reviewed annually.</p>	<p>Allocation of Young Carers will continue to ensure that Young Carers Statements are completed timeously.</p> <p>A specific Young Carer Review Worker has been employed at PKAVS to work through the backlog of reviews.</p>	<p>Lead Professional: PKAVS Young Carer Service/Young Carer Social Worker</p> <p>Target Date: Throughout the period of the strategy. Nov 2023 review, review 6-month thereafter.</p>	<ul style="list-style-type: none"> • Number of completed Young Carers Statements. • Number of Young Carers Statements offered. • Number of reviews completed.
<p>2. Support young carers where their caring role is having an impact on their attainment, and work creatively with schools to reduce the attainment gap for young carers.</p>	<p>Individual and group tutoring will continue to be provided for Young Carers who wish to access this service.</p> <p>Early identification of Young Carers will continue to be a</p>	<p>Lead Professional: PKAVS Young Carer Service/Young Carer Social Worker/ECS Inclusion</p> <p>Target Date:</p>	<ul style="list-style-type: none"> • Number of young carers supported through schools. • Number of young carers with improved outcomes at school.

	<p>priority of Young Carer Champions.</p> <p>The Young Carer Service will link with the Inclusion Service within ECS to ensure that all Young Carers are identified in schools and recorded on SEEMIS.</p>	<p>Throughout the period of the strategy. Nov 2023 review, review 6-month thereafter</p>	<ul style="list-style-type: none"> • Number of young carers registered on SEEMIS • Number of young carers accessing PKAVS EASYC (Education Attainment Service for Young Carers) service. • Number of young carers champions in schools. • Number of young carer support groups delivered in schools. • Number of Childs Plans completed. • Number of young carers with improved attendance at school.
<p>3. Provide a variety of community-based activities for young carers to make their own choices about their own needs and interests.</p>	<p>Links will be made with community partners and groups to identify as many local respite opportunities as possible.</p> <p>A full range of respite opportunities will continue to be provided.</p>	<p>Lead Professional: PKAVS Young Carer Service/Young Carer Social Worker/Community Partnerships.</p> <p>Target Date: Throughout the period of the strategy. Nov 2023</p>	<ul style="list-style-type: none"> • Number of young carers accessing short breaks. • Number of young carers who feel they have a good balance between caring and other things in their lives. • Number of community links and other partnerships developed to deliver short break

		review, review 6-month thereafter.	opportunities for young carers.
4. Support young carers and their families to improve their lives where the caring role is impacting their mental health & wellbeing.	Links will continue to be made with third sector and community partnerships to offer issue-based supports to Young Carers.	<p>Lead Professional: PKAVS Young Carer Service.</p> <p>Target Date: Throughout the period of the strategy. Nov 2023 review, review 6-month thereafter.</p>	<ul style="list-style-type: none"> • Number of young carers/families signposted onto other services. • Number of young carers/families referred into other services.
5. Support young carers pre-school age.	<p>NHS Young Carer rep is yet to be identified.</p> <p>PKAVS will monitor the number of pre-5 referrals</p>	<p>Lead Professional: PKAVS Young Carer Service/ NHS Rep.</p> <p>Target Date: October 2023</p>	<ul style="list-style-type: none"> • PKAVS will retain any referrals received for young carers aged under 5 years old until they become 5 and then action.
6. There will be regular consultation with young carers & their families to ensure the services being provided best meet their needs.	<p>Consultations with Young Carers will continue throughout the lifetime of this strategy.</p> <p>Gaps in service provision will be identified and highlighted for future service planning.</p> <p>Young Carers Voice forum to be supported to meet every 2 months.</p>	<p>Lead Professional: PKAVS Young Carer Service/Young Carer Social Worker</p> <p>Target Date: Throughout the period of the strategy. Nov 2023</p>	<ul style="list-style-type: none"> • Number of responses to an annual overarching young carers consultation. • Young carers representative on the young carers' strategy monitoring group. • PKAVS to carry out 'targeted' consultations on

		review, review 6-month thereafter.	specific areas of service delivery.
7. All professionals to be able to access training to raise awareness of young carers and the support services already in place to support them.	<p>Training and development opportunities with all agencies to be explored and, where possible, delivered.</p> <p>Liaison between PKAVS and the P&K Council Workforce Development Team is taking place to offer shadowing/awareness sessions for newly qualified workers and students.</p>	<p>Lead Professional: PKAVS Young Carer Service/ Young Carer Social Worker/ Workforce Development Team</p> <p>Target Date: November 2023 and 6-month review thereafter</p>	<ul style="list-style-type: none"> • Number of professionals completing the training. • Number of training sessions delivered



Equality and Fairness Impact Assessment (EFIA) Form and Guidance

If the '*policy or practice*'* you are developing or going to develop is assessed as relevant after undertaking the online screening process (the Integrated Appraisal Toolkit) - that is, it will have an impact on people - you should complete an Equality and Fairness Impact Assessment (EFIA).

This form (which includes accompanying guidance) should be completed.

*see definition below on Page 5

EFIA – Guidance

The purpose of the EFIA is to ensure that decision makers are fully informed, at a formative stage in the decision-making process.

Under the Equality Act 2010, the Council is required to eliminate discrimination, advance equality of opportunity, and foster good relations between equality groups. Under Part 1 of the Act 'The Fairer Scotland Duty', the Council is required to actively consider how it can reduce inequalities of outcome caused by socioeconomic disadvantage, when making strategic decisions.

The online Integrated Appraisal Toolkit (IAT) has been developed within the Council to assess all proposals against criteria for reducing poverty and socio-economic disadvantage, eliminating discrimination, advancing equality of opportunity, and fostering good relations between equality groups.

The IAT should first be used at the initial stages of proposal development to **screen** the proposal for any likely positive or negative effects in relation to equality, fairness and human rights. After completing the IAT, it should be evident if your proposal is likely (or not) to have significant implications for: reducing poverty and socio-economic advantage, eliminating discrimination, advancing equality of opportunity, and fostering good relations between equality groups. **If the screening process identifies that there are implications then this full Equality and Fairness Impact Assessment (EFIA) should be undertaken.**

When should I carry out an EFIA?

In order to fulfil our general duty it is critical that the all services conduct an EFIA in the following circumstances:

- > **All** significant policies, strategies and projects* should have as a minimum an EFIA screening inbuilt as part of the risk assessment process.
- > **All** budget options for the each financial year will require to be EFIA screened. (It is possible to group individual options if they relate to one particular service area)
- > **All** Reports to Committee now require Equalities Impacts to be reported either as a screening or full EFIA. Significant service reforms **may** require a Full Report to be completed, or as a minimum, a justification in a Screening Report as to why the Full Report was unnecessary.

Equality and Fairness Impact Assessment Screening

A screening can be undertaken as part of a scoping exercise prior to a full report, or it can stand alone as final summary if no significant Equality and Fairness Impacts are identified or arise subsequently in the policy or plan implementation. This is done using the online Integrated Appraisal Toolkit.

Equality and Fairness Impact Assessment Full Report

A full report (using this form) should be conducted where a Screening indicates an area or areas that require more detailed consideration.

