

# REPORT

## The Joint Edinburgh Carer Strategy Refresh 2023-26

Edinburgh Integration Joint Board

8 August 2023

### Executive Summary

The purpose of this report is to provide the Edinburgh Integration Joint Board with the opportunity to consider the draft Joint Edinburgh Carer Strategy Refresh 2023-26, prior to publication.

The Strategy has been developed by the Edinburgh Carers Strategic Partnership Group and sets out how planning partners will enhance carer support, reflecting the Scottish Government's commitments set out in the *Carers (Scotland Act 2016)* and subsequent guidance, and reflecting the vision for improved health and social care support, set out in the [Independent Review of Adult Social Care](#) and in the revised [National Carers Strategy 2023-2026](#).

The refreshed strategy builds on the progress made through the [Edinburgh Joint Carer Strategy 2019-2022](#) maintains a focus on the agreed 6 priority areas for Edinburgh unpaid carers, placing carer at the centre of our work, and focusses on the 5 key themes of the National Carer Strategy:

- Living With COVID-1,
- Valuing, Recognising and Supporting Carers
- Health and Social Care Support
- Social and financial inclusion
- Young Carers

## Recommendations

It is recommended that the **Edinburgh Integration Joint Board:**

1. Consider and approve the draft Joint Edinburgh Carer Strategy Refresh 2023-26 for publication and implementation.

## Directions

Direction to City of Edinburgh Council, NHS Lothian or both organisations		✓
	No direction required	
	Issue a direction to City of Edinburgh Council	
	Issue a direction to NHS Lothian	
	Issue a direction to City of Edinburgh Council and NHS Lothian	✓

Appendix 1 provides detail on the direction to be issued.

## Report Circulation

1. This report has been circulated to members of the Executive Management Team and discussed at its meeting of 13 July 2023.
2. The refreshed Strategy has been co-produced by the Edinburgh Carer Strategic Partnership, and shared with colleagues and senior managers across Children, Education and Justice
3. The outline and development of the Strategy has been discussed at the Edinburgh Integration Joint Board in December 2022, and Strategic Planning Group in June 2023.



## Main Report

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4. The Carers (Scotland) Act 2016 requires that each local authority and relevant health board must jointly publish a local carer strategy and review this within 3 years. Following the review, the local authority and relevant health board may prepare a revised local carer strategy.
5. The refreshed Edinburgh Joint Carer Strategy 2023-26 is attached in Appendix 2. This refreshed strategy builds on the 6 key priority areas identified and progressed in the Edinburgh Joint Carer Strategy 2019- 2022:
  - Identifying carers
  - Information and Advice
  - Carer health and wellbeing
  - Short Breaks
  - Young carers
  - Personalising support for carers
6. In the refreshed Carer Strategy document, Appendix 1 shows the Joint Strategic Needs Assessment (JSNA) topic paper undertaken on Carers. This paper has been updated with the latest available data. This topic paper has informed the Joint Edinburgh Carers Strategy refresh and will also be published in its own right to allow others to access the data around unpaid carers in Edinburgh. The paper will be presented to the Strategic Planning Group (SPG), as the lead EIJB committee for the JSNA on 16 August 2023 for approval to publish.
7. The refresh has provided an opportunity to reflect, and address changes in the carers landscape since the launch of the 2019-22 strategy. These changes include:
  - The impacts of Covid restrictions and subsequent remobilisation
  - Staff resource difficulties and budget implications
  - Cost of living crisis
  - The implications of the Review of Adult Social Care in Scotland and the Inspection of Adult Social Work and Social Care Services: City of Edinburgh
  - And the publication of the [National Carer Strategy](#)
8. The [National Carer Strategy](#) was published by the Scottish Government in December 2022. This Strategy recognises that unpaid care is vital to how

social care is provided in Scotland, and that the value of the dedication and expertise of carers cannot be overstated. The COVID-19 pandemic created significant difficulties and hardships for many carers and the pressures of the past two years have left many carers at breaking point. Carers are in acute need of support and now, more than ever, steps need to be taken to address the problems caused by the pandemic as well as the long-term, systemic issues that continue to affect unpaid carers. The National Strategy sets out key themes and a range of actions to ensure carers are supported, in a joined up and cohesive way, with the aim of getting it right for every carer.

9. The key themes of the National Strategy intend to put the individual carer at the centre, and focus on five different aspects of unpaid carer support:
  - Living With COVID-19
  - Valuing, Recognising and Supporting Carers
  - Health and Social Care Support
  - Social and financial inclusion
  - Young Carers
10. The draft refreshed Joint Edinburgh Carers Strategy aligns to the 5 key themes and associated outcomes of the National Carer Strategy. These have been used as a basis to develop organisational and personal outcomes for each theme and to develop local actions and commitments to support carers over the period of the strategy. The majority of the actions is, and will continue to be, applied through commissioned and internal health and social care provision, with other key contributions coming from the wider carer supports, networks and communities, enabling unpaid carers to live as good a life as possible, and allow them to continue to undertake their caring role, as long as they are willing to do so.
11. This draft refreshed Edinburgh Joint Carer Strategy 2023-26 has been developed through the Carer Strategic Partnership Group (CSPG) and various short life working groups. Membership comprises of several commissioned voluntary sector and internal partners, EHSCP staff working in both the strategic and operational field and carer representatives who bring carer insight. The views of carers have also been sought and incorporated into the development of the Edinburgh Strategy by consideration and analysis of local and national surveys, research and consultations.
12. An earlier version of the draft refreshed Strategy was presented for discussion at the EIJB in December 2022 and further discussion took place at the Strategic Planning group in June this year. Feedback has now been incorporated with

key changes being a reduction in length of the document, with much of the context and demographic information being summarised, and a rationalisation of the outcomes to improve clarity and measurability. Key has been the development of the section in the strategy highlighting Edinburgh's contribution to the national outcomes, which is in effect our implementation plan over the next 3 years.

13. Key focus areas for development for the forthcoming year are indicated, and will form the focus for the Carer Strategic Partnership work plan going forward, are aligned with the key implementation plan of the refreshed Strategy 2023-26, and include developments around aspects that mean the most to carers:
  - SDS considerations, optimising creative opportunities for carers.
  - Place based, and other short breaks and breaks from caring developments.
  - Young adult carer action plan.
  - Adult Carer Support Plan roll out.
  - Change to reporting timeline, and review of KPIs.
  - Exploring impact on female carers and engaging nationally to progress.

#### **Social Work & Social Care Inspection Improvement Plan**

14. The Care Inspectorate undertook an inspection of adult social work and social care in Edinburgh and published its [report](#) on 21 March 2023. Several Key areas for improvement were identified, including the need to take a co-ordinated approach to early intervention and prevention, the need to reduce waiting lists and improve access to services and the need to provide better support for unpaid carers.
15. The Partnership and Council have developed and agreed an [improvement plan](#) to prioritise key actions to address the issues raised. They have also agreed that unpaid carers and service users are involved in the further development of all improvement plans. This is welcomed by the Edinburgh Carers Strategic Planning Group.
16. There is clear alignment of the refreshed Carer Strategy with the Improvement Plan. The vision for the refreshed Strategy is that Edinburgh is a city where carers feel valued and well supported and the actions identified within the Strategy take a person-centred, early intervention and preventative approach to provision of support.

### **Strategic Commissioning**

17. In addition, a report went to the Performance and Sustainability committee, on 20 June 2023, regards to Drumbrae care home, and as part of the recommendations, it was noted that the Edinburgh Integrated Joint Board, (EIJB) have agreed to undertake a strategic commissioning exercise looking at capacity and demand for bed-based care. This exercise will include looking at place based short breaks and breaks from caring, (previously referred to as respite care).

### **Monitoring, Reporting & Governance**

18. In 2021, the EHSCP and partner organisations developed a performance and evaluation framework to understand the collective impact of the work to support unpaid carers. The report from 2021 can be found [here](#). The performance report covering 2022-23 will be presented to the EIJB's Performance and Delivery Committee on 2 August 2023.
19. The Performance and evaluation framework is being further developed to provide a focus on outcomes for carers across the strategy and will report on both quantitative and qualitative data. Carer Strategy Performance and Evaluation Reports will be presented to the IJB's Performance and Delivery Committee on an annual basis.
20. In addition to the reporting through the Outcomes Framework, VOCAL carry out a bi-annual survey of unpaid carers in Edinburgh, which is now sponsored through the Carers spend plan. This is an opportunity for carers to comment on the impact of caring on their lives and the carer support services. Key findings will be reported in subsequent Performance and Evaluation reports which will inform ongoing development work.
21. The multi-agency joint Edinburgh Carers Strategic Partnership Group has overseen the implementation of the Strategy. There is the opportunity in this year to review the role of that Carer Strategic Partnership Group, to consider how best to progress the strategic focus, operational implementation and contract monitoring and reporting.

### **Next Steps**

22. An Executive Summary will be prepared and will be published on the Partnership's website alongside the refreshed Strategy, once the Strategy has been ratified.

## Implications for Edinburgh Integration Joint Board

### Financial implications

23. There are no direct financial implications associated with this report. The outline spend plan, ratified by EIJB, at the same time as the Edinburgh Joint Carer Strategy 2019-2022 is highlighted below:

#### Carer Investment Plan ratified by EIJB 2019

	2021/22 £m	2022/23 £m	2023/24 £m	2024/25 £m	2025/26 £m
Identifying Carers and Information & advice	1.22	1.27	1.40	1.45	1.49
Health and Wellbeing	0.63	1.01	1.12	1.14	1.15
Short Breaks	0.59	0.99	1.16	1.09	1.09
Young Carers	0.51	0.69	0.69	0.69	0.69
Personalising support	2.75	3.34	2.92	2.93	2.95
Contingency and Innovation	0.14	0.21	0.21	0.21	0.13
<b>Total</b>	<b>5.84</b>	<b>7.51</b>	<b>7.50</b>	<b>7.51</b>	<b>7.50</b>

### Legal / risk implications

24. There is a risk of non-compliance with the duties of the Carers (Scotland) Act 2016 if the refreshed local strategy is not published, and associated implementation plan not progressed.

### Equality and integrated impact assessment

25. Consideration of equality has been considered throughout the development of the strategy with a wide range of equality outcome evidence incorporated. The strategy takes a person-centred approach to support for carers which helps ensure that equality and human rights are central to the provision of care. An Integrated Impact Assessment (IIA) has been carried out the draft report is attached in Appendix 3.

## Environment and sustainability impacts

26. The environmental and sustainability impacts were considered as part of the IIA process and no significant impacts on greenhouse gas emissions nor biodiversity were noted. The strategy recognises that unpaid care is vital to how social care is provided in Edinburgh and aims to ensure that the health and well-being of carers is supported fully, in a joined-up way, to ensure the resilience and sustainability of carers.

## Quality of care

27. The strategy has been developed to help improve the support available to carers across the city, to provide choices and opportunities for carers and improve the confidence and health of carers. Without this support, carers' health and wellbeing may suffer, leading to a detrimental impact on the cared-for person or a break-down in the provision of care.

## Consultation

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28. This draft Refreshed EJCS 2023-26 has been developed through the Carer Strategic Partnership Group (CSPG) and various short life working groups. Membership comprises of several commissioned voluntary sector and internal partners, EHSCP staff working in both the strategic carer field and in the operational field and carer representatives who bring carer insight. The views of carers have also been sought and incorporated into the development of the Edinburgh Strategy by consideration and analysis of local and national surveys, research and consultations.
29. An earlier draft version of the refreshed Strategy was presented for discussion at the EIJB in December 2022, highlighting how the strategy was developing to align the national themes and commitments to the 6 key priority areas agreed for Edinburgh unpaid carers, and discussion also took place at the Strategic Planning group in June this year.
30. Details of consultation can be found in Appendix 11 of the refreshed strategy.



## Report Author

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## Background Reports

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None.

## Appendices

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Appendix 1	Directions Template
Appendix 2	The draft Joint Edinburgh Carer Strategy 2023-26
Appendix 3	Integrated Impact Assessment for Edinburgh Joint Carer Strategy 2023-26

## Appendix 1 – Directions Template

### DIRECTION FROM THE EDINBURGH INTEGRATION JOINT BOARD (EIJB)

Partner agencies are required to carry out this direction in accordance with statutory and regulatory obligations, ensuring adherence to relevant guidance, policies and procedures, in pursuit of the EIJB's strategic objectives.

Reference number	EIJB-9/08/2023-xxx
Does this direction supersede or vary an existing direction? If yes, please provide reference number of existing direction	Yes This direction supersedes Direction IJB-02/02/2021-1 - Implement the Edinburgh Joint Carers Strategy 2019-22 and associated implementation plans
Approval date	08/08/2023

Services / functions covered	The services/functions covered are in relation to support for unpaid carers.		
Full text of direction	<p>Implement the Edinburgh Joint Carers Strategy 2023-26 and actions.</p> <p>The actions are listed in the Strategy and are aligned to the National Care Themes:</p> <ul style="list-style-type: none"> <li>• Living With COVID-19</li> <li>• Valuing, Recognising and Supporting Carers</li> <li>• Health and Social Care Support</li> <li>• Social and financial inclusion</li> <li>• Young Carers</li> </ul>		
Direction to	NHS Lothian and the City of Edinburgh Council and NHS Lothian		
Link to relevant EIJB report / reports	<p><a href="#">Provide hyperlinks</a></p> <p><a href="#">Link to be provided when report goes live</a></p>		
Budget / finances allocated to carry out the direction.	<p><a href="#">State the financial resources allocated to enable NHS Lothian or the Council or both to implement the direction.</a></p>	<p><i>NHS Lothian</i></p> <ul style="list-style-type: none"> <li>• 2023/24 - £0.55m</li> <li>• 2024/25 - £0.56m</li> <li>• 2025/26 - £0.58m</li> </ul>	<p><i>City of Edinburgh Council</i></p> <ul style="list-style-type: none"> <li>• 23/24 - £6.95m</li> <li>• 24/25 - £6.95m</li> <li>• 25/26 - £6.92m</li> </ul>
Performance measures	The performance measures linked to the strategy are:		

	<ul style="list-style-type: none"> <li>• the National Health and Wellbeing Outcome 6: People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and wellbeing.</li> <li>• the <a href="#">National Care Outcomes</a></li> <li>• the Edinburgh Joint Carer Strategy Outcomes, detailed in the strategy attached as appendix 2 to this report</li> <li>• results of the bi-annual survey of unpaid carers in Edinburgh</li> <li>• the KPIs identified for contracts.</li> </ul> <p>An evaluation and monitoring framework has been developed to ensure the above measures are monitored. Reports on performance against the outcome measures and the contract KPIs will be presented annually to the Carers Strategic Group and the EIJB Performance &amp; Delivery Committee. The National Health and Wellbeing outcome is also reported in the EIJB Annual Performance Report.</p> <p>The multi-agency joint Edinburgh Carers Strategic Partnership Group will continue to oversee the implementation of the Strategy.</p>
Date direction will be reviewed	April 2024 as part of the next Annual review of directions

# The Joint Edinburgh Carer Strategy

For all young and  
adult carers who  
support people  
living in Edinburgh



Edinburgh **Health and  
Social Care** Partnership



Working together for a caring,  
healthier, safer Edinburgh



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## **Introduction**

This refreshed Edinburgh Carers Strategy 2023-26 sets out the vision, priorities and outcomes for health and social care planning partners to make Edinburgh a caring city.

- A city, where carers have rights, choices, and opportunities to access a wide range of supports.
- A city, where carers have a voice, individually and collectively.
- A city, which respects carers as equal partners in care and where carers feel valued and well supported in their communities.
- A city, where carers care with confidence and in good health.

“In Edinburgh, many people’s lives have been severely affected by global, UK and national developments. Social care services and providers in the Capital and across Scotland have experienced a rise in demand and need for services and significant staffing pressures, as a result of these developments. 2022 saw alarming increases in the cost of living which will further impact carers and people who need health and social care services. Recently published surveys provide evidence that Carers are bearing the brunt of these changes, which are out with their control.”

The lessons of the COVID-19-19 pandemic and the challenges of a fast-changing world do not allow a return to an ‘old normal’. On the contrary, they demand ‘new radical’ approaches. The Scottish Government commissioned [Independent Review of Adult Social Care<sup>1</sup>](#) set the benchmark for wide-ranging changes in the way health and social care support will be provided in future.

This refreshed Edinburgh Carers Strategy sets out how planning partners will expand carer support, reflecting the Scottish Government’s commitments set out in the *Carers (Scotland Act 2016)* and subsequent guidance, and reflecting the vision for improved health and social care support, set out in the [Independent Review of Adult Social Care<sup>1</sup>](#) and in the revised [National Carers Strategy 2023-2026<sup>2</sup>](#). The Strategy sets out strategic priorities of planning partners to act as gateways for carers, not as gatekeepers. To this end, it commits to strengthening our partnerships city-wide and in our communities, building on the progress made through the implementation plan of [Edinburgh Joint Carer Strategy 2019-2022<sup>3</sup>](#) .

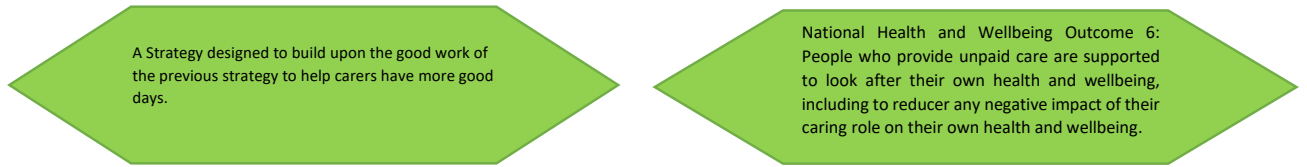
We all play a unique role to contribute to seamless carer support: the right care at the right time and in the right place. This Strategy sets out the direction for future carer support and our commitment to engaging carers individually and collectively. It set out measures to increase our capacity to deliver more person-centred support to a growing number of carers. Always led by carers’ needs and their aspirations, the Strategy builds on the best of Edinburgh’s approach, determined to continue Edinburgh’s health and social care developments and improvements.

<sup>1</sup>[Adult social care: independent review - gov.scot \(www.gov.scot\)](http://www.gov.scot)

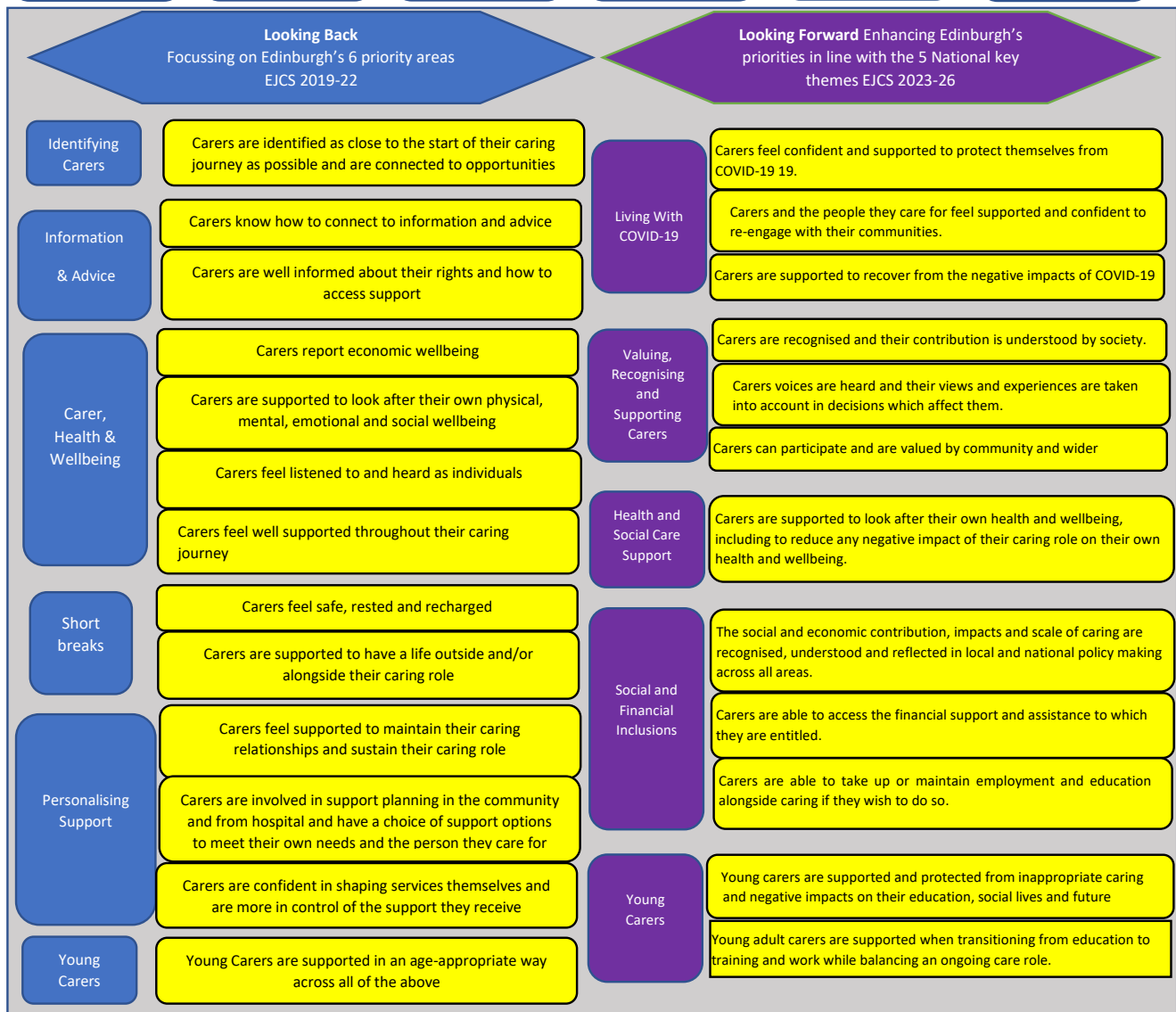
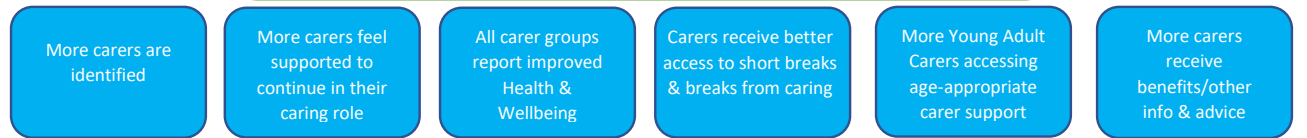
<sup>2</sup>[National carers strategy - gov.scot \(www.gov.scot\)](http://www.gov.scot)

<sup>3</sup> [Edinburgh-Joint-Carers-Strategy-2019-2022-FINAL.pdf \(edinburghhsc.scot\)](#)

# Edinburgh Joint Carer Strategy – at a Glance



## Targets





## **Scotland's Carers & Edinburgh's Carers**

Carers make a vital contribution to the lives of those who are unable live independently, either through age, frailty, disability or illness. The support that carers provide may be in place of funded support, complementing funded support arranged by the Edinburgh Health and Social Care Partnership, or support from other organisations. Indeed, the care they provide could be the only source or support that the cared for person is receiving.

Some carers may provide care for a long period of time, whereas others may only provide care for a short period of time depending upon the factors and circumstances of the caring situation, indeed for some carers, their caring role can be a life-long one. Carers may therefore be of any age and their need for support can vary as a result. For instance, young and young adult carers may need additional support when it comes to pressures arising from their caring role affecting their education, starting employment or training and establishing an independent life out with their caring role. Whereas older carers, or carers who have made this commitment for some time, may need additional support to rest and have a break from their caring role. All carers may benefit from support and learning on how to safely help the person they care for.

Most carers are female and of working age; come from any background which can include the LGBT+ Community, BME and travelling communities; be affected by their own mental or physical health conditions or disabilities, or indeed experience different socio-economic situations. Some carers may have more than one caring role and, with the effect differing from carer to carer across the city and the nation.

In order to set the context that this refreshed Carer Strategy for 2023-2026 is set against, it is important to first develop our understanding of the pressures and challenges that Carers are experiencing both at a national and local level around certain key areas. The recent Joint Strategic Needs Assessment for Edinburgh ([put in link when published, included as an Appendix 1 for now](#)) contains key information, providing this clear and recent context:

1. Age & Gender
2. Demographic Pressures
3. Intensity of Caring
4. Impact of Caring
5. Cost of Living

### **Key points about carers in Edinburgh**

The full details can be found [put in link](#) and the key findings are highlighted below:

- It is estimated that there are between 45,000 and 70,000 adult carers in Edinburgh.
- The age range of carers is spread fairly consistently across the ages with a peak in the 55 to 64 age group where 21% of the population identify as carers.

Percentage identifying as carers by age	16-24	25-34	35-44	45-54	55-64	65-74	75+	All adults
Male	5%	5%	10%	15%	19%	16%	7%	11%
Female	10%	12%	20%	23%	23%	12%	6%	16%
All Adults	7%	8%	15%	19%	21%	14%	7%	14%

- The Department for Works and Pensions (DWP) data shows that, in Edinburgh, 4,644 carers receive Carers Allowance and 250, sixteen- to eighteen-year-olds, received Young Carers Grants. The number of people in receipt of Carers Allowance had been increasing annually but has recently plateaued. The relatively low number of carers receiving carers allowance may be due to a number of factors including eligibility criteria, carer identification and that often pensioners become illegible for Carers Allowance once they receive pensionable income. The number of young carers applying for, and receiving a Young Carer Grant has been increasing since the benefit launched in 2019.
- The Scottish Government [Carers Census](#) published in December 2021, reports 89% of adult carers provide 20 hours or more of care per week.
- The Health and Care Experience Survey indicates that 16% of carers in Edinburgh do not have a good balance between caring and other areas of life and a quarter do not feel supported to continue caring. 75% of carers report their emotional welling being is affected by their caring role.
- The [Scottish Health Survey](#) estimates that nationally 13% of men and 18% of women identify as carers. Women are four times as likely to give up paid work due to multiple caring responsibilities and are more likely to be in low-paid, part-time employment than male carers.  
The responsibility of care has significant ramifications on women’s access to employment, career development and progress, access to training and higher education, as well as on physical and mental health.
- There is little information on particular issues arising in minority ethnic communities however we know that minority ethnic communities face significant inequalities with higher chances of living in poverty and disparity in access to affordable housing. Minority ethnic people were also amongst the worst affected by COVID-19 19. Being a carer in addition to being from a minority ethnic community will only increase the risk of poorer financial and well-being outcomes. In the 2011 Scotland’s Census, in Edinburgh, 9.7% of carers identified as an ethnic minority.
- Unpaid carers save Scotland an estimated £12.8bn per year ([National Carer Service - Business and Regulatory Impact Assessment.](#))

- There is little difference in the number of adult carers by deprivation in the Carers Census in 2020-21; however, there is a marked difference for young carers. 14% of young carers in the Carers Census lived in the most deprived Scottish Index of Multiple Deprivation (SIMD) decile compared to 5% who lived in the least deprived SIMD decile.
- In Edinburgh, the 2021, Voice of Carers Across Lothian (VOCAL) survey of carers<sup>1</sup>, reports that 41% of respondents reported more contact with health services about their own health (up from 35% in 2017). 67% reported that their physical health has been affected and 79% that their mental health has been affected compared with 59% reporting that being a carer made their health worse in 2017.
- In terms of the financial impact of caring, 69% of respondents reported that being a carer had a financial impact. There have been increases in people reporting they have stopped or reduced employment and lost NI or pension contributions. 15% had to borrow money due to their caring role and 7% have had to use a food bank.

