

Report

Carer (Scotland) Act 2016

Edinburgh Integration Joint Board
14 December 2018



Executive Summary

1. This report provides the Integration Joint Board with an update on progress of the pilot in the North-West Locality which started in April 2018 and ran for six months to test new ways of working across partners, team communication, eligibility criteria, assessment of young/adult carers and the allocation of services and funding. It further looks at the new business and financial systems developed to support the pilot outcomes.

Recommendations

2. The Board is asked to endorse the approach taken to the development and testing of the eligibility criteria and Adult Carers Support Plan as the basis for finalising a set of eligibility criteria that the Board will be asked to approve

Background

3. The Carers (Scotland) Act 2016 was implemented on 1 April 2018 placing new duties on local authorities, these are:
 - a change in the **definition of carer** so that it encompasses a greater number of carers
 - placing a **duty** on local authorities to offer an adult carer support plan (ACSP) or young carer statement (YCS) to anyone they think identify as a carer, or for any carer who requests one
 - giving local authorities a **duty to provide support** to carers that meet local eligibility criteria
 - requiring local authorities and NHS boards to involve carers in carers' services
 - giving local authorities a **duty** to prepare a carers strategy for their area
 - requiring local authorities to establish and maintain advice and information services for carers.

4. All workstreams report to the Strategic Carers Partnership which meets on a monthly basis. The Partnership is currently temporarily chaired by the Strategic Planning and Commissioning Officer (Carers), other members include the two unpaid carer members of the Edinburgh Integration Joint Board, third sector organisations working with adult and young carers and officers from NHS Lothian, the City of Edinburgh Council and the Health and Social Care Partnership. All workstreams outlined within this progress report are brought to this meeting for discussion and agreement.
5. A pilot to test out the new eligibility criteria, adult carers support plan and young carers statement and new ways of working across partners has commenced in the North-West locality involving the Carers Support Workers based in the hospitals and localities and the Family and Household Support Service.
6. A pilot with the Edinburgh Community Rehabilitation and Support Service (ECRSS), Longstone is being drafted up. This pilot will look at supporting carers within a citywide service as part of the Stroke Patients Recovery Pathway working with clinical teams and the Equipment Store to improve carer confidence. The pilot will also include the Smart House being developed by Blackwood on the site to showcase Telehealth technology due to open on 4th December 2018. The pilot will be a partnership between the staff team at the centre, internal staff and third sector partners.
7. The lead officer within Strategic Planning and Commissioning (Carers) continues to work across both Communities and Families and the Health and Social Care Partnership to maintain a joined- up approach.
8. The Scottish Government guidance on the implementation of the Carers Act is now published alongside the financial settlement for Edinburgh for 5 years.

Main report

9. In order to test all new systems and processes for the implementation of the Carers (Scotland) Act 2016, including the Adult Carer Support Plan (ACSP) and the Young Carer Statement (YCS) new paperwork, financial and business support systems, a pilot is being carried out with the Family Household Support Service, Edinburgh Carers Support Team (North West) and Edinburgh Community Rehabilitation and Support Service (ECRSS).
10. Identifying and supporting carers as early as possible is paramount as is supporting them at the right time throughout their caring role. Therefore, systems must be as flexible as possible to meet the changing and emerging needs of carers. Current carers' assessments tend to be carried out quite far down the carer journey and the support is mainly offered when carers fit into the 'critical and substantial' banding whereas the pilot will work with people within 'Low' need as much as possible – identifying people at point of diagnosis wherever possible and maintaining a relationship throughout.
11. As current business support and financial systems are set up to work with people when there is social worker involvement to allocate and manage any budgets, it was necessary to start the pilot with newly developed paperwork and

simultaneously develop recording, business support and financial systems to support frontline staff processing payments, where required, to meet an assessed outcome. The new paperwork had to be tested to ensure it was fit for purpose, using the feedback from the small pilot group to inform the changes required for electronic versions of the paperwork to make them more user friendly and ready for automatic payments in the future.

12. In order to test all the business processes and new paperwork we had to go live and learn as the processes were tried, developed and caught up with the frontline work, therefore, it was important all staff involved were fully briefed regarding managing carer expectations. Carers were fully advised they were part of a pilot and when a budget was identified as being required we could not guarantee when this would be processed and how long it would take. Frontline staff kept carers up to date with progress even when the news was no change or delays, this was difficult for the staff team but essential.
13. The information contained here is for April to October 2018 and is an end to end system and process check using a learning in action approach. Where any issues identified were minor, for example some wording changes, these were collated for future changes. However, where the issues were more substantial and related more to the business support and process changes these were enacted as soon as practically possible, implemented and communicated immediately. This was particularly prevalent within the payment part of the process which was very much start and stop as issues happened and stopped payments being made. Each part of the process had to be reviewed and amended, communicated to teams and trialled again.

What did we do and how did we do it?

14. Staff teams identified carers within the pilot area and an Adult Carer Support Plan was completed, initially using the paper version and moving on to the electronic version. During the pilot period 24 Adult Carer Support Plans were completed. 8 were signposted into existing services, 10 people required a budget ranging from £174 to £1008 no unpaid carers were identified during this time as being either within the category of 'moderate' or 'critical or substantial' so we have been unable to test the system within the agreed process with the practice team in the North-West locality. 6 carers have been signposted to other services but work is ongoing to identify any other needs. In total we spent £4,266 during the pilot period.
15. The staff involved in the pilot were asked to record briefly the case, the assessed need being met, the outcomes and what would have happened with each case prior to the pilot (See Appendix One for more detail). The first three columns of data are what actually happened with each case and show a more holistic approach to each case, offering a mix of financial solutions, signposting and further information to carers. The fourth column is more subjective but overwhelmingly shows poorer outcomes for general health and wellbeing, poor mental health, increased isolation and increased carer stress levels. Although the numbers are too low to draw any significant conclusions, it can be seen for the

cases here the low-level interventions in place prevent a lot of the potential poor outcomes indicated in the fourth column of the data.

16. During systems testing we worked through the finance and business support processes and related paperwork. As the pilot and relevant teams progressed using the ACSP with unpaid carers, a team of staff worked to develop the SWIFT/AIS processes and system changes (See Appendix Two) and the electronic paperwork to improve recording (See Appendix Three, Four and Five) and processing. Alongside this, where a budget was required the testing of business/finance processes was ongoing and when tried, feedback was gathered, changes made and this was repeated until the whole process had been tested and the many blockages and delays worked through, this process is still being written up as it had to change so many times throughout the pilot. The goal is to develop a process that reduces waiting times from eighteen months to ten working days and we are very close to that, although it has slowed down the progress of the pilot but it was essential to test it end to end and get it right.
17. Staff teams were trained to use the paperwork, have outcome focused conversations and, where relevant, teams requiring to be trained to get access to SWIFT/AIS attended courses, throughout there were regular meetings to discuss progress and changes within the pilot. All the teams that had been involved in the development were included in the briefings updates of any changes.
18. Colleagues in Strategy and Insight will be running reports of the data in Swift soon to check that the information recorded meets the requirements of the Scottish Government for the carer census annual return. The paperwork has been designed so that if all the information is recorded properly, all the data fields are there for the return and interval monitoring.