*see full definition Page 5

Stage 1: Screening

As noted above, a screening should ideally be carried out at the outset of a policy, service reform, or budget proposal* in order to embed consideration of equalities and fairness at the earliest part of the project plan or process.

In order to complete screening please follow the guidance provided within the online [Integrated Appraisal Toolkit](#)

A Screening Report should be conducted prior to identifying if a Full Impact Assessment is required, and the findings of the report should inform the introduction to the assessment; and provide the context and background, to outline the purpose and direction of the Full Impact Assessment.

Stage 2: Full Impact Assessment

If there are any areas that arise as part of the screening process that require further investigation or highlight areas of concern with regard to likely impacts across any or all protected characteristics, then a Full Impact Assessment report be conducted.

*see full definition Page 5

EFIA Form

Complete this for all *relevant policies*

'Relevant' means it will have an impact on people

'Policy or Practice' - see definition below

Definition of policy or practice for the purposes of EFIA:

For the purposes of an EFIA the term 'policy or practice' covers Service delivery and Employment. This can include a Policy, a Plan, a Strategy, a Project, a Service Review, a function, practice or service activity or a Budget option.

Section 1: Policy Details (see definition of 'Policy' or 'Practice' above)

Name of Policy or Practice:

Carers Strategy 2023-26

Service and Division/Team:

Perth and Kinross Health and Social Care Partnership

Owner/Person Responsible (include your Name and Position):

Karyn Sharp, Strategic Lead

Impact Assessment Team (include your Names and Positions). This team can consist of two people or more as appropriate:

Alison Gallacher, Business Improvement Officer, Christine Tse, Policy and Commissioning Officer and David McPhee, Equalities Team Leader.

Is the 'policy' or 'practice' being impact assessed new or existing? Please tick the appropriate box below to indicate.

☐ New

☒ Existing

What are the main aims of the policy or practice?

To provide improved support to Young and Adult Unpaid Carers living or caring in Perth & Kinross

Who are the main target groups/beneficiaries?

Unpaid Carers of all ages, and, indirectly, the people who they care for, which may include other family members.

What are the intended outcomes of the policy or practice?

That people who provide unpaid care are given support on a sustainable basis as long as they are able and willing to continue in that caring role. Support can be given to improve their health and wellbeing and other areas of their lives that are impacted, as well as to help them to be able to have a life alongside caring. Additionally, for Young Carers, they are supported to be a child first and foremost and have similar opportunities as their peers.

Section 2: Information Gathering

You should list here the sources of information used to assess the impact of the relevant policy or practice. This can include local sources such as reports, information and data, relevant partners' information, data and reports, other Council's relevant information, data and reports, national information, research outcomes, data profiles and any other evidence which has led to the development of this policy. You may wish to refer to Appendix 1 for reference when gathering information relating to Equality Monitoring Data,

Information/Evidence Gained and Used to Shape this Policy or Practice	List Details, Source and Date <i>(continue on a separate sheet if necessary – tick to indicate this has been done)</i> <input type="checkbox"/>
Community consultation/involvement outcomes from earlier contacts - this usually includes formally arranged contact with individuals or community, voluntary sector and other relevant interest groups	<p>Original consultation was held in October 2018 via social media, letters to registered carers, emails, focus groups with carers of all ages, consultation stalls and events. 324 responses were received.</p> <p>A follow-up consultation was carried out at the Carers Conference, Perth, which was open to all across Perth and Kinross, whereby 35 responses were received.</p> <p>Carer representatives are able to provide ongoing feedback on the draft consultation through the Carer Programme Board, Carers Strategic Group, Carers Voice and related subgroups.</p> <p>Further consultation for the strategy refresh was carried out in June - Aug 2022 via an online survey promoted across social media and attendance at meetings of carers in the community, their representatives and professionals who work to support carers. 255 responses were received.</p>
Employee involvement/consultation feedback (e.g. survey, focus groups)	<p>2019-22 strategy consultation survey was developed through:</p> <ul style="list-style-type: none"> • Several meetings held with key stakeholders on 12th, 13th, 19th, 20th, and 26th September 2018, and • 2 focus groups: one with adult carers and the other with young carers, both held on 20/9/2018. • Draft consultation has ongoing feedback from key stakeholders across the Partnership and carers. <p>For the strategy refresh, professionals who support unpaid carers were involved in the development of the survey from March 2022 and participated in the consultation through focus groups to provide their views on the support for carers.</p>
Research and information list main sources	<p>Census 2011, General Registrar of Scotland and Relevant legislation where applicable.</p>

Officer knowledge and experience	Involvement from Strategic Lead for Health and Social Care Partnership, Christine Tse, Policy and Commissioning Officer and Alison Gallacher, Business Improvement Officer, David McPhee, Equalities Team Leader. All contributors have a vast range of experience and broad knowledge in this area.
Equality monitoring data	Cross referenced existing information in Appendix 1 and final draft will be shared with Equalities Strategic Forum.
Service user feedback (including customer contact, services and complaints)	Received through events outlined above.
Partner feedback	Received through events outlined above.
Other - this may be information gathered in another Council area, nationally or in partner organisations which is considered to have relevance	

Section 3: Consultation/Involvement

Consultation with key stakeholders can be undertaken throughout the whole of the equality and fairness impact assessment process. This section can include details of outcomes from current, earlier or ongoing consultation/involvement activities. This activity **can also** help to **reach people not previously involved** with these processes, but who will be affected by this policy or practice when it is implemented.

The Consultation/Involvement process can also help **identify or agree changes** that need to be made to ensure the policy or practice will be inclusive when implemented.

The Equalities Team Leader (equalities@pkc.gov.uk) may be able to provide advice relating to potential contact with consultees from equality protected characteristic groups via existing mechanisms such as the Community Equalities Advisory Group (CEAG) or Equalities Strategic Forum.

A summary of the replies received from individuals and stakeholders consulted/involved. Include any previous feedback or complaints relating to equality and diversity issues and the policy or practice currently being assessed.

Equality Protected Characteristic	Specific Characteristics	Date	Outcome of Consultation/Involvement <i>(continue on a separate sheet if necessary – tick to indicate this has been done</i> <input type="checkbox"/>
Age	Older People (65+)	September 2022	Approx 28% of 255 carers gave feedback on their experience of carer services locally which helped us to develop the themes and commitments of the strategy.
	Younger People (17-64)	September 2022	Approx 37% of 255 carers gave feedback on their experience of carer services locally which helped us to develop the themes and commitments of the strategy.
	Children (0-16)	September 2022	Approx 28% of 255 carers gave feedback on their experience of carer services locally which helped us to develop the themes and commitments of the strategy.
	Looked After Children (Corporate Parenting)		
Disability	Physical Disability		N/A – not particularly relevant due to our strategy relating to supporting carers who look after people with disabilities.
	Sensory Impairment		N/A – not particularly relevant due to our strategy relating to supporting carers who look after people with disabilities.
	Mental Health		N/A – not particularly relevant due to our strategy relating to supporting carers who look after people with disabilities.
	Learning Disability		N/A – not particularly relevant due to our strategy relating to supporting carers who look after people with disabilities.