### **Impact of the Cost of Living**

Carers Scotland, in their recent report "[State of Caring in Scotland 2022 - A cost-of-living crisis for unpaid carers in Scotland](#)"<sup>2</sup>, state that *"We are living through an unprecedented time, with the cost of energy, food, fuel, and basic commodities all rising at the same time. The inflation rate is at its highest level in over 40 years<sup>3</sup> and is due to increase to 13% by the end of the year."* They go on to suggest *"Unpaid carers have been among the groups hardest hit by the cost-of-living crisis in Scotland"*.

Several key reasons for this include, but are not limited to:

- Higher energy costs so that their home is warm enough to ensure the person they care for stays well.
- Essential equipment that requires power such as hoists, oxygen and wheelchairs.
- Additional laundry costs as a consequence of incontinence.
- Extra transport costs to support a person to and from health appointments.
- Special diets to support the nutritional needs of the person they care for.

Another recent report published by Carers UK entitled *"Heading for Crisis - caught between caring and rising costs"*, where just over 13,000 carers responded, highlights the impact upon unpaid carers of the current cost-of-living crisis. It pays particular attention to carers financial challenges and how their sense of health and well-being are affected. Key findings include:

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<sup>2</sup> [State of Caring in Scotland - A Cost of Living Crisis for carers- FINAL Embargoed.pdf](#)

<sup>3</sup> [UK inflation rises to 9.1%, its highest rate in 40 years | Inflation | The Guardian](#)

- 1 in 6 carers are in debt as a result of their caring role, increasing to 2 in 5 for carers in receipt of Carer's Allowance (approximately 8% of carers in Edinburgh receive carers allowance).
- The proportion of carers unable to afford their utility bills has more than doubled since last year to 14%.
- Carers in receipt of Carer's Allowance are more likely to be cutting back on food and heating.
- Nearly all carers who are struggling to make ends meet (93%) agreed that the increase in the cost of living was having a negative impact on their mental and physical health.

## **The Carer (Scotland) Act 2016**

### Definition of a Carer:

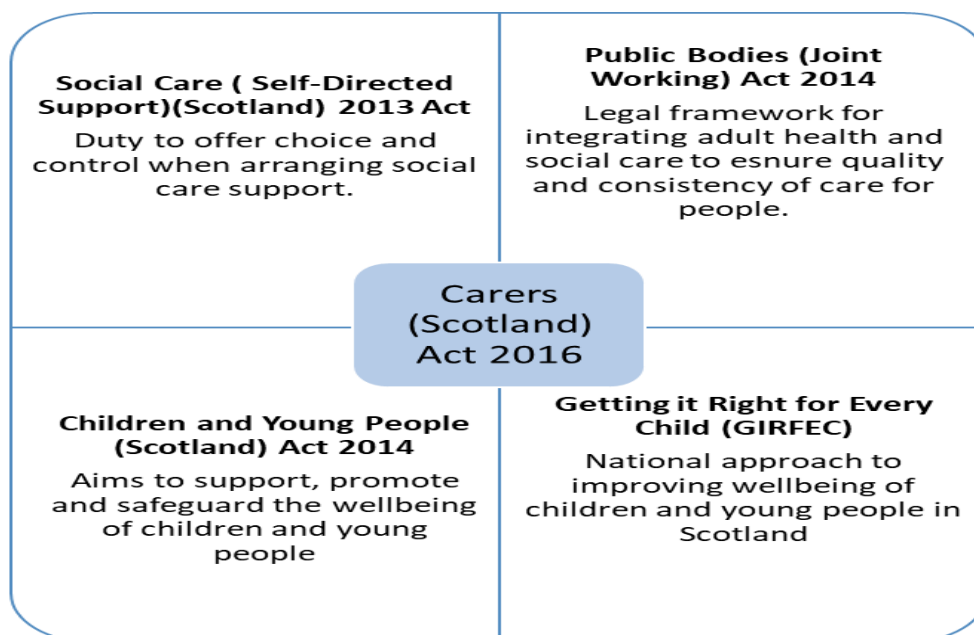
*“A carer is ‘a person of any age who provides, or intends to provide, unpaid help and support to a relative, friend or neighbour who cannot manage to live independently without the carer’s help due to frailty, illness, disability, or addiction’.” (Scottish Government 2016)*

The Carers (Scotland) Act 2016 distinguishes between young carers, young adult carers and adult carers;

- A young carer is a carer who is under 18 years old or is 18 years old and is still at school.
- A young adult carer is a carer aged between 16 and 25 years old, who is no longer attending high school education and is providing an unpaid caring role for someone who needs additional support.
- An adult carer is a carer who is at least 18 years and not a young carer.

### Carer Act Overview

The Act draws on other key pieces of legislation and took effect in April 2018. It aims to ensure carers have choice and control and can access preventative support to protect their wellbeing and keep caring situations manageable.



It puts in place a system of carers' rights designed to listen to carers; expand and transform carer support; and prevent problems – helping sustain caring relationships and protect carers' health and wellbeing.

This includes:

1. The provision of support to carers, based on their identified needs which meet the local Eligibility Framework (Appendix 2), such as
  - Access to information and advice
  - Access to various forms of short breaks
  - Benefits support
  - Any self-identified support need by the carer
  
2. Each carer's right to a personalised plan (an adult carer support plan or young carer statement see Appendices and [Materials – Edinburgh Young Carers & Young Carer Statement • Capital Carers](#)) to identify what is important to them, for example, returning to work or undertaking studies or training.
  - the nature and extent of the care provided and the impact on the carer's wellbeing and day-to-day life.
  - the extent to which the carer is able and willing to provide care.
  - emergency and future care planning. Carers have the right to support to meet their eligible needs. Local authorities must consider whether that support should include a break from caring and record these decisions in the plan.
  
3. The provision of an information and advice service for carers in such areas as
  - Emergency and future care planning
  - Advocacy

- Income maximisation
- Carer's rights

### **Edinburgh Joint Carer Strategy 2019 – 2022<sup>4</sup>**

The city-wide strategy highlighted 6 priority areas for carers and associated intended outcomes, based on carer feedback and direction at national and local levels. These are listed in the table below along with the associated outcomes and cross-referenced to the relevant National Theme(s) in the new National Carer Strategy.

Priority Area	Associated Outcomes	National Theme
1. Identifying Carers	<ul style="list-style-type: none"> <li>• Carers are identified as close to the start of their caring journey as possible, &amp; are connected to opportunities &amp; support</li> </ul>	1.Living with COVID-19 3.Health & Social Care Support
2. Information and Advice	<ul style="list-style-type: none"> <li>• Carers know how to connect to information and advice.</li> <li>• Carers are well informed about their rights and how to access support.</li> <li>• Carers report economic wellbeing</li> </ul>	4.Social and Financial Inclusion
3. Carer Health and Wellbeing	<ul style="list-style-type: none"> <li>• Carers are supported to look after their own physical, mental, emotional and social wellbeing.</li> <li>• Carers feel listened to and heard as individuals.</li> <li>• Carers feel well supported throughout their caring journey</li> </ul>	3.Health & Social Care Support
4. Short Breaks and Breaks from Caring	<ul style="list-style-type: none"> <li>• Carers feel safe, rested and recharged.</li> <li>• Carers are supported to have a life outside and/or alongside their caring role.</li> <li>• Carers feel supported to maintain their caring relationships and sustain their caring role</li> </ul>	3.Health & Social Care Support
5. Young Carers	<ul style="list-style-type: none"> <li>• Are identified as close to the start of their caring journey as possible and are connected to opportunities and supports.</li> <li>• Can access good quality, age-appropriate information and advice using a range of media and are well informed about their rights and how to access support.</li> <li>• And their families report economic wellbeing.</li> <li>• Sustain their physical, mental, emotional, and social wellbeing.</li> <li>• Feel listened to and heard as individuals.</li> <li>• Feel well supported throughout their caring journey.</li> <li>• Feel safe and rested and are able to be children and young people first.</li> </ul>	5.Young Carers

<sup>4</sup> [Edinburgh-Joint-Carers-Strategy-2019-2022-FINAL.pdf \(edinburghhsc.scot\)](#)

	<ul style="list-style-type: none"> <li>• Are supported to have a life outside and/or alongside their caring role.</li> <li>• Feel supported to maintain their caring relationship and sustain their caring role.</li> <li>• Are supported into a positive destination from school.</li> <li>• Are involved in support planning and have a choice and options to meet their needs and the person they care for</li> <li>• Are confident in shaping services for themselves and those they support and are more in control of the support they receive.</li> <li>• Feel supported to move into a life after caring and feel supported with the transition into adulthood</li> </ul>	
6. Personalising Support	<ul style="list-style-type: none"> <li>• Carers are involved in support planning in the community and from hospital, and have a choice of support options to meet their own needs and the person they care for</li> <li>• Carers are confident in shaping services for themselves and those they support and are more in control of the support they receive</li> </ul>	2. Valuing, Recognising and Supporting Carers

The 2019-22 strategy aimed to support the EHSCP and Communities and Families in the City of Edinburgh Council, to demonstrate improvements associated with the overarching national Health and Wellbeing Outcome 6:

*People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact if their caring role on their own health and wellbeing.*

Funding from the Carers Act legislation, averaging £7.5m per year remains key to the delivery of the implementation plan (see appendix 9 for overall spend plan).

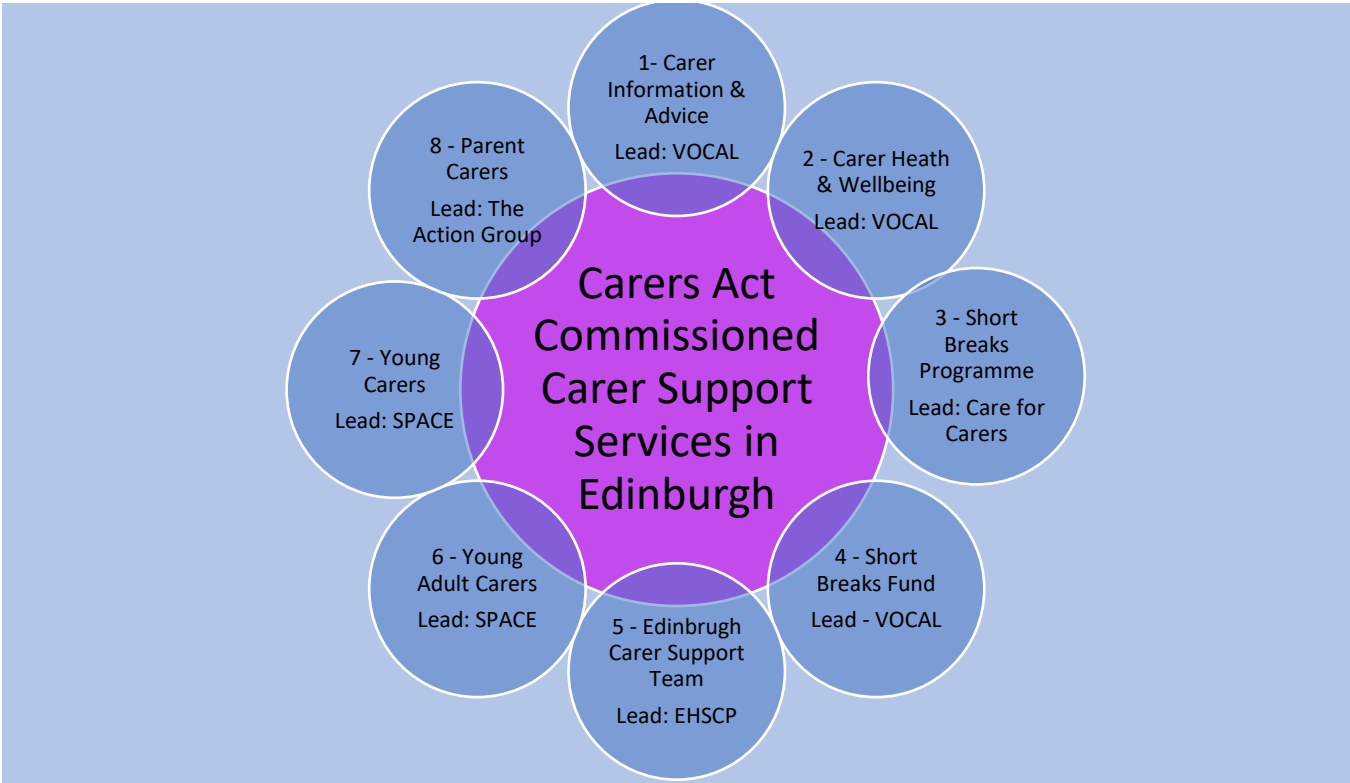
#### **Edinburgh's Investment in Carers Through Contracted Provision 2021-2026 (£35.86m)**

	2021/22 £m	2022/23 £m	2023/24 £m	2024/25 £m	2025/26 £m
Identifying Carers and Information & advice	1.22	1.27	1.40	1.45	1.49
Health and Wellbeing	0.63	1.01	1.12	1.14	1.15
Short Breaks	0.59	0.99	1.16	1.09	1.09
Young Carers	0.51	0.69	0.69	0.69	0.69
Personalising support	2.75	3.34	2.92	2.93	2.95
Contingency and Innovation	0.14	0.21	0.21	0.21	0.13
<b>Total</b>	<b>5.84</b>	<b>7.51</b>	<b>7.50</b>	<b>7.51</b>	<b>7.50</b>

This funding allowed the EHSCP to award eight contracts, the specifications for which were co-produced with various voluntary sector partners and launched in January 2021. These were awarded on a five-year basis, and three further 1-year periods if required to reduce short termism, stabilise the market, and progress on a continuous improvement and development basis, responding to local and national considerations. A key consideration for this was to allow the space and time for the Outcomes Framework to be developed.

The City of Edinburgh Council awarded contracts associated with young carer delivery, with young carer partners being an integral part of the Edinburgh Strategic Partnership Group, (see Appendix 10 for membership), to ensure aspects of young carers transitioning to young adult carers are considered, as well as the impact on adults being cared for by young carers.

In addition to the spend through the contracted provision noted above, the EHSCP also provides carer support through its mental health and disability workstreams and through its Grant Programme. Wider support is also provided through statutory services, individuals, community groups and organisations' work. Work to quantify the extent of this wider support is being carried out through the CLEAR action research.



Commissioned partners are supported via quarterly meetings with Planning and Commissioning personnel with end of year data drawn together and collated to form the [annual performance report](#) against several key performance indicators forming the contractual arrangement. This report is then scrutinised by the Performance and Delivery Committee, again on an annual basis.



## **The National Carer Strategy**

*“We want Scotland to be a place where all carers are recognised and valued for the contribution they make, where they are enabled to provide the right support for the people they care for while living full, rounded lives. No-one should need to put their aspirations and ambitions on hold because they are providing care to a loved one. There are several key principles that must be central to our approach. We must make sure that providing care does not mean that someone needs to give up their job or reduce their hours, that it does not plunge them into financial hardship or social exclusion. All carers must be seen as equal partners in care and involved in decisions relating to their caring role. We must ensure that the importance of unpaid care is recognised and that its value is acknowledged and respected, by the public sector, employers and by society.”*

*Kevin Stewart MSP Minister for Mental Wellbeing and Social Care, December 2022.*

The National Strategy recognises that unpaid care is vital to how social care is provided in Scotland, and the value of the dedication and expertise of carers cannot be overstated. The strategy sets out a range of actions to ensure they are supported fully in a joined up and cohesive way.

The Strategy was developed through consultation with carers and carer organisations and a range of delivery partners to make sure those with first-hand experience of caring and those with responsibilities to support carers helped shape the Strategy.

The Strategy covers activity during the current Scottish Parliament to spring 2026 but will be reviewed annually to monitor progress and ensure it is focussed on the most important issues.

The 5 key themes and associated national strategic outcomes of the strategy intend to put the individual carer at the centre and focus on five different aspects of unpaid carer support.

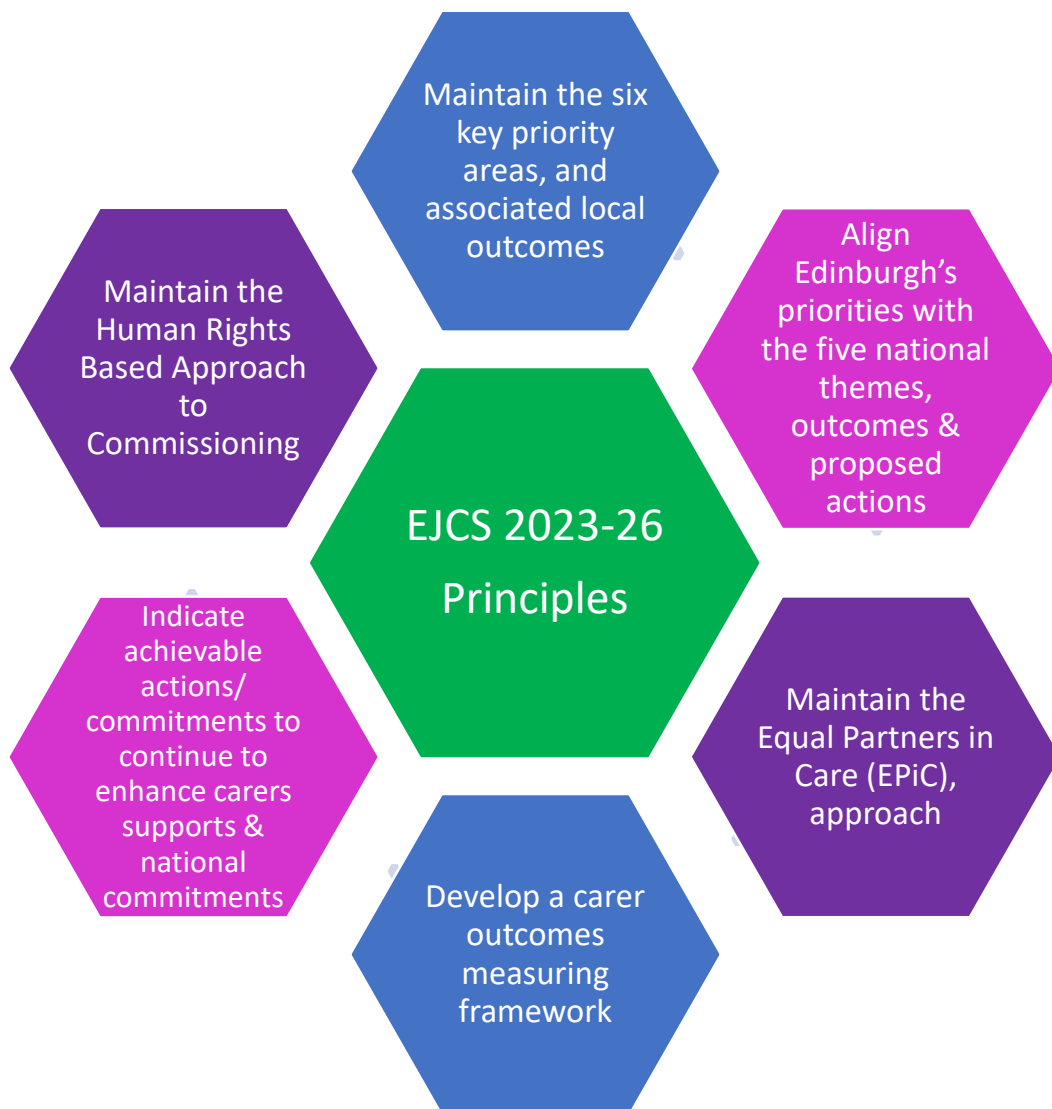
## The National Carer Strategy – Key Themes and National Outcomes

National Themed aspects of carer support	National Strategic Outcomes
Living with COVID-19-19	<p>Carers feel confident and supported to protect themselves from COVID-19-19.</p> <p>Carers and the people they care for feel supported and confident to re-engage with their communities.</p> <p>Carers are supported to recover from the negative impacts of COVID-19-19.</p>
Valuing, Recognising and Supporting Carers	<p>Carers are recognised and their contribution is understood and valued by society.</p> <p>Carers' voices are heard, and their views and experiences are taken into account in decisions which affect them.</p>
Health and social care support	<p>People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and wellbeing. (National health and wellbeing outcome 6)</p>
Social and financial inclusion	<p>That the social and economic contribution, impacts and scale of caring are recognised, understood and reflected in local and national policy making across all areas.</p> <p>Carers are able to access the financial support and assistance to which they are entitled.</p> <p>Carers are able to take up or maintain employment and education alongside caring if they wish to do so.</p> <p>Carers can participate in and are valued by their community and wider society.</p>
Young carers	<p>Young carers are supported and protected from inappropriate caring and negative impacts on their education, social lives and future opportunities.</p> <p>Young adult carers are supported when moving from education to training and work while balancing an ongoing caring role.</p>

## The Edinburgh Joint Carer Strategy 2023-2026

The Carers (Scotland) Act 2016 requires that each local authority and relevant health board must jointly publish a local carer strategy and review this within 3 years. Once the review has been carried out, with the views of carers taken into account, they may prepare a revised or refreshed local carer strategy, or, where they do not prepare a revised strategy, publish a statement to that effect.

This refreshed strategy was developed by a group who report to the Edinburgh Carer Strategic Partnership Group, (CSPG), whose membership includes carer organisations, EHSCP and CEC services and strategic managers, Director of Planning, Performance and Evaluation, and EIJB Carer representative. The CSPG is led by the Strategic Programme Manager for Older People, Carers and Dementia. The refreshed strategy is the result of collaboration and wide engagement with carers, supported people and other key stakeholders (see appendix 11 for more details on the consultation). It is based on a set of Key Principles:



Other key drivers that have influenced the content and direction taken in developing this refreshed strategy have included:

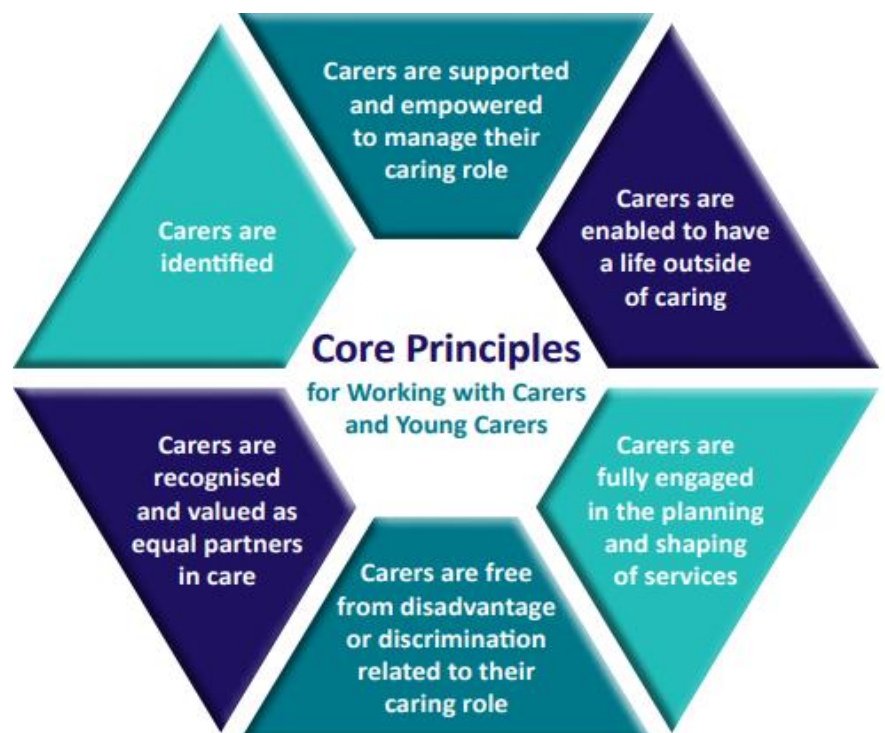
- The carer voice being heard through various routes, and engagement with stakeholders.
- A commitment to continuing to work with the voluntary sector, working closely with all other sectors, including ever-closer working with Primary Care.
- A priority to support carers in greatest need through early identification, needs assessment, and referrals to support in order to prevent crisis, build carer resilience and allow people to have more good days.
- The view that carers should not be worse off by caring and are clear about the support they are entitled to.
- To ensure carers with complex and different needs will have those assessed and met through equal access to services and support.

### **The EPiC Approach**<sup>5</sup>

Edinburgh's Joint Carers Strategy shall continue to encompass the EPiC principles as described below as it has throughout the 2019-2022 Carer Strategy:

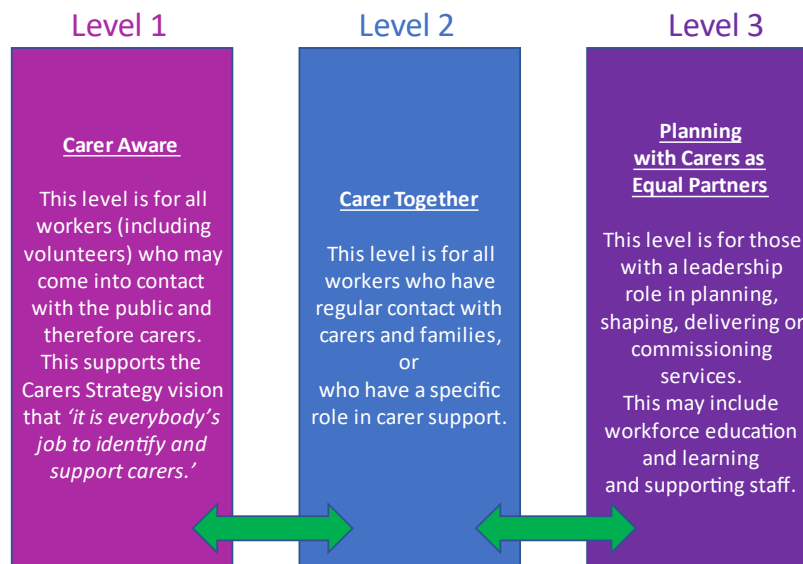
The core EPiC principles were developed through consultation with carers, health and social services workers, carer organisations, workers involved in training and education, employers, managers, regulatory and professional bodies, and other key stakeholders. They are intended to make sure that workers from different settings have shared understanding of partnership working with carers of all ages.

These were initially informed by the vision of the Carers Strategy 2010-15 and are based on proposed outcomes for all carers (diagram right). Each outcome highlighted intends to highlight the necessary requirements and skills of workers to effectively support carers.



<sup>5</sup> [EPiC Principles.pdf](#)

The principles comprise 3 levels designed to interact with each other (diagram below). “Every worker or volunteer who may come into contact with carers in any setting should have at least Level 1 awareness of carers. Those with more regular contact with carers should also have Level 2, while those with a leadership role should also have Level 3”.



Movement across these levels is directed by a worker or volunteer's level of involvement, rather than by their specific job or role. Embracing this will ensure we develop an equal partners' culture where carers are identified and valued as such.

### **Edinburgh's Alignment with the Emerging Getting It Right for Everyone (GIRFE) Approach**

As Edinburgh's Carer strategy is person centred, there is clear alignment with the emerging national approach for getting it right for everyone, which is drawing on the learning from Getting it Right For Every child. The working principles are currently:

- Focused on individual care needs
- Based on an understanding of the physical and mental well-being of individuals in their current situation
- Based on early intervention
- Requires joined up working/information sharing
- Based on a human rights approach

The approach looks across the whole system, to improve the experience for individuals, with the key elements including: prevention, reducing inequalities; community building, ensuring as much care and support can occur out with hospitals; enhancing quality to improve outcomes and sustaining services and supports by effective and efficient use of available resources. As the

GIRFE approach further develops, the key aspects will be embedded in the ongoing implementation and development work associated with this strategy.

**Edinburgh’s Alignment with the National Carer Strategy, December 2022**

The National Strategy indicates the key actions required in order to achieve the national strategic outcomes. In Edinburgh, as the refreshed Carer Strategy 2023-26 has been developed, with the following steps taken:



This section highlights the National Carer Strategy themes and national outcomes, the organisational outcomes for partner organisations within each theme and personal outcomes for each theme and a descriptor of what these mean for carers. There is an indication of what Edinburgh will do, to contribute to the outcomes overall. The majority of the action is, and will continue to be applied through commissioned and internal health and social care provision, with other key contributions coming from the wider carer supports, networks and communities.