Next Steps

19. The pilot has only been tested with a small number of carers and the volumes could be extremely large when it is rolled out to other teams and localities. However, the system and processes that have been put in place are transferable for larger volumes and it will be the human resources required to process them that might be a limiting factor.
20. There will be a requirement for training of staff teams for the outcomes focused conversation, the this workstream will be joined up with the wider workstream of 'Good Conversations' training currently happening as this will join up those projects to meet the strategic objective of intervening earlier to support people away from statutory interventions wherever possible.
21. Work will continue with third sector partners who deliver services to unpaid carers to develop a pathway to allow them to operate in the same way as internal services. This work has begun with North West Carers Centre on a small pilot with young carers using the electronic paperwork (See Appendix Five).
22. The joining up of pathways to ensure carers are identified as early as possible will continue – the current processes in the pilot still identify some people when they

are established in their caring role and the intention is to identify people as early as possible. Currently work is underway to identify people earlier within the pilot areas, for example, looking at the Longstone pilot and working the pathway back to people admitted to Edinburgh Royal Infirmary having had a stroke but discharged within three or so days, working with the Stroke Nurses and Speech and Language Therapists to identify carers. Similar work is progressing with the dementia pathway and early identification through GP practices.

23. Work to join up pathways is developing across both the Health and Social Care Partnership and Communities and Families to support whole life planning, for example, transitions for children with a disability. This work is early in its development but discussions looking at working with the whole family during the Section 23 assessment process and offering Adult Carers Support Plans and Young Carer Statements to support the whole family as early as possible are underway.
24. The early identification of carers will be central within the revision of the Edinburgh Joint Carers Strategy that is in its final stages of development. The revision of the strategy is the result of a citywide consultation and discussions with third sector partners and internal stakeholders. The first draft will be ready for consultation at the end of November to tie in with the other draft strategic plans where Carers have been identified as a cross-cutting theme.
25. Currently being developed alongside the above is the financial plan for commissioned spend, the Scottish Government settlement and joining this up with the pilot outcomes and next steps, the revision of the Edinburgh Joint Carers Strategy and working with key stakeholders to develop linked statements within the five outline Strategic Commissioning plans and the over-arching Strategic Commissioning Plan.

Key risks

26. The processes have only been tested on a small number of teams and carers – there is a risk that there are not enough physical resources to implement the changes effectively. Working closely with key partners should reduce this risk throughout the full implementation of the act – however, once communicated there may be an upsurge in requests/offers of ACSP/YCS causing delays for unpaid carers.
27. When the systems and processes are implemented some of them are for citywide services (Stroke Rehabilitation Service, for example) and some will be for localities (In-house teams like Family and Household Support) - there is a possibility that the implementation might be fragmented and open to local interpretation. In order to plan for this, there will be a detailed implementation plan alongside the Joint Carers Strategy and clear processes written up to ensure that it is implemented the same in each locality, so carers and practitioners know what to expect regardless of the locality they work across.

Financial implications

28. All commissioned services were recently reviewed and a consultation to understand what carers' priorities are for the Scottish Government settlement, work is ongoing regarding identify key areas for spend, a Carer Service Steering Group meets on a monthly basis and this work is reported to the Strategic Carers Partnership Meeting.
29. A report has been prepared and submitted for the Finance and Resource Committee in December 2018 to request that services currently commissioned are extended for one year.
30. As the number of ACSP/YCS completed increases there may be a need to increase the number of staff who can process any payments required – where some of this may be able to be absorbed within current resources, if numbers are very high further resources may be required.
31. Work is ongoing with colleagues in finance to develop a financial plan for the implementation and subsequent developments of services to meet the needs of carers within a budget that is increasing year on year.

Involving people

32. Unpaid carers are involved at all levels of governance in respect of the implementation of the Carers (Scotland) Act 2016 including the two unpaid carer members of the Integration Joint Board. Carers organisations working with both adult and young carers also sit on the Strategic Carers Partnership that oversees the work of the four workstreams. There has been consultation with both adult and young carers throughout the development of the Eligibility Criteria, the Adult Carers Support Plan and Young Carers Statement and their input has influenced and changed the drafts to date. This engagement will be ongoing throughout the development and implementation of the Carers (Scotland) Act 2016.
33. Carers have been widely consulted regarding the review of the Edinburgh Joint Carers Strategy 2014-2017, during the reviews of services and identifying priorities for the Scottish Government settlement. These consultations have used online surveys, paper surveys with follow up face to face meetings and discussions to clarify understanding with both unpaid carers and professionals.

Impact on plans of other parties

34. Carers (Scotland) Act 2016 will have an impact on all areas of work as carers crosscut all aspects of life to varying degrees. The lead officer is currently establishing links to relevant strategies to ensure a joined-up approach to meeting carers needs within different service areas.

Background reading/references

[Carers \(Scotland\) Act 2016](#)

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Links to priorities in strategic plan

Appendices

Appendix 1	Data for North West Pilot
Appendix 2	Adult and Young People Carer Assessment Process
Appendix 3	Swift Adult Carer Support Plan
Appendix 4	Swift Young Carer Statement
Appendix 5	External Agencies Adult Carer Support Plan

Appendix 1

North West Pilot –

Edinburgh Carers Support Team (North West)

Total ACSP carried out: 17

Budget not required: 8

Budget requested: 3

Pending: 6 (waiting to hear back from carers to complete ACSP)

Case	How Assessed Need(s) Met: Equipment purchased & cost, where/who signposted to etc	Outcomes	Potential Outcome if no intervention
1. Client cares for her daughter with Multiple Sclerosis (MS). Client gave up her extra bedroom in her flat for her daughter. Client was then unable to host other family members in her home and felt it was affecting her	NW budget: £250 for a sofa bed. Client already has ongoing support from Lanfine Dedicated Carer Support Service which is specific to the cared for person's condition.	Client could host her grandchildren and other daughter who lives in another city. This would help her maintain this relationship and receive emotional support from other family members during her caring role. Also, time spent with grandchildren would provide carer with a short break from her caring role. Both of these outcomes would reduce carer isolation and improve her mental wellbeing.	Client's social isolation could have increased as she had been seeking support and gaining short breaks from her own family. Without gaining regular breaks her own health and wellbeing could be affected significantly. Linking client with VOCAL to apply for funds from the Short Breaks Fund, although this organisation has limited funding and a limited window of time when applications are accepted.

