CONSULTATION QUESTIONS

The Carer's Assessment: Carer's Support Plan

Question 1: Should we change the name o Support Plan?	of the carer's assessment to the Carer's
X Yes	□No

Comments:

The support plans needs to clearly articulate the needs and the rights of the carers and be focused on the carer rather than the cared for person. It is important that there is a shared understanding between different disciplines and different agencies of the meaning and importance of the plan.

We welcome the suggestion that there should be an increase in the number of agencies (thinking particularly of 3rd sector) who undertake the support plans. We recognise that this would require resources, both in terms of developing the plans as well as service provision, if that was identified as part of the plan

Question 2: Should we remove the substantial and regular test so that all carers will be eligible for the Carer's Support Plan?				
X Y	∕es □ No			
T w fc m fl F	Comments: The ability to put in preventative measures to support carers <i>prior</i> to a crisis arising will be much easier if the current restrictions are removed. We acknowledge that or some groups of carers, thinking particularly of those caring for someone with a mental health problem that the level of support they provide is often variable and luctuates. However, we also recognise that potentially the development of a carer's support plan may highlight the tension of different views between the carer and the cared or person, therefore some form of mediation would also needed to be considered. We recognise that there will resource implications around this change.			
wh	lestion 3: Should we remove that part of the existing carer assessment process ereby the cared-for person is a person for whom the local authority must or may ovide community care services/children's services?			
X Y	∕es □ No			
c a o p	Comments: See above around the need for preventative services to support the carer prior to a crisis arising. The cared for person may not meet the eligibility criteria for local authority services (particularly as thresholds increase) and yet a small investment of support for the carer, would enable them to continue caring longer and potentially reduce the need for services from statutory providers. For people with a mental health problem, they often do not qualify (or want) services from the local authority.			
Question 4: Should we introduce two routes through to the Carer's Support Plan – at the carer's request and by the local authority making an offer?				
X Y	res □ No			
T	Comments: This seems no different to the current situation of accessing a carers' assessment where a carer can request an assessment and/or be offered one by the Local Authority			
	estion 5: Should we remove from statute the wording about the carer's ability to ovide care?			
X Y	∕es □ No			

Comments: We welcome a shift	t towards an outcomes based approach as defined by the carer
	re introduce a duty for local authorities to inform the carer of the ely to take to receive the Carer's Support Plan and if it exceeds ed of the reasons?
X Yes	□ No
Comments: We welcome the pr will have to wait for	oposal that carers should be informed of the length of time they an assessment.
Question 7: How signand carers?	nificant an issue is portability of assessment for service users
often identified as b	transitions, whether it is geographical or between services, is being a particular stressful time for carers. Carers input may ecrease) and a review of their support arrangements is
	he Scottish Government and COSLA with relevant interests forward improvements to the portability of assessment?
X Yes	□ No
Comments: Yes	
a service for providing	vice re introduce a duty for local authorities to establish and maintain g people with information and advice relating to the Carer's oport for carers and young carers?
X Yes	□ No
making appropriate passed 'from pillar	be more than a leaflet – there needs to be a conversation and referrals if consent is given by the carer, rather than being to post' tend to include NHS Boards and GPs.

Question 10: Should we repeal section 12 of the Community Care and Health (Scotland) Act 2002 about the submission of Carer information Strategies to Scottish Ministers, subject to reassurances, which are subject in turn to Spending Review

decisions, about the cand young carers?	ontinuation of funding to Health Boards for support to carers
X Yes	□ No
	nced funding has been a vital support to carers via the projects ed. It is the ring fencing of funds that is important, rather than
Support to Carers (o	ther than information and advice)
Question 11: Should to an eligibility framew	we introduce a duty to support carers and young carers, linked ork?
X Yes	□ No
criteria, recognising	to support carers through a consistent and uniform eligibility the need for support that prevents crisis's arising ively, should we retain the existing discretionary power to ung carers?
☐ Yes	X No
that the guidance is	d to wide variation in the support that is offered. It is hoped sued around the Child's Plan (arising from the Children and will help manage the stages around caring for the young carer
Question 13: Should	we introduce a duty to provide short breaks?
X Yes	□ No
Comments: We recognise the te	ension when a cared for person refuses a short break, even

Stages and Transitions

Question 14: Should we issue statutory guidance on the Carer's Support Plan which will include guidance for those undertaking the Carer's Support Plan on managing stages of caring? This would apply to adult carers only. (For young carers, practice guidance will be developed to support management of a Child's Plan through the stages of caring).