Key system wide developments required will be led through the Carer Strategic Partnership Group, applying their recognised multi agency short life working group approach as resources allow.

The outcomes are aligned with the Edinburgh Carer Outcome Framework, which started development in late 2022.

### **National Strategic Outcomes:**

- Carers feel confident and supported to protect themselves from COVID-19-19.
- Carers and the people they care for feel supported and confident to re-engage with their communities.
- Carers are supported to recover from the negative impacts of COVID-19-19.

### **Organisational Outcomes**

- Carers are identified as close to the start of their caring journey as possible.
- Carers are recognised as a priority group in their own right for future public health emergencies.
- Public, private and voluntary sector agencies are COVID-19-19 prepared for rapid response(s).

### **Personal Outcomes**

- Adult Carers feel better supported to protect themselves from COVID-19-19.
- Adult Carers feel more confident to socially re-engage in a post COVID-19-19 world.
- Adult Carers feel supported in their recovery from COVID-19 19.

Living with COVID-19-19 demands a flexible approach and an ability to respond quickly and decisively. There is no absolute certainty in what lies ahead, but by carefully monitoring the situation and having in place effective contingency plans, we can reduce risk and harm in more proportionate and less restrictive ways.

We must maintain and improve our strategies to:

- Optimise people sustaining immunity and enhance the availability of, and access to treatments.
- Support carer providers to adapt behaviours and physical environments.
- Monitor risk from the virus and develop contingency plans.

### Why this is important

All adult carer groups have been significantly affected by the pandemic. For example, there was suspension of short breaks/breaks from caring; participation in training/education; reduced employment opportunities and cessation of assisted transport services during the initial lockdown from March 2020. In Edinburgh, some services have not remobilised, with recruitment of staff proving extremely challenging. Others have been reinstated fully or partially, and in some cases took until late 2021 to be back at the level of service offered pre-pandemic, as staffing levels and safety restrictions have allowed.

This was evidenced locally by an EVOC [review](#) of support with travel and short breaks and breaks from caring for adults with disabilities or additional support needs and those that care for them, published in December 2021<sup>6</sup>, which has informed ongoing work where

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<sup>6</sup> <https://www.evoc.org.uk/wordpress/wp-content/media/2021/12/Getting-About-Getting-A-Break-Phase-1-DEC-2021.pdf>

commissioners have worked with carers, and providers to consider alternative options, optimising the national approach of promoting choice and variety.

**Short & Long-Term Impact**

It is understood that short term impacts of COVID-1919 on all adult Carers included; the rapid suspension of all building-based services and delays to medical treatment and operations for cared for people; the non-viability of breaks from caring; increased caring role and increased caring hours; and a decrease in formal supports and care at home services. Loneliness, isolation, anxiety, loss of face-to-face emotional support, and difficulties around maintaining education, employment and income had a major impact on unpaid carers of all ages and backgrounds as a result.

Many of these short-term impacts have moved into long term impacts. Many supports and services for adult carer groups specifically have returned, and in some cases increased within the city. Services for the cared for person, especially day opportunities, replacement care and short break options have not yet all returned to the level they were at prior to the pandemic. This is now impacting on carer mental health and wellbeing, increasing exhaustion, loneliness/isolation, and the risk of burn out and break down across all groups.

In the long term, the cared for persons’ condition is likely to have progressed and the caring role to have increased in relation to this. Meanwhile the demand for carer support planning and assessment for the cared for person is increasing too.

**Living with COVID-19-19: How Edinburgh will contribute to the Outcomes**

<p>Living with COVID-19-19 National Outcome 1.1:          “Carers feel confident and supported to protect themselves from COVID-19-19”</p>	<p>EJCS          Priority</p>
<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Commit to support the national carer identification and registration system.</li> <li>• Continue the collective Carer Awareness Raising programme targeting all sectors.</li> <li>• Continue to ensure that accurate and up to date information is available to carers</li> <li>• Develop information in accessible formats to support carers to improve their wellbeing.</li> </ul>	<p>1,2,3</p>

<p>Living with COVID-19-19 National Outcome 1.2:          “Carers and the people they care for feel supported and confident to re-engage with their communities”</p>	<p>EJCS          Priority</p>
<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Work with providers to build confidence in the preparedness of their support.</li> </ul>	<p>2</p>



<ul style="list-style-type: none"> <li>• Commit to introduce specific prompts in the ACSP guidance around COVID-19 19.</li> <li>• Encourage all carer support providers to have the key aim of ensuring support for the ‘cared for’ person returns to and surpasses, pre-COVID-19 levels, using their wide network of community intelligence to optimise community engagement</li> <li>• Review provision of assisted transport and day support services for the cared-for and seek to ensure that these returns to pre-covid levels as a minimum or alternative services are put in place</li> </ul>	
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<p>Living with COVID-19-19 National Outcome 1.3: “Carers are supported to recover from the negative impacts of COVID-19-19”</p>	<p>EJCS Priority</p>
<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Continue to promote unpaid carers in Edinburgh being treated on a par with paid carers in relation to COVID-19 and treated as equal partners in care.</li> <li>• Commit to develop stronger links with Primary Care and public health information, on their developments, to support carers, and to optimise link worker availability.</li> <li>• Build on the EPiC and <i>Think Carer</i> training programme in the city as a key element of core training for Primary and Secondary Care Staff, and wider where possible.</li> <li>• Promote carer access to and awareness of self-directed support (policy/ information and advice).</li> <li>• Continue the offers of health and wellbeing supports to all carers and enhance those where possible.</li> <li>• Continue to have a focus on recovery support to all carers, this may be practical, physical, financial, social, or mental and emotional supports.</li> <li>• Consider all <i>Living With COVID-19</i> outcomes in the development of a Young Adult Carer Action Plan</li> </ul>	<p>3</p>

## National Theme 2 – Valuing, Recognising and Supporting Carers

### National Strategic Outcomes:

- Carers are recognised and their contribution is understood and valued by society.
- Carers' voices are heard and their views and experiences are taken into account in decisions which affect them.

### Organisational Outcomes

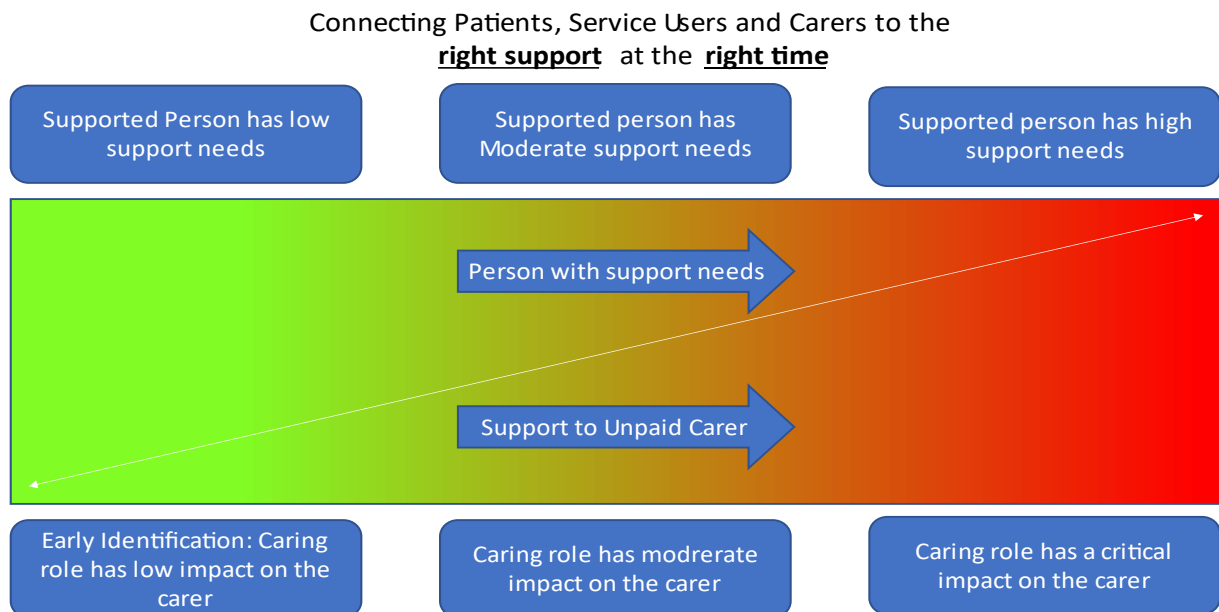
- Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support.
- Carers needs are understood within the system and it works better for their needs.
- Services and supports are designed and improved based on what carers tell us is important and their ongoing feedback.

### Personal Outcomes

- Carers feel welcomed, valued and listened to and heard as individuals.
- Carers have the capacity to engage and take action.

## 2.1 Recognising Carers

Identifying carers as early as possible in their caring role and providing the right support at the right time has been a priority in previous national and local Carer Strategies.



In Scotland, 15% of the population have a caring role.<sup>7</sup> Public recognition of carers' role as 'equal partners in care', early carer identification by practitioners, especially in Primary Care and Hospital Discharge settings<sup>8</sup>, and automatic referral to carer support agencies are critical pre-conditions for preventive support, good information and carer health, wellbeing and resilience.

Most carers can take years to recognise their role<sup>9</sup>. Over-reliance on self-identification all too often means that carers are not identified until they are struggling or in crisis when caring relationships are at risk of breaking down and when the situation places additional pressures on families, employers, health and social care and hospital systems.

Critical to a prevention approach and early carer support are the responsibilities of practitioners, such as GPs<sup>10</sup> and the evolving role of GP receptionists and wider Primary Care workers, front line health and social care staff and employers. They play a critical part in systematic identification of people with a caring role. It has been indicated that previous perceived barriers to identifying carers, such as lack of awareness, knowledge, time, and fears of breaching confidentiality<sup>11</sup> cannot be accepted as factors preventing systematic carer identification and referral for assessment.

The Carers (Scotland) Act 2016 requires practitioners in community and acute sectors to offer an Adult Carer Support Plan (ACSP) to any carer they identify, yet a 2019 Coalition report<sup>12</sup> suggests only 16% of carers surveyed knew about the legislation and the rights it provides. Slow implementation of the Act and the impact of the COVID-19-19 pandemic have exacerbated the situation. Service suspension and the redeployment of health and social care staff eroded many established carer referral pathways. This, combined with an estimated 400,000<sup>13</sup> carers taking on new caring roles during the pandemic, had a cumulative effect requiring urgent attention.

Extensive evidence from carers suggests that early identification leads to improved personal outcomes – particularly in their financial, emotional and social wellbeing. A 2016 Carers UK report<sup>14</sup> found 91% of carers missed out on financial or practical support (or both), as a result of not identifying as a carer, and carers responding to VOCAL's Carer Survey 2017<sup>15</sup> were more likely to report a positive outcome if they had accessed support.

Evidence also suggests parent carers, mental health carers and distance carers<sup>16</sup> take longer than average to identify their role. Additional barriers can be cultural or influenced by socio-economic factors, language, sexuality, dynamics of the caring relationship or nature of the caring role. People with less intense or 'stereotypical' caring roles; caring roles that increase over time or concerns about diminishing the independence of the person they care for by identifying as their carer<sup>17</sup> – are all factors which make carer identification a personal and complex issue. The term itself can also be problematic, with some feeling it can imply dependency, burden or even an obligation to care<sup>18</sup>.

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<sup>7</sup> Scottish Government Survey 2019-20; <https://www.gov.scot/publications/health-care-experience-survey-2019-20/pages/8/>

<sup>8</sup> <https://bmcfampract.biomedcentral.com/articles/10.1186/1471-2296-15-48>

<sup>9</sup> Carers UK, Missing out report; <https://www.carersuk.org/for-professionals/policy/policy-library/missing-out-the-identification-challenge>

<sup>10</sup> General practices contractually required to have protocol for carer identification; <https://bmcfampract.biomedcentral.com/articles/10.1186/1471-2296-15-48>

<sup>11</sup> [https://www.macmillan.org.uk/\\_images/doyoucarehelpinghealthprofessionalstoidentifyandsupportcarers\\_tcm9-271232.pdf](https://www.macmillan.org.uk/_images/doyoucarehelpinghealthprofessionalstoidentifyandsupportcarers_tcm9-271232.pdf)

<sup>12</sup> Coalition of Carers in Scotland 2019; [www.carersnet.org](http://www.carersnet.org)

<sup>13</sup> Carers UK. June 2020. <https://www.carersuk.org/news-and-campaigns/news/COVID-19-19-pandemic-392-000-become-unpaid-carers-in-scotland-in-a-matter-of-weeks>

<sup>14</sup> Carers UK, Missing out report; <https://www.carersuk.org/for-professionals/policy/policy-library/missing-out-the-identification-challenge>

<sup>15</sup> VOCAL 2017 survey; <https://www.vocal.org.uk/news/survey2017reports/>

<sup>16</sup> Carers UK, Missing out report; <https://www.carersuk.org/for-professionals/policy/policy-library/missing-out-the-identification-challenge>

<sup>17</sup> [Hidden caring, hidden carers?](#)

<sup>18</sup> Carers UK, Missing out report; <https://www.carersuk.org/for-professionals/policy/policy-library/missing-out-the-identification-challenge>

This diversity of caring situations and the significant increase in new carers during the pandemic, demands better awareness of what motivates carers to identify and seek support, and requires more systematic referral pathways and more informed and ambitious carer identification strategies. During the pandemic, the ‘Carer ID’ and vaccination letters, alongside the promotion of increased short breaks funding, encouraged record numbers of new carers to self-identify<sup>19</sup> – highlighting the value of incentivised self-identification<sup>20</sup>. Digital tools have transformed and underpinned services and support for carers over the last year. More carers are engaging with support digitally and there is greater expectation for seamless online experiences and quick access routes into support.

To increase carer identification, Edinburgh planning partners can build on good practice over many years and need to rebuild the systematic and methodical carer identification at the health and social care, Primary Care and hospital discharge interface.

**Recognising Carers: How Edinburgh will contribute to the Outcomes**

Actions to Recognise Carers	EJCS Priority
<p>In Edinburgh, carers will be identified early in their caring role, and we will....</p> <p>(a) undertake a range of measures to aid carer self-identification:</p> <ul style="list-style-type: none"> <li>• Promote positive images of caring in the city in all local communities, with employers and through public and private sector agencies, to reach people of all ages and raise awareness of carers’ rights to support.</li> <li>• Promote self-referral.</li> <li>• Continue to identify, support and refer carers as part of hospital discharge planning.</li> <li>• Encourage all partners and carer support agencies to practice systematic carer identification and referral.</li> </ul> <p>(b) in partnership with third, private and educational sector agencies we will:</p> <ul style="list-style-type: none"> <li>• Continue to work in partnership with higher and further education establishments to support and identify carers.</li> <li>• Continue to develop links with employers to support and identify carers.</li> <li>• Work ever-more closely with Primary Care and GP receptionists to help identify carers.</li> <li>• Determine the best way to deliver <i>Think Carer</i> training to health, social care, education and private sectors to encourage early identification and onward referrals to supports and services</li> </ul> <p>(c) within the H&amp;SCP we will provide training for frontline staff to raise awareness that recognition and early intervention is integral to their roles, and they are clear about the duties and responsibilities in relation to the Carers Act and have a good awareness of the carer support team and wider support available</p>	1,2,5
<p>In Edinburgh, carers will be referred to support agencies early in their caring role and we will....</p>	2,3,5

<sup>19</sup> <https://www.vocal.org.uk/wp-content/uploads/2021/11/Edinburgh-Report-2021.pdf>

<sup>20</sup> NCO Scottish Election Manifesto 2021 calls for a new national carer card [nco-carers-manifesto-for-scottish-parliament-election-2021.pdf](https://www.nco.org.uk/wp-content/uploads/2021/03/nco-carers-manifesto-for-scottish-parliament-election-2021.pdf)

(a) in partnership with health, social care, children, education, justice and partner agencies

- Reinforce the benefits of methodical carer identification at GP practices, health centres, and health and social points of contact.
- Strengthen referral pathways and establish more systematic carer referral by health and social care services to carer support agencies.
- Increase engagement from minority ethnic and migrant carers across mainstream carer supports so that who we support, better reflects our local communities<sup>21</sup>
- Strengthen referral pathways between all professionals involved in diagnosis and identification of children affected by disability and Carer Support services.
- Undertake a mapping exercise and establish follow-up actions to ensure parent carers are connected to carer supports

(b) in partnership with employers

- Work with employers in the city to develop carer identification and support, making use of Scotland's *Carer Positive* programme and Edinburgh's *Think Carer* training.
- Identify and support carers following referral from employers.
- Consolidate and expand the employers' network in the city.
- Strengthen referral pathways with *Carer Positive* employers.
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## 2.2 Valuing Carers

As equal partners in care, carers views, experiences and aspirations must shape all aspects of care planning for their individual caring situations and health and social care services. Carer policy and service planning must be carer-led.

Carers will be fully engaged in the development, monitoring and review of their personal outcomes and adult carer support plans, to support their individual caring situation.

Planning partners will draw on carer needs and aspirations, as indicated by the reality of demand for support, and information provided through the adult carer support plans, and work with providers to analyse trends and directions for future support and service developments.

Every two years, carers will have the opportunity to engage in a wide-ranging survey, sponsored by the health and social care partnership. The survey will seek views on their satisfaction of supports, services and future needs, aiming to reach 15,000 carer households. This survey is a joint initiative of all Edinburgh planning partners, developed and analysed with polling experts, to inform future planning.

Planning partners will contribute local intelligence to the Scottish Government's Carer Census and other national studies. Locally, we will integrate census findings, trends and developments from carer statistics and research published by the Scottish Government, national carer organisations, academic institutions and agencies who regularly consult carers.

Planning partners will continue to commit to engage carer representatives and local carer organisations in planning for carers, including the Edinburgh Integrated Joint Board, associated committees, and planning fora emerging from health and social care reviews.

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<sup>21</sup> <https://www.scotlandscensus.gov.uk/census-results/at-a-glance/ethnicity/>

## Valuing Carers: How Edinburgh will contribute to the Outcomes

Actions to value carers.	EJCS Priority
<p>In Edinburgh, carer policy and support will be evidenced by national and local data of carer need and we will....</p> <ul style="list-style-type: none"> <li>• Undertake a bi-annual survey of carers' needs, aspirations and satisfaction with health and social care supports, starting in 2023.</li> <li>• Include within the carer support planning, systematic recording of the carer's ability and willingness to care, with identified measures to complement the carer's contribution of care with additional care support, against their assessed need.</li> <li>• Embed Self-directed Support options in all carer conversations and care planning, increasing the number of unpaid carers each year to consider the SDS options, to support implementing new measures contained in Scottish Government Self-directed Support (SDS) Guidance.</li> </ul>	2,3,4,5,6
<p>In Edinburgh, evidence-based research will inform the development of carer support planning and we will....</p> <ul style="list-style-type: none"> <li>• From available data sources, including carer surveys and analysis of ACSP, identify the main areas and trends of unmet need, and invest available resources to enhance support in these areas.</li> <li>• Increase engagement from minority ethnic and migrant carers so that who we support, better reflects our local communities.</li> <li>• Encourage the carer focus and impact assessment on carers in wider areas of planning, including housing, transport, etc.</li> <li>• Work with City of Edinburgh Council to encourage 'Carer Positive' criteria to commissioned services.</li> </ul>	2
<p>In Edinburgh, carers are equal partners in care and carers will be represented on all strategic and service planning boards, committees and appropriate fora. We will also</p> <ul style="list-style-type: none"> <li>• Consider how carer representatives on the Edinburgh IJB and other committees can be better supported.</li> <li>• Consider how and where carers can be more visible and involved in strategic planning, and have their voices heard through community conversations</li> </ul>	2,3

### 2.3 Supporting Carers: Carer Health & Wellbeing

Improved carer health and wellbeing is a key outcome that will matter to many carers, and may be improved through receiving a range of supports, which may include timely information and advice, person-centred support, peer support and training, emotional support and counselling, and regular breaks from caring. This chapter sets out measures to continue to improve the Edinburgh offer to carers although it is recognised that carers' health may deteriorate for a number of reasons not related to their unpaid caring role.

## Information, advice and transitions

Carers seek different information at various stages in their caring journey, pre-diagnosis, following diagnosis and at times of change and transitions when choices needed to be made<sup>22</sup>. Transitions or changing circumstances can impact caring responsibilities and affect the wellbeing of adult carers, young adult carers, young carers or cared for people. Changing circumstances may be short or long term and relate to a number of factors, including age, moving on to high school, leaving school, adults becoming carers for their parents, death of a parent resulting in siblings becoming carers, carers moving into retirement, moving home, change of income, moving towards long term care or hospital, illness or caring for people with terminal conditions, etc. A carer's income and housing situation may also be impacted due to changes in circumstances of the cared for person, for example if the person goes into care or dies. Information and financial advice is a key priority of the Strategy.

For young carers and young adult carers, life beyond school can be a daunting prospect and this transitional change and the options for consideration can feel particularly overwhelming. Young carers and young adult carers have the same hopes as other young people; to have a voice, a social life, to be involved and to participate as active, included and valued citizens. Young carers and young adult carers often require additional support in the different areas of their lives, for example, moving from school to further education or employment, benefits, welfare and/or housing support.

The range of information carers seek is varied<sup>23</sup> and can include navigating complex health and social care systems: financial advice; legal advice (e.g., on employment or Power of Attorney); information on balancing education or employment with the caring role; re-entering employment; relationship changes, coping skills and managing challenging behaviour; on end-of-life care and other difficult areas of their lives.

The Carers Scotland Act 2016 strengthened carers' rights to support, introduced requirements on local authorities to ensure carers can access information and advice and made it a duty on authorities to offer carers a 'carer support plan' (known as an adult carer support plan, or a young carer statement) to enable them to identify their own needs and personal outcomes.

Enabling carers to develop and implement a support plan to improve their personal outcomes and make caring more sustainable, the adult carer support plans and young carer statements have been in use in Edinburgh for some years, with the adult carer support plans having even wider implementation across agencies in 2023. This follows a series of developments, and testing of the plan, with carer agencies, and the national Carer Strategy being key to the finalisation of the document.

Evidence shows carers benefit from conversational, person centred, asset-based support to identify and achieve personal outcomes<sup>24</sup>. This approach has increasingly been practiced by many third sector agencies. Self-directed support brokerage, the three conversations model<sup>25</sup> and other innovative practices have been introduced in Edinburgh to promote more holistic approaches to carer support.

It is acknowledged however that it can often be challenging for the carer if the cared for person is not assessed as eligible for support.

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<sup>22</sup> [Training for Carers \(iriss.org.uk\)](http://iriss.org.uk)

<sup>23</sup> [Scotland's Carers - gov.scot \(www.gov.scot\)](http://www.gov.scot)

<sup>24</sup> Cook, A. and Miller, E. *Talking Points Personal Outcomes Approach: A practical guide for organisations*. Edinburgh, Joint Improvement Team. 2012. Available for download at: <http://www.ccpscotland.org/wp-content/uploads/2014/01/practical-guide-3-5-12.pdf>

<sup>25</sup> [Partners4Change home – Conversations that change lives](#)

Carers report lack of support, feeling isolated, worried about their capacity to care and lack of time to focus on themselves<sup>26 27</sup>. Unsurprisingly, that many carers say caring adversely affects their health and wellbeing<sup>28 29</sup>. A 2016 study found carers had a considerably lower health and wellbeing score compared to the national average (18.9 compared to 23.6) with 20% considering themselves to have a mental health condition. More recent research shows this situation has further deteriorated<sup>30</sup> and carers have sought higher levels of emotional support and presented more complex situations.

Access to adequate replacement care for the cared-for person (so that carers are only providing the care that they are willing and able to provide) is intrinsically linked with a carer's own health and well-being. Despite investment to the replacement care budget through the Edinburgh carer spend plan over-stretched health and social care budgets, and the current national social care staffing crisis means that some carers are unable to access the replacement care they need to maintain their own health and wellbeing.

### **Training, learning and peer support**

Carers need accurate and timely information to plan, deliver and coordinate care and this has been well documented in research and policy for many years<sup>31</sup>. Early policy commitments are set out in the 'New Deal for Carers' in the 2006 White Paper 'Our health, our care, our say'<sup>32</sup>, which committed to a national carer training programme 'Confidence in Caring'<sup>33</sup>.

More recent studies confirm the important role carer training in increasing caring knowledge, confidence and competence, both from experts and peer learning elements of training.

Positive outcomes from the pandemic include the development and wide-spread use of online digital platforms and the growth of digital training offers, which increasingly serve many carers well. Post-pandemic, hybrid training approaches must become the norm, offering carers the options to participate in person or digitally.

Carer health and wellbeing are critical for sustaining caring relationships and quality of life. This is mirrored by growing carer demand to engage in training and personal development opportunities.

Carers regularly report how much they value opportunities to meet and hear from other carers. Peer support helps reduce the sense of isolation many carers face in their caring role and encourages peer to peer support, with evidence of powerful benefits<sup>34</sup>.

### **Emotional support**

The emotional impact of caring for a close relative or friend – child, adult or older person, often with various levels of disability – is well documented, internationally and in the UK: Caring often leads to social isolation, changing relationships, feelings of guilt and loss, distress and a sense

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<sup>26</sup> [The Health and Wellbeing of Unpaid Carers - Carers UK](#)

<sup>27</sup> [Scotland's Carers - gov.scot \(www.gov.scot\)](#)

<sup>28</sup> [Who cares for the carer? The often forgotten patient | Australian Family Physician \(informat.org\)](#);

<sup>29</sup> [2020 Vision: Hear Me, See Me, Support Me and don't Forget Me. - Resources - Carers Trust](#)

<sup>30</sup> <https://www.carersuk.org/news-and-campaigns/campaigns/caring-behind-closed-doors>

<sup>31</sup> [www.carersuk.org/images/News\\_and\\_campaigns/Behind\\_Closed\\_Doors\\_2020/Caring\\_behind\\_closed\\_doors\\_Oct20.pdf](https://www.carersuk.org/images/News_and_campaigns/Behind_Closed_Doors_2020/Caring_behind_closed_doors_Oct20.pdf)

<sup>32</sup> [Meeting carers' information needs | Carer Research and Knowledge Exchange Network \(CAREN\) \(open.ac.uk\)](#).

<sup>33</sup> [Our health, our care, our say: a new direction for community services - GOV.UK \(www.gov.uk\)](#)

<sup>34</sup> [Caring with confidence: new programme for carers - Carers UK](#)

<sup>34</sup> [Understanding the impact of peer support | Nesta](#)



of being overwhelmed. All can contribute to despair, hopelessness, anger or resentment of the situation. <sup>35, 36, 37, 38,</sup>

The 2019 State of Caring report by Carers UK (pre-COVID-19) found that, in pre pandemic conditions, nearly two thirds of carers (63%) were feeling more stressed because of their caring role and 55% reported that it had an impact on their health and wellbeing. 27% of carers reported 'bad' or 'very bad' mental health. The survey also revealed that 93% of carers reported feeling lonely and isolated because of their caring role. The 2019 report went on to highlight that carers are seven times more likely to say they are always or often lonely compared with the general population. This research report also evidenced carers experiencing levels of anxiety nearly twice as high as the general population.

Locally, growing carer demand for counselling has been reflected in increased referrals and self-referrals to carer Counselling Services since 2013.