Gender Reassignment	Male transitioning to female		Consultation opportunities offered through press/social media.
	Female transitioning to male		Consultation opportunities offered through press/social media.
Marriage/Civil Partnership	Women		Consultation opportunities offered through press/social media.
	Men		Consultation opportunities offered through press/social media.
	Same Sex Couple (Male)		Consultation opportunities offered through press/social media.
	Same Sex Couple (Female)		Consultation opportunities offered through press/social media.
Pregnancy / Maternity/Paternity	Women		Carer Positive Employer
	Men (Paternity)		Carer Positive Employer
Race	A list of categories used in the census is here		Consultation opportunities offered through PKAVS Minorities Hub and through press/social media.
Religion / Belief	A list of categories used in the census is here		Consultation opportunities offered through press/social media.
Sex	Female		Consultation opportunities offered through press/social media.
	Male		Consultation opportunities offered through press/social media.
	Other Gender Identity		Consultation opportunities offered through press/social media.
Sexual Orientation	Lesbian		Consultation opportunities offered through press/social media.
	Gay		Consultation opportunities offered through press/social media.
	Bisexual		Consultation opportunities offered through press/social media.
Socio-economic(fairness)	Options detailed in Appendix 2		Consultation opportunities offered through press/social media.

Section 4: Detail the Positive and/or Negative Impacts or Tick to Indicate No Impact

Key Questions to Address

The Assessment should highlight areas of interest covering the following:

- > Positive and Negative impacts across all protected characteristics.
- > Scale of the Impact: An indication of the degree of potential impact, and whether this is judged to have a High, Medium or Low impact potential.
- > Anticipated duration of the impact if relevant
- > Whether there is a specific differential impact to a particular protected characteristic or characteristics
- > Or if the impact is more wide ranging and general in its effect.
- > Whether any impacts identified would/could be mitigated by an amendment to the policy, practice budget decision or service reform proposal

This information will be indicated by activities at Section 2 and Section 3 above.

Equality Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit the group concerned)	Negative Impact (it could disadvantage the group concerned)	No Impact
Age	Older People (65+)	The Carers Strategy seeks to improve the lives of all carers regardless of age.		
	Younger People (16-64)	The Carers Strategy seeks to improve the lives of all carers regardless of age.		
	Children (0-16)	The Carers Strategy seeks to improve the lives of all carers regardless of age.		
	Looked After Children (Corporate Parenting)	The Carers Strategy seeks to improve the lives of all carers regardless of age.		
Disability	Physical Disability	The strategy intends to raise awareness of carer support and services to enable all carers to be supported in their caring role and to meet their own outcomes. Carer Support Workers or Social Workers are able to travel to any carers who may not be able to travel outside of their own homes.		

Sensory Impairment	The strategy intends to raise awareness of carer support and services to enable all carers to be supported in their caring role and to meet their own outcomes.	There may be an indirect impact on people with sensory impairment due to difficulty in receiving information (e.g. from posters advertising help and support). However, once they have contacted our service, we are able to make measures to support them in understanding information given to them. Links to existing strategies would be considered e.g. See Hear, British Sign Language, TEC Strategy.	
Mental Health	The strategy intends to raise awareness of carer support and services to enable all carers to be supported in their caring role and to meet their own outcomes	There may be an indirect impact on people with mental health problems and their carers due to perceived societal stigma in accessing services or support. Links to existing strategies would be considered e.g. Mental Health and Wellbeing Strategy.	

	Learning Disability	The strategy intends to raise awareness of carer support and services to enable all carers to be supported in their caring role and to meet their own outcomes	There may be an indirect impact on people with learning disability due to difficulty in receiving information (e.g. from posters advertising help and support). However, once they have contacted our service, we are able to make measures to support them in understanding information given to them. Links to existing strategies would be considered e.g. Keys to Life Strategy.	
Gender Reassignment	Male transitioning to female	This strategy is all-encompassing and does not differentiate carers or the cared-for by their gender. As carers are assessed only on the impact their caring role has on them using a published eligibility criteria, this ensures that there will be no discrimination against people on gender.		
	Female transitioning to male	This strategy is all-encompassing and does not differentiate carers or the cared-for by their gender. As carers are assessed only on the impact their caring role has on them using a published eligibility criteria, this ensures that there will be no discrimination against people on gender.		

Marriage/Civil Partnership	Women	The strategy seeks to improve the circumstances of each individual carer and enables them to meet their own individual outcomes		
	Men			There is no evidence of a prevalence which indicated that there would be a specific impact on the strategy at this stage.
	Same Sex Couple (Male)			There is no evidence of a prevalence which indicated that there would be a specific impact on the strategy at this stage.
	Same Sex Couple (Female)			There is no evidence of a prevalence which indicated that there would be a specific impact on the strategy at this stage.
Pregnancy / Maternity/Paternity	Women			There is no evidence of a prevalence which indicated that there would be a specific impact on the strategy at this stage.
	Men (Paternity)			There is no evidence of a prevalence which indicated that there would be a specific impact on the strategy at this stage.

Race	A list of categories used in the census is <u>here</u>	The strategy seeks to improve the circumstances of each individual carer and enables them to meet their own individual outcomes.	However, where there are language or culture barriers, this may indirectly mean that these people are negatively impacted due to lack of understanding (of published information etc.). Additionally, for example, carers from the gypsy/traveler community can find it difficult to access services or support and prefer dedicated workers who can develop a relationship with their community and provide information/support to them. Would work with existing organisations e.g. PKAVS and MECOPP who provide Ethnic Minority Support work. Work is also done by Social Prescribers and Perthshire Welfare Society to raise awareness and support BME carers. Practice is non-discriminatory and policies would support this throughout any commissioned services.	
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Religion / Belief	A list of categories used in the census is here	The strategy seeks to improve the circumstances of each individual carer and enables them to meet their own individual outcomes.	However, where there are language or culture barriers, this may indirectly mean that these people are negatively impacted (due to difference in cultures which may prevent them from accessing support or certain types of support). Would work with existing organisations e.g. PKAVS and MECOPP who provide Ethnic Minority Support work. Work is also done by Social Prescribers and Perthshire Welfare Society to raise awareness and support BME carers. Practice is non-discriminatory and policies would support this throughout any commissioned services.	
Sex	Female	The strategy seeks to improve the circumstances of each individual carer and enables them to meet their own individual outcomes.	Some forms of support may appeal more to the other sex or there may not be a female equivalent, e.g. mens shed, certain leisure activities.	
	Male	The strategy seeks to improve the circumstances of each individual carer and enables them to meet their own individual outcomes.	Some forms of support may appeal more to the other sex, e.g. carer cafes, therapies, which may indirectly but negatively exclude male carers.	
	Other Gender Identity	The strategy seeks to improve the circumstances of each individual carer and enables them to meet their own individual outcomes.	Some forms of support may appeal more to the other sex, which may indirectly but negatively exclude these carers.	

