CONSULTATION QUESTIONS

The Carer's Assessment: Carer's Support Plan

Question 1: Should we change the name of the carer's assessment to the Carer's Support Plan?

☑ Yes

🗌 No

Comments:

It shouldn't matter what it is called as I ong as it leads to improved outcomes for carers. However, many carers find the assessment process intimidating and overly intrusive into their personal liv es. In line with current legis lation, many professionals use the carer's assessment to decide whether or not the carer has the ability to provide c are, but this rank les with many carers. Some professionals also use it as a thinly disguised form of means testing; to decide whether or not the carer should pay for the supports they have been assessed as needing.

There is so much negative feeling around the carer's assessment that, in order to improve uptake, it would be pr udent to r edefine it as the carer's support plan. However, new legislative m easures must state clearly that the purpose of the carer's support plan is to determine the supports and resources carers need to carry out their caring roles rather than their r ability to care. Guidance should also reinforce that carers are not service us ers. Legislative measures should make clear that c arers are equal partners in care and sh ould therefore not be c harged for any resources and supports they need to carry out their caring role. As one carer said recently, *"The public would be outraged if di strict nurses had to pay for the dressings they use in their jobs."*

Question 2: Should we remove the substantial and regular test so that all carers will be eligible for the Carer's Support Plan?

☑ Yes

🗌 No

Comments:

The right to a carer's assessment is conditional on caring duties being regular and substantial, but there is no clear, unive rsal shared definition of regular and substantial. What does it really mean? There is a concern that local interpretations of the term can lead to it becoming a barrier to carers accessing the resources and supports they need. The alter native to removing it is to define it in guidance; in which case such definition on should be co-produced with carers at a national level and applied in every local authority area.

Question 3: Should we remove that part of the existing carer assessment process whereby the cared-for person is a person for whom the local authority must or may provide community care services/children's services?

☑ Yes

🗌 No

Comments:

Many unpaid carers provide support to people with long term conditions and other specific health problems w ho are not in receipt of comm unity care services i.e. services that are put in place following a community care assessment. The care they provide would be considered regular and substantial, and indeed n ecessary to enable the cared-for person to remain in the community rather than a hospital setting.

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?

☑ Yes

🗌 No

Comments:

The important issue here is the identification of carers. We know that many carers have been providing care for many year s that would be considered regular and substantial yet they still appear to be unknown to service pr oviders. We therefore have to allow for these 'yet to be identified carers' to present themselves and, in doing so, to request a carer's support plan. Such presentations may be to carers' centres rather than directly to the lo call authority.

Question 5: Should we remove from statute the wording about the carer's ability to provide care?

☑ Yes

🗌 No

Comments:

For reasons stated in response to Q1. If the purpose of the carer's assessment is to determine the carer's ability to provi de care, it implies one possible outcome is that the carer is considered not able to provide care. Presumably this means the local authority then has to take on sole responsibility in line with its duty of care. It would be interesting to know how o ften this has happened since the Act was implemented.

Question 6: Should we introduce a duty for local authorities to inform the carer of the length of time it is likely to take to receive the Carer's Support Plan and if it exceeds this time, to be advised of the reasons?

☑ Yes

🗌 No

Comments:

In consideration of the integration of adult health and social care, when this duty is introduced on local authorities it should extend to the NHS (see response to Q3). I feel that carer's support plan should be agreed within six week s; assessments need to be carried out quick ly as the process can be very s tressful for some carers. I also believe that carers should have access to an appeals process when the carer's support plan c annot be agreed within 6 weeks. The carer's support plan should then be implemented within 12 weeks of being requested (i.e. within 6 weeks of being agreed). There should also be regular review and update of the carer's support plan, as circumstances can change significantly - often unexpectedly - within the caring relationship.

Question 7: How significant an issue is portability of assessment for service users and carers?

Comments:

Even allowing for a mobile population s uch as Gypsies and Travellers, I believ e this is an issue that affects relatively few service users and care rs, but it is still a significant issue for the few who are affected. I believe that the loc al authority where the cared-for person lives should be responsible for under taking the carer support plan and for funding the support for the carer. The local authority area where the carer resides should be responsible for actually providing the supports and resour ces the carer has been assess ed as needing. Loc al authorities are perfectly capable of cross- charging when the carer liv es in a different local authority area to the cared- for person. I believe cr oss-charging is a well established practice, so new syst ems should not have to be put in place to deal

with the relatively few cases that present each year.

Question 8: Should the Scottish Government and COSLA with relevant interests work together to take forward improvements to the portability of assessment?

\checkmark	Yes
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🗌 No

Comments:

The portability of assessment will only work if there is cooperation, communication and agreed protocols between local authorities. Carers have to take responsibility for giving the local authority as much not ice as possible of any planned m ove to another local authority area (this should be stated in their carer's support plan), so that information about the carer's suppor t plan (the resources and supports the carer needs to help them carry out their caring role) c an be pass ed on. The aim should be to have these resources and supports in place at the point of relocation.