VOCAL's 2017 survey (reporting base 915 carers) highlighted the increased importance carers place on counselling: 29% found emotional support and counselling to be one the most useful services. 59% of carers reported "being a carer has made my health worse", with 49% of carers reporting that they had experienced depression since becoming a carer. The 2021 survey<sup>39</sup> further shows how the loss of support services and breaks from caring increased the sense of isolation, the impact on their emotional and mental wellbeing and significantly increased levels of stress, worry and helplessness.

**Digital Support**

The restrictions due to COVID-19, advancements in technology and cultural shift have led to an ever- increasing reliance on digital technology. The important role which digital access plays in maintaining health and wellbeing is well recognised and the negative consequences of being digitally excluded are worse than ever. It is therefore important that encouragement and assistance is provided to those who need help in making the transition to the use of digital technology, or that non-digital service provision is provided where required and appropriate.

**Supporting Carers: How Edinburgh will contribute to the National Outcomes**

Actions to Support Carers.	EJCS Priority
<p>In Edinburgh, carers health and wellbeing are supported throughout their caring journey, and we will....</p> <ul style="list-style-type: none"> <li>• Work, through the variety of improvement and service development plans to ensure appropriate and adequate services are in place for cared for person to enable carers to only provide the care that they are willing and able to do, through replacement care.</li> <li>• Encourage City of Edinburgh Council, as part of their overarching commissioning principles, to include carer positive criteria to encourage organisations to demonstrate</li> </ul>	2,3,4,5,6

<sup>35</sup> The Impact of Caring on Family Carers. OECD 2011. <http://www.oecd.org/els/health-systems/47884865.pdf>  
<sup>36</sup> Psychological Distress in Carers of People with Mental Disorders. BJMP 2011. <http://www.bjmp.org/content/psychological-distress-carers-people-mental-disorders>  
<sup>37</sup> State of Caring. Carers UK 2019.  
<sup>38</sup> The experiences of therapy from the perspectives of carers of people with dementia: An exploratory study. Ruth Elvish, Rosanne Cawley & John Keady. 2013. <http://www.tandfonline.com/doi/pdf/10.1080/14733145.2013.768284>  
<sup>39</sup> <https://www.vocal.org.uk/news/carer-survey-2021/>

<p>that they have flexible working contracts for their employees who may have an unpaid caring role.</p> <ul style="list-style-type: none"> <li>• Refer carers who experience barriers to digital inclusion, to organisations who can assist to remove those barriers.</li> <li>• Consider the transition pathway for young/ adult/young adult carers and use findings to make improvements and support carers to plan successful transitions and change at all life junctions.</li> </ul>	
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<p>In Edinburgh, we want carers to report improved health and wellbeing and we will....</p> <ul style="list-style-type: none"> <li>• Progress with the carer outcomes measurement framework developments.</li> <li>• Continue to collect data on commissioned carer contracts.</li> <li>• Include findings from the wider Carer Landscape in Edinburgh Action Research (CLEAR) to inform reports.</li> <li>• Support the carer census data collection exercise and learn from findings in this area.</li> <li>• Report upon data drawn from outcome focussed adult carer support plans.</li> <li>• Continue work to increase access to health and wellbeing services and support for carers across all agencies, within available resources.</li> <li>• Consider all <i>Valuing, Recognising and Supporting Carers</i> outcomes in the development of a Young Adult Carer Action Plan</li> </ul>	2,3
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### National Theme 3 – Health & Social Care Support

<p><b>National Strategic Outcomes:</b></p> <ul style="list-style-type: none"> <li>• People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on the own health and wellbeing. (National Health and Wellbeing outcome 6)</li> </ul> <p><b>Organisational Outcomes</b></p> <ul style="list-style-type: none"> <li>• Carers are supported to look after their own physical, mental, emotional and social wellbeing.</li> <li>• Carers are supported to have a life outside and/or alongside their caring role.</li> </ul> <p><b>Personal Outcomes</b></p> <ul style="list-style-type: none"> <li>• Carers feel listened to and heard as individuals.</li> <li>• Carers feel well supported throughout their caring journey.</li> <li>• Carers feel safe, rested and recharged.</li> <li>• Carers feel that they have choice and control over their services and supports.</li> <li>• Carers feel supported to maintain their caring relationships and sustain their caring role.</li> <li>• Carers build relationships with and gain peer support from other carers and families.</li> <li>• Carers access the right supports at the right time, including taking breaks from their caring role.</li> <li>• Carers report improved physical and mental wellbeing.</li> <li>• Carers report improved social participation and wellbeing.</li> </ul>
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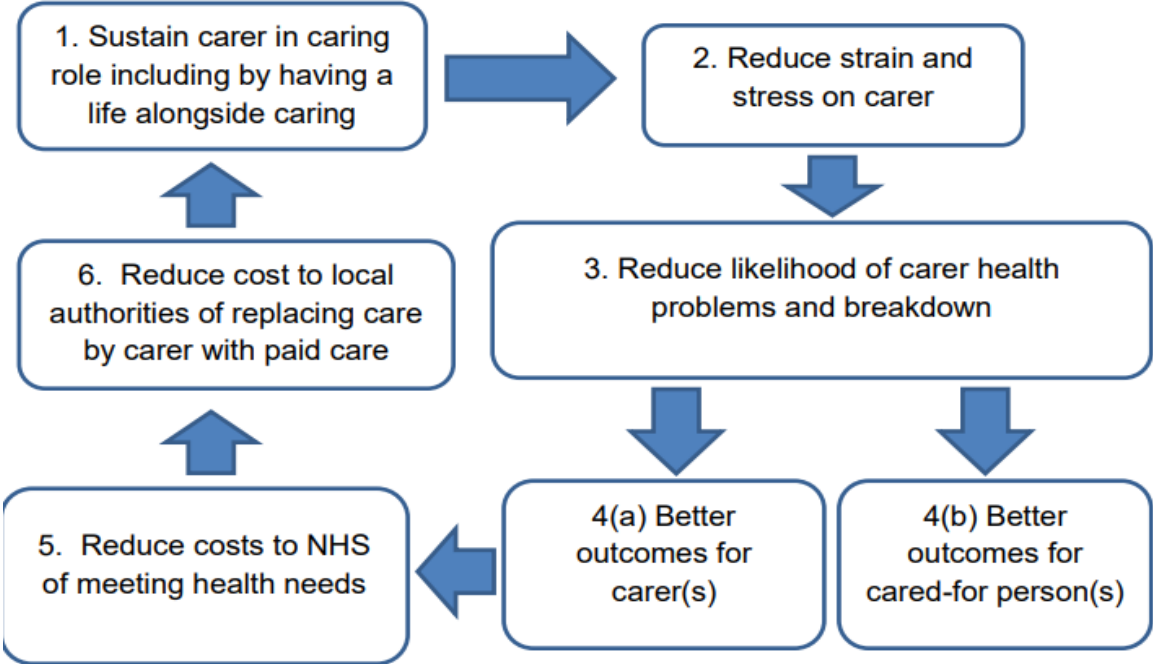
This refreshed carer strategy is primarily intended to take the requirements stipulated in The Act and to translate these into local plans of action. In Edinburgh, this strategy should also be used to inform how other public services are planned for and delivered, thus taking a more holistic view around carer support. This will be important in areas of strategic and operational development currently underway in Edinburgh, emerging from inspection improvement and development plans, service reviews, and strategic capacity and demand work, ensuring carer support is embedded in the fabric of the city. The National Carer Strategy helpfully indicates synergy with various parallel National Strategies and associated actions, which will also encourage a carer focus across all these associated areas, including:

<b>Edinburgh Carer Strategy</b>	<b>Carers reflected in other Local Strategies</b>	<b>Carers Reflected in other National Strategies</b>
Carers Act	Charging for Adult Social Care	Older People’s Health and Social Care Strategy
Breaks from Caring	Carers and Housing	Palliative and End of Life Care Strategy
Self-Directed Support	Mental Health (ACES & Trauma)	National Dementia Strategy
Carers, Hospitals & Healthcare	Whole Family Wellbeing Funding	Supporting the Scottish Strategy for Autism
Social Care and National Care Service	Supporting Disabled Children, Young People, and their families	Supporting the Learning Disability Strategy
Improvement Plans associated with inspections, operational and strategic reviews and developments	Carers and Mental Health	Neurological care & support: action framework 2020-2025
	British Sign Language	National Drugs Mission
		Supporting the sensory impairment strategy
	Thrive Edinburgh	Mental Health and Wellbeing Strategy

For people with learning disabilities or autism, mental ill-health, drug and addiction issues, sensory impairment or who are older and have dementia, their unpaid carer is never usually far behind. However, until the Carers (Scotland) Act (2016) was introduced, many carers struggled on doing the best they could, unaware of the importance of their work, or of the support that was available, with little or no breaks, or the sense of having a life of their own. As highlighted in this strategy, such situations would often leave the carer in desperate situations with their mental health impacted, employment or training opportunities out of reach, relationships strained, with them often feeling burnt out and unable to cope.

Across Scotland approximately 1 in 5 of the population have a caring role whose dedication and hard work is reported to save local authorities in the region of c.£10.8bn per year<sup>40</sup>. Unpaid Carers therefore play a significant role not only in the support of people with health and social care needs, but in preventing or delaying the need for costly packages of care to be introduced.

Demands and pressures on our Health and Social Care system are projected to increase significantly in coming years<sup>41</sup>, and the impact in Edinburgh has been highlighted through the Edinburgh Joint Integration Board. Against a backdrop of an ageing population and challenging financial circumstances, directing the right support to carers at the right time will be critical in preventing carers and families from reaching crisis point. This will also ensure the health and social care system continues to deliver support to those with the highest need for it. The need therefore to establish what support a carer needs, if they are to feel able and willing to continue in their caring role, is an imperative now and for the future. The benefits associated with sustaining unpaid carers in their caring roles, including having a life alongside caring, is indicated below:



**3.1 The Carer (Scotland) Act 2016 – “The Act”**

*“The Act<sup>42</sup> aims to ensure carers have choice and control and can access preventative support to protect their wellbeing and keep caring situations manageable. It puts in place a system of carers’ rights designed to listen to carers; expand and transform carer support; and prevent*

<sup>40</sup> [Improved support for Scotland’s unpaid carers - gov.scot \(www.gov.scot\)](http://www.gov.scot)

<sup>41</sup> <https://www.gov.scot/publications/independent-review-adult-social-care-scotland/pages/2/>

<sup>42</sup> [Carers \(Scotland\) Act 2016 \(legislation.gov.uk\)](http://legislation.gov.uk)

*problems – helping sustain caring relationships and protect carers’ health and wellbeing”. – National Carer Strategy*

A central tenet of The Act, through the Carers Charter<sup>43</sup> was the introduction of the carer’s right to an **Adult Carer Support Plan (ACSP)** or, in the case of Young Carers, a Young Carer Statement (YCS) (appendices 4-10). These key plans, designed to be **preventative** in nature and implemented at a local level, are used to capture what is important to carers, such as feeling more skilled in their caring role, or having a life outside of their caring role. The conversations that flow from these provide an opportunity for the carer to explain how their situation affects them; to be supported to identify their **personal outcomes**, and to feel supported towards these as they continue in their caring role. The Act also stipulates that these plans must help a carer to consider:

- the nature and extent of the care they provide and, the impact on their wellbeing and day-to-day life.
- the extent to which they are **able and willing** to provide care.
- emergency and future care planning.

Another key part of the ACSP/ YCS process is for carers to receive the right support to meet their **eligible needs** (Appendices 6 & 10). This duty under The Act directs Local Integration Authorities to consider as part of the process, whether that support should include a short break or break from caring ensuring this is reflected within the Plan.

The development of **Local Carer Strategies** was also highlighted as a duty for Local Integration Authorities across Scotland. Edinburgh launched their 3-year [Joint Carer Strategy](#) in mid-2019. The developments, initiatives and collaborations flowing from this shall continue to be built upon and improved through this refreshed version.

Accompanying the Act at the point of its production, was the National Plan<sup>44</sup>. This covers six key priorities and includes:

1. Strategy and leadership
2. Legislation and guidance
3. Workforce and systems support and development
4. Raising awareness
5. Carer involvement and choice
6. Measuring progress and impact

Since the Act was introduced in 2018, the Local Integration Authorities across Scotland, and in Edinburgh, have worked to take forward these developments. It is critical in these early stages, and in a post-pandemic era, to consider just how effective these strategies are, and how well carers are supported as a result of them.

Actions around the Carers Act	EJCS Priority
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<sup>43</sup> [Carers' charter: Your rights as an adult carer or young carer in Scotland \(www.gov.scot\)](http://www.gov.scot)

<sup>44</sup> [Carers+Act+Post-Implementation+Plan+-+Final.pdf \(www.gov.scot\)](#)

<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Continue to align with the 6 key priorities detailed in the National Plan for implementing the Carers Act</li> <li>• Work collaboratively to determine best uses of available funds to further the positive impacts to carers through Carer’s Act implementation.</li> <li>• Build upon the progress made through the 2019-2022 Edinburgh Joint Carer Strategy</li> <li>• Make the case for extending the lifespan of the Edinburgh Joint Carer Strategy, particularly if there are no new major drivers.</li> </ul>	1-6
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<p>In Edinburgh we will continue to support improvements in the data collected to demonstrate impact for carers, including:</p> <ul style="list-style-type: none"> <li>• Work to improve carer awareness and importance of the Carer Census, to assist in informing the needs of carers.</li> <li>• Take on and incorporate support and advice provided from national bodies around improving data gathering exercises.</li> <li>• Build upon previous experiences of data gathering returns across the carer support landscape: commissioned and statutory provision and wider carer landscape, and use this to inform future developments.</li> <li>• Continue with developments around the measurement of carer outcome framework and subsequent application.</li> </ul>	1-6
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### 3.2 Short Breaks and Breaks from Caring

*We know that access to personalised, flexible short breaks can make a real difference for carers to recharge their batteries - helping sustain caring relationships and enabling carers to have more of a life of their own. We also know that to be worthwhile, breaks need to be a positive experience for both the carer and cared for person. – National Strategy*

Short Breaks and Breaks from Caring are an integral part of this strategy refresh to ensure that we meet the key guidance within the Carers Act (Scotland)<sup>45</sup>, the National Carers Strategy and most importantly the needs of local carers in Edinburgh in relation to getting a break from caring.

As indicated in the COVID-19- section above, it is acknowledged that carers have been significantly affected by reduced access to short breaks and breaks form caring, with key shorter and longer term impacts being articulated.

It is acknowledged that the term ‘Respite’ is often used to describe a break from something which is unpleasant. Most carers and partners therefore feel that the term ‘respite’ is negative and is often associated with institutional services or emergency situations. ‘Short Breaks’ is a more positive, broader and inclusive term and captures the flexibility and creativity that carers

<sup>45</sup> <https://www.gov.scot/publications/carers-scotland-act-2016-statutory-guidance-updated-july-2021/>

have told us matters to them and will replace the term 'respite.' Short breaks and breaks from caring also supports the promoting variety<sup>46</sup> approach being adopted across Scotland.

Edinburgh Voluntary Organisations' Council (EVOC), carried out a review of support with travel and respite for adults with disabilities or additional support needs and those that care for them, published in December 2021<sup>47</sup>

Two surveys were carried out:

- a. People caring for and/or using day support services for people with additional support needs - 101 responses, of which 38 respondents cared for people who received a short break/respite service.
- b. Organisations providing day support for people with additional support needs - 10 organisations responded, of these 5 provided support to unpaid carers.

Initial conclusions from these include:

- The number of people accessing day support five days per week has dropped by just over 50% since the start of the pandemic.
- There has been a significant increase in the number of people providing their own transport to day support or respite services, compared to a significant decrease in people travelling by minibus or sharing transport – both of which were of course not possible in many cases due to COVID-19 safety issues.
- The way in which decisions regarding service changes were communicated was variable, as was the pattern of negotiating to resume services i.e., in many cases this required an assessment for a service that had been provided prior to the pandemic.
- While 40% of respondents reported no change to respite arrangements, 23% said the service had been reduced, and 28% said it had not been available at all since the pandemic.

This highlights some of the key areas for ongoing development in the provision of short breaks and breaks from caring.

By taking a preventative and innovative approach we will develop a Short Breaks Implementation Plan, incorporating key aspects associated with the EHSCP *Supporting Adult Carers and Caring Relationships* Policy. This policy was developed with partners and carers, ensuring the key purpose of a 'break from caring/short break' continues to be to support carers to have a life outside of, and/or alongside of their caring role. The key foci should continue to be helping to support unpaid carer health and wellbeing, sustain their ability to continue in their caring role as long as they are willing and able to do so, and support breaks planned around what is important in their life and improve their personal outcomes.

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<sup>46</sup> [Promoting variety | Shared Care Scotland](#)

<sup>47</sup> <https://www.evoc.org.uk/wordpress/wp-content/media/2021/12/Getting-About-Getting-A-Break-Phase-1-DEC-2021.pdf>

We will undertake to extend, and update any new statutory requirements associated with the Edinburgh [Short Break Services Statement](#) 2019, the purpose of which is, and will continue to be, to provide information to carers and cared for people so that they:

- Know they can have a break in a range of ways
- Are informed about short breaks that are available
- Have choice in the support they access, and are able to optimise self-directed support options
- Can identify what a short break means for them, and how they can be supported to meet their needs and achieve their personal outcomes and more.

The range of ways (not exhaustive), in which a carer can have a short break may

- Take place during the day, evening or overnight
- Be for short or extended periods
- Involve the person with support needs having a break away from home allowing the carer time for themselves in their own home
- Enable the carer to have a break away from caring, and the home if needed, by temporarily providing replacement care, or other support as indicated
- Allow the carer and the cared for person/family to have breaks together
- Enable the carer to have a break from caring with a group of their peers
- Provide a range of supported and bespoke break options for groups of carers with or without their cared for person

The Short Breaks Implementation Plan will seek to build caring relationships, and collaborations between partners to promote and expand a variety of short breaks and breaks from caring and optimise availability across partner agencies. The plan will also recognise that carers may often require a significant level of support prior to, during and post the short break.

Work through the current contracts and early learning from the Promoting Variety work within Edinburgh, has identified joint working partnerships, development of bespoke break options for carers and expansion of offers that include the carer and the cared for person sharing breaks, safely, securely and in a supported manner. Short breaks are not one size fits all, and we will aim to have a portfolio of offers and approaches and will seek to develop these over the life of this strategy.

Edinburgh carers who are in the most complex and challenging caring roles may experience significant gaps in break options or replacement care for their cared for person. This can result in these carers not being able to access the expanded service offers and provision in the city for themselves because they cannot safely leave the cared for person unattended.

Befriending Services and Sitter Services that can cater for people with high level care needs would be valued, particularly to support the unpaid carer to get a break. Carers also tell us that overnight services that can cater for people with high level care needs in their own home to enable the carer to get a break away from the home environment is not available or affordable.

Opportunities will be identified for services to be developed to provide high quality short breaks to meet carers strategic and personal outcomes. Options around Short Breaks Brokerage will be explored and developed, supporting carers to have an outcomes focused plan, increased



knowledge and support to access more short break opportunities and to therefore have a more balanced life alongside or outside of their caring role.

Actions about breaks from caring	EJCS Priority
<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Encourage engagement in national conversations about the introduction of a statutory right to breaks from caring.</li> <li>• Respond to any resulting statutory changes, through proactive preparation by the Carer Strategic Partnership Group to ensure compliance.</li> <li>• Seek to extend the Short Breaks Statement, and refresh with any new statutory requirements indicated</li> <li>• Continue meeting the key guidance within the Carers Act (Scotland) and the National Carers Strategy.</li> <li>• Commit to continue to support the recommendations of the Independent Review of Adult Social Care, and other Inspection and Review Reports.</li> </ul>	2,3,4,5,6

<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Continue to take a preventative, innovative, long-term &amp; sustainable approach to Short Breaks and breaks from caring.</li> <li>• Continue to build upon Short Breaks and Breaks from Caring options to promote variety and choice, which will be detailed in the Short Breaks implementation Plan</li> <li>• Develop the Short Breaks Implementation Plan, incorporating the key aspects of the <i>Supporting Adult Carers and Caring Relationships</i> Policy, and national guidance to consider collaboration; promotion of variety; sustainable group options; optimisation of SDS options; explore short breaks brokerage model, to ensure a range of opportunities are available to meet a variety of complex needs</li> <li>• Increase involvement of all adult carers in proposed developments around short breaks and breaks from caring.</li> <li>• Seek to better understand the barriers to flexible short breaks and breaks from caring for all carers.</li> </ul>	3,4,5,6
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**3.3 Self-Directed Support**

*“Self-directed support is Scotland’s approach to social care support. It allows people and their carers to make informed choices on what their support looks like and how it is delivered. Greater control of their life and decision-making leads to better health and wellbeing for carers and supported people.” (National Strategy ref)*

Carers involvement in decision-making affecting the support for the supported person. Such involvement creates the sense of control over their particular situation and encourages a sense of wellbeing for both parties.

The Social Care (Self-directed Support) (Scotland) Act 2013<sup>48</sup> requires local authorities to offer people who are eligible for social care a range of choices over how they receive their support. The option of how the supported person’s funded support should be arranged, will therefore be discussed with both the carer (of any age or background), and the supported person in a way they can understand, through the involved professional Social Worker or Occupational Therapist. Information on the 4 SDS options will be presented and collectively, a decision on the best route shall be reached. The options are:

- Option 1: A Direct Payment (DP), which gives you the most choice and control over your care and support.
- Option 2: An Individual Service Fund (ISF) where a service, registered as an ISF provider, manages a Direct Payment on your behalf
- Option 3: A direct service where your care and support are fully arranged by the involved Social Worker or Occupational Therapist
- Option 4: Simply a combination of any of the three options above.

By being involved in these decisions, the carer can ensure the support can fit around their caring role more easily and lead to them finding a better balance around their work, relationships, and personal life. However, SDS has not been implemented as fully and widely as was the expectation. For this reason, work at a National Level has been completed, resulting in SDS Framework of Standards<sup>49</sup> designed with Carers and supported people’s outcomes at the centre ensuring the key aspects of the SDS Act are fully implemented. It was recognised that much positive work has been done however there is still more to be done.

The [Self-directed Support \(SDS\) Improvement Plan 2023-2027](#) was therefore developed and published in June 2023 and aims to take a whole system approach to the improvement of SDS, recognising that delivery partners across statutory, third and independent sectors all play an essential role in SDS improvement. The SDS Improvement Plan 2023 – 2027 sets out the priorities to drive forward improvement in Self-directed Support over the next few years. The plan recognizes that Self-directed Support should be the way that social care support is delivered for adults, children and young people, families and carers.

Actions about self-directed support (SDS)	EJCS Priority
In Edinburgh we will... <ul style="list-style-type: none"> <li>• Continue to develop and implement local eligibility criteria.</li> <li>• Continue involvement in work underway around SDS implementation, taking into consideration the latest national SDS improvement<sup>50</sup></li> </ul>	1,2,6

<sup>48</sup> [Social Care \(Self-directed Support\) \(Scotland\) Act 2013: statutory guidance - gov.scot \(www.gov.scot\)](#)

<sup>49</sup> <https://www.gov.scot/publications/self-directed-support-framework-standards-including-practice-statements-core-components/>

<sup>50</sup> <https://www.sdsscotland.org.uk/sds-improvement-plan-2023-2027/>

<ul style="list-style-type: none"> <li>• Continue to develop referral routes to carer groups for those involved in assigning SDS budgets.</li> <li>• Continue to promote the principle of carer involvement in SDS spending decisions.</li> <li>• Support the implementation of the SDS framework of standards and the Self-directed Support (SDS) Improvement Plan.</li> </ul>	
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<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Identify where the barriers to SDS flexibility exist and seek ways to minimise or eliminate these and encourage use of funds as fully as possible within legal parameters.</li> <li>• Communicate the circumstances whereby SDS budgets may not be used.</li> <li>• Work with partners to produce a comprehensive menu of SDS examples to help carers and practitioners to decide what form the right support may take.</li> </ul>	2,3,6
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<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Continue to engage with, input to, and learn from national conversations around the challenges of SDS implementation.</li> <li>• Through those national conversation, create links with local Scottish Government funded SDS carer projects to ensure joined up communications, planning and development.</li> </ul>	6
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### 3.4 National Care Service

At time of writing this strategic refresh the consultation and engagement process on the establishment of a National Care Service (NCS) in Scotland is still underway. The proposals for the National Care Service put human rights and needs front and foremost, using a preventative approach to alleviate and improve the identified needs, placing them at the heart of the solution for the individual.

This approach has been built into the Edinburgh Joint Carers Strategy Refresh and we will ensure that our strategic refresh and future strategies align with the proposed National Care Service Bill and legislation as it progresses.

## National Care Service: How Edinburgh will contribute to the Outcomes

Actions about the National Care Service	EJCS Priority
<p>In Edinburgh we will...</p> <ul style="list-style-type: none"> <li>• Work with National Carer organisations to understand and make provision for the NCS at the appropriate time.</li> <li>• Respond as a health and social care partnership and integration authority in ways dictated by incoming legislation.</li> <li>• Continue to raise the profile of carers to Scottish Government and policy makers</li> </ul>	1-6
<p>In Edinburgh we will...</p> <ul style="list-style-type: none"> <li>• Revisit our Local Eligibility framework once NCS guidance around this is published, and where possible meet identified needs.</li> </ul>	1-6

### **3.5 Carers, Hospitals & Healthcare**

As detailed and described in a number of sections within this strategy the motivation is to link to the current Proposed Actions within the Draft National Strategy, particularly around Preparedness for future scenarios, the role of GP Practices and Care Navigation Role, Primary Healthcare Teams and Hospital Discharge procedures. This will involve working with partners in healthcare to support and develop practical solutions to the identified issues and impacts for carers. Such as;

- Identification of carers
- Connecting carers to opportunities and support
- Social prescribing
- Healthcare-located carer support, such as, contact with outreach workers, welfare and benefits, counselling, and emotional support.
- Working alongside the Discharge Without Delay programme. This programme is being piloted in Edinburgh from 2022, to support speedy discharge from hospital for those patients who no longer have a clinical requirement to be there. This model will depend on unpaid carers to be partners at every stage to ensure success. The Hospital Discharge Carer Support Team (HDCST) are already involved in this multi-discipline programme, and it is envisaged that the Edinburgh Carer Strategic Partnership Group (ECSPG) will also have a role.
- Exploring how the carer support organisations/teams/services will exploring closer working with the Marie Curie Caring for Someone at Home - End of Life at Home, Hospice or Hospital – Learning from Lived Experience Project. Identifying the gaps and resources needed to support carers and families to have more choices around End-of-Life care at home.
- Advocacy
- Access to fast tracked ACSP and YCS

## Carers, Hospitals & Healthcare: How Edinburgh will contribute to the Outcomes

Actions about breaks from caring.	EJCS Priority
<p>In Edinburgh we will...</p> <ul style="list-style-type: none"> <li>• Determine how key messages about unpaid carers can become embedded within health and social care access teams to encourage flexible health and social care appointments.</li> <li>• Continue with development of a Short Breaks Implementation Plan incorporating the key aspects of the <i>Supporting Adult Carers and Caring Relationships</i> Policy, and national guidance to consider collaboration; promotion of variety; sustainable group options; optimisation of SDS options; explore short breaks brokerage model, to ensure a range of opportunities are available to meet a variety of complex needs</li> <li>• Work with a range of volunteer networks across Edinburgh to optimise opportunities for volunteers to engage with carers to allow them to have short breaks from caring that enable carers to access health appointments.</li> </ul>	3,6
<p>In Edinburgh we will...</p> <ul style="list-style-type: none"> <li>• Encourage work to influence patient visiting policy and ensure there is a carer representative involved in consultation around future visiting policies.</li> </ul>	2,3,5,6
<p>In Edinburgh we will...</p> <ul style="list-style-type: none"> <li>• Ensure there is consideration about the role of the Hospital Discharge Carer Support workers, and the value this will bring to the Discharge Without Delay programme roll out to raise the profile of carers of all ages and background, and to encourage that carers are routinely and meaningfully involved in discharge planning, wherever possible.</li> </ul>	2,3,5,6
<p>In Edinburgh we will...</p> <ul style="list-style-type: none"> <li>• Seek to include key members of existing multi-disciplinary teams, across the whole system, and provide them with the opportunity to contribute Carer Strategic Partnership Group developments, where appropriate</li> </ul>	2,6
<p>In Edinburgh we will...</p> <ul style="list-style-type: none"> <li>• Strengthen work with Primary Care across the city, ensuring the key priorities for carers are focussed upon.</li> <li>• progress the expansion of the EHSCP Hospital Discharge Carer Support team, within available resources to enhance presence across Edinburgh hospital sites.</li> </ul>	1,2,3,6
<p>In Edinburgh we will...</p>	2,3,5

- Work with colleagues across programmes, to raise the profile of unpaid carers and encourage optimisation of available programme resources to support carers to meet their outcomes.
- Consider all *Health & Social Care Support* outcomes in the development of a Young Adult Carer Action Plan

#### 4. National Theme 4 - Social & Financial Inclusion

##### **National Strategic Outcomes:**

- That the social and economic contribution, impacts and scale of caring are recognised, understood and reflected in local and national policy making across all areas.
- Carers are able to access the financial support and assistance to which they are entitled.
- Carers are able to take up or maintain employment and education alongside caring if they wish to do so.
- Carers can participate in and are valued by their community and wider society.