X Yes	□ No			
Comments: It is essential that there are linkages between the plans for children and young people to ensure vital information is not missed				
Question 15: Should new carers' legislation provide for young carers to have a Carer's Support Plan if they seem likely to become an adult carer? Any agreed support recorded in the Carer's Support Plan would be put in place after the young carer becomes a (young) adult carer.				
X Yes	□ No			
Comments: Yes				
Carer Involvement				
Question 16: Should there be carer involved delivery of services for the people they can outwith the scope of integration?	1 0, 1 0			
X Yes	□ No			
Comments: Carers should be involved in every stage Collective advocacy can promote and en	•			
Question 17: Should we make provision for in the planning, shaping and delivery of se scope of integration?				
X Yes	□ No			
Comments: Yes				
Question 18: Should we establish a princi involvement in care planning for service us themselves in areas not covered in existing	sers (subject to consent) and support for			
X Yes	□ No			
Comments: Carers frequently do not feel that they a difficult for carers to engage with health complexity of these organisations.	• •			

Question 19: What are your views on making provision for young carer involvement in the planning, shaping and delivery of services for cared-for people and support for young carers?

1	\cap	\sim	m	m	Δ	nts	٠.
١		u			_		``

We welcome young carers being involved, recognising that their needs differ significantly from adult carers. Young carers should be supported through this process however and may need specialised support to help them understand the full impact and consequences that being involved in decisions about planning someone's care can bring

Planning and Delivery

Question 20: Should we introduce statutory provision to the effect that a local

authority and each rele organisations and care	rant Health Board must collaborate and involve relevant in the development of local carers strategies which must be plated every three years?
X Yes	□No
_	to reflect both strategic priorities for Health Boards and Local locally identified needs and gaps which carers and carers
authorities with Health practicable, that a suffi	e introduce statutory provision to the effect that local soards must take steps to ensure, in so far as is reasonably ient range of services is available for meeting the needs for bung carers in the area?
X Yes	□No
Comments: Yes	
Identification	
	ere be no legislative provision for GPs or local authorities to ster in order to support the identification of carers?
Yes	X No
	efits of registers. GPs and other members of the primary CT) are often the first and only point of contact for carers.

Carers sees GPs as an important source of help. Members of the PHCT are in an

point them in the di	te the presence of a carer, recognise and validate them and rection of information and services. Included to highlight how young a young carer can be and this ilots of the young carers identification card, if the pilots are
	the Scottish Government ensure that good practice is widely th Boards about the proactive use of Registers of Carers within
X Yes	□ No
•	e more than simply a collection of data and should a means of ith mechanisms for regular reviews of carers health needs and reforms of support
	the Scottish Government ask Health Boards to monitor core contractual elements of the GP contract?
X Yes	□ No
Comments: NHS Lothian has al	ready put in monitoring mechanisms
	Person(s) in Different Local Authority Areas
undertaking the Care	e the views of respondents on the lead local authority for r's Support Plan and agreeing support to the carer where the nt local authority area to the cared-for person(s)?
assessment. Howe	ed for person's local authority who leads for the carer ver, whichever authority develops the plan – there should be an rent process for deciding who does it.
	re the views of respondents on which local authority should oport to the carer in these circumstances?
Comments: Costs should be sp	ilt 50:50
Question 27: Should local authorities?	the Scottish Government with COSLA produce guidance for
☐ Yes	□ No
Comments:	