Information and Advice

Question 9: Should we introduce a duty for local authorities to establish and maintain a service for providing people with information and advice relating to the Carer's Support Plan and support for carers and young carers?

☑ Yes

🗌 No

Comments:

The duty should c over the provision of information and adv ice on the carer's support plan, signposting c arers to source s of support, and carers' rights (Carers Rights Charter). Guidanc e should reflect the very important role that carers' organisations and c arers' centres have in delivering information and advis е services. 90% of carers got their information and s upport from carers' centres rather than NHS or Social Services staff. It is gratifying to note that it is stated clearly in the beginning of the c onsultation document just how good c arers' centres are at maximising the resources t hey have for the benefit of carers. would not want a duty on lo cal authorities to have the unforeseen circumstance of such services going out to tender or bei ng delivered through a c entral – possibly national - website and telephone helpline service.

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 continuation of funding to Health Boards for support to carers and young carers?

Ī	2 Yes	□ No
	Comments:	

However, if section 12 is repealed, the scope of local carer strategies (local authority-led) must be widened to include the key themes of NHS carer information strategies, which would no longer be r equired to be pr oduced. F unding streams should be merged to ensure the continuation of some highly suc cessful initiatives currently funded thr ough NHS carer in formation strategies. The more comprehensive carer strategies, as de scribed, should be co-produced within the context of the new, integrated health and social care partnership arrangements.

Support to Carers (other than information and advice)

Question 11: Should we introduce a duty to support carers and young carers, linked to an eligibility framework?

⊠Yes

🗌 No

Comments:

There is no point in having a duty to provide an assessment of need without a duty to support. The duty to support, linked to an eligibility framework, will ensure that carers most in need of support will receive e it, as well as help to protect carers' health and wellbeing. However, a duty to support must have sufficient resources assigned to it for it to be success sfully implemented, as well as sufficient resources to fund preventative strategies. The el igibility framework must be a national framework co-produced with c arers. Otherwise it will lead to a post code lottery across Scotland.

Question 12: Alternatively, should we retain the existing discretionary power to support carers and young carers?

⊠ Yes

🗌 No

Comments:

But not alternatively. Local authorities should have a duty to support carers and young car ers, linked to an eligibility framework support carers and young carers who do not meet the eligib ility criteria. As previously stated, circumstances can and often do change in a caring relationship, so it is important to review the latter cases.

Question 13: Should we introduce a duty to provide short breaks?

🗹 Yes

🗌 No

Comments:

The duty should be to provide and promote short breaks, linked to an eligibility framework. This will ensure that carers most in need of short breaks will receive them, as well as help to protect care rs' health and wellbeing. The eligibilit y framework must be a national framework co-produced with carers. Otherwise it

will lead to a post code lottery across Scot land. The duty must have sufficient resources assigned to it for it to be su ccessfully implemented. There is no point having the duty, if carers cannot access the kind of break they need when they need it. Local authorities should look critically at investing in soc ial enterprise and community-based short breaks solutions. The duty sh ould be ac companied by a Short Breaks Statement that clearly explai ns what is available where, how to access short breaks, the expected outcome s for all carers and how these will be monitored.

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).

☑ Yes

No No

Comments:

Transition planning is about continuity and change. It should st art early so that carers are well prepar ed for change. It is es pecially important for parent carers. Professionals involv ed in transition planning and ma naging transitions need to have a high level of awareness and understanding of carers' rights and issues. Transition planning s hould take account of the ambition s of the carer for a life alongside caring. It should also take account of anticipated changes in family and community supports that will impact on the carer. Guidance is necessary because some transitions are predictable, such as the transition fr om children to adult services, while some are less predictable; often the resu It of unforeseen changes in circumstances. The carer's s upport plan planning process has to take account of this.

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.

⊠ Yes

🗌 No

Comments:

When it becomes obv ious that a young c arer is about to become a young adult carer, it is essential that they are informeed of the rights as an adult carer, as set out in the Carers Rights Charter. The carer's support plan should reflect not only their willing ness to provide care, but also the amount of care they are willing to provide. The carer's support plan should be worked up in the context of transition planning.

Carer Involvement

Question 16: Should there be carer involvement in the planning, shaping and delivery of services for the people they care for and support for carers in areas outwith the scope of integration?

☑ Yes	□ No		
Comments:			
There should also be statut ory provision for car service users, subject to the consent, where a At the very least, carers should be involved in them. Carers and those for whom they care are supports and services they need. The carer's important to the evaluation of these services. wherever a caring relationship exists –whet he integration.	ppropriate, of the cared-for person. care planning that directly inv olves e the real experts in determining the s 'voice' and experience is equally There should be support for carers		
Question 17: Should we make provision for the involvement of carers' organisations in the planning, shaping and delivery of services and support falling outwith the scope of integration?			
⊠Yes □	No		
Comments:			
If there should be s upport for carers w here regardless of whether this is within or without follows that there should be provision for the in in the planning, shaping and delivery of service scope of integration.	the sc ope of integration – then it volvem ent of carers' organis ations		
Question 18: Should we establish a principle about carer and young carer involvement in care planning for service users (subject to consent) and support for themselves in areas not covered in existing legislation?			