Sexual Orientation	Lesbian	The strategy seeks to improve the circumstances of each individual carer and enables them to meet their own individual outcomes.	There may be feelings of societal stigma which may prevent some carers from accessing services. Otherwise, the strategy does not discriminate or promote one 'type' of carer over another.	
	Gay	The strategy seeks to improve the circumstances of each individual carer and enables them to meet their own individual outcomes.	There may be feelings of societal stigma which may prevent some carers from accessing services. Otherwise, the strategy does not discriminate or promote one 'type' of carer over another.	
	Bisexual	The strategy seeks to improve the circumstances of each individual carer and enables them to meet their own individual outcomes.	There may be feelings of societal stigma which may prevent some carers from accessing services. Otherwise, the strategy does not discriminate or promote one 'type' of carer over another.	
Socio-economic(fairness)	Options detailed in Appendix 2	The strategy seeks to improve the circumstances of each individual carer and enables them to meet their own individual outcomes and would consider the needs of those affected particularly by socio-economic disadvantage e.g. rurality, low income, substance misuse.		

Section 5: Recommendations and Actions

As a result of this equality impact assessment, please **clearly describe practical actions** you plan to take to:

- ☐ *reduce or remove any identified **negative impact***
- ☐ *promote any **positive impact** or*
- ☐ ***gather** further information/evidence*

Equality Protected Characteristic	Specific Characteristics	Action	Who is responsible	Date for completion
Age	Older People (65+)	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
	Younger People (16-64)	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
	Children (0-16)	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
	Looked After Children (Corporate Parenting)	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
Disability	Physical Disability	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
	Sensory Impairment	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
	Mental Health	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
	Learning Disability	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
Gender Reassignment	Male transitioning to female	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	

	Female transitioning to male	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
Marriage/Civil Partnership	Women	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
	Men	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
	Same Sex Couple (Male)	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
	Same Sex Couple (Female)	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
Pregnancy / Maternity/Paternity	Women	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
	Men (Paternity)	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
Race	A list of categories used in the census is here	Services have been commissioned through Minorities Community Hub and MECOPP to mitigate and support carers where there is a risk that carers may be indirectly disadvantaged due to race. An Ethnic Minority Support Worker is also funded as a frontline interface and support.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
Religion / Belief	A list of categories used in the census is here	Services have been commissioned through Minorities Community Hub and MECOPP to mitigate and support carers where there is a risk that carers may be indirectly disadvantaged due to cultural and religious belief. An Ethnic Minority Support Worker is also funded as a frontline interface and support.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	

Sex	Female	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
	Male	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
	Other Gender Identity	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
Sexual Orientation	Lesbian	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
	Gay	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
	Bisexual	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	
Socio-economic(fairness)	As detailed in Appendix 2	If an issue were to arise we would reduce or remove any identified negative impact.	The Strategic Planning Group and Carers Strategy Group through the Risk Mitigation Plan	

Section 6: Outcomes

When the evidence has been considered in relation to the proposed Policy, Practice, Project, Service Reform or Budget Option, it will be apparent what the likely impacts are. The type, scale, duration, and specificity of the likely impacts will inform the direction of the outcome of the EFIA.

There are four potential outcomes as follows:

1. No major change required The Policy, Practice, Project, Service Reform or Budget Option is robust and can continue without amendment
2. Continue the Policy, Practice, Project, Service Reform or Budget Option. A justification is required for continuing despite the potential for adverse impact
3. Adjust or Amend the Policy, Practice, Project, Service Reform or Budget Option. Remove barriers, make changes to better advance equality or remove or mitigate negative impact
4. Stop, or Remove the Policy, Practice Project, Service Reform or Budget Option if adverse effects cannot be justified and cannot be mitigated.

1. No major change required The Policy, Practice, Project, Service Reform or Budget Option is robust and can continue without amendment

The successful implementation of the strategy including communication and engagement with all groups of carers and support to groups of carers who may be indirectly disadvantaged, will improve the lives of carers across Perth & Kinross.

Section 7: Authorising the Assessment

The following signatures are required:

Service Manager

[illegible]

Quality Assured by PKC Equality and Fairness Impact Assessment Trained Officer (within service)

Signed D McPhee Name David McPhee Date

Section 8: Publishing the Assessment

The completed and authorised EFIA should be added to your Service pages on the internet.

Date Action Completed _____ Date for Review of EFIA _____

Section 9: Committee Reporting

Ensure your Committee **report** to accompany this policy **includes information** about any **actions** taken to reduce or remove **negative impacts** identified, or include any **positive impacts** expected when the policy is implemented.

Section 10: Review and Monitor

Note of Action required (from Section 5)

If any equalities issues are identified through consultation at the Equalities Strategic Forum or as part of our ongoing work we would refer to existing mechanisms for specialist advice as required. The Strategic Lead is a member of the NHS Tayside Equality and Diversity Forum and the Perth and Kinross Equality and Strategic Forum.

Date completed

August 2019

Note of Action required (from Section 5)

Date completed

Note of Action required (from Section 5)

Date completed

Note of Action required (from Section 5)

Date completed

Add more sections as required

Appendix 1 – Equality Monitoring Data Guidance

The Equality Protected Characteristics in Our Area

There are nine protected characteristics in the Equality Act and these are disability, sex, race, sexual orientation, gender reassignment, age, marriage and civil partnership, pregnancy and maternity and religion and belief.

The Scottish Government Equality Evidence Finder is updated twice a year with data surrounding equality evidence from a wide range of policy areas. Some key local statistics should be noted:

Disability - 28% of the Perth & Kinross population consider themselves to have a long term physical or mental health condition, compared to 22% for Scotland overall. (*Scottish Household Survey 2016*)

Sex - 49% of the Perth & Kinross population identify as male, the same as Scotland overall. (*Scottish Household Survey 2016*)

Race - 98% of the Perth & Kinross adult population classify themselves as 'White', compared to 96% for Scotland as a whole (*Scottish Household Survey 2016*)

Sexual orientation - 99% of the Perth & Kinross adult population identify as Heterosexual, compared to 98% for Scotland overall. (*Scottish Household Survey 2016*)

Gender reassignment - The Registrar General for Scotland maintains a Gender Recognition Register in which the birth of a transgender person whose acquired gender has been legally recognised is registered showing any new name(s) and the acquired gender. This enables the transgender person to apply to the Registrar General for Scotland for a new birth certificate showing the new name(s) and the acquired gender. The Gender Recognition Register is not open to public scrutiny. Local information is not available. (*NRS Registration Division 2016*)

Age - Young people under 16 currently make up 16% of the population in Perth & Kinross, compared to the national average of 17%. People aged 65 and over account for 23% of the total population, higher than the national average of 19%. By 2039 this proportion is set to increase to 30%. (*ONS Population data*)

Marriage and civil partnership - 58% of the Perth & Kinross adult population are married or in a civil partnership, compared to 47% for Scotland as a whole. (*Scottish Household Survey 2016*)

Pregnancy and maternity - In 2016, the birth rate was 53.5 per 1000 women aged 15-44. In other words, broadly 5.4% of women of child bearing age were pregnant in 2016 in Perth and Kinross, compared to 5.2% for Scotland as a whole. (*NRS Vital events 2016*)

Religion and belief - 52% of the Perth & Kinross adult population consider themselves to have a

religious belief, compared to 49% for Scotland as a whole. (*Scottish Household Survey 2016*)

National data sources have been used to provide this information but it should be noted that the Scottish Household Survey is only based on a sample of respondents so variations may not be statistically significant.