family relationships.			
<p>2. Client cares for her husband who as MS. In addition the client also works part time and cares for her elderly mother. Client had been having issues looking after their front and back garden due to the time pressures caused by her multiple caring roles and this was causing some tension with neighbours. The property in which the client and are husband are living in is not suitable for her husband's needs given his medical condition and they are in process of relocating</p>	<p>NW budget : TO provide a gardener every 3 weeks for 4months @ a cost of £250</p> <p>Carr Gomm – sitter service to provide the carer a short break.</p> <p>Client already has ongoing support from Lanfine Dedicated Carer Support Service which is specific to the cared for person's condition.</p> <p>Waiting to hear back from Gardener.</p>	<p>Carr Gomm offered 3 hours of sitter service per week for client to be able gain short respite on regular bases</p>	<p>Increased tension between neighbours could lead to unpleasant living environment for the client and cared for person, which could lead to rising stress levels and would impact on client's mental well-being.</p> <p>Linking client with VOCAL to apply for funds from the Short Breaks Fund, although this organisation has limited funding and a limited window of time when applications are accepted. (the time client was seen by me, VOCAL funds were not available)</p> <p>Placing on waiting list for Voluteernet . Waiting time unknown until volunteer (with interest in gardening) available.</p>

although the time frame for this move is not known.			
3. Client cares for her husband; he has suffered a stroke and has throat cancer. Client was looking for an activity to maintain her health and wellbeing and also wanted to set up achievable goals in her daily life as she felt she had been unable to do this and no sense of 'achieving' anything. Client also wanted to explore further carer support and explore the options available how she could have a short break/ weekend away for herself with her husband.	<p>We identified that the carer could not swim and this is something she would like to learn to do.</p> <p>NW budget : £174 for adult swimming lessons (3months)</p> <p>Referral to Edinburgh Carer support team to have an Emergency Plan completed</p> <p>Emergency Card requested</p> <p>Referral to VOCAL for POA service</p>	<p>Learning to swim would help to improve the clients physical and mental well being, reduce isolation and give a feeling of having achieved a new skill. This would also provide the carer with a short break.</p> <p>Edinburgh Carer Support Team (ECST) supported the client to establish an emergency plan and also provided ongoing emotional support. In addition the ECST advised and supported the client to access a Respite service to obtain a short break with her husband.</p>	<p>Deteriorated client's health and wellbeing due to lack of social interaction and lack of exercises. Affected mental health as client wanted more control of her life.</p> <p>.....</p> <p>Linking client with VOCAL to apply for break from care fund, although organisation has limited funding and limited time when applications are accepted. (The time client was seen by me, VOCAL funds were not available).</p> <p>In regards of swimming lessons no alternative service/organisation able to provide swimming lessons to client</p>
4. Client cares for his half brother who has learning disabilities. The client also has own family who live abroad.	Client and his Brother are applying for an SDS payment to pay for personal assistant	Carer Outcomes still to be discussed	Risk to carers own mental health due to carer stress; risk to carers employment and financial well being. Risk of carer not being able to access any short breaks due to caring role and work commitments

<p>The client works 60 hrs per week.</p> <p>The clients Brother fully relies on him in regards of organising his day to day life; providing emotional support and guidance and taking care of household tasks. The client has great concerns about when his brother is left alone as he is very vulnerable.</p>	<p>Client has ongoing carer support from VOCAL</p> <p>NW budget : Researching on what technologies could be available and suitable for their situation and could be purchase with NW pilot budget to give the client the opportunity to check in on his brother and his wellbeing and gain reassurance that he is safe when the client is working.</p> <p>Carer away on holiday at the moment</p>		<p>increasing social isolation and carer burn out.</p>
<p>5. Client cares for her elderly mother in law. The client has her own health issues and feels very alone in her caring role as her other family members live abroad. Her own main health issue is sciatica pain. Sciatica affects her caring role significantly on the days she is pain, unable to assist her mother in law which domestic tasks, toileting tasks. Also mother in law relies on client for social interactions.</p>	<p>NW budget : Massage treatment for sciatica £480</p> <p>Referral for Edinburgh Carer Support Team to gain emotional support and guidance in her caring role</p> <p>Emergency Card</p> <p>Emergency Plan</p>	<p>Specialised massage would help client to target specific health issue she is experiencing . Reduced back pain would allow client to live better quality of life and also would be able maintain her caring role.</p>	<p>Deteriorated client's health – unable to care for her mother in law as she provides a wide variety of practical help towards her mother in law's needs. Client could become a cared for person. Considering the majority of her family live abroad she might decided to move back home and this could lead to her mother in law requiring residential care.</p> <p>.....</p> <p>Linking with VOCAL for free massages for carers- but they only provide 3 sessions and massage type not specifically address sciatica.</p>

<p>6. Client cares for his elderly disabled mother and has done so for almost 20 years. His mother requires full assistance with day to day tasks. Client privately hires a paid carer for overnight support to his Mum so he can have a good night sleep. Due to his caring role he is unable to gain permanent employment , but has some occasional offers of distance work through university staff . For the client, this work gives him a small amount of income and helps him avoid social isolation .</p>	<p>Referral for SDS assessment to organise care privately</p> <p>NW budget : £500 for iPad</p> <p>Carr Gomm for sitter service</p> <p>Emergency Plan</p> <p>Emergency Card</p> <p>Edinburgh Carer Support Team referral</p>	<p>An iPad would help the client maintain his self employment; help to deal with correspondence; and also be one of the ways that would help him to relax and gain a short break from his caring role while still 'on hand' for his Mother.</p> <p>Carr Gomm would provide a short break and allow the client to leave the family home for short periods of time,</p> <p>Edinburgh Carer Support Team will help to establish a Carers Emergency Plan and support the carer to liaise with the GP Practice to ask if they would keep a copy of this plan.</p>	<p>Client would lack social interaction and considering his age (55years old) it might lead to reaching a point of crisis and the client not being able to look after his mother's need.</p> <p>If the client experiences a decreased monthly income, he wouldn't be able to organise overnight care for his Mother, which would lead to sleep deprivation. Lack of sleep can cause fatigue, daytime sleepiness, clumsiness and weight loss or weight gain. It adversely affects the brain and cognitive function.</p> <p>.....</p> <p>Linking client with VOCAL to apply for break from care fund, although organisation has limited funding and limited time when applications are accepted. (The time client was seen by me, VOCAL funds were not available).</p>
<p>7. Client cares for her mother who has multiple health issues. The main issue is deafness and poor mobility. Client is a young adult who has her own mental health issues and feels she has dedicated most of her life towards her mother needs. Due to her caring role she had to</p>	<p>NW budget : A block of driving lessons – awaiting to hear back from client to confirm pricing</p> <p>Edinburgh Carer Support Team referral(ongoing emotional support, guidance on how to access short breaks for unpaid carers)</p>	<p>Client would be able to have a better balance between her own life and her caring role, also give her an opportunity to assist her mother with shopping, appointments , gaining regular short breaks.</p>	<p>Client would not be able to take care of her mother's needs. Reduce mother's social life, as client as the main carer attends to all of her mother needs.</p> <p>Lacking time for her own life as she has to rely on public transport. Financial strain on client trying to reduce travel time by using taxis.</p> <p>.....</p>