##### **Organisational Outcomes**

- Carers know how to connect to information and advice.
- Carers are well informed about their rights and how to access support.
- Carers report economic wellbeing.
- Carers are better supported at work and better able to manage.
- Employers have knowledge of what it takes to be a carer aware employer and how to improve.
- Employers develop better policies to support carers and commit to further support.

##### **Personal Outcomes**

- Carers understand their rights and how to access support, information and advice.
- Carers report economic wellbeing.
- Carers have access to the replacement care that they need, to enable them to work and have meaningful social connections.
- Carers feel heard and understood by their employer.
- Carers report they are supported towards work and in employment.

Caring can have a dramatic impact on personal finances as highlighted in many studies. Poverty disproportionately affects households where someone is disabled. Nearly half of all individuals in poverty live in such a household and a quarter of unpaid carers live in poverty<sup>51</sup>.

Poverty is more likely to affect carer finances where carers reduce paid employment to provide care to another person. An estimated 600 carers a day gave up work across the UK to look after someone, prior to the pandemic<sup>52</sup>. Evidence also shows increasing in-work poverty rates, with dramatic increases in households with children – seven in ten children in poverty are now in a working family in the UK<sup>53</sup>.

<sup>51</sup><https://www.jrf.org.uk/report/uk-poverty-2019-20>

<sup>52</sup><https://www.theguardian.com/money/2020/feb/29/carers-financial-pressures-supporting-loved-ones>

<sup>53</sup><https://www.jrf.org.uk/report/uk-poverty-2019-20>

Female carers are disproportionately affected by poverty as are younger adult carers, with nearly four in ten younger female carers living in poverty compared to just over one in four young male carers. Carers who have been caring for an extended period are more likely to experience financial difficulties. Just two in five of those caring for more than 15 years could afford to pay their bills without struggling financially compared with three in five (62%) of carers in their first year<sup>54</sup>. Caring can also have a negative impact on household income, particularly where carers give up paid work<sup>55</sup>.

The impact of COVID-19 has further worsened many carers' financial situation, with as many as 106,000 unpaid carers in the UK having relied on a food bank during the pandemic (twice as likely as the general public to have used a food bank)<sup>56</sup>. This research found that younger adult carers (aged 17-30) were more likely to live in a household that experienced hunger than carers aged 66 or older.

In 2020, the UK economy contracted by 9.9% - the largest ever recorded drop<sup>57</sup>, with benefit claims increasing by 113.2%<sup>58</sup>. The Edinburgh Poverty Commission<sup>59</sup> highlights the significant rise and threat of poverty. The report finds that poverty is widespread across the city and is not limited to those living in 'deprived area', with two-thirds of the people in poverty in Edinburgh **not** living in those areas commonly considered as 'deprived'. Very often these families will be affected by physical and mental health burdens related directly to the poverty they experience. The report also finds that carers are one of the groups of people more likely to be living in poverty than others in the city. The report identified six areas for action – fair work, a decent home, income security, opportunities to progress, connections, health and wellbeing and notes that the single biggest transformation Edinburgh could achieve to help end poverty would be to make the experience of seeking help less painful, less complex, more humane, and more compassionate.

## Carer employment

VOCAL carer surveys found just a quarter of respondents were in paid employment, despite over half being of working age. In line with findings reported above, the proportion of working age carers not in employment were highest for carers of children (49%) and young adult carers (43%). Over one quarter of respondents (27%) stated they had stopped working due to their caring responsibilities, with a further 23% experiencing a reduction in their working hours.

The 2021 Carer VOCAL Carer survey produced further evidence that poverty risks had worsened: Of 826 carer respondents in Edinburgh 33% had stopped working (up from 27% in 2017); 30% had reduced their hours of work (up from 27% in 2017); 23% had lost NI or pension contributions as a result of giving up work (against 13% in 2017); 15% of had been forced to borrow money and 7% had been forced to use food banks.<sup>60</sup>

In 2017, almost half of respondents agreed with the statement: *'Being a carer has made money and finances more difficult'*, this increased in the 2021 survey to over 50%. Over one third of carers report that they use some of their own finances to pay for care.

Talking about finances is not straightforward, with 40% of respondents in 2017 and 39% in 2021 expressing difficulties talking about how caring affects them financially. This highlights

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<sup>54</sup> [https://www.carersuk.org/images/News\\_and\\_campaigns/Carers\\_Rights\\_Day/CUK-Carers-Rights-Day-Research-Report-2018-WEB.PDF](https://www.carersuk.org/images/News_and_campaigns/Carers_Rights_Day/CUK-Carers-Rights-Day-Research-Report-2018-WEB.PDF)

<sup>55</sup> [Caring & Family Finances Inquiry: UK report - Carers UK](https://www.carersuk.org/images/News_and_campaigns/Carers_Rights_Day/CUK-Carers-Rights-Day-Research-Report-2018-WEB.PDF)

<sup>56</sup> <https://www.birmingham.ac.uk/news/2020/unpaid-carers-going-hungry-during-COVID-19-lockdown-says-study>

<sup>57</sup> [UK economy suffered record annual slump in 2020 - BBC News](https://www.bbc.com/news/business-56884444)

<sup>58</sup> [The UK's COVID-19 unemployment crisis in six charts | Business | The Guardian](https://www.theguardian.com/business/2020/dec/23/the-uk-s-covid-19-unemployment-crisis-in-six-charts)

<sup>59</sup> [20200930 EPC FinalReport AJustCapital.pdf \(edinburghpovertycommission.org.uk\)](https://www.edinburghpovertycommission.org.uk/20200930-EPC-FinalReport-AJustCapital.pdf)

<sup>60</sup> <https://www.vocal.org.uk/wp-content/uploads/2021/11/Edinburgh-Report-2021.pdf>

the need for carer support staff to be adept at sensitively opening conversations regarding finances.

Only 32% of respondents felt confident applying for financial support in 2017 and this dropped to just 25% in 2021. Around 35% of respondents agreed in 2017 that they had enough financial support, but this share of respondents reduced to just 27% in 2021.

Carers will therefore be more likely need to apply for welfare benefits for financial support. They will require specialist accessible information and advice to support them in this process.

Poverty and associated challenges such as stress, anxiety, health problems and debt, are further exacerbated by the current cost of living crisis. Carers face dramatic increases in fuel and food bills with little to no additional income.

The impact of the current cost of living crisis has been well documented. Citizens Advice research confirms that more people than ever will seek access to advice, information and additional supports. *'More people will be hitting crisis point'*<sup>61</sup>

Carers UK research confirms that unpaid carers are now facing unprecedented financial challenges in light of the UK's cost of living crisis<sup>62</sup>. *'Thousands of carers are now having to make extremely difficult choices about whether they eat or heat their homes. Many cannot afford both. Others are having to get into debt to manage their living costs or are turning to foodbanks and other means of support to cope.'*

This challenges the resilience of carers and sustainability of caring relationships, with increased risks of carers breaking down and being unable to continue caring.

Financial welfare support should also include carer support with Power of Attorney (POA), and Guardianship, through surgery appointments to provide information on Power of Attorney welfare and financial powers over another's finances where that person is deemed to have incapacity to make decisions. Many carers require financial support to meet the cost of POA and Guardianship procedures.

Edinburgh has a solid base for expanding welfare benefit and income maximisation support - including FAIR and the Action Group being accredited to the Scottish National Standards for information and advice providers. The advice provided includes representation up to independent tribunal level. This accreditation demonstrate that carers have access to the highest standard of advice. There is scope to further share expertise and resources in this area.

Across 2021-22, Fair, The Action Group and VOCAL (whose advice services assist carers and people with disabilities) generated over £2,850,000 of income through various sources for Edinburgh households.

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<sup>61</sup> <https://wearecitizensadvice.org.uk/our-new-cost-of-living-dashboard-the-crisis-were-seeing-unfold-aac74fb98713>

<sup>62</sup> <https://www.carersuk.org/for-professionals/policy/policy-library/under-pressure-caring-and-the-cost-of-living-crisis>



## Social & Financial Inclusion: How Edinburgh will contribute to the Outcomes

Actions about Social and Financial Inclusion	EJCS Priority
<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Influence the training of practitioners and carer support staff to embed conversations about financial wellbeing, in all carer conversations, Adult Carer Support planning and young carer statements, so that carers are connected to appropriate income maximisation and debt advice supports</li> </ul>	1,2,3,6
<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Extend the focus on identifying and supporting all carers to advice and support agencies across the city – e.g., food banks; food initiatives, housing agencies, housing associations – in line with current policy.</li> <li>• Through providers, raise carers awareness of their rights to financial support under existing and new Social Security Scotland benefits, regardless of their age.</li> <li>• Support ethnic minority adult parent carers of disabled children and provide holistic advice and support and welfare rights advice and representation.</li> <li>• Provide casework support, advice and information for minority ethnic carers.</li> <li>• Support carers through Adult Carer Support Plans to engage in future planning and refer to specialist Power Of Attorney, legal and guardianship support.</li> </ul>	1,2,3,5
<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Highlight the importance of income maximisation adviser role to help address cost of living crisis and raise awareness about particular issues carers may face.</li> <li>• Consider how developments around replacement care may help all adult carers maintain and re-enter paid employment and have meaningful social connections.</li> <li>• Encourage City of Edinburgh Council, as part of their overarching commissioning principles, to include carer positive criteria to encourage organisations to demonstrate that they have flexible working contracts for their employees who may have an unpaid caring role.</li> <li>• Consider all <i>Social &amp; Financial Inclusion</i> outcomes in the development of a Young Adult Carer Action Plan</li> </ul>	1,2,3,5

### 5. National Theme 5 - Young Carers

In Edinburgh, our work continues to be underpinned by the Getting It Right For Every Child<sup>63</sup> (GIRFEC) approach in order to improve outcomes for young carers and support their wellbeing, by offering timely and relevant supports. We see young carers as children and young people first and foremost and recognise them as unique individuals, each entitled to find and reach their full potential. Caring responsibilities can occur at any time in a child or young person's life and the impact can be far reaching. Early identification is key to ensure young carers with these

<sup>63</sup> [Getting it right for every child \(GIRFEC\) - gov.scot \(www.gov.scot\)](http://www.gov.scot)

responsibilities receive appropriate support, whilst protecting them from any inappropriate roles that could negatively impact their wellbeing.

The Edinburgh Young Carers Collaborative was established in October 2020 and is comprised of three young carer support services who collectively support young carers across the city, working closely with education, health, social care and third sector services.

The pandemic understandably created challenges both in terms of the provision of, and access to supports for young carers. However, as with support for adult carers, the Young Carers Collaborative adapted their response to ensure that young carers and their families continued to receive a high level of specialist support, utilising technology to maintain both individual and group support. As post COVID-19 remobilisation has occurred, the Collaborative has continued to use technology to extend the reach of the support delivered, particularly for those young carers who may struggle to access face-to-face opportunities.

The collaborative identified and supported 554 young carers across Edinburgh in 2021, 6 months later a total of 649 young carers were being supported and this number continues to rise each month.

Nationally it is recognised that there are many young carers who struggle to identify as young carers, either through lack of awareness or choice. As a city, we are committed in our efforts to raise awareness amongst both young people themselves and the adults in their lives to support early identification, ensuring that young carers rights and availability of supports are well understood in allowing informed choices to be made. There is a valuable connection with Education services throughout the city, where a young person is often identified as having a caring role.

In this section of the refreshed strategy there is alignment with the strategic outcomes with those from each of the relevant sections in the national strategy, with the local strategic outcomes highlighting support for young carers in schools.

## 5.1 Recognising, Valuing and Involving Young Carers

### National Strategic Outcomes:

- Young Carers are supported and protected from inappropriate caring and negative impacts on their education, social lives and future opportunities.
- Young adult carers are supported when moving from education to training and work while balancing an ongoing caring role.

### Organisational Outcomes

- We will continue to recognise and involve young carers as part of all of the actions highlighted in Sections 1 to 4 of this refreshed strategy.
- Young carers can access good quality, age-appropriate information and advice using a range of media and are informed about their rights and how to access support.
- Young carers are at the centre of shaping services, support planning and decision making for themselves and the people they care for and have a choice and options to their needs and the person they care for.

- Education, health, social care and third sector services work in partnership to identify young carers and provide a range of appropriate support opportunities.

### **Personal Outcomes**

- Young carers report increased feelings of being “included” and “respected” with regards to their involvement in decisions affecting their own, and the cared-for person’s wellbeing, evidenced through their Young Carer Statement and statement reviews.
- Young carers will be aware of their option to no longer provide care and will be supported with this choice.
- Feel safe and rested and are able to be children and young people first.
- Young carers are supported at key transition points in their lives.
- Young carers feel supported to move into a life after caring and feel supported with the transition into adulthood.
- Young carers are confident in shaping services for themselves and those they support and are more in control of the support they receive.

We recognise, value and involve young carers in their caring and life journey. The approaches, principles and values embedded in GIRFEC serve to strengthen the wellbeing of young carers placing their rights, their views and their unique circumstances at the centre to ensure decisions in their best interests are made jointly with them.

The Edinburgh Young Carer Collaborative has ensured young carers are able to access good quality, age-appropriate information and advice using a range of media and that they are well informed about their rights and how to access support through their local young carer centre.

Young carers feel that their experiences and knowledge in relation to the cared-for person are often overlooked by professionals leaving them feeling excluded and undermined<sup>64</sup>. In response to this, with the continued support of their local young carer service and the implementation of Young Carer Statements and Adult Carer Support Plans, young carers across Edinburgh are now involved in support planning and have choice and options in meeting their needs and the person they care for.

Throughout the pandemic there has been ongoing involvement, discussions, consultation and feedback with young carers and the organisations supporting them about the issues they face, and how best we can help them. Young carers have indicated that they needed more personalised individual support during this time. In response to this, the Collaborative provided 1,351 one to one support sessions for young carers. Access to local young carers service has been of great benefit to young carers, and since the pandemic many of these services are utilising technology to reach out and provide support. During the pandemic the Collaborative provided young carers with a total of 33 laptops, 30 iPads and 76 tablets, as well as 30 mobile phone top-ups and 60 Wi-Fi boosters, alongside providing 691 digital and face-to-face respite groups across the city.

There are also opportunities locally and nationally for young carers to be involved in decisions that affect them. This includes the Scottish Youth Parliament, a youth-led democratic

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<sup>64</sup> [Young, gifted, and caring: A project narrative of young carers, their mental health, and getting them involved in education, research and practice — Research Explorer The University of Manchester](#)

organisation where young carers can get involved in consultations and parliamentary motions. Young carers from Edinburgh will also participate in the national Scottish Young Carers Festival.

The Edinburgh Young Carers Collaborative have established a young carers/young adult carers forum to provide the opportunity to have their say and take-action on what matters to them from an Edinburgh perspective. Carer Centres across Scotland can get involved in the ‘Carers Parliament - Cross-party group’ with its purpose being to ensure equality of opportunity for unpaid carers in Scotland by liaising with carers’ organisations, lobbying the Scottish Government and promoting legislation on unpaid carers’ behalf. Any relevant Scottish policy changes or decisions relating to Young Carers across Scotland will benefit Young Carers in Edinburgh.

**Recognising, Valuing and Involving Young Carers: How Edinburgh will meet the Outcomes**

Actions about Recognising, valuing and involving young carers	EJCS Priority
<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Raise awareness of children’s rights in line with the UNCRC (Incorporation) (Scotland) Bill 2021 and support others to take a child rights-based approach to policy and practice on behalf of young carers.</li> <li>• Ensure that there is young carer representation from Edinburgh on the ‘Carers Parliament-Cross-Party’ group, the Scottish Young Carers Festival, and that young carers have the opportunity to get involved in the Scottish Youth Parliament and the Young Carer/Young Adult Carer Forum.</li> <li>• Engage young carers in the planning and shaping of services.</li> </ul>	5
<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Continue to apply the principles of GIRFEC in our work with young carers to support their wellbeing.</li> <li>• Involve young carers in decisions made about them through the implementation of young carer statements.</li> <li>• Work closely with education, health, social care and third sector services to identify young carers and provide a range of appropriate support opportunities.</li> </ul>	5,6

## 5.2 Young Carers: Health and Social Care

Over the past three years of the Edinburgh Joint Carers Strategy, young carers in Edinburgh have had their rights under the Carers (Scotland) Act 2016 developed and delivered. In particular, young carers, third sector partners and City of Edinburgh Council have worked together to create new paperwork and processes for the Young Carer Statement, an outcomes-based conversation model and action plan that puts young carers at the centre of their wellbeing and support choices.

Since 2021, the Edinburgh Young Carer Collaborative have been offering Young Carer Statements to young carers aged 5 – 18 years across the city. The Young Carer Statements have supported young carers to identify their own personal outcomes and support action plans, linked to the Wellbeing Indicators. Furthermore, the Collaborative have responded to the introduction of the Carers (Scotland) Act 2016 Terminal Illness Directions to ensure young carers are supported with a Young Carer Statement in a timely fashion through these most difficult of times.

The Collaborative have continued to support the emotional wellbeing and mental health of young carers across Edinburgh. Many young carers reported a decline in their mental wellbeing throughout the pandemic and resulting lockdown period due to anxiety, isolation and the intensity of caring roles, without the regular respite of school, short-breaks or replacement care. This continues to be a major presenting issue in this recovery period. In research by the Carers Trust Scotland, 45% of young carers say their mental health is worse than it was before the pandemic began and 40% feel overwhelmed by the pressures they are now facing which is having an inevitable impact on their mental health and wellbeing<sup>65</sup>.

Requests for support for young carers has risen across the city compared to pre-pandemic with a notable increase in referrals for children and young people who are taking on an inappropriate caring role. This may be as a result of difficulties with parenting roles, or where there are wider wellbeing and safeguarding concerns. Third sector and statutory services have been working together to support young carers and their families to access the right support at the right time, with an emphasis on early intervention and prevention. Over the lifetime of this Joint Carers Strategy, a key aim is to continue to ensure families have access to the right supports to remove inappropriate caring roles and prevent harm.

As part of the Health and Social Care Partnership, the Edinburgh Carer Support Team provide 'Carer Champion' training to frontline health professionals to ensure they are equipped to recognise and identify young carers in their professional settings and are confident in the conversations they are having about onward referrals and supports. This training has helped to reduce the stigma around disclosing caring situations to GP's and other health professionals, as well as facilitating identification of young carers across Edinburgh.

A key action is to extend this good practice and ensure we are involving young carers in the health pathways of the cared-for person, including, but not limited to, age-appropriate involvement in needs assessments, support plans and hospital discharge. Young carers currently report that they are 'overlooked' when it comes to decisions around the cared for person, and in a review of the needs of sibling young carers in Edinburgh, one young carer

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<sup>65</sup> <https://carers.org/resources/all-resources/109-2020-vision-hear-me-see-me-support-me-and-donot-forget-me>

said that one of the difficult things about caring for his brother was *“professionals not taking your seriously as a carer – listening to your parents more than you”*.<sup>i</sup>

Over the past three years of the Edinburgh Joint Carers Strategy, offers of support have been tailored to meet the needs of particularly vulnerable young carers. Across the city’s localities, young carers impacted by parental substance use can access practical and emotional support, as well as short-breaks and core-skill groups (such as swimming lessons, literacy groups and bike-ability) from the Edinburgh Young Carer Collaborative. Alongside Minority Ethnic Carers of People Project and the Multi-Cultural Family Base, they provide support for minority ethnic young carers, who may struggle to access support. It is widely acknowledged that people from minority ethnic communities have been more greatly affected by COVID-19-19. As such, supporting minority ethnic young carers and their families will continue to be a priority in this pandemic recovery period.

**Health and Social Care Young Carers: How Edinburgh will contribute to the Outcomes**

Actions about Health and social care for young carers	EJCS Priority
<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Work with teams across education, the council, health and social care to enhance skills, knowledge and confidence to identify, support and involve young carers in line with the Carers (Scotland) Act 2016</li> <li>• Encourage teams across Edinburgh to adopt a trauma-informed approach to increase services’ abilities to support the emotional health and wellbeing of all young carers.</li> <li>• Work together to further develop the offer of health and wellbeing supports that are flexible and meet need depending on young carers personal circumstances, for example; 1:1, group, emotional support and/or counselling and digital supports and support for minority communities.</li> <li>• Plan to provide young carers with more access to early and meaningful supports for their mental health and wellbeing, within available resources.</li> <li>• Continue to deliver and enforce young carers’ rights as adopted by the Carers (Scotland) Act 2016 and the UNCRC (Incorporation) (Scotland) Bill 2021, with a focus on ensuring all young carers are offered a Young Carer Statement and have the knowledge (and support thereafter) that they can choose to stop caring at any point in their caring role.</li> <li>• Through the Young Carer Statement pathway, offer every identified young carer appropriate support with Emergency Planning</li> <li>• Through relevant information and advice provision, ensure young carers know what they need to in a way that is accessible to them e.g., about their caring role, short breaks, the cared-for person’s health needs, their own health needs, further and higher education, employment and training, digital safety, healthy relationships, access to C Card, LGBT issues, and others.</li> </ul>	2,3,4,5,6

<ul style="list-style-type: none"> <li>• Make young carers <i>Equal Partners in Care</i> by actively listening and involving them in age-appropriate ways in the decisions and health pathways of the cared-for person(s) including but not limited to involvement in needs assessments, support plans and hospital discharge.</li> <li>• Recognise the unique needs and impacts of key groups of young carers, including but not limited to, young carers caring for parents with substance use problems, sibling young carers and BAME young carers. We will work with young carers, families and key partners to ensure the support is relevant and provide training so that all professionals are aware of their roles in identifying and supporting these hard-to-reach groups.</li> </ul>	
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<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Support all young carers to prevent them from taking on inappropriate caring roles and ensure they are protected from harm, by continuing to work in partnership to intervene quickly, report risk of harm accordingly, and adopt appropriate family supports when concerns are raised.</li> <li>• Act immediately for those children and young people who are at risk of harm, in line with local multi-agency child protection guidelines.</li> <li>• Collect and report on inappropriate referrals to young carer services so that we can develop a view of unmet carer need across the city which will inform ongoing and future planning with council, education, transport and health and social care colleagues</li> </ul>	3,5,6
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### 5.3 Young Carers: Support in Schools

Schools by their very nature play a crucial role in supporting young carers due to the daily contact they have with children and young people. Through direct contact with school staff and pupils, the Edinburgh Young Carer Collaborative have helped raise awareness of young carers, and in particular the potential for increased or new caring roles that have developed during the pandemic. This work has included:

- Staff training, both at a school establishment and city-wide level aimed to increase knowledge of how to identify young carers, their rights and available supports.
- The delivery of assemblies and workshops across both primary and secondary sectors that allows pupils to understand the role of the young carer, how they can be impacted, support available, and importantly to self-identify.
- Facilitating a Young Carer Co-ordinator Network that meets termly for the 145 young carer coordinators currently identified across both local authority and independent schools, allowing school representatives to network, share best practice and find out about further supports and resources.

In the 6 months up to March 2022, over 400 education staff across the city accessed training opportunities delivered by the Edinburgh Young Carer Collaborative, with almost 8,000 school pupils having engaged in awareness raising assemblies and workshops during the same

period. Collectively, this work has been crucial in identifying young carers and raising awareness of their rights, whilst also ensuring school staff have the skills and confidence to support young carers in their classroom. Through this education of their peers and highlighting the needs of young carers, it is hoped that this will continue to reduce the feelings of isolation, stigmatisation and sadly, bullying that young carers report.

The work to ensure young carers are identified in a timely way in school will continue through the application of GIRFEC. This approach is well embedded in schools, placing the child’s health and well-being at the centre when considering relevant supports. Increasing the number of young carers statements being offered will be key. A robust system is in place in Edinburgh for tracking attendance and attainment data in schools which also ensures needs can be identified early and relevant supports considered.

Following a collaborative event with young carers in Edinburgh in July 2021, Good Practice Guidelines for Supporting Young Carers in schools<sup>66</sup> has been created and shared with all schools. The aim is to ensure all schools embed these guidelines into their practice and have policies in place that demonstrate their commitment to identifying and supporting young carers.

The ‘*We Care Schools for Young Carers*’<sup>67</sup> Award has been developed by Edinburgh Young Carers to recognise and reward good practice around identifying and supporting young carers in school in Edinburgh, and across Scotland. By developing approaches, policies and through regular self-evaluation, schools taking part in *We Care* will ensure young carers are supported in achieving their identified personal outcomes and the barriers they may be facing in accessing a full education will be reduced or removed. In September 2022, 6 schools across primary, secondary and independent sectors have achieved awards across the different levels.

In accordance with the Education (Additional Support for Learning) (Scotland) Act 2004, the additional support needs of young carers are considered and where appropriate support is put in place. Transition planning is core to these considerations, with particular reference to the transition to high school and to post-school decisions. A key action is to ensure continued active engagement with young carers in their planning and that information sharing is done so sensitively and in sufficient time to ensure they receive access to appropriate supports and services depending on individual need.

**Support in Schools: How Edinburgh will meet the Outcomes**

Actions about Support in Schools for young carers	
<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>Record all young carers on SEEMiS when they have been identified and ensure they have been offered a young carer statement.</li> <li>Work with schools to ensure all schools have participated in awareness raising training to identify and support young carers.</li> <li>Record and monitor reported incidents of young people being at risk of harm, or bullying across young carers and act immediately through Child Protection Guidance</li> </ul>	1,2,3,5

<sup>66</sup> <https://www.youngcarers.org.uk/wp-content/uploads/2023/06/EYC-Toolkit-Final-2023-1-1.pdf>

<sup>67</sup> [We Care Awards – Edinburgh Young Carers](#)



<ul style="list-style-type: none"> <li>• Through GIRFEC planning, the young carer statements and regular monitoring of attendance and attainment data ensure a holistic approach is taken to meeting the needs of young carers in schools and ensuring they have access to appropriate and timely supports.</li> <li>• Work with schools to encourage implementation of the Good Practice Guidelines to support young carers.</li> <li>• Encourage more schools to participate in, and in turn 'We Care' awards to recognise and support young carers in their school and wider community</li> </ul>	
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<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Through partnership working, support young carers at key transition points in their life, such as moving to high school, leaving school or entering further education, or pursuing job opportunities.</li> <li>• Ensure information shared at transition times is done sensitive and in sufficient time to allow for planning and appropriate supports to be identified and accessed</li> <li>• Continue to engage with young carers in their own planning and that the appropriate information is shared</li> </ul>	1,2,3,5
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#### 5.4 Young Carers: Social and financial inclusion

Young carers are aged 5-18years therefore having access to adequate and affordable transport is essential in order for them to attend the supports provided to them. It can be particularly challenging for those young carers who live in rural communities on the outskirts of the city.