Appendix 2– Socio-economic (Fairness)

Socio-Economic Disadvantage:

- Low Income – (in comparison to most others) – can be measured in a range of ways e.g. relative poverty (after housing costs) looks at number of individuals living in households with incomes below 60% of UK median income. Statistics on absolute poverty (household living standards over time) and persistent poverty (where households live in poverty for 3 years out of 4) are also available. Poverty statistics can also be broken down by gender, disability, ethnicity, tenure and urban/rural.
- Low/No Wealth – having access to wealth e.g. financial products, equity from housing and a pension, provides some protection from socio-economic disadvantage. Single adult households (including single parent households) have very high risks of low wealth; households with lower educational qualifications and in routine or manual occupations have significantly higher risks of low wealth.
- Material deprivation – refers to households being unable to access basic goods and services and tends to focus on families with children.
- Area deprivation - living in a deprived area can exacerbate negative outcomes for individuals and households already affected by issues of low income.
- Socio-economic background – the structural disadvantage that can arise from parents' education, employment and income (i.e. social class) is more difficult to measure.

Inequalities of Outcome – any measurable differences for communities of interest or communities of place such as:

- Poorer skills and attainment
- Lower quality, less secure and lower paid work
- Greater chance of being a victim of crime
- Lower healthy life expectancy
- Less chance of a dignified and respectful life

Communities of Place – refers to people who are bound together because of where they reside, work, visit or otherwise spend a continuous proportion of their time. Poverty is often hidden in smaller rural communities with issues such as cost of living and accessibility of transport, education and employment impacting more negatively.

Communities of Interest – refers to people who share an identity e.g. an equality protected characteristic. Consideration of the impact on those groups can help develop a deeper understanding of socio-economic impact, particularly by talking to people with lived experiences.

For further information refer to [Fairer Scotland Duty -Interim Guidance for Public Bodies](#)

Appendix 3– Human Rights Based Approach

A Human Rights approach should also be an embedded consideration in an EFIA.

In summary; we need to consider, where applicable, to what (if any) extent policies, practices, projects, Service Reforms, or Budget Options impact on three key strands of Human Rights:

Absolute rights:

- > the right to life,
- > the right to freedom from inhuman and degrading treatment

Limited rights:

- > the right to liberty,
- > the right to a fair trial

Qualified rights

- > the right to respect for private and family life, home and correspondence
- > the right to freedom of thought, conscience and religion
- > the right to freedom of assembly and association
- > the right to protection of property

Any restriction of Qualified Rights must be:

- > In accordance with the law: have a basis in domestic law, safeguards against arbitrary interference, foreseeable
- > In pursuit of a legitimate aim: including "the economic wellbeing of the country"; "the protection of health", "protection of the rights and freedoms of others"
- > Necessary
- > Proportionate
- > Not discriminatory

There is further guidance on integrating human rights into the equality impact assessment process available on the Scottish Human Rights Commission website following previous pilots with local authorities: <http://eqhria.scottishhumanrights.com/>



Perth & Kinross Health and Social Care Partnership

Communications & Engagement Plan: Carers Programme & Strategy 2023-26

Version V0.1 April 2023
Project Lead: Karyn Sharp,

Contents

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2. Communication Aim
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13. Strategic Environmental Assessment
14. Communications and Engagement Activity Plan

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0.1	Draft	For review
0.2		Presented to Strategy Group
0.3		For Approval by IJB

DRAFT

1. Introduction

- 1.1 Unpaid carers play a vital role in our society; providing care and support to family members or friends, supporting them to stay at home and within their communities for longer. Many carers fulfil a caring role without identifying as such and therefore may not be aware of the support that is available. Having a Communications Plan is necessary to ensure that carers are aware of the range of information and support which is available locally and nationally, that can support them with their caring role, as well as to enjoy a life alongside that role.
- 1.2 Following the reviewed governance framework for the delivery of services as agreed in February 2020 by IJB, the Carers Programme Board was replaced by the Carers Strategy Group, which is supported by the Strategy Steering Group to ensure good governance around the improvements for carers. The role of the Steering group is to provide oversight and direction to ensure the implementation of the Carers Strategy. Legislatively, the Carers (Scotland) Act 2016 (the Act) was implemented in April 2018 giving carers new rights to ensure that they were supported to sustain their caring role if they so wish, and have a life alongside that role. The Act places a duty on the local authorities and health boards to provide information, advice and develop local Eligibility Frameworks for young and adult carers for the provision of support.
- 1.3 A further requirement of the Act is that each local authority and health board publish a Carers Strategy to align with the Strategic Commissioning Plan indicating how it would ensure that carers were supported and to improve the level of support in the area. The Carers Strategy will be in place from 2023 to 2026 and this Communications Plan will apply during the lifetime of the Strategy.
- 1.4 Since the last Strategy we have developed different ways for communicating with carers including more digital communications. Much of this is born out of our experiences throughout the pandemic but we still use more traditional forms like poster and banners and newsletters. Communication is still required within the Partnership to ensure shared understanding of the legislation and the outcomes of the Strategy and outwith the Partnership in our wider communities to ensure Carers receive the support that they need and are entitled to.
- 1.5 This Plan and the Carers Strategy link to the Strategic Commissioning Plan and other strategies operating to inform the work of the Partnership in achieving its aims.

2. Communication Aim

- 2.1 To raise Carers awareness and uptake of the range of supports that are available to them.
- 2.2 To raise awareness of the Carers Strategy and our work to improve support for carers.

3. Communication Objectives

The communications objectives for this project are:

1. Increase the number of carer referrals by 10% in each year of the Plan; for both Young and Adult Carers;
2. Increase the number of carers receiving support from the Partnership or Carers Centre by 10% in each year of the plan;
3. Increase the number of Adult Carer Support Plans by 10% in the first year of the Plan, by 10% of the second year of the Plan and by 10% in the third year of the Plan;
4. Increase the number of Young Carer Statements by 10% in the first year of the Plan, by 10% in the second year of the Plan and by 10% in the third year of the Plan;
5. Maintain the percentage of admissions to long-term or permanent residential care due to carer breakdown at 20% or below through the lifetime of the Strategy;
6. Increase the number of businesses who are recognised as Carer Positive at level 1 (Engaged) by 10 through the life of the strategy;
7. Perth & Kinross Council to achieve Carer Positive Level 3 – Exemplary.

4. Stakeholders

- 4.1 We will communicate and engage with the following internal and/or external audiences:

Carers
 People who are Cared For
 Carer Representatives
 All staff working for the Health and Social Care Partnership (HSCP)
 Integration Joint Board (IJB)
 Perth & Kinross Council
 NHS Tayside
 Voluntary/Private and 3rd Sector Groups
 Commissioned Services
 Elected members
 Chamber of Commerce
 Local Businesses

Trade Unions
 Scottish Government Carers Leads
 Public members of Perth and Kinross

5. Key Messages

5.1 The key messages for this project are:

- i. Information and support for all carers is available from PKAVS;
- ii. Carers should be supported to enable them to sustain their caring role, to have a life alongside caring;
- iii. Young carers should be children first;
- iv. Carers have a right to be offered or to request an Adult Carer Support Plan or Young Carer Statement;
- v. Carers' opinions matter and we will take account of their wishes and ambitions to help develop how we work;
- vi. By supporting unpaid carers, people will be able to stay at home for longer and so families will be able to stay together;
- vii. Carers should not be disadvantaged due to their caring role.