give up work which caused her great financial worries. Client is lacking time for her own interest and life of her own.	Carers Emergency Card Emergency plan VOCAL POA		Client already has contact with third sector organisations and none of them were able to assist her financially towards driving lessons.
8. Client cares for her husband who was recently diagnosed with dementia. Client is very new in her role and has no knowledge in regards of support they are entitled to access. Client would like to gain a regular break from her caring role as she is unable to leave her husband at home unattended for long period of time.	Husband consented to referral for day club/lunch club VOCAL POA Local citizen advised bureau information provided to gain assistance filling AA paperwork Edinburgh Carer Support Team (to access ongoing/flexible support in her caring role) Emergency Plan Carer Emergency Card	Carer Outcomes still to be discussed	Lack of knowledge and support in place would lead to crisis points where client's health and wellbeing affected. Respite or residential care would be needed for client to gain back ability to care for her husband.
9. Client cares for two of her adult children. Her Daughter has an official diagnosis of Down's syndrome, clinical depression and learning disabilities. Her Son has	NW budget will be required to assist the client to purchase assistive equipment for gardening. This would be something like a kneeling stool or suitable chair?	Carer Outcomes still to be discussed	Life balance and self worth would decrease as client would not be able to engage in her own interest. This could affect client's ability to care for her adult children also affect family dynamics and relationship.

<p>global learning delay and clinical depression. The client is experiencing high stress levels as just recently her husband passed away and she became the sole main carer/care provider for her adult children. Client would like to gain more time of her own time and be able to return into gardening. Client has an arthritic hip and is finding it more difficult to maintain a safe environment and be efficient in garden.</p>	<p>Edinburgh Carer Support Team-ongoing emotional support</p> <p>Supportive referral to SCD for daughter needs (lunch club /day centre)</p> <p>Emergency Plan</p> <p>Carer Emergency Card</p> <p>Carr Gomm – once daughter has her care needs assessment</p>		<p>The clients mental and physical wellbeing could be compromised due to lack of time to her self and no life/interests outside of/alongside her caring role.</p> <p>Linking client with VOCAL to apply for break from care fund, although organisation has limited funding and limited time when applications are accepted. (The time client was seen by me, VOCAL funds were not available).</p>
<p>10. Client Cares for her elderly mother. No POC is in place. Client happy to continue helping her mother with personal care and meal preparation. Main concern client had in regards of future, on how social service could be alerted if client became unwell and unable to assist her mother with day to day life. Client also unsure of what to do if her mother fell or hurt herself and how she can alert her daughter,</p>	<p>NW budget: Provided information about alarm for elderly people available to purchase (cost of £70) Called back and declined , as they revisited idea about CAS alarm</p> <p>Edinburgh Carer Support Team (gain ongoing/flexible support in her caring role)</p> <p>Emergency Plan</p> <p>Information about anticipatory care planning</p>	<p>Client feels more secure in her caring role, as she gain more knowledge about emergency planning and anticipatory care planning, which reduce stress levels for carer and able to provide better care for her mother.</p>	<p>Increase stress levels for client as unsure what's the most appropriate way to plan future in regards of her mother care needs as they don't have ongoing contact with social services. Stress could of affect client's and mother's relationship and also client's ability to care in future.</p>

as they don't have ongoing contact with social care. CAS alarm was not suitable as client's mother against installing key safe at her property.			
<p>11. Client cares for her father who was recently diagnosed with vascular dementia. Client also looks after her 18 months old grandchild. In the past few months the client experienced high volume of stress as she is unfamiliar what to expect from her father's diagnoses.</p> <p>Client has a very tight schedule and routine due to her grandchild's needs, and only has Thursday or Friday morning available for a life of her own. Due to her caring role she has had to give up her work as a domestic worker in WGH.</p>	<p>NW budget: would like to attend activity that would help client cope with high level of stress and would fit in her busy schedule.</p> <p>Referral onto Alzheimer's Scotland to gain a better understanding about vascular dementia</p> <p>Edinburgh Carer Support Team referral to gain ongoing emotional support /gain advice on how to access other ongoing supports available for unpaid carers in Edinburgh</p> <p>Emergency Plan Carer Emergency Card Information on day centres/lunch clubs available for her father</p>	Carer Outcomes still to be discussed	<p>High volume of stress could lead to Caregiver burnout is a state of physical, emotional, and mental exhaustion that may be accompanied by a change in attitude - from positive and caring to negative and unconcerned. Carers who are "burned out" may experience fatigue, stress, anxiety, and depression.</p> <p>.....</p> <p>Contact VOCAL for free massages services, could be not suitable as client has very limited availability.</p>

Edinburgh Community Rehabilitation and Support Service (ECRSS), Longstone

Case	How Assessed Need(s) Met: Equipment purchased & cost, where/who signposted to etc	Outcomes	Potential Outcome if no intervention
1 Client post stroke (& other long-term health issues): dependent on wife for all care. Wife could not leave house due to worry re risk of falls or potential health emergency.	2 X Amazon Show £442	Wife can “drop-in” to see if husband is well and safe. Can now go out to garden (previous hobby) and local shops. Client also uses device to voice activate audiobooks and music for own health & wellbeing.	Carer unlikely to leave house due to anxiety around her husband coming to harm eg falling. Increase in stress levels for carer to a point where residential care would be an increased possibility.
2. Client with Parkinson’s Disease relying on wife to assist to WC at night, use phone, access ipad.	Ipad mount Amazon Echo 3X wifi bulbs TP link £264.04 Night class attendance (art) £280	Client can independently voice activate lights so that he can access toilet safely & independently at night. He can make calls to wife (and others) by voice activating calls to her smart phone so that she can go out but remain in contact. Also using echo to self-manage condition eg access mindfulness programme. NB since installation this carer has been able to participate in new community based activities and now has taken on a volunteering role herself.	Carer’s reporting of low mood likely to deteriorate further due to not getting out. Sleep would continue to be disturbed and carer’s mental health likely to deteriorate.
3. Client with MS. Carer/husband undergoing cancer treatment. Client cannot access standard smart phones.	Doro Phone with GPS £129.50	Easy to use phone means that client can keep in touch with husband while he is a day patient receiving his treatment. Client goes out in scooter for shopping – now has accessible phone to call for help if required. GPS means that if client is in	Carer able to comply with chemotherapy treatment for treatment of cancer. Likely that his high anxiety around his wife being out while he was in hospital would affect his recovery.

		difficulty when out, husband has means to identify exactly where she is to organise help.	Previous to having this phone wife was “rescued” by local community when she was out on her own and needing help. Potential of being vulnerable to passers-by or need for emergency services to rescue client.
4. Client post-stroke living with wife and has care package. Wife has to stay at home to let carers enter house since client unable. She would like to attend a keep-fit class but is prevented by having to let carers into house. 8275467	Ring Doorbell App that links with client’s smart phone. £189	Clients can see who is at the door and he can then give access to the carers. This allows his wife to leave him at home and attend her fitness class. Also ensures independence and control for whoever calls at their home.	Carer would not have left house. Increased stress of having no regular respite ie getting out of house and increased risk of situation breaking down and (increase of care package or residential care).