Young carers deserve to be able to live a full life and to be children first, which includes time for socially connecting. During the pandemic, research from Carers Trust in Scotland found that '74% of young carers and 73% of young adult carers in Scotland are feeling less connected to others since Coronavirus'<sup>68</sup>. Lack of connection to others socially leads to poorer mental health outcomes for many young carers, such as feelings of isolation, loneliness, and hopelessness. Therefore, it is vital for support to be put in place for young carers so they can feel better connected now and continue to in the years ahead.

Schools are key in providing opportunities for social inclusion, however during school holiday times low-income families experience increased financial pressures to provide food and activities. The Scottish Government made funding available to local authorities for the targeted provision of a Summer Holiday Programmes offering coordinated access to activities, childcare and food for children aged 5-14 from low-income families. Young carers were listed as a priority area within this funding, therefore there is a recognised need in the City of Edinburgh for young people with caring responsibilities to have access to support during holiday time.

The City of Edinburgh have committed to providing all young people aged primary 6 to S6 with digital devices<sup>69</sup>. This commitment is particularly important for young carers as it will mean they can use technology at home to access aspects of learning at times that may suit them better

<sup>68</sup> <https://carers.org/what-we-do/our-survey-on-the-impact-of-coronavirus-on-young-carers-and-young-adult-carers->

<sup>69</sup> <https://digitaleducationteam.com/>

and making the likes of homework more accessible, whilst also creating more potential for virtual learning experiences if required.

The Edinburgh Poverty commission states: ‘Levels of poverty are particularly high among families with children. In Edinburgh an estimated 23% of children grow up in relative poverty. In some areas this rate rises to more than 1 in 3 of all children. These areas rank among the highest levels of child poverty recorded anywhere in Scotland.’<sup>70</sup> Young carers are disadvantaged and are amongst the 1 in 3 children living in poverty due to the increased likelihood of them living in households of worklessness and limited access to disposable income. Young carer grants can be accessed via their young carers statement and various other financial benefits in the city, for example, Edinburgh clothing grants, School uniform grants, EMA, Young Scot for free travel and Young Scot young carer packages.

**Young Carers Social and Financial Inclusion: How Edinburgh will contribute to the Outcomes**

Actions about Social and Financial Inclusion for young carers	EJCS Priority
<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Provide support to access short break opportunities away from home (locally and nationally i.e., SYCF)</li> <li>• Work with agencies, to enhance access to transport for all young carers to allow them to attend support and mainstream community opportunities.</li> <li>• Provide information and access to financial grants and opportunities (including young carer grants, EMA, Young Scot Package, clothing and food grants, free bus travel via Young Scot), and continue to work with agencies and carers to optimise their financial inclusion</li> </ul>	2,3,5,6
<p>In Edinburgh we will....</p> <ul style="list-style-type: none"> <li>• Support and provide young carers with opportunities to connect with others both professionally and socially.</li> <li>• Continue to work with agencies to enhance the level of access to digital services for young carers.</li> <li>• Consider the <i>Young Carers</i> outcomes in the development of a Young Adult Carer action plan.</li> </ul>	1,2,3,5

<sup>70</sup> <https://edinburghpovertycommission.org.uk/poverty-in-edinburgh/>

## **Monitoring, Reporting & Governance**

The multi-agency joint Edinburgh Carers Strategic Partnership Group will continue to oversee the continuing implementation of the Strategy.

The Group are responsible for: ensuring that the actions in the Strategy are implemented, monitoring their impact, monitoring the implementation of the Carers Contracts against the agreed spend ratified by the EIJB in 2019, overseeing developments associated with the strategy, through co-production with partners, and, ensuring that the Strategy remains relevant.

The six priority areas developed as part of the 2019-2022 Carer Strategy remain relevant and remain a focus for this refreshed strategy. These priorities, in the main continue to be delivered through the contracts underway with partner organisations, the performance of which is reported to the Performance and Delivery Committee.

Delivery of the strategy is also through wider work through statutory services, grants, individuals, community groups and organisations' work. As part of the learning from the 2019-2022 strategy, it was considered that the contribution to the strategy outcomes from these wider carer supports and contributions across other programmes of work, needed to be explored further. To this end, a piece of Action Research looking at the Carers Landscape across Edinburgh has been commissioned, with the aim of reporting this contribution in some way through the Performance and Evaluation annual report.

In years one and two of the contracts, the EHSCP developed a performance and evaluation framework with partner organisations to understand the collective impact of their work to support unpaid carers. During discussion with the Performance and Delivery Committee, it was agreed that as the reporting on activity and the quantitative elements had become established, it would be helpful to provide a balance, through a focus on outcomes for carers. Through the Carer Strategic partnership Group, work to deliver this was commissioned, for all contracted carer organisations for young and adult carers to develop an outcomes framework.

Matter of Focus<sup>71</sup> were selected to support the outcomes framework development associated with the strategy since late 2022. This is progressing through the development of the OutNav<sup>ii</sup> approach, in the form of four key phases of tailored support, which includes:

- co-producing a shared outcomes map and monitoring framework
- all partners being supported to get up and running with OutNav, to understand the data, and start to use the framework to track effectiveness of their work
- all partners accessing the framework, and allowing a start to be made on reporting progress around carer outcomes
- a final phase, to continue use of OutNav for the EHSCP and commissioned partners to sustain meaningful reporting for unpaid carer outcomes

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<sup>71</sup> [Home - Matter of Focus \(matter-of-focus.com\)](https://www.matter-of-focus.com)

The progress associated with the OutNav developments will be included in future Performance and Evaluation Reports, with learning along the way about opportunities for this type of approach elsewhere across the EHSCP being considered.

In addition to the reporting through the Outcomes Framework, VOCAL carry out a bi-annual survey of unpaid carers in Edinburgh, which is now commissioned through the Carers spend plan. This is an opportunity for carers to comment on the impact of caring on their lives and carer support services. Key findings will be captured in subsequent Performance and Evaluation reports which will inform ongoing development work.

As indicated, governance of the delivery of the strategy is through the Edinburgh Integration Joint Board's Performance and Development Committee and Carer Strategy Performance and Evaluation Reports are presented to this committee annually.

Governance associated with carer strategy refresh, and any future extensions, will be a matter for the Edinburgh Integrated Joint Board's Strategic Planning Group to consider, as has been the position in the development of this refreshed strategy.

Final ratification of the strategy remains Edinburgh Integrated Joint Board's responsibility.

#### Key Individuals involved in developing the EJCS 2023-2026

- Ruth Hendery – EIJB Carer Representative
- Jo Kirby – Action Group
- Kimberly Swan – FAIR
- Sebastian Fischer - VOCAL
- Ruth McLennan – Care for Carers
- Hugo Whittaker – EVOG
- Kirsty Makay – City of Edinburgh Council
- Amanda Farquharson – SPACE
- Ron Carthy – North West Carers
- Tracy Stewart – Capital Carers
- Kyle Oram – EHSCP
- Sarah Bryson, EHSCP
- Katie McWilliam, EHSCP

The development of this refreshed strategy would not have been possible without the key contributors indicated above, alongside the membership of the Edinburgh Carer Strategic Partnership Group, and wider

strategic and operational colleagues. All of whom will play a valuable role in the implementation, monitoring and reporting on the associated actions and development work.

## Appendices

Appendix 1	Draft Carer joint Strategic Needs Assessment
Appendix 2	Eligibility Framework (Adults) (currently under review)
Appendix 3	Adult Carer Support Plan Template (currently under review)
Appendix 4	Adult Carer Support Plan leaflet (currently under review)
Appendix 5	<p>Young Carer Statement Leaflet</p> <p><a href="#">Materials – Edinburgh Young Carers</a></p> <p><a href="#">Young Carer Statement • Capital Carers</a></p>
Appendix 6	<p>Young Carer Statement template (Younger Carers)</p> <p><a href="#">Materials – Edinburgh Young Carers</a></p> <p><a href="#">Young Carer Statement • Capital Carers</a></p>
Appendix 7	<p>Young Carer Statement template (Older Children)</p> <p><a href="#">Materials – Edinburgh Young Carers</a></p> <p><a href="#">Young Carer Statement • Capital Carers</a></p>
Appendix 8	<p>Young Carer Statement Guidance (Inc. Eligibility)</p> <p><a href="#">Materials – Edinburgh Young Carers</a></p> <p><a href="#">Young Carer Statement • Capital Carers</a></p>
Appendix 9	Agreed Spend Plan
Appendix 10	Membership of the Edinburgh Carer Strategic Partnership Group
Appendix 11	Consultation

## Appendix 1 - Draft Carer Joint Strategic Needs Assessment Topic Paper

### Carers

Carers make a vital contribution to the lives of those who are unable to live independently, either through age, disability or illness. The support they provide may be in place of formal support, complementing formal support arranged by the Edinburgh Health and Social Care Partnership or support from other organisations or the care they provide could be the only source of support that the cared for person is receiving.

The Joint Edinburgh Carer Strategy notes that some carers may provide care for a long period of time, whereas others may only provide care for a short period of time depending upon the factors and circumstances of the caring situation, indeed for some carers, their caring role can be a life-long one. Carers may therefore be of any age and their need for support can vary as a result. For instance, young and young adult carers may need additional support when it comes to pressures arising from their caring role affecting their education, starting employment or training and establishing an independent life outwith their caring role. Whereas older carers, or carers who have made this commitment for some time, may need additional support to rest and have a break from their caring role. All carers may benefit from support and learning on how to safely help the person they care for.

As with other chapters in the JSNA, no account of the impact of COVID-19 has been explicitly considered in the analysis. Carers UK have carried out [research](#)<sup>1</sup> on the impact of COVID-19 on carers in 2020, which provides some insights but is not provided at an Edinburgh level. There were 12 key findings which highlight strengths, weaknesses and opportunities in the system. Additionally, in December 2022 the [Care Inspectorate](#)<sup>1</sup> published a report on adult carers' experiences of social work and social care. Similarly, the impact of increases in cost of living is not explicitly considered in the analysis, but Carers UK published briefings in [March 2022](#)<sup>1</sup> and [October 2022](#)<sup>1</sup> which highlight pressures for carers and the people they look after.

This chapter aims to collate published data and research on unpaid carers to assist in strategic and service planning across the Partnership. Feedback from unpaid carers and those with lived experience has been key to developing the Joint Edinburgh Carer Strategy and it is in this document that the issues arising and support required for unpaid carers can be addressed more appropriately.

#### Key points

Detailed key points are highlighted at the end of each section, however, as a summary, a number are noted here:

- It is estimated that there are between 45,000 and 70,000 adult carers in Edinburgh.
- The carers census reports 91% of adult carers provide 20 hours or more of care per week.
- The Health and Care Experience Survey indicates that 16% of carers in Edinburgh do not have a good balance between caring and other areas of life and a quarter do not feel supported to continue caring.

#### Policy background

The Carers (Scotland) Act 2016 came into effect in 2018. The Act placed a number of responsibilities on NHS Boards, Local Authorities and Integration Authorities. These include setting local eligibility criteria for supporting carers, preparing Adult Carer Support Plans and Young Carer Statements for people who identify as carers and preparing a strategy for their area.

The [National Care Service \(Scotland\) Bill](#), currently at Stage 1, as introduced will make a number of changes to the Carers (Scotland) Act 2016 including the right to a break from caring. These changes are shown in a [Keeling Schedule](#)<sup>1</sup> published by the Scottish Government.

The [report and evaluation](#) of the first year of contracted provisions supporting the [Joint Edinburgh Carers Strategy 2019-22](#)<sup>1</sup> was considered at the Performance and Delivery Committee on 2 March 2022<sup>1</sup>. The Joint Edinburgh Carer Strategy 2023-2026 will be considered by the Strategic Planning Group and Integration Joint Board in the second half of 2023.

### **Benefits for carers**

The Scotland Act 2016 devolved powers over a number of benefits to the Scottish Parliament. Carer's Allowance was one of the benefits to be devolved and in September 2018 became the first benefit to come under the competency of Social Security Scotland. [Research](#) published by the Scottish Government in December 2020<sup>1</sup> details the impact of Carer's Allowance Supplement on the lives of carers. It highlights that although carers felt more recognised and valued it also helped with their mental health and wellbeing. The benefit had not however raised the profile of carers more generally and therefore carers did not feel more recognised or valued by society generally. An additional Coronavirus Carer's Allowance Supplement, equal to the Carer's Allowance Supplement, was paid in June 2020 and December 2021<sup>1</sup>.

Policy Position Papers published by the Scottish Government in [October 2017](#) and [February 2019](#) outline Scottish Government policy related to benefits for carers. To help develop the new benefits, the Scottish Government has established Social Security Experience Panels, the members of which have recently been in receipt of benefits. In the summer of 2020 a [report](#) on the panel's views on carer benefits for those caring for disabled children was published<sup>1</sup>. The report identifies how carers would like to apply for the benefit online and how they have positive experiences of benefits for carers. Respondents were concerned about the impact of receiving the benefit on other benefits and how rules on work and study did not reflect the reality of lives of carers.

In 2022 the Scottish Government held a [consultation](#) on the development of Scottish Carer's Assistance, the replacement of the Carer's Allowance. The [response](#) to the consultation was published in November 2022. Scottish Carer's Assistance will be piloted by the end of 2023 and launched in the spring of 2024<sup>1</sup>.

### **Estimated number of carers**

Although not broken down to a local authority level by age, The [Scottish Health Survey](#)<sup>1</sup> provides a wide range of information on carers across Scotland. The survey estimates that nationally 15% of adults (13% of men and 18% of women) identify as carers. This is a proportion that peaks for the 55-64 age group where 1 in 4 (25%) of the population identify as carers.

The survey report estimates that 10% of adults in Edinburgh aged 16+ are carers. This would provide an estimate of 44,764 carers, however, there are no details of the breakdown of this number. The survey does provide a breakdown nationally (shown in table 4.1) but given the different population structures cannot be used to estimate a breakdown of carers in Edinburgh.



**Table 4.1: People identifying as carers by age**

Percentage identifying as carers by age	16-24	25-34	35-44	45-54	55-64	65-74	75+	All adults
Male	6%	11%	12%	13%	23%	10%	10%	13%
Female	13%	14%	18%	25%	27%	17%	7%	18%
All Adults	9%	12%	15%	20%	25%	14%	8%	15%

The [Health and Care Experience \(HACE\) Survey](#)<sup>1</sup> is a bi-annual survey which provides insight to the experiences of people using health and social care services in Scotland. Data for the caring responsibilities section are available at Health and Social Care Partnership level. The latest results, for 2021, were published in May 2022. In the Caring Responsibilities section of the Health and Care Experience Survey show that 15% of respondents in Edinburgh identify as a carer, compared with 18% nationally. Unlike other results from the HACE survey, this is an unweighted result (no adjustment has been made to the data to take into account any groups of the population that may be under-represented in the survey). As such it may not be representative of the population, but 15% would represent an estimated 67,147 carers (applying the 2021 Mid-year population estimate).

These estimates of carers in the City of Edinburgh are far greater than the number of carers identified in the [2021/22 Carers Census](#)<sup>1</sup>. Nationally there were 42,050 carers in the census and no breakdown to Health and Social Care Partnership was published. In contrast to the Scottish Health Survey the Carers Census only considers carers who have been in contact with carer centres or Health and Social Care Partnerships; some carers in the Scottish Health Survey will not be supported in any way and this may reflect the higher number of carers who self-identify in the Scottish Health Survey or Health and Care Experience Survey. It should be remembered that the carers census is a new data return and as such should be seen as a dataset under development; it was noted that in the 2020/21 census there were 31,760 carers identified and the 30% increase may be due in part to the greater number of organisations submitting data.

Carers Allowance is payable to carers providing more than 35 hours of care per week and who meet certain criteria, including earning less than £139 (net) per week. Given the criteria in place not all carers will receive Carers Allowance, however, using (DWP) data in *Stat-Explore*<sup>1</sup> it is possible to identify the number of recipients by locality.

The number of people in receipt of carers allowance in each locality at six monthly intervals is shown in the table below (due to disclosure control at ward level, the sums do not always add match the total):

**Table 4.2: Carers allowance recipients by locality, 2018-2022**

	May 18	Nov 18	May 19	Nov 19	May 20	Nov 20	May 21	Nov 21	May 22	Nov 22
North West	1,320	1,342	1,369	1,360	1,378	1,408	1,382	1,369	1,385	1,354
North East	1,265	1,260	1,257	1,269	1,288	1,297	1,277	1,270	1,287	1,276
South East	832	813	841	845	901	939	899	898	895	901

South West	1,030	1,063	1,081	1,033	1,059	1,090	1,090	1,062	1,057	1,069
<b>Total</b>	<b>4,442</b>	<b>4,472</b>	<b>4,552</b>	<b>4,507</b>	<b>4,621</b>	<b>4,727</b>	<b>4,641</b>	<b>4,606</b>	<b>4,638</b>	<b>4,615</b>

Across Edinburgh, the number of people in receipt of Carers Allowance increased by 285 between May 2018 and November 2020, following an upward trend over the period, however the number of recipients has since fallen back slightly. It is not known if the increase reflects a greater number of carers eligible to receive the benefit, or a greater uptake of those eligible to receive the benefit who may have been supported to maximise benefit income. This may also have been affected by an increasing number of people fulfilling the criteria due the COVID-19 lockdowns.

Young Carer Grants, a benefit administered by Social Security Scotland launched on 21 October 2019, provides an annual payment to carers aged 16-18 meeting certain criteria including providing an average of at least 16 hours of care per week. The latest [Young Carer Grant: high level statistics<sup>1</sup>](#) publication shows that by the end of between 2019-20 and 2022-23, 525 applications had been received for young carers living in Edinburgh, of which 330 had been authorised. Grants worth £98,931 had been disbursed.

**Table 4.3: Young Carer Grants**

	2019-20	2020-21	2021-22	2022-23
Applications	65	125	155	180
Processed	50	135	145	155
Authorised	40	90	105	95

Key points:

- The number of people in receipt of Carers Allowance had been increasing but has plateaued.
- The number of young carers applying for a Young Carer Grant has been increasing since the benefit launched, however the number authorised has flattened.

Table 4.4 lists the different estimates, and counts, of carers by source; carers can appear in more than one source.

**Table 4.4: Estimate of carers in Edinburgh by source**

Data source	Estimated number of carers
Scottish Health Survey (local authority)	44,764
Health and Care Experience Survey	67,147
Carers Allowance recipients	4,615
Young Carer Grant recipients	95

## **Caring in Black and Minority Ethnic Communities**

There is little information available on particular issues arising in Black and Minority Ethnic (BME) communities in Edinburgh. A MECOPP (Minority Ethnic Carers of People Project) briefing paper from 2017, *Informal Caring within Scotland's Black and Minority Ethnic Communities*<sup>1</sup>, references a small study from 1996 as the most substantive Scottish document. It should be emphasised the study is 25 years old and the sample size was small.

### **Impact of caring**

In December 2021 the Scottish Government published results of the first collection of the annual [Carers Census](#)<sup>1</sup>. The census provides the most recent national data on the impact of caring for those carers known to carers centres and Health and Social Care Partnerships. As many organisations, both Health and Social Care Partnerships and Carer Centres, are still developing systems and processes, the data are incomplete and the publication provides national data only. Due to COVID-19 no census was carried out in 2019/20, however, this was requested during 2021 and the publication covers both 2019/20 and 2020/21. The data are only available at Scotland level so we are unable to show figures for Edinburgh but the results provide an idea of the types of needs unpaid carers face that need to be responded to in each local area. As noted earlier, the second publication of the [Carers Census 2022](#) results were published in December 2022.

The Carers Census shows that 91% of adult carers provide 20 hours or more of care per week.

**Table 4.5: Hours spent caring per week, Scotland**

<b>Hours caring per week</b>	<b>Adult Carers</b>
up to 19 hours	9%
20 - 49 hours	28%
50+ hours	63%

The impact of caring presents itself more broadly with a range of impacts, emotional well-being the most common (68%).

**Table 4.6: Impact of caring, Scotland**

<b>Impact</b>	<b>Adult Carers</b>
Emotional well-being	68%
Life balance	66%
Health	56%
Future plans	54%
Carer feels valued	42%
Finance	36%

Employment	30%
Living environment	30%

Locally VOCAL, Voice of Carers Across Lothian, carry out a [survey of carers](#). The latest survey was carried out in 2021<sup>1</sup>. Although not directly comparable, it indicates a change from the previous survey in 2017 in a number of areas. For example the age of carers has reduced, in 2017 45% of respondents were aged over 65 compared with 27% in 2021. This is reflected in the economic activity of the respondents between 2017 and 2021 where the proportion in paid employment has increased from 25% to 31% and the proportion retired and in receipt of a pension has fallen from 50% to 33%.

A new question in the survey asks the relationship to the cared for person. As carers can care for more than one person, the type of relationships add up to more than 100%, however, the main groups of child (of any age), spouse/partner and parent are broadly similar at 35%, 32% and 32% respectively. It is noted that 11% of respondents reported caring for a child and a parent.

The impact of caring as reported in this survey is more qualitative than the functional impact as reported in the carers census. For example, 41% of respondents reported more contact with health services about their own health (up from 35% reporting seeing their GP more often in 2017) and in 2021 67% report their physical health and 79% report their mental health has been affected compared with 59% reporting that being a carer made their health worse in 2017.

In terms of the financial impact of caring, 69% of respondents reported that being a carer had a financial impact. Perhaps reflecting the change in demographic noted above or the impact of the pandemic, there have been increases in people reporting they have stopped or reduced employment and lost national insurance or pension contributions. New questions show that 15% had to borrow money due to their caring role and 7% have had to use a food bank.

Key points include:

- 91% of carers nationally, identified in the carers census, provided 20 or more hours of care per week.
- 68% of carers report their emotional wellbeing is affected by their caring role.

### **Support provided**

The carers census reports on the different support that has been provided to carers included in census submissions.

Almost 17 in 20 carers received advice and information whereas just over a third (34%) received support via a short break or respite. It should be noted that 8% report as receiving no help or support, however, as these records relate to people known to carers centres or Partnerships it may be that having the opportunity to talk with a worker about their situation was a support in and of itself and no further input was required.

**Table 4.7: Support provided for adult carers, Scotland**

<b>Support</b>	<b>Carers with support provided</b>
Advice & information	84%
Short breaks or respite	34%
Counselling or emotional support	28%
Practical support (e.g. transport, equipment, adaptations)	17%
Other support	15%
Peer support/group activities	14%
Assistance with benefits, e.g. Carer's allowance	14%
Training and learning	13%
Emergency planning	8%
No help / support required	8%
Advocacy	7%
Future planning	6%

The HACE survey asks four questions related to the experience of people with caring responsibilities. Two of the questions could be seen as proxies for carers ability to continue in that role. It shows that carers in Edinburgh are no different in their balance between carer and other things in life and how supported they feel to continue caring. It should be noted that respondents to this survey self-identify as carers and therefore may reflect people who have not approached services for support, rather than people who are discontent with the support they are receiving.

**Table 4.8: Balance of caring and support for caring**

	<b>Edinburgh</b>			<b>Scotland</b>		
	<b>Positive</b>	<b>Neutral</b>	<b>Negative</b>	<b>Positive</b>	<b>Neutral</b>	<b>Negative</b>
I have a good balance between caring and other things in my life	64%	20%	16%	63%	20%	17%
I feel supported to continue caring	30%	42%	28%	30%	43%	28%

Key points include:

- Two thirds (64%) of carers in Edinburgh have a good balance between caring and other things in their lives; 16% do not have this balance.
- Almost a third (30%) of carers feel supported to continue caring; just over a quarter 28% do not.

**Philip Brown**

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**Appendix 2 - Eligibility Framework (Adults) (Currently Under Review)**

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Local Carers Eligibility Criteria	4
How we Apply the Local Carers Eligibility Criteria	7

## 1 Introduction

Under the Carers (Scotland) 2016 Act we have powers and duties to support adult and young carers.

You are a carer if:

- you care for, or intend to care for, another person
- and you are not paid for the care you provide
- and you are not providing the care through a voluntary organisation.

If you are a parent of a child (someone under 18) you may be a carer if your child has additional care and support needs which are not because of their age.

As a carer, we have a duty<sup>1</sup> to offer you an Adult Carer Support Plan (ACSP) or a Young Carer Statement (YCS) (for those who are under 18 or over 18 but still at school) and prepare it if you want one. We will offer to do this for every carer we identify, or for any carer who requests one.

Our ACSP is based on the personal outcomes approach and our YCS is based on the national wellbeing indicators for children and young people. As part of the ACSP/YCS, together with you, we look at the care you give and the impact this has on your life. We also look at personal supports, access to supports in the community and areas in which you need more individualised supports.

To help us determine the impact of caring we ask the following questions:

- Is the caring role sustainable?
- How great is the risk of the caring role becoming unsustainable?

## 2 Carers Eligibility Criteria

The Scottish Government has asked Local Authorities to set local eligibility criteria for carers. Eligibility criteria help guide Local Authorities to be consistent when deciding what level of support to provide to different people.

The Scottish Government have outlined a set of 7 'indicators' which cover key areas of a carer's life. They have asked Local Authorities to use these indicators as the basis of their Eligibility Criteria. The indicators are:

1. health and wellbeing
2. relationships
3. living environment
4. employment & training
5. finances
6. life balance
7. future planning

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Our eligibility criteria is set out in the table on page 5 using these seven indicators

<sup>1</sup> A duty is something we must do.



### 3 Local Eligibility Threshold

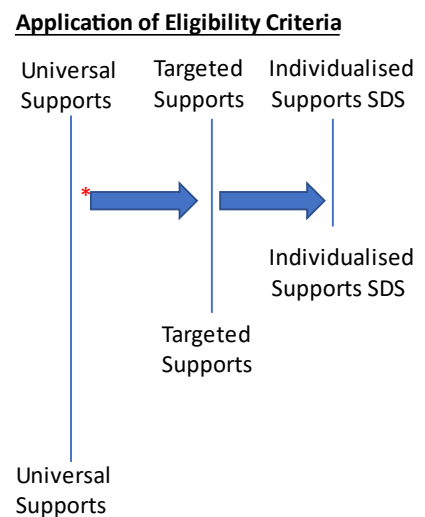
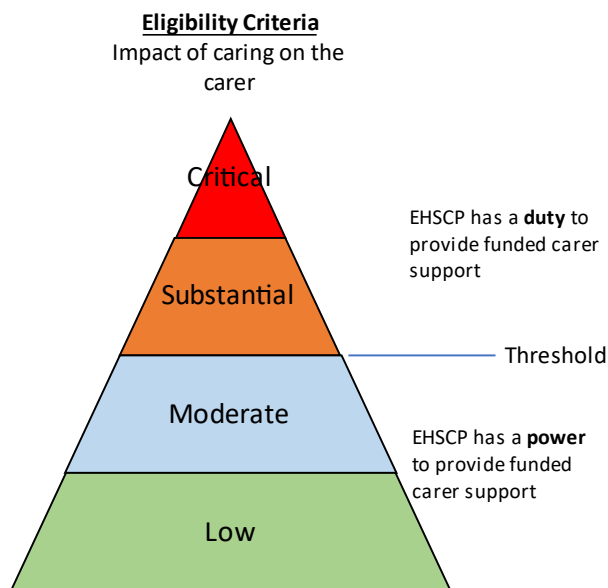
When completing your ACSP/YCS we use this eligibility criteria to make sure we make consistent decisions about the level of support to provide and also to decide who is eligible to receive individualised support.