6. Tactics

6.1 A wide range of communication channels will be used to ensure we reach all of our stakeholders.

- Information Stalls/leaflets – based on Coalition of Carers literature
- Conference (Central Event)/ local events
- Advertising – radio – electronic media
- Briefings/meetings with Elected members/partnership/ IJB/Carer Representatives/local community groups supporting carers/Employers/
- Press Releases
- Conversations with Carers
- Training sessions to support Carers
- Outreach for Young Carers
- Community Engagement Newsletters
- Social Media Messages inc. PKAVS & PKC social media
- Plasma Screens in PKC buildings/libraries/ PKAVS/Health Centres/
- Council website – for new resources/updates
- PKAVS website – new resources
- NHS Website – to confirm details
- Partner Publications
- Training Sessions with Staff
- Consultation questionnaires/user surveys

7. Design and Branding

- Leaflets relating to the resources for carers will use the Partnership's colour palette, Partnership logo and, where commissioned services are involved, PKAVS logo.
- Communication will include "Translation / Other Formats" panel where appropriate / available
- Posters for events through commissioned services – included in commissioned services budgets – need clarity on use of the Partnership logo.
- Digital platforms: Social Media/Plasma screens as above
- Upright Banner for events / info booths – Supporting Unpaid Carers using Health & Social Care Partnership brand
- Young Carers may want further branding
- A range of materials have been printed based on literature from the Carers Coalition.
- Distribution of communication leaflets / posters will be through Community Engagement and commissioned services

8. Budget

This communications plan will be delivered in-house by existing employees. Additional budget may be required for engagement and printing activities. This will be funded by the Carer's Programme Budget for 2023/24 of which the budget for information and promotional materials is £5,000 (repeated for 2024/25 and 2025/26).

Examples of types of spend covered by this budget are detailed below:

- Events during Carers Week & Carers Rights Days
- Carers Week brochures
- Printing to supplement existing leaflets as and when stocks are exhausted
- Promotional Materials

Consideration should be given to ensure that costs of communications and engagement undertaken by PKAVS commissioned services are properly branded and costed as part of the Service Level Agreement.

9. Milestones

Date	Key milestone
5-11 June 2023	Carer Week activities to promote and engage with carers of all ages across

	communities
21 June 2023	Presentation of Strategy to IJB
24 August 2023	Presentation of Strategy to Learning & Families Committee
30 November 2023	Carers Connect Event
10-15 June 2024	Carers Week 2024 activities to promote and engage with carers of all ages across communities
28 November 2024	Carers Rights Day – virtual conference
9-15 June 2025	Carers Week 2025 activities to promote and engage with carers of all ages across communities

10. Risks

Risk Description	Impact (Scale 1 to 5)	Probability (Scale 1 to 5)	Action Plan to mitigate risk
There is a risk that the Strategy will not be completed in sufficient time for further consultation prior to presentation to Integration Joint Board and Learning and Families Committee	4	5	A timeline has been prepared for use by officers responsible for submissions for the Strategy.
There is a risk that a clear and consistent message about the help that is available to support carers is not presented to Carers in the area.	3	3	This Plan Partnership planning and working together with commissioned services, voluntary and community groups will ensure that a clear and consistent message is presented, raising awareness across the area and care groups, so that carers are aware of the help that is available and how to access it.

11. Review & Evaluation

- 11.1 This Communications and Engagement Plan will be reviewed and evaluated by the Health and Social Care Partnership Communications and Engagement Group periodically and the Carer's Strategy Steering Group at each meeting.

12. Equality Assessment

- 12.1 An equality impact assessment needs to be carried out for functions, policies, procedures, or strategies in relation to race, gender and disability and other relevant protected characteristics. This supports the Council's legal requirement to comply with the duty to assess and consult on relevant new and existing policies. The Carers' Strategy has been subject to an Equalities Impact Assessment which ensures that supports have

been put in place to minimise the impact of a caring role on people with protected characteristics.

13. Strategic Environmental Assessment

- 13.1 Strategic Environmental Assessment (SEA) is a legal requirement under the Environmental Assessment (Scotland) Act 2005 that applies to all qualifying plans, programmes, and strategies, including policies (PPS). Further information on strategic environmental assessment is available on ***eric***.

A Strategic Environmental Assessment is not required for this Strategy.

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14. Communications and Engagement Stakeholder Activity Plan

This **Communications & Engagement Stakeholder Activity Plan** aims to achieve the following objectives:

1. Engaging with stakeholders who have an interest in and/or are affected by the Strategy.
2. Providing clear current reliable information in a range of formats so that unpaid carers of all ages can self-identify and be aware of the support that is available to them when they need it.
3. Professionals who support carers of all ages have sufficient training and reliable information to ensure that they treat carers fairly and empower them to access all appropriate support;
4. Our carers feel valued, listened to, and understood through positive communication, consultation and engagement.
5. Promote the key themes of the Strategy to ensure all stakeholders understand and can fully engage.
6. Provide useful opportunities for key stakeholders to comment on and contribute to key aspects of the Strategy as appropriate.
7. Build and maintain relationships throughout the Strategy period.

- i. Information and support for all carers is available from PKAVS;
- ii. Carers should be supported to enable them to sustain their caring role, to have a life alongside caring;
- iii. Young carers should be children first;
- iv. Carers have a right to be offered or to request an Adult Carer Support Plan or Young Carer Statement;
- v. Carers' opinions matter and we will take account of their wishes and ambitions to help develop how we work;
- vi. By supporting unpaid carers, people will be able to stay at home for longer and so families will be able to stay together;
- vii. Carers should not be disadvantaged due to their caring role.

Outcome 1: Carers can expect: clear, reliable, accessible information about local and national support

No	Activity	Objective No	Channel	Key Messages	Audience	Start	End	Lead Officer(s)
1.1	Review of presentation of Carers Information on pkc.gov.uk for accuracy and relevance	2	Website	i, ii, iv, vi, vii	Carers, Cared For	Sep 23	Nov 23	K Sharp
1.2	Digital videos created for use at pkc website and external hostings	2	Video	i, ii, iii, iv, vi, vii	Carers		Nov 23	A Gallacher
1.3	Provision of information for carers on social media on ongoing basis	2, 7	Social Media Facebook Twitter	i, ii, iii, iv, vi, vii	Carers	Jun-23	Ongoing	K Sharp
1.4	Emergency Planning information for carers to be made available to	2, 3, 7	Leaflets	i, ii, iii, iv, vi, vii	Carers, Cared For	Aug-23	Dec 23	V Riddell

	support carers							
1.5	Anticipatory Care information for carers to be made available to support Carers	2, 3, 7	Leaflets	i, ii, iii, iv, vi, vii	Carers, Cared For	Aug-23	Dec 23	V Riddell
1.6	1.6.1 Distribution of printed material across area in health and community locations	2, 7	Leaflets	i, ii, iii, iv, vi, vii	Carers. Cared for	Jun 23	Jun 23	K Sharp
	1.6.2 Creation of Easy Read Version of leaflet for online presentation	2	Website	i, ii, iv, vi, vii	Carers, Cared For	Jan 24	Ongoing	A Gallacher
1.7	Review of content of Carers Hub website information on ongoing basis	2, 7	Websites	i, ii, iii, iv, vi, vii	Carers	Jun 23	Jun 23	R Jamieson
1.8	Design of specific Plasma screens for use in public buildings on ongoing basis*	2, 7	Plasma Screens	i, ii, iii, iv, vi, vii	Carers, Cared For	Dec 23	Dec 23 6-month review	A Gallacher
1.9	Identification of new outlets for information	2						
	1.9.1 PKC Council Tax letter -ongoing	2, 7	Letter	i, ii, iii, iv, vi, vii	Carers	Jan 24	Apr 24	A Gallacher