Family and Household Support

Case	How Assessed Need(s) Met: Equipment purchased & cost, where/who signposted to etc	Outcomes	Potential Outcome if no intervention

<p>1.</p> <p>Young person supporting mother with Mental Health issues. The relationship between young person and mother is very volatile and has on occasion lead to physical violence. Young person spends his mornings keeping his mother calm due to her poor mental health. In the afternoon he shops and cleans. Young person describes himself as having low mood. He would like to attend a course at college and volunteer at the Broomhouse Café. He would like to become more independent and learn life-skills to prepare him to live in own accommodation. He is unable to self-travel and relies on others' support with this.</p>	<p>Taxi to and from college to attend course.</p> <p>Taxi to and from Broomhouse Café to volunteer.</p> <p>Support to travel independently links with college to look at possible mentor.</p> <p>Amount awarded £1008 to cover taxis for 3-month period.</p>	<p>Young person will have time away from his caring role to attend college.</p> <p>Young person will gain new experiences/skills in volunteer role.</p> <p>Young person will have the support from college to travel independently.</p> <p>Young person and mother will have time apart, this may reduce the risk of arguments and physical violence.</p> <p>All the above will have a positive impact on young person's low mood.</p>	<p>Risk that young person's health and wellbeing will deteriorate further.</p> <p>Risk that relationship between mother and young person will result in serious physical assault from either party. This may result in statutory criminal justice services becoming involved.</p> <p>Young person may not gain skills for independent living.</p>
<p>2.</p> <p>Mother currently caring for daughter who has Complex Regional Pain Syndrome, Chronic Fatigue, Scoliosis, Lower lumbar Lordosis, Hyper mobility and</p>	<p>Support from Family and Household Support to secure appropriate Tenancy.</p> <p>Counselling.</p>	<p>Support to access appropriate Tenancy.</p> <p>Mother will have time away from the emotional and physical stresses of caring for her daughters.</p>	<p>Housing situation may have a detrimental effect on the whole family.</p> <p>Mother's mental health and wellbeing may deteriorate.</p>

<p>Hemipelagic migraines. She provides physical and emotional care to her daughter. This requires travelling to and from physiotherapy and art therapy appointments, medication assistance 4xdaily, support to deal with dizzy spells and vomiting due to medication and multiple baths to ease chronic pain. She also has older daughter and 4-year-old grandchild living with her. Older daughter has ADHD, Binocular Instability, dyslexia and hip problems, who requires support with her parenting and general daily living.</p> <p>Mother has Lumpus, DVT, COPD and knee problems. She is unable to take prescribed pain medication as this may affect her ability to care for her daughters. She feels exhausted and has no time for herself.</p>	<p>Hydro therapy/salt therapy to ease chronic pain and relieve symptoms of COPD.</p> <p>£300 awarded for 10 sessions at the salt Caves.</p>	<p>Reduction in Pain, this will allow her to continue to offer physical care to her daughter.</p>	<p>If Pain is unmanaged, mother may be unable to care for child at home.</p> <p>Daughter's physical and emotional care needs may not be met.</p>
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The private rented accommodation is a Townhouse and is unsuitable for the family's needs.			
<p>3. Brother is currently caring for his brother who has Diabetes, COPD, Large cell arthritis, Nerve damage, Mental health and mobility problems. He is in full time employment as a nightshift worker and lives in Fife. He takes his brother to different health appointments, shops for him and offers physical care. He describes his relationship with his brother as emotions running low. He is currently travelling to Edinburgh from Fife to care for his brother.</p>	<p>Information on emergency care plans for carers.</p> <p>Referral to vocal.</p> <p>Emergency carers card/Vocal information.</p> <p>Family & Household Support will offer support with PIP appeal to get his mobility reinstated to be approved for Mobility car.</p> <p>Occupational health referral for bathroom/shower adaptations.</p>	<p>Brother feels he is now being offered appropriate support to care for his brother and alleviate stress.</p>	



Swift/AIS

Adult & Young People

Carers Assessment

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Carers Assessment Received

The following process details the steps for when a person has requested a carers assessment for themselves/ another.

Previous Activity:

- Person would like a carers assessment
- FHS worker/ Voluntary Organisation/ other team has spoken with the person and completed the Adult and Young People Carer Assessment form with them.
- Voluntary Organisation/ other team has sent the form Family & Household Support Team
- Family & Household Support have received the form and financial support has been authorised.
- Form is received into generic email box: FHSBSC@edinburgh.gov.uk

Business Support

1. Click Find/ New and do a thorough search for the person using the provided fields
 - If **not** known, Click Create – Go to step 2
 - If known, Click Finish to access record – Go to step 3
2. Record person with a minimum of Name, Address and Date of Birth
 - Save
3. Click Further details
 - Update all the client information in the tabs available on this screen
4. Click on the Paper Files tab
 - File ID: Swift Number
 - Resp. Unit: SSC FHS (appropriate locality)
 - Normal Location: File - Electronic Only
 - Date Opened: Today's Date
 - Save
5. Click on F'sheet to come out of Further Details and back to the Front Sheet
6. Navigate to Contacts
 - Add Contact
 - Contact Date: Date form was received
 - Method: Letter/Form
 - Source Type: Other Source
 - Name: Person that sent the form (if on Swift)
 - Source Org: Organisation that sent in the form (if on Swift)
 - Text: Type in Person/Organisation that sent in the form (if **not** on Swift)
 - Contact Tel: number of Person/Organisation
 - Reason: Assessment Request
 - Text: 'See Case note dated *state date of note*

 - Receiving Team: SSC FHS (appropriate locality)
 - Worker: Populates
 - Outcome: Progress to referral

- If there is already an open referral choose 'Progress to Assessment' and Skip to Step 8
- Save