In Edinburgh we have said that if caring is having either a **substantial** or **critical** impact on the carer we have **duty** to support that carer using individualised support. This is known as our threshold. Through this individualised support our aim is to reduce the impact of caring to a manageable level. Carers can request a new ACSP or YCS where they believe their circumstances have changed.

The impact only has to meet the threshold for one indicator for us to have a duty to provide support for that indicator. Future planning is the one nationally recognised exception to this. This indicator will be considered alongside the others rather than on its own. In Edinburgh’s ACSP we also look at the relationship (partnership) between carers and services. In a similar way to future planning, we will consider how this is working alongside the other national indicators.

We can use our discretion to consider individualised support even if the threshold has not been met. We will do this if it is clear that without this support the impact of caring would reach a critical level within a short space of time (normally considered to be within 6 months).

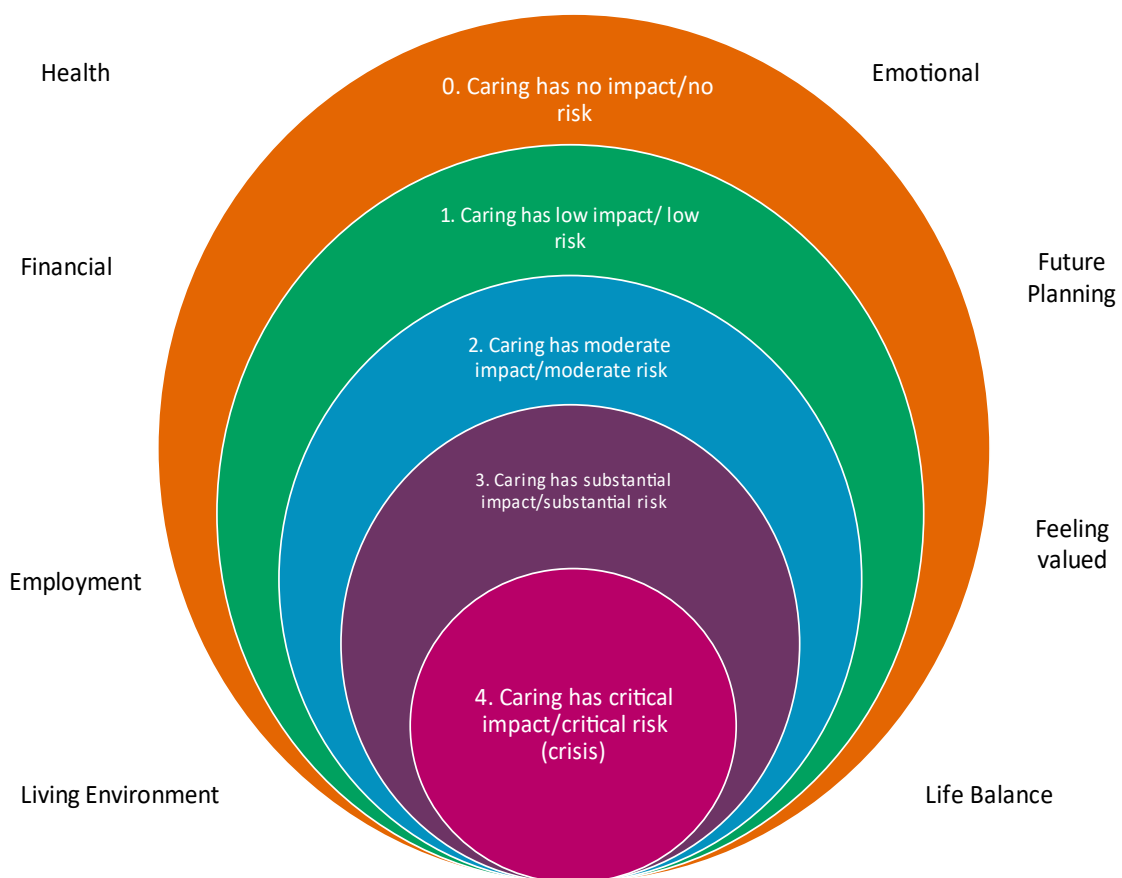
Illustrative threshold for carer support



\*The order in which supports will be considered across all areas o

## 4 Local Carers Eligibility Criteria

The tables below provides a detailed breakdown of Edinburgh Health & Social Care Partnership's eligibility criteria. We know people do not fit neatly into boxes but it is important that we have some way of ensuring we are as consistent as possible when supporting carers. The term carer means both adult and young carers.



National Indicator	Critical	Substantial	Moderate	Low	No impact/no risk
Health	Carer's health is breaking/has broken down	Carer's health requires attention	Carer's health is at risk without intervention	Carer's health beginning to be affected	Carer in good health
Emotional	Carer's emotional wellbeing is breaking/has broken down Relationship with cared-for person is breaking/has broken down	Significant impact on carer's emotional wellbeing Relationship with cared for person is significantly affected	Some impact on carer's emotional wellbeing Some detrimental impact on relationship with cared-for person	Caring role beginning to have an impact on emotional wellbeing Risk of detrimental impact on relationship with cared-for person	Carer has good emotional wellbeing. Good relationship with cared-for person
Finance	Caring is causing severe financial hardship e.g. carer cannot afford household essentials and utilities, not meeting housing payments	Caring is having a significant impact on finances e.g. difficulty meeting housing costs AND utilities	Caring is causing some detrimental impact on finances e.g. difficulty meeting either housing costs OR utilities	Caring is causing a risk of financial hardship e.g. some difficulty meeting housing costs and utilities	Caring is not causing financial hardship, e.g. carer can afford housing costs and utilities

National Indicator	Critical	Substantial	Moderate	Low	No impact/no risk
Life Balance	Carer feels their knowledge and expertise is never valued by health, social care and other practitioners and consequently they always feel excluded and disempowered	Due to their caring role, the carer has few and irregular opportunities to achieve the balance they want in their life. They have little access to breaks and activities which promote physical, mental, emotional wellbeing	Due to their caring role, the carer has limited opportunities to achieve the balance they want in their life. They have access to a few breaks and activities which promote physical, mental, emotional wellbeing	Carer has some opportunities to achieve the balance they want in their life. They have access to a choice of breaks and activities which promote physical, mental, emotional wellbeing	Carer has regular opportunities to achieve the balance they want in their life. They have a broad choice of breaks and activities which promote physical, mental, emotional wellbeing
Feeling valued	Carer feels their knowledge and expertise is never valued by health, social care and other practitioners and consequently they always feel excluded and disempowered	Carer often feels their knowledge and expertise is not valued by health, social care and other practitioners and consequently they often feel excluded and disempowered	Carer increasingly feels their knowledge and expertise is not valued by health, social care and other practitioners and consequently they sometimes feel excluded and disempowered	Carer feels their knowledge and expertise is sometimes valued and consequently they generally feel included and empowered	Carer feels their knowledge and expertise is always valued by health, social care and other practitioners and consequently they feel included and empowered

National Indicator	Critical	Substantial	Moderate	Low	No impact/no risk
Future Planning	Carer is very anxious about the future and has severe concerns	Carer is anxious about the future and has significant concerns	Carer is not confident about the future and has some concerns	Carer is largely confident about the future but has minor concerns	Carer is confident about the future and has no concerns
Employment	Carer has significant difficulty managing caring and employment and/or education and there is an imminent risk of giving up work or education. Carer is not in paid work or education but would like to be now	Carer has significant difficulty managing caring and employment and there is a risk to sustaining employment and/or education in the short term Carer is not in paid work or education but would like to be soon.	Carer has difficulty managing caring and employment and there is a risk to sustaining employment and/or education in the medium term Carer is not in paid work or education but would like to be in medium term	Carer has some difficulty managing caring and employment and there is a risk to sustaining employment and/or education in the long term Carer is not in paid work or education but would like to be in the long term	Carer has no difficulty in managing caring and employment and/or education Carer does not want to be in paid work or education.
Living environment	Carer's living environment is unsuitable and there are immediate and critical risks to the health and safety of the carer and cared for person	Carer's living environment is unsuitable and poses an immediate risk to the health and safety of the	Carer's living environment is unsuitable but poses no immediate risk.	Carer's living environment is mostly suitable but could pose a risk to the health and safety of the carer	Carer's living environment is suitable, posing no risk to the physical health and safety of the carer and

<b>No Impact (0)</b>	<b>Indicates that there are no quality of life issues resulting from the caring situation and at this moment no need for support or advice.</b>
<b>Low Impact (1)</b>	Indicates that there may be some quality of life issues but low risk to a carer's capacity for independence or health and wellbeing. There may be some need for universal and/or preventative support or advice.
<b>Moderate Impact (2)</b>	Indicates that there is some risk to a carer's capacity for independent living and health and wellbeing. This may call for provision of some health and social care services.
<b>Substantial Impact (3)</b>	Indicates that there is major risk to a carer's capacity for independent living and health and wellbeing. Likely to require urgent provision or health and social care services.
<b>Critical Impact (4)</b>	Indicates that there are significant risks to a carer's capacity for independent living and health and wellbeing. Likely to require immediate provision or social care services.

## 5 How we Apply the Eligibility Criteria

We will look at the impact your caring role is having on you, what needs to change, if anything, and the best way to support those changes. By doing this our aim is to help you to continue to care for the person you care for (if that's what you want). There are three broad categories of support which are detailed below with examples<sup>2</sup>:

### 5.1 Universal/Preventative & Existing Support

Universal supports are those which are open to everyone. We will help guide you to support that is already generally available and help you to make the best use of the strengths, capabilities and supports you already have. We will always look at these types of support first across all levels of impact and risk.

#### Examples of Universal Supports

Adult & Young Adult Carers	Young Carers
<ul style="list-style-type: none"> <li>• Adult Carer Organisations</li> <li>• Local health services</li> <li>• Peer and family support</li> <li>• Advocacy</li> <li>• Community and support groups</li> <li>• Supported self-care</li> <li>• Social and leisure opportunities</li> <li>• Emergency planning</li> </ul>	<ul style="list-style-type: none"> <li>• Young Carer Organisations</li> <li>• Support through local health services and education</li> <li>• Peer and family support</li> <li>• Community and local youth groups</li> <li>• Social and leisure opportunities</li> <li>• Advocacy</li> <li>• Emergency planning</li> </ul>

### 5.2 Targeted Supports

If your needs are either not met, or not fully met through universal and/or informal supports then we will look at more targeted support. Most targeted supports have a referral or screening process and tend to be more specialist or focused on a particular issue. Some of these projects or services may be funded or provided by support from the Integration Authority or health board.

Table 2 Examples of Targeted Supports

Adult Carers	Young Carers
<ul style="list-style-type: none"> <li>• Edinburgh Leisure Card (gym access)</li> <li>• Counselling and Mediation services i.e. family group conferencing</li> <li>• Access to learning and development sessions</li> <li>• Groupwork around key carer issues</li> <li>• 1:1 support</li> </ul>	<ul style="list-style-type: none"> <li>• Edinburgh Leisure Card (Gym Access)</li> <li>• Group work</li> <li>• Work with schools</li> <li>• Help with employment and training opportunities</li> <li>• Help with budgeting</li> <li>• Counselling and therapy</li> </ul>

<sup>2</sup> Please note the examples do not provide an exhaustive list. Individual need and desired outcome (what matters to you) will determine the best way to support you.

### 5.3 Individualised Supports

Individualised support applies to the ‘remaining’ needs and is support that cannot be provided by universal or targeted supports. This is arranged through self-directed support, which gives you options about the level of choice and control you want over your support. If the ‘remaining’ needs do not meet the eligibility threshold we must decide whether our discretionary power to provide support should be used.

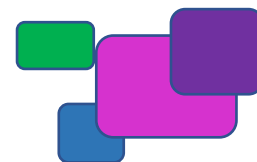
The purpose of individualised support is to reduce the impact and risks of caring to below the threshold (moderate). There is a large degree of flexibility in individualised support and it is agreed on a case by case basis, in line with what would be considered a reasonable cost to reduce the risk(s).

**Examples of Individualised Supports** (the National Indicators have been included to illustrate the types of support available in Edinburgh under each indicator). **The examples below are for illustrative purposes only.**

National Indicator	Adult Carers	Young Carers
<b>Health and wellbeing</b>	<ul style="list-style-type: none"> <li>• Short breaks/ breaks from caring</li> <li>• Support to pursue a particular hobby/interest</li> <li>• Membership of a group/activity</li> </ul>	<ul style="list-style-type: none"> <li>• Short breaks/ breaks from caring</li> <li>• Support to pursue a particular hobby/interest</li> <li>• Membership of a group/activity</li> </ul>
<b>Relationships</b>	<ul style="list-style-type: none"> <li>• Replacement care to allow a break from caring</li> <li>• Support to reduce carer stress for example funding to enable the carer to pursue an interest which reduces the impact of caring on their relationships.</li> </ul>	<ul style="list-style-type: none"> <li>• Replacement care to allow a break from caring</li> <li>• Support to reduce carer stress for example funding to enable the carer to pursue an interest which reduces the impact of caring on their relationships.</li> </ul>

National Indicator	Adult Carers	Young Carers
<b>Employment and Training</b>	<ul style="list-style-type: none"> <li>• Training specific to the caring role i.e. manual handling, condition specific training</li> <li>• Individualised support is not generally available to assist with the payment of further education. This is the responsibility of educational services.</li> </ul>	<ul style="list-style-type: none"> <li>• Individualised support is not generally available to assist with the payment of further education. This is the responsibility of school/ educational services</li> <li>• Training specific to the caring role i.e. manual handling, condition specific training (age appropriate)</li> <li>• Individualised support may be appropriate specific to the young carer i.e. to purchase equipment to help them stay on top of school work.</li> </ul>
<b>Finances</b>	<ul style="list-style-type: none"> <li>• Individualised support is not generally available to help pay for household/utility bills</li> <li>• Individualised support may be appropriate specific to the carer such as paying for a bus pass to reduce the financial impact of travel as part of caring role.</li> </ul>	<ul style="list-style-type: none"> <li>• Individualised support is not generally available to help pay for household/utility bills and this would generally not be a responsibility for most young carers, although may be relevant to those aged 16-18</li> <li>• Individualised support may be appropriate specific to the carer such as paying for a bus pass to reduce the financial impact of travel as part of caring role.</li> </ul>
<b>Life Balance</b>	<ul style="list-style-type: none"> <li>• Short Breaks/ break from caring</li> <li>• Funding to pursue a particular hobby/interest</li> <li>• Membership of a group/activity</li> <li>• Equipment to enable a carer to continue with an interest.</li> </ul>	<ul style="list-style-type: none"> <li>• Short breaks/ break from caring</li> <li>• Funding to pursue a particular hobby/interest</li> <li>• Membership of a group/activity</li> <li>• Equipment to enable a carer to continue with an interest.</li> </ul>
<b>Future planning</b>	<ul style="list-style-type: none"> <li>• Future planning is considered alongside the other indicators. It is also something we would look at in an assessment of the needs of the cared for person.</li> </ul>	<ul style="list-style-type: none"> <li>• Future planning is considered alongside the other indicators. It is also something we would look at in an assessment of the needs of the cared for person.</li> </ul>





## Appendix 3 – Adult Carer Support Plan (currently under review)

### Adult Carer Support Plan

#### Carer Information

Title	
First name(s)	
Surname	
DOB	
Preferred pronoun	
Ethnic Group	
Address line 1	
Address line 2	
Address line 3	
Address Line 4	
Postcode	
Contact number	
Carer Advocacy/ communication needs?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Would carer like a copy of this plan?	Yes <input type="checkbox"/> No <input type="checkbox"/>

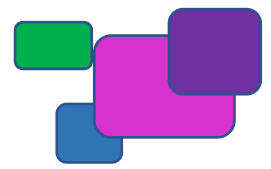
#### Supported Person Information

Full Name (with consent)	
Terminal Illness?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Diagnosis date	DD/MM/YY
6 Months Prognosis?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, Substantive conversation date	DD/MM/YY
Light Touch ACSP ( <b>blue sections only</b> ) date complete	DD/MM/YY

#### Worker Information

Name of worker completing this plan	
Organisation	
Contact number	
Email address	

Can we share this plan? (required for processing carer payments/ onward referrals - certain anonymous data used in stats/ census; <b>not</b> for marketing)	Yes <input type="checkbox"/> No <input type="checkbox"/>		
If YES, who do you agree we can share it with?			
<b>NHS</b>	<b>The City of Edinburgh Council</b>	<b>Carer Agencies</b>	Other (please list below)
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Carer Name:	Worker Name:		
Carer Signature:	Worker Signature:		



Date:	Date:
-------	-------

### Consent to Share Information

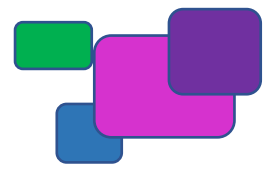
### Background Information/ Carer Story

What is your relationship with the person you care for? (consider supported person's diagnosis/ relationship/ what carer wants for supported person/ history/ length of relationship/ length of caring/ needs of supported person/ other caring responsibilities/ any other information)

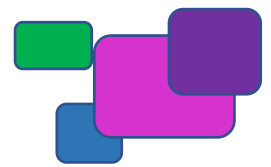
Who and/or what helps you care for the person? (consider Legal arrangements/ technology/equipment/ friends/ family/ neighbours/other)

What do you really want to share about your situation? (what does the carer want the worker to understand about their situation, what are their priorities)

What does a typical day look like for you? (consider daily tasks & routine/ likely daily events/ regularity of support/ other caring responsibilities/ work, training, education/ time for self/ any additional information)



What might a good/better day look like for you? (consider supported person/ carer/ social, physical, emotional wellbeing/ any other factors)
What does a bad day look like for you? (consider supported person/social, physical, emotional wellbeing/ any other factors)
What is going well for you and why? (consider relationship with supported person/ other relationships/ social supports/ environmental factors/ employment/training opportunities)
What worries you in your caring role? (Own health/ supported person's health/ finances/ state of housing/ future/family relationships)

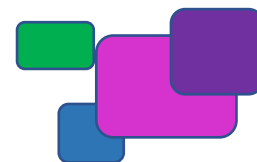


At this present time, are you able to continue with your caring role?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If "NO" what would need to change in order to continue in caring role? (add to action plan)	
At this present time, are you willing to continue in your caring role	Yes <input type="checkbox"/> No <input type="checkbox"/>
If "NO" what, if anything, could change in order to continue the caring role? (add to action plan)	
Comments:	

**Additional Information**

How long have you been caring for?	Less than 1 year <input type="checkbox"/> 1 year but less than 5 years <input type="checkbox"/> 5 years but less than 10 years <input type="checkbox"/> 10 years but less than 20 years <input type="checkbox"/> 20 years or more <input type="checkbox"/> Unknown <input type="checkbox"/>		What type of care do you provide? (tick all that apply)	Medication <input type="checkbox"/> Personal Care <input type="checkbox"/> Shopping, Cleaning and Domestic tasks <input type="checkbox"/> Transport <input type="checkbox"/> Financial Support <input type="checkbox"/> Supervision/ Emotional Support <input type="checkbox"/> Other <input type="checkbox"/>
Care hours provided in a typical week?	Up to 4 hours <input type="checkbox"/> 5-19 hours <input type="checkbox"/> 20-34 hours <input type="checkbox"/> 35-49 hours <input type="checkbox"/> 50+ hours <input type="checkbox"/> Unknown <input type="checkbox"/>		What area of your life has caring impacted on? (tick all that apply)	Health <input type="checkbox"/> Emotional wellbeing <input type="checkbox"/> Finances <input type="checkbox"/> Life balance <input type="checkbox"/> Feeling valued <input type="checkbox"/> Future Plans <input type="checkbox"/> Employment <input type="checkbox"/> Living environment <input type="checkbox"/>

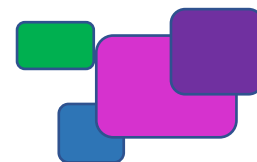
Are you Benefits Appointee for the Supported Person	Yes <input type="checkbox"/> No <input type="checkbox"/>
If no would you like more information?	Yes <input type="checkbox"/> No <input type="checkbox"/> (add to action plan if yes)
Do you hold Welfare or Financial Power of Attorney?	Welfare <input type="checkbox"/> Financial <input type="checkbox"/> Neither <input type="checkbox"/>
Would you like more information?	Yes <input type="checkbox"/> No <input type="checkbox"/> (add to action plan if yes)
Are you Welfare or Financial Guardian for the supported person?	Welfare <input type="checkbox"/> Financial <input type="checkbox"/> Neither <input type="checkbox"/>
Would you like more information?	Yes <input type="checkbox"/> No <input type="checkbox"/> (add to action plan if yes)
Do you have an Anticipatory Care Plan?	Yes <input type="checkbox"/> No <input type="checkbox"/>



If no, would you like more information?	Yes <input type="checkbox"/> No <input type="checkbox"/> (add to action plan if yes)
Do you have an emergency plan?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If no, would you like more information?	Yes <input type="checkbox"/> No <input type="checkbox"/> (add to action plan if yes)
Do you have an emergency card?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If no, would you like more information?	Yes <input type="checkbox"/> No <input type="checkbox"/> (add to action plan if yes)

### Action Plan

<b>Outcome 1</b>				
<b>To continue in my caring role, I need:</b>				
<b>What would be helpful?</b>	<b>Actions</b>	<b>By Who?</b>	<b>By When?</b>	<b>Action Complete Date</b>
<b>Review Date:</b> <b>Outcome Achieved:</b> Yes <input type="checkbox"/> No <input type="checkbox"/> (if no, assign new actions to plan) <b>Next Check in Date:</b> <small>(Worker can add new rows, actions and dates as necessary for new tasks relating to each outcome)</small>				
<b>Outcome 2</b>				
<b>To continue in my caring role, I need:</b>				
<b>What would be helpful?</b>	<b>Actions</b>	<b>By Who?</b>	<b>By When?</b>	<b>Action Complete Date</b>
<b>Review Date:</b> <b>Outcome Achieved:</b> Yes <input type="checkbox"/> No <input type="checkbox"/> (if no, assign new actions to plan) <b>Next Check in Date:</b> <small>(Worker can add new rows, actions and dates as necessary for new tasks relating to each outcome)</small>				
<b>Outcome 3</b>				
<b>To continue in my caring role, I need:</b>				
<b>What would be helpful?</b>	<b>Actions</b>	<b>By Who?</b>	<b>By When?</b>	<b>Action Complete Date</b>
<b>Review Date:</b> <b>Outcome Achieved:</b> Yes <input type="checkbox"/> No <input type="checkbox"/> (if no, assign new actions to plan) <b>Next Check in Date:</b> <small>(Worker can add new rows, actions and dates as necessary for new tasks relating to each outcome)</small>				
<b>Outcome 4</b>				
<b>To continue in my caring role, I need:</b>				



What would be helpful?	Actions	By Who?	By When?	Action Complete Date

**Review Date:**  
**Outcome Achieved:** Yes  No  (if no, assign new actions to plan)  
**Next Check in Date:**  
 (Worker can add new rows, actions and dates as necessary for new tasks relating to each outcome)

## Eligibility Level

(Please refer to the Carer Eligibility Framework)

Eligibility Level	Critical	<input type="checkbox"/>
	Substantial	<input type="checkbox"/>
	Moderate	<input type="checkbox"/>
	Low	<input type="checkbox"/>

## Completed Plan

Copy of the plan received	Yes <input type="checkbox"/> No <input type="checkbox"/>
Authorisation of completed plan (by the carer)	Signature:  Date:

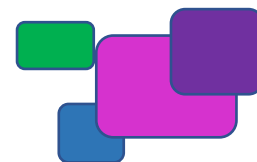
## Carer Payment Requested (for worker to complete)

Carer Payment Requested	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, amount	£
Summary of requested support with link to Outcome (above)	
Details of other funding applied for (if applicable)	

## For Office Use Only (For completion by Edinburgh Carer Support Team)

### Referral Information

Initial referral by? (name/ organisation)	
Date referral made?	
Date referral received?	
Is this a re-referral?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If re-referral state reason	

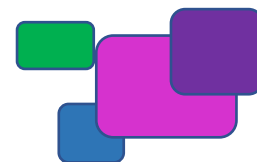


Swift/ Trak number	
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### Plan Information

ACSP Completion date	DD/MM/YY
Carer Payment?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, amount?	£
Eligibility Criteria	Critical <input type="checkbox"/>
	Substantial <input type="checkbox"/>
	Moderate <input type="checkbox"/>
	Low <input type="checkbox"/>
Authorised Date	DD/MM/YY
Authorised Name	XXXX
Case Closure Date	DD/MM/YY

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## Appendix 4 – Adult Support Plan Leaflet

# What to expect from an adult carer support plan

### Do you provide care for someone?

You may be a parent, partner, son, daughter, brother, sister, friend or neighbour to someone who needs support.

This may be due to a physical or mental illness, alcohol or substance use, a long term condition or a disability. If you give someone help and support to manage their life – you are a carer.

### What is an adult carer support plan?

An adult carer support plan (ACSP) allows you to discuss your caring role and its impact on your life. The plan can help you balance your life alongside your caring role. The plan will also set out what supports can help you achieve what is important to you. An ACSP can also help identify what can be done if you feel you cannot continue caring.

### Carer support

All carers can access free information and support from community organisations like local carers centres and from staff within the Health and Social Care Department. In addition, each local authority sets eligibility criteria to decide support carers are entitled to. This support will depend on your identified needs and personal outcomes.

### The Carers (Scotland) Act 2016

The Carers Act means all adult carers have a right to an adult carer support plan.

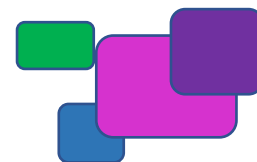
For young carers this is called a young carer statement.

The Act introduced a power for local authorities to support carers generally and required them, under specific duties to:

- support carers who have needs that meet the local eligibility criteria
- provide an information and advice service to carers
- publish a Short Breaks Services Statement

Local health boards also have duties under the Act to involve carers in discharge from hospital and to prepare a local carer strategy with the relevant authority.





## How do you make an adult carer support plan?

Most carer support plans will be prepared during conversations between you and the practitioner supporting you. It can help to think of a typical day and the type of support you provide.

Think about how your life could improve and what you might need to achieve this. If your caring situation changes from day to day, think what a good day and bad day looks like. Services often use the term 'outcomes' to describe what is important to you and your aims and hopes. Typical outcomes carers tell us they want include:

- being mentally and physically healthy
- feeling valued
- feeling informed
- having a life outside of caring
- being listened to

The adult carer support plan will record key points, and any agreed actions. You can keep a copy and share it with anyone you choose. You will be offered a review of your plan within an agreed timescale or earlier if your situation changes substantially.

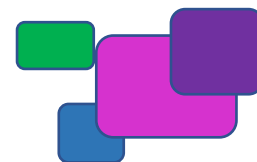
## How can I find out more about having an adult carer support plan?

In Edinburgh you can ask any carer organisation about an adult carer support plan or you can contact the Edinburgh Carer Support Team on 0131-536-3371 who can advise you further.