	1.9.2 Community Engagement newsletters	2, 7	Newsletter	i, ii, iii, iv, vi, vii	Carers	Jun 23	Ongoing	Community Engagement Team
	1.9.3 Translations and in variety of formats to be made available regarding carer support	2,7	Video	i, ii, iii, iv, vi, vii	Carers, cared for, carers with protected characteristics	May 23	Ongoing	R Jamieson
	1.9.4 Potential to use TV advertising explored	2, 7	Video/ advertising	i, ii, iii, iv, vi, vii	Carers, cared for	Feb 24	Jun 25	Community Engagement Team

Outcome 2: Carers can expect: Promoted awareness about the Carers Act in the community and workplaces to improve early identification and support of carers.

No	Activity	Objective No	Channel	Key Messages	Audience	Start	End	Lead Officer(s)
2.1	Training to health, social care and wider partners to support carers and to help carers to self-identify more easily.	3	Online/ in person training sessions	i, ii, iii, iv, vi, vii	Integrated Teams	Jun 23	Ongoing	F Matthews
2.2	Develop network of workers across various organisations to share information about the different types of support available to	2, 3	Online Community Participation and Engagement activity	i, ii, iii, iv, vi, vii	Carers	Dec 23	Ongoing	R Jamieson

	carers.							
2.3	Work with employers in Perth & Kinross to recognise carers in the workplace	1, 2, 5, 7	Online/ in-person meetings	i, ii, iii, iv, vi, vii	Chamber of Commerce/ Individual employers or groups	Jun 23	Ongoing	K Sharp R Jamieson
	2.3.1 Presentation to Commissioned Providers to engage and increase uptake of Carer Positive accreditation.	1, 2, 5, 7	Presentation	i, ii, iii, iv, vi, vii	Employers	May 23	Ongoing	S Jenkins D Henderson
	2.3.2 Link with Carer Positive to develop strategies to engage with local employers	1, 2, 5, 7	Emails Online Meeting, Plans, events	i, ii, iii, iv, vi, vii	Employers	Jun 23	Ongoing	K Sharp
	2.3.3 Social networking to be used to develop Carer support in PKC	1, 2, 5, 7	MS Teams	i, ii, iii, iv, vi, vii	PKC employees	Jun 24	Ongoing	F Thomson
2.4	Work with GPs Practice Managers, and other health professional teams for the early identification of carers.	3	Meetings, events, information cards, leaflets	All	GPs lead groups/ Practice Managers, Health Teams	Dec 23	Ongoing	R Jamieson A Taylor
	2.4.1 Social Prescribers to present to GP clusters with Carer Support	3	Meetings, events, information	All	GPs lead groups/ Practice Managers	Jun 24	Ongoing	Locality Team Leaders

	Workers		cards, leaflets					
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Outcome 3: Ensure carers are listened to and have their opinions valued by professionals.								
No	Activity	Objective No	Channel	Key Messages	Audience	Start	End	Lead Officer
3.1	Develop hospital discharge planning awareness to include carers	3	Booklets, videos. meetings	i, ii, iv, vi, vii	Health professionals	Oct-23	Ongoing	R Jamieson A Gallacher
3.2	Provide information and training to: Health, Social Work Education professionals with respect to the health needs of the individual and the support needs of the carer.	3, 4	Online, booklets, online/ in=person training events	i, ii, iv, vi, vii	Health, Social Work and Education professionals	Oct 23	Ongoing	F Matthews
3.3	Provide training for professionals to improve communication with carers with regard to changes in support to cared for	3	Online , & in-person training events	i, ii, iv, vi, vii	Professionals	Aug-23	Ongoing	F Matthews
3.4	Programme of support for carers who are	2, 3		v, vi, vii	Carers	Nov-19	Ongoing	S Thomson

	bereaved or when the person they care for enters long-term care							
3.5	Consultation and Engagement events with carers around: Eligibility frameworks Short breaks services statement, to ensure relevance and consistency Provide Easy Read	1, 3, 4, 6	Consultation events, surveys	i, ii, iii, v, vii	Carers/ Carer Representatives	Oct-19	Ongoing	K Sharp R Jamieson
3.6	Presentation to Strategy Group regarding Charging Policy Review	1, 3, 4, 6	Presentation	ii, v, vi, vii	Carers/ Carer Representatives	Feb 19	Feb 19 Apr 21 Apr 24	C Barnett
3.7	Presentation to Carer Strategy Group for Care @ Home	1, 3, 4, 6	Presentation	ii, v, vi, vii	Carers/ Carer Representatives	Mar 21	Ongoing	S Maclean
3.8	Presentation to Carers Strategy Group for Eligibility Framework	1, 3, 4, 6	Presentation	ii, v, vi, vii	Carers/ Carer Representatives	Jul 21	Sept 23	G Morrison/ I Paterson

Outcome 4: Provide opportunities for carers to participate as active partners to the planning and shaping of carer services in their local areas including services for the people who are cared for.

No	Activity	Objective No	Channel	Key Messages	Audience	Start	End	Lead Officers
4.1	Invite Carer representatives to relevant steering and working groups.	1, 4, 6	Meetings Online	v, vii	Carer Representatives	Apr-19	Ongoing	K Sharp R Jamieson S Cooper A Taylor
4.2	Opportunities for carers to recognise their own contribution in the life of those they care for, to receive updates on current developments, and to give feedback on future changes, such as at the Carers Conference, during Carers Week and the Young Carers Consultation event.	1, 4, 6	Events, Newsletters,	I, ii, iii, iv, vi, vii	Carers/ Carer Representatives	Jun-19	Ongoing	R Jamieson
4.3	Support for carers will be developed including support from social enterprise providers and volunteers	1	Consultation, meetings, surveys	ii, iii, vi, vii	Carers, Carer Representatives	Apr-19	Ongoing	K Sharp R Jamieson R Pollock
4.4	Develop carer satisfaction survey for	1, 4, 6	Consultation, survey	i, ii, iv, v, vi, vii	Carers	Jun-19	Oct 19	A Gallacher

	carers to obtain information about the care they provide and their experiences of carers services used, to review effectiveness and efficiency of resources used.							
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Outcome 5: The development of wider carer networks to enrich peer support.