7. Click onto the Referral tab

- Add Referral
- Date: Date form was received
- Client Category: Carers (incl Young carers)
- Reason: Work Required
- Team Resp: Populates
- Worker: Populates
- Outcome: Progress to Assessment
- Save

8. Click onto the Involvements tab

- Add Involvement
- Start Date: Today's Date
- Organisation: (Select Dropdown) Family and Household Support
- If there is **not** a Key Team recorded Tick Key Team, otherwise:
- Involvement Role: Other Team Involved
- Start Date: Today's Date
- Save

- Add Involvement
- Start Date: Today's Date
- Involvement: (select Dropdown) Worker name
- If there is not a Key Worker recorded Tick Key Worker, Otherwise:
- Involvement Role: Other Worker involved
- Start Date: Today's Date
- Save

9. Navigate to Assessment Framework and into Assessments

- Add Assessment
- Assessment Type: Adult Carer Support Plan/ Young Carer Statement
- Requested Date: Today's Date
- Resulting from: Choose appropriate from dropdown list
- Required by: Today's Date
- Target Start Date: Today's Date
- Subject: Populates
- Target End: Populates
- Resp. Worker: Choose worker name
- Resp. Team: populates
- Level: Enter if applicable
- Status: In Progress
- Save

Subsequent Activity:

- Client now appears in the worker's Cases – 'All my cases' section
- Client now appears in the worker's Task List – Assessment Responsibility section
- Worker to carry out Assessment Questionnaire

Carers Assessment Allocated to Practitioner (Swift)

The following process details the steps for when a practitioner has been allocated to a case to carry out an Adult and Young People's Carers Assessment and how the Senior would Authorise/ Reject the request

Previous Activity:

- Business Support have created the client on the system and added relevant information within clients record
- Business Support has put on the assessment and allocated this to a Practitioner

Practitioner

1. Click into Traffic Light area (workflow)
 - Click the 'ALL' tab
 - Type (dropdown): Assessment Responsibility
2. Click on to the workflow and click 'Work On' to go into that clients assessment
3. Click on Further Details
4. Click on Further Details again to start the questionnaire.
5. Complete all sections of the 'Adult Carer Support Plan/ Young Carer Statement' Questionnaire
6. Save & Continue
7. Click Further Details
8. Click Actions
 - Add Action
 - Action Status: Open
 - Action Type: Assessment Authorisation Request
 - Search for Senior using the Person/ Team Responsible fields
 - Action by Date: Today
 - Save

Senior

1. Click into Work Flow area
 - Click ALL tab to see all Work Flows
 - Change the type to Assessment Authorisation Request
 - Click Work on to access what has been sent
 - You will be taken to the Assessment screen
 - Click Further Details
 - Click Further Details once more to access the Questionnaire
 - Click into More tab to come out of the questionnaire once viewed
 - Click Actions tab
 - Add new Action
 - Action Status: Open
 - Action Type: Assessment Authorised/ Assessment Rejected
 - Click Person Responsible and find worker
 - Action by Date: Today
 - Notes: If you have chosen Assessment Rejected explain in the notes field why

Practitioner

9. Click into Work Flow area

- Click into Current tab to see all active tasks
- Type: All (to see everything)

If the action is 'Assessment Rejected' check the notes field of the Action to see what amendments are needed and then re-send for authorisation otherwise continue with these steps

- Click work on for 'Assessment Authorised'

10. Navigate to Case Notes

- Create Case Note by clicking the piece of paper icon at the top
- Note Type: CC Carers Assessment
- Date: Today's Date
- Headline: Adult and Young People form Received
- Notes Details: Details of the Assessment and any actions made, Ask Business Support to put on a Review and state the next review date
- Start Time and End Time: enter appropriately
- Outcome: enter if applicable
- Save

11. Click onto Further Details

12. Click into Actions

- Action Status: Open
- Action Type: Information Update
- Action by Date: Today
- Add Organisation: Send to relevant Business Support
- Save

13. Navigate to Involvements

- Select own involvement
- End Date – Today's Date
- End Reason – Work Complete
- Save

Subsequent Activity:

- Key Team should stay open for review purposes
- Business Support to create Review against the Team

Carers Assessment Allocated to Practitioner (AIS)

The following process details the steps for when a practitioner has been allocated to a case to carry out an Adult and Young People's Carers Assessment and how the Senior would Authorise/ Reject the request

Previous Activity:

- Business Support have created the client on the system and added relevant information within clients record
- Business Support has put on the assessment and allocated this to a Practitioner

Practitioner

1. Click on the Task List
 - View User or Team List: User
 - View Uncompleted or Completed Tasks: Uncompleted
 - Click GO
 - View Tasks of a specific Type: Assessment Responsibility
 - Click GO
2. Click on the [Description Hyperlink](#) to go into that clients assessment
3. Click on the [Yellow Navigation button](#) at the top right hand side to start the questionnaire.
4. Complete all sections of the 'Adult Carer Support Plan/ Young Carer Statement' Questionnaire
 - Click Save & Continue
 - Enter Actual End date
 - Enter Delay Reason (if required)
 - Do you wish to complete this assessment: Click yes
 - Save
5. Scroll to Authorisation section
 - Is the assessment ready to go for authorisation?: Click Yes
 - Send authorisation to: Click Find worker
 - Search using the fields provided
 - Tick Select box of worker to pull through to Action
 - Action authorisation by date: Today
 - Save (this has now send to the senior)
 - Authorisation Status should have 'Pending Authorisation'

Senior

6. Task List
 - Click User
 - Click Uncompleted
 - GO
 - View Tasks of a specific type: Assessment Authorisation Request
 - Click GO

You will now be able to see all Assessments sent for Authorisation

 - Click on the [Description Hyperlink](#) to go into that clients assessment

You are now taken to the Authorisation screen where you can see the assessment on the screen

- Use the radio buttons at the top to Authorise or Reject the Assessment
- If Authorise is selected - Click Save (this will send an automatic workflow back to the worker letting them know its been Authorised)
- If Reject is selected – you will need to provide a Rejection Reason in the text field and then Click Save (this will send an automatic workflow back to the worker letting them know its been Rejected)

Practitioner

7. Navigate to the Task List

- Click User
- Click Uncompleted
- Click GO

Sort tasks by date: Click on the column arrows twice at the right hand side of the word 'Due Date'

If the Task is 'Assessment Rejected' Click on the Due date Hyperlink to see what amendments are needed and then re-send for authorisation otherwise continue with these steps

8. Navigate to Person Search

- Search for the client using the field provided
- Click on the number hyperlink to access the clients record

9. Navigate to Case Notes

- Add Case Note (with the next Review date/ Destruction Date if NFA)
- Note Type: CC Carers Assessment
- Date: Today's Date
- Headline: Adult and Young People form Received
- Notes Details: Details of the Assessment and any actions made, Ask Business Support to put on a Review and state the next review date
- Start Time and End Time: enter appropriately
- Outcome: enter if applicable
- Save