### Examples of support for carers

- information and advice
- welfare rights and advocacy
- carer support groups and cafes
- short breaks or respite
- counselling or one to one support
- relaxation therapies, stress management sessions
- carer training courses
- Emergency planning
- leisure and recreational activities like exercise, singing or art



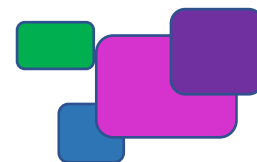


Appendix 5	Young Carer Statement Leaflet <a href="#">Materials – Edinburgh Young Carers</a> <a href="#">Young Carer Statement • Capital Carers</a>
Appendix 6	Young Carer Statement template (Younger Carers) <a href="#">Materials – Edinburgh Young Carers</a> <a href="#">Young Carer Statement • Capital Carers</a>
Appendix 7	Young Carer Statement template (Older Children) <a href="#">Materials – Edinburgh Young Carers</a> <a href="#">Young Carer Statement • Capital Carers</a>
Appendix 8	Young Carer Statement Guidance (Inc. Eligibility) <a href="#">Materials – Edinburgh Young Carers</a> <a href="#">Young Carer Statement • Capital Carers</a>

## Appendix 9 – Agreed Spend Plan

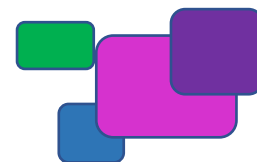
### EJCS Spend Plan

	2021/22 £m	2022/23 £m	2023/24 £m	2024/25 £m	2025/26 £m
Identifying Carers and Information & advice	1.22	1.27	1.40	1.45	1.49
Health and Wellbeing	0.63	1.01	1.12	1.14	1.15
Short Breaks	0.59	0.99	1.16	1.09	1.09
Young Carers	0.51	0.69	0.69	0.69	0.69
Personalising support	2.75	3.34	2.92	2.93	2.95
Contingency and Innovation	0.14	0.21	0.21	0.21	0.13
<b>Total</b>	<b>5.84</b>	<b>7.51</b>	<b>7.50</b>	<b>7.51</b>	<b>7.50</b>



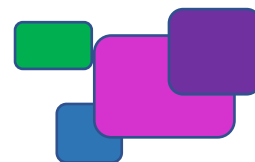
## Appendix 10 - Membership of the Edinburgh Carers Strategic Partnership Group

Attendees	
Amanda Farquhar	Youth and Families Service Manager, Space and Broomhouse Hub
Christine Farquhar	Carer representative: EIJB
Hugo Whitaker	Development Worker for Carers, EVOG
Jo Kirby	Advice Service Manager, The Action Group
Kimberley Swan	Chief Executive, FAIR
Kirsty Mackay	Young carer strategic lead, communities and families, EHSCP
Madeleine Martin	Interim Carer Services Development Manager, EHSCP
Margaret Chianza	Chief Executive Officer, MECOPP
Margaret Murphy	Chief Executive, Edinburgh Young Carers
Maureen Martin	Chief Executive, Edinburgh Development Group
Ron Carthy	Manager, Capital Carers
Ruth MacLennan	Manager, Care for Carers
Kirsty Dewar	North East Cluster Manager, EHSCP
Tony Duncan	Director for strategic planning, EHSCP
Luan Sanderson	Planning and Commissioning Officer, Communities and Families, City Of Edinburgh Council
Deborah Clark	Development Officer, Adult Health and Wellbeing Team, EVOG
Helen Hunter	Development Officer – Holiday Support, CEC
Emma Pemberton	Care and Support Manager, Disability Services, EHSCP
Lasma Rancane	Assistant Manager, FAIR
Lora Vernon	Head of digital communications, VOCAL
Ruth Rooney	Chief Executive, ECC
Kyle Oram	Policy and Commissioning Officer (Carers and Older People), EHSCP
Katie McWilliam (chair)	Strategic Planning & Quality Manager for Older People and Carers, EHSCP
Catherine Corbett	Carer Services Development Manager, EHSCP
Glen Scott	Advocacy Worker, Edinburgh Carers' Council
Laura Stirling	Home First Lead, EHSCP
Gavin Hay	Admin Assistant, Carer Support Team, EHSCP
Rosie McLoughlin	Deputy CEO, VOCAL
Laura Hill	Head of Carer Support Edinburgh & Midlothian



## Appendix 11 - Consultation

Date	Group
July 2023	Consultation with Senior Managers in Education, Children's and Justice Services
13 July 2023	EHSCP Executive Management Team
13 December 2022	Edinburgh Integration Joint Board (EIJB)
12 October 2022	EIJB Strategic Planning Group
Ongoing throughout development of the Edinburgh Carer Strategy refresh.	The refreshed strategy has been progressed in collaboration with the Edinburgh Carer Strategic Partnership Group (CSPG), (Membership comprising several commissioned voluntary sector and internal partners, key planning and commissioning colleagues and EIJB Carer representatives).
Ongoing throughout development of the Edinburgh Carer Strategy refresh.	Various working groups developed the refreshed strategy and those included Carer representation, EIJB Carer representative, voluntary sector and internal partners and key planning and commissioning colleagues.
Ongoing throughout the development of the Edinburgh Carer Strategy refresh.	Views of carers were considered and incorporated by consideration and analysis of local and national surveys, research and consultations.
Ongoing throughout development of the Edinburgh Carer Strategy refresh.	Consideration and incorporation of the National Carer Strategy which included extensive carer consultation in its development.



Published March 2023

Consideration of the findings of the Adult Social Work and Social Care Services: City of Edinburgh.

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## Appendix 3– Integrated Impact Assessment for Edinburgh Joint Carer Strategy 2023-26

### Integrated Impact Assessment – Summary Report

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Each of the numbered sections below must be completed.

Please state if the IIA is interim or final - FINAL.

**1. Title of proposal**  
Carer Strategy Refresh

**2. What will change as a result of this proposal?**

The refreshed Edinburgh Carers Strategy sets out how planning partners will expand carer support, reflecting the Scottish Government's commitments set out in the *Carers (Scotland Act 2016)* and subsequent guidance, and reflecting the vision for improved health and social care support, set out in the [Independent Review of Adult Social Care](#) and in the revised [National Carers Strategy 2023-2026](#).

The 5 key themes and associated national strategic outcomes of the strategy intend to put the individual carer at the centre and focus on five different aspects of unpaid carer support:

- Living With COVID-19
- Valuing, Recognising and Supporting Carers
- Health and Social Care Support
- Social and financial inclusion
- Young Carers

The Strategy sets out strategic priorities and commits to strengthening our city-wide and community partnerships, building on the progress made through the implementation plan of [Edinburgh Joint Carer Strategy 2019-2022](#)<sup>3</sup>. The refreshed strategy also addresses the impacts of Covid and the cost-of-living crisis.

**3. Briefly describe public involvement in this proposal to date and planned**

Date	Group
26 June 20223 to 11 July 2023	Edinburgh Carers Strategic Partnership Group discussion and wider feedback through member reps
14 June 2023	EIJB Strategic Planning Group
13 December 2022	Edinburgh Integration Joint Board (EIJB)
12 October 2022	EIJB Strategic Planning Group
Ongoing throughout development of the Edinburgh Carer Strategy refresh.	The refreshed strategy has been progressed in collaboration with the Edinburgh Carer Strategic Partnership Group (CSPG),  (Membership comprising several commissioned voluntary sector and internal partners, key planning and commissioning colleagues and EIJB Carer representatives).
Ongoing throughout development of the Edinburgh Carer Strategy refresh.	Various working groups developed the refreshed strategy and those included Carer representation, EIJB Carer representative, voluntary sector and internal partners and key planning and commissioning colleagues.
Ongoing throughout the development of the Edinburgh Carer Strategy refresh.	Views of carers were considered and incorporated by consideration and analysis of local and national surveys, research and consultations.
Ongoing throughout development of the Edinburgh Carer Strategy refresh.	Consideration and incorporation of the National Carer Strategy which included extensive carer consultation in its development.



Published March 2023	Consideration of the findings of the Adult Social Work and Social Care Services: City of Edinburgh.
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**4. Is the proposal considered strategic under the Fairer Scotland Duty?**

Yes

**5. Date of IIA**

11 July 2023

**6. Who was present at the IIA? Identify facilitator, lead officer, report writer and any employee representative present and main stakeholder (e.g., Council, NHS)**

<b>Name</b>	<b>Job Title</b>	<b>Date of IIA training</b>
Sarah Bryson	Strategic Planning and Commissioning Officer, Health and Social Care (Facilitator and Report writer)	Nov 2017
Katie McWilliam	Strategic Programme Manager, Health and Social Care	
Catherine Corbett	Carer Service Development Manager	
Luan Sanderson	Strategic Planning & Commissioning Officer, Children, Education and Justice Services	
Christine Farquhar	Carer Rep, Edinburgh integration Joint Board	
Ruth MacLennan	Care for Carers	
Laura Stirling	Northwest Locality Hub Manager Health and Social Care Partnership	





<b>Name</b>	<b>Job Title</b>	<b>Date of IIA training</b>
Sune Skaarup	National Policy and Engagement Officer, MECOPP	
Lisa Mullen	Contract Advisor, Children and Families	
Glen Scott	Edinburgh Carers Council	
Tony Duncan	Service Director Strategic Planning Edinburgh Health & Social Care Partnership	
Amanda Farquhar	Head of Service Youth and Families Broomhouse Hub	
Maureen Martin	CEO, Edinburgh Development Group	

**7. Evidence available at the time of the IIA**

<b>Evidence</b>	<b>Available – detail source</b>	<b>Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal</b>
Data on populations in need	Carers in Edinburgh joint Strategic Needs Assessment (JSNA) (see Appendix 1 of Carer Strategy)	<p>The JSNA provides the context for Carers and the pressures and challenges that Carers are experiencing both at a national and local level around certain key areas including:</p> <ol style="list-style-type: none"> <li>1. Age &amp; Gender</li> <li>2. Demographic Pressures</li> <li>3. Intensity of Caring</li> <li>4. Impact of Caring</li> <li>5. Cost of Living</li> </ol> <p>It is estimated that there are currently between 50,000 and 70,000 adult carers in Edinburgh.</p>
Data on service uptake/access	<a href="#">annual performance report</a>	<p>Commissioned partners provide end of year data re their services and key performance indicators. This is drawn together and collated to form the <a href="#">annual performance report</a>. This year's report shows that:</p> <ul style="list-style-type: none"> <li>• 13 targets were exceeded</li> <li>• 102 were met and</li> <li>• 7 were partially met</li> <li>• 14 were not met</li> <li>• 1 is under development</li> </ul> <p>Work to quantify the wider uptake and access to support through statutory services, individuals, community groups and organisations' work is currently being carried out through the</p>

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal
		CLEAR action research and will be available later in 2023
Data on socio-economic disadvantage e.g. low income, low wealth, material deprivation, area deprivation.	<a href="#">State of Caring in Scotland 2022 - A cost-of-living crisis for unpaid carers in Scotland</a> <i>Heading for Crisis - caught between caring and rising costs</i>	<p>Unpaid carers have been among the groups hardest hit by the cost-of-living crisis in Scotland.</p> <p>This report highlights the impact upon unpaid carers of the current cost-of-living crisis. It pays particular attention to carers financial challenges and how their sense of health and well-being are affected:</p> <ul style="list-style-type: none"> <li>• 1 in 6 carers are in debt as a result of their caring role, increasing to 2 in 5 for carers in receipt of Carer's Allowance.</li> <li>• The proportion of carers unable to afford their utility bills has more than doubled since last year to 14%.</li> <li>• Carers in receipt of Carer's Allowance are more likely to be cutting back on food and heating.</li> <li>• Nearly all carers who are struggling to make ends meet (93%) agreed that the increase in the cost of living was having a negative impact on their mental and physical health.</li> </ul>

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal
	<p><a href="#">The Voice of Carers Across Lothian (VOCAL) survey of Edinburgh carers 2021</a></p> <p>The Department for Works and Pensions (DWP) data</p> <p><a href="#">“It’s hard work being poor” Women’s Experiences of</a></p>	<p>Outlines the financial impact of caring, 69% of respondents reported that being a carer had a financial impact.</p> <p>There have been increases in people reporting they have stopped or reduced employment and lost NI or pension contributions. 15% had to borrow money due to their caring role and 7% have had to use a food bank.</p> <p>The Department for Works and Pensions (DWP) data shows that, in Edinburgh, 4,644 carers receive Carers Allowance and 250, sixteen- to eighteen-year-olds, received Young Carers Grants. The number of people in receipt of Carers Allowance had been increasing annually but has recently plateaued. The relatively low number of carers receiving carers allowance may be due to a number of factors including eligibility criteria, carer identification and that often pensioners become illegible for Carers Allowance once they receive pensionable income. The number of young carers applying for, and receiving a Young Carer Grant has been increasing since the benefit launched in 2019.</p>

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal
	<p><a href="#">the Cost-of-Living Crisis in Scotland</a>, The Poverty Alliance, Nov 2022</p> <p><a href="#">WOMEN'S SURVEY 2023 Experiences of rising costs across Scotland</a> Scottish Women's Budget Group</p>	<p>This report shares the experiences of women in Scotland on low incomes affected by the cost-of-living crisis. Women are being disproportionately impacted by the cost-of-living crisis due to existing inequalities across all areas of life. They are more likely to be living in poverty, have lower levels of savings and wealth and are less able to increase paid work than men due to caring responsibilities. The role of unpaid caring is significant for women in Scotland. 85% of those economically inactive due to caring are women' the stat is referenced to the Scottish Government 2020 Gender Equality Index.</p> <p>In total, 871 women from all 32 local authorities in Scotland took part in SWBG Women's Survey from February to March 2023. The current cost-of-living crisis has not impacted everyone equally. Issues such as austerity, wage stagnation, rising inflation, and the impact of the Covid-19 pandemic, all impact women due to pre-existing structural inequalities. Rising costs have hit individuals on the lowest incomes the hardest. This disproportionately impacts women as they are more likely to experience poverty throughout their lifetime with</p>

Evidence	Available – detail source	<b>Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal</b>
		lower levels of savings and wealth in comparison to men as well as being unable to increase paid work due to caring responsibilities.
Data on equality outcomes	<p>The Scottish Health Survey</p> <p><a href="#">Impact of Poverty on Women and Girls</a></p> <p>2011 Scotland's Census MECOPP Briefing Papers based on data from 2011 Census: <a href="#">Gypsy/Traveller Carers</a> – May 2020 <a href="#">Informal Caring within the LGBT</a></p>	<p>It is estimated that 60% of carers are women.</p> <p>Women are four times as likely to give up paid work due to multiple caring responsibilities and are more likely to be in low-paid, part-time employment than male carers.</p> <p>The responsibility of care has significant ramifications on women's access to employment, career development and progress, access to training and higher education, as well as on physical and mental health.</p> <p>There is little recent evidence re particular issues arising in minority ethnic communities however we know that minority ethnic communities face significant inequalities with higher chances of living in poverty and disparity in access to affordable housing. Minority ethnic people were also amongst the worst affected by COVID-19. Being a carer in addition to being from a minority ethnic community will only increase the risk of poorer financial and well-being</p>



Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal
	<p> <a href="#">Community – August 2019 Self Directed Support and Scotland’s Black and Minority Ethnic Communities</a>, June 2017  <a href="#">Informal Caring within Scotland’s Black and Minority Ethnic Communities</a>, June 2017  <a href="#">The Health of Scotland’s Black and Minority Ethnic Communities</a> June 2017  <a href="#">Data Sources</a> </p> <p> <a href="#">The Voice of Carers Across Lothian (VOCAL) survey of carers.</a> </p>	<p>outcomes. In the 2011 Scotland’s Census, in Edinburgh, 9.7% of carers identified as an ethnic minority.</p> <p>In Edinburgh, the 2021, the Voice of Carers Across Lothian (VOCAL) survey of carers, reports that 41% of respondents reported more contact with health services about their own</p>

Evidence	Available – detail source	<b>Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal</b>
	<p><a href="#">Experiences of Older Adult Unpaid Carers in Scotland</a> – Carers Trust Scotland – May 2023</p>	<p>health (up from 35% in 2017). 67% reported that their physical health has been affected and 79% that their mental health has been affected compared with 59% reporting that being a carer made their health worse in 2017.</p> <p>Survey of older carers over 65. Key findings from respondents:</p> <p>80% said their physical health had been affected by their caring role. 87% said that their health and wellbeing had been affected by their caring role.</p> <p>65% said that they experience feelings of loneliness some of the time, and a further 19% said they often felt lonely. 18% feel as though they have no time for themselves.</p> <p>82% felt as though their caring role has financially impacted them.</p> <p>In the past 12 months 37% have used gas and electricity as a way to save money, and 19% have skipped meals in the past 12 months.</p>
Research/literature evidence	<p><a href="#">The National Carers Strategy</a></p>	<p>This strategy sets out a range of actions to ensure they are supported fully in a joined up and cohesive way</p>



Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal
Public/patient/client experience information	<p><a href="#">annual performance report</a></p> <p><a href="#">State of Caring in Scotland, Nov 2022, Carers UK</a></p>	<p>Case studies of people using the services are provided.</p> <p>This report explores the key findings from our latest State of Caring survey. The annual State of Caring report provides comprehensive research into the lives of unpaid carers in Scotland, along with the experiences of carers.</p> <p>The 2022 State of Caring survey was carried out between July and September 2022 and completed by <b>2,044</b> unpaid carers across Scotland.</p>
Evidence of inclusive engagement of people who use the service and involvement findings	<p><a href="#">Carer Strategy annual performance report</a></p>	<p>Feedback from service users</p>
Evidence of unmet need	<p>As noted above</p> <p><a href="#">Care Inspectorate inquiry into Adult Carers' Experiences of social work and care services</a></p>	<p>As noted above</p> <p>The report highlights the need for improvement in support of adult unpaid carers and makes a series of recommendations. Inspectors from the Care Inspectorate carried out this work between March and July 2022</p>

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal
	<p><a href="#">published December 2022</a></p> <p><a href="#">Care Inspectorate Report of adult social and social care services City of Edinburgh published March 2023</a></p>	<p>An inspection of adult social work and social care services in the City of Edinburgh which identified areas for improvement in adult social work and social care services in the City of Edinburgh</p>
<p>Good practice guidelines</p>	<p><b>Carers (Scotland) Act 2016: statutory guidance - updated July 2021</b></p> <hr/> <p><a href="#">Equal partners in care</a></p>	<p>Statutory guidance for local authorities, health boards and integration authorities on effective implementation of the provisions of the Carers (Scotland) Act 2016 ('the Act'). It will also be of interest to other organisations working alongside statutory bodies to deliver carer support.</p> <p>Equal Partners in Care (EPiC) is a learning resource for health and social care staff to help have better conversations and interactions with carers. The aim is to make a positive difference and improve outcomes for carers and the people they care for.</p>

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal
	<p><a href="#"><u>Independent Review of Adult Social Care</u></a></p> <p><a href="#"><u>Self-directed Support (SDS) Improvement Plan 2023-2027</u></a></p> <p><a href="#"><u>Carers' charter - gov.scot (www.gov.scot)</u></a></p>	<p>Outlines the vision for improved health and social care support in Scotland.</p> <p>The <a href="#"><u>Self-directed Support (SDS) Improvement Plan 2023-2027</u></a> aims to take a whole system approach to the improvement of SDS, recognising that delivery partners across statutory, third and independent sectors all play an essential role in SDS improvement. The SDS Improvement Plan 2023 – 2027 sets out the priorities to drive forward improvement in Self-directed Support over the next few years. The plan recognizes that Self-directed Support should be the way that social care support is delivered for adults, children and young people, families and carers.</p> <p>The charter aims to help carers understand their rights under the Carers (Scotland) Act 2016.</p>
Carbon emissions generated/reduced data	N/A	
Environmental data	N/A	
Risk from cumulative impacts	EVOC <a href="#"><u>review of support with travel and short</u></a>	All adult carer groups have been significantly affected by the pandemic. For example, there was suspension of

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal
	<p><i>breaks and breaks form caring for adults with disabilities or additional support needs and those that care for them,</i></p> <p><a href="#">EIJB Medium Term Financial Strategy &amp; 2023/24 Financial Plan Update</a></p>	<p>short breaks/breaks from caring; participation in training/education; reduced employment opportunities and cessation of assisted transport services during the initial lockdown from March 2020.</p> <p>In the long term, the cared for persons' condition is likely to have progressed and the caring role to have increased in relation to this. Meanwhile the demand for carer support planning and assessment for the cared for person is increasing too.</p> <p>The report outlines Phase 2 savings proposals for 2023/24 and a range of options which would be required to balance the plan in year.</p>
Other (please specify)		
Additional evidence required		

**8. In summary, what impacts were identified and which groups will they affect?**

Equality, Health and Wellbeing and Human Rights	Affected populations
<p><b>Positive</b></p> <p>The strategy encourages and assists individuals to identify as a carer and seek support at an early stage in their caring journey. This early intervention and prevention approach will not only help ensure the wellbeing of carers but will also help us understand better any unmet need and aid improved measurement of the number of carers in Edinburgh. This will allow us to collate evidence, understand and articulate the growing need for resource allocation to carer support and help lobby for further resource allocation for carer support from Scottish Government.</p> <p>The strategy and supporting evidence referenced, recognises that a high percentage of carers are women and understands the additional pressures which women in particular, are facing.</p> <p>Actions to encourage people to come forward as carers are included in the Strategy however all partners present were also asked to encourage carers to identify and come forward for support.</p> <p>The Strategy aligns to the principles of Getting It Right For Everyone (GIRFE). GIRFE is still in the early stages however it is unlikely that the principles will change. These are:</p> <ul style="list-style-type: none"> <li>• Focused on individual care needs.</li> <li>• Based on an understanding of the physical and mental well-being of individuals in their current situation</li> <li>• Based on early intervention</li> <li>• Requires joined-up working/information sharing.</li> <li>• Based on a human rights approach</li> </ul>	<p>All although women in particular</p>

Equality, Health and Wellbeing and Human Rights	Affected populations
<p>The Strategy recognises the Gender Pay Gap, how this affects women carers, the difficulties for women carers in getting access to training, the difficulties for women in maintaining employment if they are carers, that women often become lone parents if caring for children, that women often become carers of siblings if the parent dies and that the situation is worsening for this particular group.</p> <p>The Strategy recognises that responsibility of caring is often unplanned and sudden (this can often be due to the death of a parent and a sibling may take on the caring role). This transition stage is recognised in the strategy and actions to raise awareness of support for new carers are identified.</p> <p>The needs of young Adult Carers will be further recognised in the development of the proposed Young Adult Carer Action Plan.</p> <p>The strategy includes work to continue implementation of the Carer Support Plans. Gypsy/Roma/Traveller communities, and other families which are moving through the area, will have the option of taking their plan with them if moving away from the area and this helps to reduce barriers to support. There may be opportunities to better connect to the community working with these groups. Opportunities for strengthening links to the community worker should be investigated.</p> <p>The Strategy recognises that language can be a barrier, not only for those whose English is not their first language, but also because many people have caring roles but do not recognise themselves as carers. For example, older gay men who care for their partners, often refer to themselves as a friend. Some ethnic minorities do not regard themselves as carers. The use</p>	

Equality, Health and Wellbeing and Human Rights	Affected populations
<p>of inclusive language is acknowledged in training and refined through practice.</p> <p>The Strategy recognises that a carer's income and housing may change due to changes in circumstances of the cared for person for example if the cared for person goes into care or dies. The Carer Support Plan can assist/be a prompt for these difficult conversations and can help identify support and assistance (getting back to employment for example) and aid longer term planning. Financial advice and information are a key priority of the Strategy.</p> <p>There is a finite envelope of funding and it is vital that we ensure that we know what is working well and what does not work so well. This will help ensure value for money and efficiency. The Strategy identifies that a Performance Management Framework is currently being developed.</p> <p>The Strategy has endeavoured to ensure that breaks from caring are organised on a locality basis, where viable, to try and ensure that travel time for the carer does not negate any break from caring time. Transport is a crucial part of carer's lives.</p> <p>The Strategy recognises the valuable role which employers have in supporting carers and works to promote carer positive status in Edinburgh. Work to advance carer friendly policies and enhance carer employer status for both NHS Lothian and CEC will be considered.</p> <p>The Strategy prompts more choice and a creative approach to meeting needs, in particular through the use of SDS. (Options to buy more smaller services to give cumulative effect)</p>	

<b>Equality, Health and Wellbeing and Human Rights</b>	<b>Affected populations</b>
<p><b>Negative</b></p> <p>The Strategy identifies links to other areas of development and strategies however joined up plans around these could be areas for further development.</p> <p>The Strategy does not explicitly note any link to the Veterans covenant and the support which is available to veterans and their families. There appears to be inconsistencies in information available.</p>	

<b>Environment and Sustainability including climate change emissions and impacts.</b>	<b>Affected populations</b>
<p><b>Positive</b></p> <p>Goods, services and works will be procured in a way that supports the key priorities to tackle poverty through Fair Work, support initiatives that grow opportunities and capacity in the city, use community benefit spend to support disadvantaged communities and contribute to the impact of climate change on the city.</p>	
<p><b>Negative</b></p>	

<b>Economic</b>	<b>Affected populations</b>
<p><b>Positive</b></p> <p>The cost of living crisis and economic considerations for carers, including employment, are a key aspect of the Strategy.</p> <p>The Young Carer Action Plan which will be developed will consider transitions and employment.</p>	
<p><b>Negative</b></p>	



**9. Is any part of this policy/ service to be carried out wholly or partly by contractors and if so, how will equality, human rights including children’s rights, environmental and sustainability issues be addressed?**

No

**10. Consider how you will communicate information about this policy/ service change to children and young people and those affected by sensory impairment, speech impairment, low level literacy or numeracy, learning difficulties or English as a second language? Please provide a summary of the communications plan.**

**11. Is the plan, programme, strategy or policy likely to result in significant environmental effects, either positive or negative? If yes, it is likely that a Strategic Environmental Assessment (SEA) will be required and the impacts identified in the IIA should be included in this. See section 2.10 in the Guidance for further information.**

No

**12. Additional Information and Evidence Required**

If further evidence is required, please note how it will be gathered. If appropriate, mark this report as interim and submit updated final report once further evidence has been gathered.

No further evidence is required.

**13. Specific to this IIA only, what recommended actions have been, or will be, undertaken and by when? (These should be drawn from 7 – 11 above) Please complete:**

Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts)	Who will take them forward (name and job title)	Deadline for progressing	Review date
Assess opportunities to better connect/strengthen links to community workers/communities with families which might be moving through the area.	Edinburgh Carer Strategic Partnership Group (ECSPG)		

Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts)	Who will take them forward (name and job title)	Deadline for progressing	Review date
Continue to encourage the use of inclusive language through training and in practice.	ECSPG		
The Strategy identifies links to other areas of development and strategies however joined up plans around these could be areas for further development.	ECSPG		
The Strategy recognises the valuable role which employers have in supporting carers. Work to advance carer friendly policies and enhance their carer positive employer status for both NHS Lothian and CEC will be considered. Best practice in other organisations to be considered e.g. Independent Living Fund Scotland.	ECSPG		
Opportunities to establish/strengthen carer staff groups/colleague networks/peer support groups at CEC and NHS Lothian will be investigated and encouraged.	CEC/NHS Lothian		
The Strategy does not explicitly note any link to the <a href="#">Veterans Covenant</a> Fund Trust and the support which is available to veterans and their families. Actions will be considered which	ECSPG		

Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts)	Who will take them forward (name and job title)	Deadline for progressing	Review date
will help ensure that consistent information is widely available.			

**14. Are there any negative impacts in section 8 for which there are no identified mitigating actions?**

No

**15. How will you monitor how this proposal affects different groups, including people with protected characteristics?**

**16. Sign off by Head of Service**

Name Tony Duncan



Date 25-07-23

**17. Publication**

Completed and signed IIAs should be sent to:

[integratedimpactassessments@edinburgh.gov.uk](mailto:integratedimpactassessments@edinburgh.gov.uk) to be published on the Council website [www.edinburgh.gov.uk/impactassessments](http://www.edinburgh.gov.uk/impactassessments)



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[www.edinburghhsc.scot/the-ijb/integrated-impact-assessments/](http://www.edinburghhsc.scot/the-ijb/integrated-impact-assessments/)