No	Activity	Objective No	Channel	Key Messages	Audience	Start	End	Lead Officers
5.1	Develop & support Carer Peer Support Groups	1, 4	Social media, press releases, information stalls/leaflets	i, ii, iii, v, vi	Carers Carer Rep Groups Voluntary Organisations Statutory Services	Apr 19	Ongoing	R Jamieson K Sharp
	5.1.1 Virtual Peer Support groups established	1, 4	Zoom, press releases, newsletters	i, ii, v, vi	Carers Carer Rep Groups	Jun 20	Ongoing	R Jamieson
	5.1.2 Work to establish or re-establish previous	1, 4	Social media, press releases,	i, ii, v, vi	Carers	Apr 21	Dec 24	A Gallacher

	peer support groups in localities with community engagement, social prescribers,		information stalls/leaflets		Carer Rep Groups Voluntary Organisations			Community Engagement Carer Support Workers
5.2	Support to Carers Voice for adult carers	1, 4	Social media, meetings, events, press releases, information stalls/leaflets	i, ii, v, vi	Carers Carer Rep Groups Statutory Services	Apr 19	Ongoing	R Jamieson K Sharp
	5.2.1 Support for Coalition of training Carers Pilot on representation to Social Care Partnership	1, 4	Presentations, MS Teams meetings,	i, ii, v, vi	Carers Carer Rep Groups	Dec 20	Feb 21	Carers Voice R Jamieson F Johnstone A Gallacher
	5.2.2 Confirm policy in place for all volunteer expenses	1, 4	Policy	i, ii, v, vi	Carers Carer Rep Groups	Jul 21	May 23	R Pollock
5.3	Establishment of Young Carer Forum	1, 4	Social media, Plasma screens, school information /leaflets	i, ii, iii, v	Carers Carer Rep Groups Charity Groups Statutory Services	Apr 19	Apr 20 & ongoing	R Jamieson S Cooper

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Outcome 6: Improve provision of flexible and personalised support to support the emotional/physical wellbeing of carers and to support them to have a life alongside caring

No	Activity	Objective No	Channel	Key Messages	Audience	Start	End	Lead Officer
6.1	Provide training opportunities for carers to develop confidence and skills.	1, 2, 3	In-person meetings Online meetings (Zoom)	i, ii, iv, v, vi, vii	Carers	Nov 19	Ongoing	R Jamieson
6.2	Provide opportunities for carers to be active partners in planning and shaping supports that promotes better emotional/physical wellbeing and life balance.	1, 4, 5, 6, 7	Working groups, discussions, surveys, feedback	ii, iv, v, vi, vii	Carers	Nov 19	Ongoing	K Sharp
6.3	Review provision to support carers of different cultural backgrounds and communities.	All	Working groups, discussions, feedback, meetings	ii, iv, v, vi, vii	Carers, Community leaders	Nov 19	Ongoing	K Sharp
6.4	Improve the range of person-centred support across Perth & Kinross	1, 2, 4, 5, 6, 7	Working groups, discussions,	ii, iv, v, vi, vii	Carers	Nov 19	Ongoing	K Sharp

	for accessibility availability, relevance and sustainability		feedback, meetings					
6.5	Explore improvements to reduce social and financial exclusion for carers	All	Meetings, working groups. consultations discussions	vii	Carers	Nov 19	Ongoing	K Sharp
6.6	Presentation to Carer Strategy Group on Charging Policy	All	Meetings	vii	Carers Carer Rep Groups	Nov 19	Ongoing	C Barnett
6.7	Presentation to Carers Strategy group on Eligibility Framework for Adult Care	All	Meetings	vii	Carers Professionals Carer Rep Groups	Nov 19	Ongoing	K Sharp

Outcome 7: Young Carers will be supported to achieve their educational potential to have similar opportunities as to peers and to enjoy their childhood.

No	Activity	Objective No	Channel	Key Messages	Audience	Start	End	Lead Officer
7.1	Complete a Young Carer Statement when requested by a Young Carer/Parent /guardian	1, 2	Conversations, meetings	All esp. iii, iv,	Young Carers, Cared For, Professionals, Commissioned Services	Apr-18	Ongoing	S Cooper
7.2	Support young carers where their caring role is having an impact on their attainment.	1, 2, 3	Conversations, meetings	All esp. iii, iv,	Young Carers, Cared For, Professionals	Apr -19	Ongoing	S Cooper R Jamieson
7.3	Support young carers to improve their emotional and physical wellbeing of young carers by accessing a variety of resources and respite opportunities.	1, 2, 3	Conversations, meetings, activities	All esp. iii, iv,	Young Carers, Cared For, Professionals	Apr-19	Ongoing	S Cooper R Jamieson
7.4	Work with schools to identify young carers to provide preventative support, as early as possible (Level 1).	3	Conversations, meetings	All esp. iii, iv,	Young Carers, Cared For, Professionals	Apr-19	Ongoing	S Cooper R Jamieson

7.5	Increase opportunities to creatively engage with learning and identify what support is needed at home to improve attendance in school.	1, 2,	Conversations, tutorials, meetings	All esp. iii, iv,	Young Carers, Cared For, Professionals	Apr-19	Ongoing	S Cooper R Jamieson
7.6	Provide Mind of My Own training to Young Carers who would benefit from this.	1, 2	Conversations, meetings, training sessions	All esp. iii, iv,	Young Carers, Cared For, Professionals, Commissioned Services.	Apr-19	Ongoing	S Cooper R Jamieson

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PERTH AND KINROSS INTEGRATION JOINT BOARD

DIRECTION ISSUED UNDER S26-28 OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

1	Direction reference Number	G/23/84/2023	Direction reference to be superseded (if relevant)	n/a
2	Date of IJB	21 June 23	IJB report reference	G/23/84
3	Report Title	Carers' Strategy, 2023 - 2026		
4	Date from which direction takes effect	22 nd June 2023		
5	Direction to	Perth & Kinross Council and NHS Tayside		
6	Functions covered by Direction	Services to support unpaid carers, provided directly or commissioned, by Perth & Kinross Council and NHS Tayside.		
7	Reference to Strategic Plan	<p>The Direction will contribute to P&K IJB's Strategic Commissioning Plan Aims:</p> <ul style="list-style-type: none"> • Working Together with our Communities – people will have the health and care services they need within their local communities and be empowered to have greater control over their lives and stronger connections in their community. • Prevention and Early Intervention - support people to remain healthy, active and connected in order to prevent escalation of health concerns. • Person-Centred Health, Care and Support - put people at the heart of what we do. • Reducing Inequalities and Unequal Health Outcomes and Promoting Healthy Living - reduce health inequalities, increase life expectancy, increase people's health and wellbeing and reduce the personal and social impact of poverty and inequality. • Making Best Use of Available Facilities, People and Other Resources - use our combined health and social care resources efficiently, economically and effectively to improve health and wellbeing outcomes for the people of Perth and Kinross. 		

8	Full Text of Direction	Perth & Kinross Council and NHS Tayside are directed to make the necessary arrangements to implement the actions in the Carers Strategy 2023-26.
9	Budget allocated for the implementation of the Direction	The budget allocated is £910,000 recurring.
10	Intended Outcomes to be delivered by this Direction	Progress in fulfilling the strategic ambitions contained within Perth and Kinross Integration Joint Board's Strategic Commissioning Plan 2020-2025
11	Performance monitoring requirements for this Direction	Performance on progress in implementing this direction will be monitored via the performance Management Framework which will be routinely considered by the IJB's Audit and Performance Committee.
12	Review date	December 2026