10. Click onto Actions

- Add Action
- Action Type: Information Update
- Action by Date: Today
- Add Organisation: Send to relevant Business Support
- Save

11. Navigate to Involvements

- Select own involvement
- End Date – Today's Date
- End Reason – Work Complete
- Save

Subsequent Activity:

- Key Team should stay open for review purposes
- Business Support to create Review against the Team

Creating the Review

The following process details the steps for the SSC FHS Team to record a review

Previous Activity:

- Practitioner has completed the initial review and ended their involvement with the client

Business Support

1. Click into Traffic Light area (workflow)
 - Click the 'ALL' tab
 - Find the workflow from the practitioner and click 'Work on' to access the record.
2. Navigate to Assessment Framework > Reviews
3. Create a new review
 - Review Type: Unpaid Carer Review
 - Subject: Populates
 - Due Date: Enter Date stated in Practitioners' case note (usually annually)
 - Address Type: Select appropriate
 - Status: to be arranged
 - Save
4. Click Further Details
5. Click on the Reviewer tab
 - Involvement: Select Dropdown and click next
(Past and Present involvements will appear)
 - Select SSC FHS Team involvement
 - Click Finish
 - Reason: Main Reviewer (Wrkr/Team resp for review)
 - Save

Subsequent Activity:

- Business Support will run the C&F Reviews Due report

Report

The following process details the steps on how to run the C&F Reviews report for the SSC FHS Team

Previous Activity:

- Previous Reviews have been recorded and are now due to be reviewed

Business Support

1. Navigate to Assessment Framework and into Review tab
2. Click Print
3. Select C&F Reviews
4. Click GO
5. Report Parameters
 - Completion Status: Open
 - Team: select dropdown
 - Click De-select (as at the moment all teams are selected)
 - Choose 1 or more of the SSC FHS Teams by clicking on them
 - Click Finish
 - Review Type: Unpaid Carer Review
 - Change dates if required
 - Click Run Report

Subsequent Activity:

- Previous Reviews have been recorded and are now due to be carried out
- Business Support will email Team Manager with the reviews that are due
- Practitioner will carry out review and workflow a case note to Business Support with Destruction Date or another review date as per 'Carers Assessment Allocated to Practitioner' process above.

Costs

The following process details the steps on how to add a cost for a specific Financial assistance payment.

Previous Activity:

- Practitioner has informed Business Support that a Financial Assistance payment has been made.

Business Support

1. Navigate to Assessment Framework
 - Click the new record button at the top of the screen
 - To add a Young Carer Statement
 - Description: Level 1: C&F&YP
 Level 2: Financial Assist
 Level 3: Young Carer Statement
 Care Item: Click OK

OR

To add an Adult Carer Statement

- Description: Level 1: Adults
 Level 2: Financial Assist
 Level 3: Adult Carer Statement
 Care Item: Click OK
- Click Next
- Click Finish
- Required units: amount of the payment
- Payment: Choose appropriate payment type
- Purch Org: Populates/ SSC FHS Team/ Leave as is
- Pur Worker: Populates/ SSC FHS Worker/ Leave as is
- Planned Start: Today
- Planned End: Select Appropriate
- Actual Start: Today
- Actual End: Select Appropriate
- Notes: Any Relevant Information
- Save

Previous Activity:

- Business Support to inform worker that this has been completed.

Change Control

Version	Date	Process	Change
V1	13/06/2018	Adult & Young People Carer Assessment	
V2	19/10/2018	"	<ul style="list-style-type: none"> ➤ Added in Authorisation part of the Assessment for both Swift and AIS users. ➤ Changed the Service created to 2 seperate ones so that we can differentiate between Adult Carer and Young Carer ➤ Updated Assessment Questionnaires to include Payment method

Assessment Questionnaire
Adult Carer Support Plan

Report run on and by: August 15, 2018 11:15 AM,

Client Name:	Mr AN OTHER	Date of Birth:	20/01/1901
Swift No.:	12345678	Assessor:	AN OTHER
Address:	Edinburgh	Responsible Team:	SWIFT PROJECT
Postcode:			
Start of Assessment:		End of Assessment:	

About You

How long have you been caring for?:

- ☐ A) Less that 1 year
- ☐ B) 1 year but less than 5 years
- ☐ C) 5 years but less than 10 years
- ☐ D) 10 years but less than 20 years
- ☐ E) 20 years or more
- ☐ F) Unknown

What type of care do you provide?:

- ☐ A) Medication
- ☐ B) Personal care
- ☐ C) Shopping, Cleaning, Domestic tasks
- ☐ D) Transport
- ☐ E) Supervison/ Emotional support
- ☐ F) Financial support
- ☐ G) Other
- ☐ H) Not Known

If 'Other' please elaborate:

Care hours provided in a typical week?:

- ☐ A) up to 4 hours
- ☐ B) 5-19 hours
- ☐ C) 20 - 34 hours
- ☐ D) 35 - 49 hours
- ☐ E) 50+ hours
- ☐ F) Not known

What has caring impacted on?:

- ☐ A) Health
- ☐ B) Emotional Wellbeing
- ☐ C) Finance
- ☐ D) Life Balance
- ☐ E) Feel Valued
- ☐ F) Future Plans
- ☐ G) Employment
- ☐ H) Living Environment

What is difficult in your caring role?:

What could affect your ability to care?:

Things that worry you in your caring role?:

who supports you in your life?:

Are you able to continue caring?: ☐ A) Yes ☐ B) No

Assessment Questionnaire

Adult Carer Support Plan

Report run on and by: August 15, 2018 11:15 AM, SWIFT PROJECT

Template: GEN_00131_04_01
GEN_00181_05_00

Your Caring Role

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Sunday:

What does your average GOOD day look like?:

What does your average BAD day look like?:

Assessment Questionnaire

Adult Carer Support Plan

D

Report run on and by: August 15, 2018 11:15 AM, SWIFT PROJECT

Template: GEN_00131_04_01

GEN_00181_05_00

Support

Why does this person need support?:

Who helps care for this person?:

In order to have more good days, What support would you need?:

Do you need information/ support from other organisations i.e. Volunteer Net:

☐ A) Yes ☐ B) No

Would you like information about the free FLORENCE (FLO) text service?:

☐ A) Yes ☐ B) No

Description of the support to meet agreed outcomes:

Wellbeing Score

Wellbeing Score: ☐ A) Low ☐ B) Medium ☐ C) High

Consent to Share Information

Can we share this form?: ☐ A) Yes ☐ B) No

If YES, Who do you agree we can share it with?:

Client Name:	Mr AN OTHER	Date of Birth:	21 01 1901
Swift No.:	12345678	Assessor:	AN OTHER
Address:	Edinburgh	Responsible Team:	SWIFT PROJECT
Postcode:			
Start of Assessment:		End of Assessment:	

About You

How long have you been caring for?:

- ☐ A) Less that 1 year
- ☐ B) 1 year but less than 5 years
- ☐ C) 5 years but less than 10 years
- ☐ D) 10 years but less than 20 year
- ☐ E) 20 years or more
- ☐ F) Unknown

What type of care do you provide?:

- ☐ A) Medication
- ☐ B) Personal care
- ☐ C) Shopping, Cleaning, Domestic tasks
- ☐ D) Transport
- ☐ E) Supervisor/ Emotional support
- ☐ F) Financial support
- ☐ G) Other
- ☐ H) Not Known

If 'Other' please elaborate:

Care hours provided in a typical week?:

- ☐ A) up to 4 hours
- ☐ B) 5-19 hours
- ☐ C) 20 - 34 hours
- ☐ D) 35 - 49 hours
- ☐ E) 50+ hours
- ☐ F) Not known

What has caring impacted on?:

- ☐ A) Health
- ☐ B) Emotional Wellbeing
- ☐ C) Finance
- ☐ D) Life Balance
- ☐ E) Feel Valued
- ☐ F) Future Plans
- ☐ G) Employment
- ☐ H) Living Environment

What is difficult in your caring role?:

What could affect your ability to care?:

Things that worry you in your caring role?:

who supports you in your life?:

Are you able to continue caring?: ☐ A) Yes ☐ B) No

Assessment Questionnaire

Young Carer statement

Report run on and by: August 15, 2018 11:16 AM, SWIFT PROJECT

Template: GEN_00131_04_01

GEN_00181_05_00

Your Caring Role

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Sunday:

What does your average GOOD day look like?:

What does your average BAD day look like?:

Assessment Questionnaire

Young Carer statement

D

Report run on and by: August 15, 2018 11:16 AM, SWIFT PROJECT

Template: GEN_00131_04_01

GEN_00181_05_00

Support

Why does this person need support?:

Who helps care for this person?:

In order to have more good days, What support would you need?:

Do you need information/ support from other organisations i.e. Volunteer Net:

☐ A) Yes ☐ B) No

Would you like information about the free FLORENCE (FLO) text service?:

☐ A) Yes ☐ B) No

Description of the support to meet agreed outcomes:

Wellbeing Score

Wellbeing Score: ☐ A) Low ☐ B) Medium ☐ C) High

Consent to Share Information

Can we share this form?: ☐ A) Yes ☐ B) No

If YES, Who do you agree we can share it with?:

Young Carer Statement / Adult Carer Support Plan

About you

Title	Click or tap here to enter text.
First Name(s)	Click or tap here to enter text.
Surname	Click or tap here to enter text.
DOB	Click or tap here to enter text.
Gender	Click or tap here to enter text.
Address Line 1	Click or tap here to enter text.
Address Line 2	Click or tap here to enter text.
Address Line 3	Click or tap here to enter text.
City	Click or tap here to enter text.
Postcode	Click or tap here to enter text.
Contact Number	Click or tap here to enter text.
Ethnic Group	Click or tap here to enter text.
Advocacy/ communication needs?	Click or tap here to enter text.

About the person you care for

Title	Click or tap here to enter text.
First Name(s)	Click or tap here to enter text.
Surname	Click or tap here to enter text.
DOB	Click or tap here to enter text.
Gender	Click or tap here to enter text.
Address Line 1	Click or tap here to enter text.
Address Line 2	Click or tap here to enter text.
Address Line 3	Click or tap here to enter text.
City	Click or tap here to enter text.
Postcode	Click or tap here to enter text.
Contact Number	Click or tap here to enter text.
Ethnic Group	Click or tap here to enter text.
Client Category	Click or tap here to enter text.

Contact Information

Referred By	Click or tap here to enter text.
Date Requested	Click or tap to enter a date.
Date Completed	Click or tap to enter a date.
Swift/ Trak Number	Click or tap here to enter text.

Background information

What is the client's relationship to you? Click or tap here to enter text.	
Who else helps you care for the client? Click or tap here to enter text.	
How long have you been caring for?	Choose an item.
What type of care do you provide?	Choose an item.
If you have chosen 'other' please elaborate: Click or tap here to enter text.	
Care hours provided in a typical week?	Choose an item.
What has caring impacted on?	Choose an item.

What is difficult in your caring role? Click or tap here to enter text.	
What could affect your ability to care? Click or tap here to enter text.	
Things that worry you in your caring role? Click or tap here to enter text.	
Who supports you in your life? Click or tap here to enter text.	
Are you able to continue caring?	Choose an item.

Additional Information

Do you have power of attorney?	Choose an item.
Do you have/ want an emergency plan?	Choose an item.
Do you have/ want an emergency card?	Choose an item.
Name of worker completing this form with you	Click or tap here to enter text.
Organisation	Click or tap here to enter text.
Contact number	Click or tap here to enter text.
Would you like a copy of this form?	Choose an item.

Your Caring Role

Please describe the duties you carry out each day

Monday	
Click or tap here to enter text.	
Tuesday	
Click or tap here to enter text.	
Wednesday	
Click or tap here to enter text.	
Thursday	
Click or tap here to enter text.	
Friday	
Click or tap here to enter text.	
Saturday	
Click or tap here to enter text.	
Sunday	
Click or tap here to enter text.	
Total Care hours	Click or tap here to enter text.
What does your average <u>GOOD</u> day look like? Click or tap here to enter text.	
What does your average <u>BAD</u> day look like? Click or tap here to enter text.	

Support

Who will deliver the support? <i>(please mention contact information of lead person)</i> Click or tap here to enter text.	
Date Agency/ organisation was contacted	Click or tap to enter a date.
Date agreed support could start	Click or tap to enter a date.
Lead person contact details Click or tap here to enter text.	
Why does this person need support? Click or tap here to enter text.	
Who helps care for this person? Click or tap here to enter text.	
In order to have more GOOD days, What support would you need? Click or tap here to enter text.	
Do you need information/ support from other organisations i.e. Volunteer Net?	Choose an item.
Would you like information about the free FLORENCE (FLO) text service?	Choose an item.
Description of support to meet agreed outcomes: Click or tap here to enter text.	
Wellbeing Score	Choose an item.

Consent to Share Information

Can we share this form?	Choose an item.
If YES, Who do you agree we can share it with? <i>(NHS, CEC, Volunteer Net)</i> Click or tap here to enter text.	

Carer Name _____

Worker Name _____

Carer signature _____

Worker signature _____

Date _____

Date _____

Please email completed form to FHSBSC@edinburgh.gov.uk