🗹 Yes

🗌 No

Comments:

Carers and young carers should be involved in care planning for service users, (subject to the cons ent of the cared-for r person), where appropriate (capacity issues have to be considered), At the very least, carers and young carers should be involved in care planning that directly involves or impacts on them. Carers and young carers should also participate in t he evaluation of these services. There should be support for carers and young carers wherever a caring relationship exists – whether or not this is in areas covered in existing legislation.

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?

Comments:

The term "equal partners in care" needs to be meaningf ul and it should also apply to young carers. It is important that y oung carers and/or their representatives are able to influence dec isions that impact on them and the people for whom they care. This includes decisions about the planning, shaping and delivery of services for cared-for people and support for young carers.

Planning and Delivery

Question 20: Should we introduce statutory provision to the effect that a local authority and each relevant Health Board must collaborate and involve relevant organisations and carers in the development of local carers strategies which must be kept under review and updated every three years?

☑ Yes

🗌 No

Comments:

There should be statutory provision for r local authorities and NHS boards to not only collaborate and involve carers' organisations and carers, but to do so as equal partners in care. Consideration should also be given to young carers' strategies being developed alongside carer strategies at a local level. As with the national strategy, this could be one strategy comprising of two parts that reflects the different needs of adult carers and young carers, but acknowledging that there are some common issues, particularly around young carers' transitions into adulthood.

Question 21: Should we introduce statutory provision to the effect that local authorities with Health Boards must take steps to ensure, in so far as is reasonably practicable, that a sufficient range of services is available for meeting the needs for support to carers and young carers in the area?

⊠Yes

🗌 No

Comments:

There is little point to having a duty to undertake carer's assessments and a new duty to provide supports, if there are not sufficient resources and supports – as opposed to services - available to meet assessed needs. Continuity of service provision is important too. Many carers experiences breakdowns in service provision when paid workers move on to other jobs, as it often takes months to recruit, select and appoint replacement staff.

Identification

Question 22: Should there be <u>no</u> legislative provision for GPs or local authorities to maintain a Carers Register in order to support the identification of carers?

🗌 Yes

⊠No

Comments:

If good practice can be replic ated acro ss Scotland then t here should be no requirement for legislative measures. In North Lanarkshire every one of the 64 GP practices has a c arers' register, which wo rks proactively for carers; ensuring they are called in for annual flu vaccinations and health checks, get access to extended appointment times, and are signposted to sources of support. The success of this initiative is underpinned by the work of two community-based car er co-ordinators whose pos ts are funded, on a fixed te rm basis, through the local NHS carer information strategy. They promote the GP carers register, undertake carer awareness training with GPs an d practice staff, follow up every carer referred to them; providing carer information packs, and signposting and referring carers to other sources of support. Funding and/or continuation funding for such staff is essential t o the future identification of carers through the GP carers register initiative.

Question 23: Should the Scottish Government ensure that good practice is widely spread amongst Health Boards about the proactive use of Registers of Carers within GP practices?

☑ Yes

🗌 No

Comments:

As for Q22

Question 24: Should the Scottish Government ask Health Boards to monitor compliance with the core contractual elements of the GP contract?

☑ Yes

🗌 No

Comments:
The requirement for GPs to hold a Regis ter of Carers is included in the core

element of the GP Contract. It is t herefore a contractual agreement. It makes absolute sense for NHS boards, as the contractors, to monitor compliance with the core contractual elements of the GP co ntract. I have no knowledge of whether NHS Lanar kshire monitors compliance with t he core contractual elements of the GP contract. However, I am aware that NHS Lanar kshire, in the context of the NHS c arer information strategy arrangements, closely monitors the work of the carer co-ordinators (see Q22) who work across the 64 GP practices, with a requirement for quarterly activity reports to be submitted.

Carer and Cared-for Person(s) in Different Local Authority Areas

Question 25: What are the views of respondents on the lead local authority for undertaking the Carer's Support Plan and agreeing support to the carer where the carer lives in a different local authority area to the cared-for person(s)?

As for Q7.	

Question 26: What are the views of respondents on which local authority should cover the costs of support to the carer in these circumstances?

Comments:			
As for Q7.			

Question 27: Should the Scottish Government with COSLA produce guidance for local authorities?

🗹 Yes

🗌 No

Comments:

Guidance should be co-produced, but there are internal issues with CoSLA that may make it difficult to do this. In any case, politics should not get in the way of doing the right thing!