

East Dunbartonshire Carers Strategy 2023-26: Consultation Paper

This document sets out the background to the development of the Health and Social Care Partnership's new Carers Strategy 2023-26 and invites partners, stakeholders and the general public to participate in the development of this new strategy.

The first section of the report provides the background and context. If you would like to jump straight to the proposals and questions, please feel free to proceed to **Section 2: The Conversation**.

Section 1: The Background and Process

1 THE EAST DUNBARTONSHIRE HSCP CARERS STRATEGY

Carers

- 1.1 The Carers (Scotland) Act 2016 defines a carer as “*an individual who provides or intends to provide care for another individual (the ‘cared-for person’)*”. The Act defines a “Young Carer” as someone who is under the age of 18, or over 18 but still at school and an “Adult Carer” as someone over the age of 18, and not a young carer. Carers (sometimes called informal carers) are not employed to care, they do so voluntarily to support a family member or friend.
- 1.2 People may become carers at almost any stage in their lives, including when they are young, and may be from all walks of life. Carers may be in employment, in education, retired, or they may provide care full time. Care may be provided a few times a week or for more significant periods, each carer, and their role is unique. Carers report that their role can have many positive features and rewards but it is recognised that caring can have a significant impact upon a carer's health, wellbeing and relationships.
- 1.3 Young carers are young people and children and whilst they may value and enjoy the role they fulfil within their families, they may experience much less opportunities to access social, recreational or educational opportunities and may experience greater disruption and anxiety for the person they care for.

Strategic Plan 2022-25

- 1.4 Health and Social Care Partnerships (HSCPs) were introduced in 2015 to bring together a range of community health and social care services. The responsibility for organising these services previously lay with Councils and Health Boards, but now sit with HSCP Boards (sometimes called Integration Joint Boards). The idea behind creating these HSCPs was to integrate health and social care services much more closely under a single manager, with a single combined budget, delivering a single plan to meet a single set of national outcomes in a way that best meets local needs. The “single plan” is called the

HSCP Strategic Plan. It sets out how HSCP Boards will plan and deliver services for their area over the medium term, using the integrated budgets under their control.

- 1.5 East Dunbartonshire HSCP has agreed a new Strategic Plan for 2022-25. This document provides an overarching direction for the improvement and development of services over the next 3 years, The Strategic Plan sets out the HSCP's key priorities with a programme of action taking these forward. Support to carers has a high profile within the Strategic Plan, but it is important that these commitments are set out in more detail, to meet our obligations under the Carers (Scotland) Act 2016. That is why we have developed a dedicated Carers Strategy.
- 1.6 Although the Carers Strategy is led by the HSCP, its success depends upon the contributions of many other organisations, particularly Education services, as schools are often the first to identify young carers. East Dunbartonshire Council Education Services are fully committed partners in the development of this strategy.

The new Carers Strategy

- 1.7 This is not the East Dunbartonshire HSCP's first Carers Strategy. The Carers (Scotland) Act 2016 requires that HSCPs prepare a local carer strategy and review that strategy every three years, so this will be our third Carers Strategy since the HSCP was created. Since that time, we have worked with partners, carers and communities to improve support to carers in many ways, including:
- Increasing identification of adult and young carers;
 - Increasing levels of short break provision for a higher number of carers, for example in 2021/22, a total of 13384 weeks of respite was provided for 1798 cared for people (aged 18+) with an additional 188 weeks of respite provided to carers of 29 children with disabilities;
 - Training and awareness provided to health, social work, social care and education services. Over 60 session per year provided by Carerslink;
 - Information provided to carers in a range of languages;
 - Around 225 carers supported to complete an Adult Carer Support Plan, each year;
 - Better information on short breaks, personalised to meet individual needs;
 - Better ways to identify and engage with young carers, with 280 young carers referred to Carerslink since April 2018;
 - Since April 2018, 140 young carers regularly attending group and holiday period activities run by Carerslink;
 - A Short Breaks Statement was developed in 2018 and will be reviewed in conjunction with this new Carers Strategy;
 - Carers continue to be encouraged to access all Self Directed Support options to maximise the level of flexibility and choice that is right for them;

- Carers Link currently provided grants for carers to access Short Breaks through the Time to Live Fund. During the pandemic, this fund was almost trebled to just over £34,000 with over 100 carers benefitting.

1.8 In preparing the new Carers Strategy, we need to consider whether our existing priorities are the same or have changed. Changes might be due to new policy or legislation, they might be due to feedback from carers, they might be to take account of successful work that has been done elsewhere, or it may be due to changed circumstances. Since the last Carers Strategy, the Covid-19 pandemic has had an enormous impact on carers, so it will be essential to ensure that these impacts are recognised in the new strategy and plans developed to support carers through and out of the pandemic.

2 ENGAGEMENT AND PARTICIPATION

2.1 HSCP Boards are collaborative at heart; they include membership from Local Authorities and Health Boards, plus representatives of service users, informal carers, professionals and clinicians, trade unions and third and independent sector service providers. When preparing any new strategy, an HSCP Board must ensure that all of these stakeholders and partners are fully engaged in the process and have regard to the [Health and Social Care Delivery Principles](#)¹. This ensures that a shared approach is taken to the planning of services to deliver the [National Outcomes for Health and Wellbeing](#)² and to achieve the core aims of integration, which are:

- To improve the quality and consistency of services for patients, carers, service users and their families;
- To provide seamless, integrated, quality health and social care services in order to care for people in their homes, or a homely setting, where it is safe to do so; and
- To ensure resources are used effectively and efficiently to deliver services that meet the needs of the increasing number of people with long term conditions and often complex needs, many of whom are older.

2.2 Many of these principles and outcomes described above clearly go wider than the delivery of direct support to carers, but how well care and support is provided to patients and service users impacts enormously on the well-being of family and friends that provide day to day care for them. It is essential therefore that we consider the whole system of health and social care when thinking about the needs of carers. That is why the Carers Strategy should be seen as part of a wider programme of improvement and development that is set out in the HSCP Strategic Plan 2022-25.

2.3 The Covid-19 pandemic has posed significant challenges regarding participation, engagement and consultation. Whilst wishing to ensure that our engagement to develop and shape the new Carers Strategy is as robust and

¹ <https://www.gov.scot/publications/guidance-principles-planning-delivering-integrated-health-social-care/>

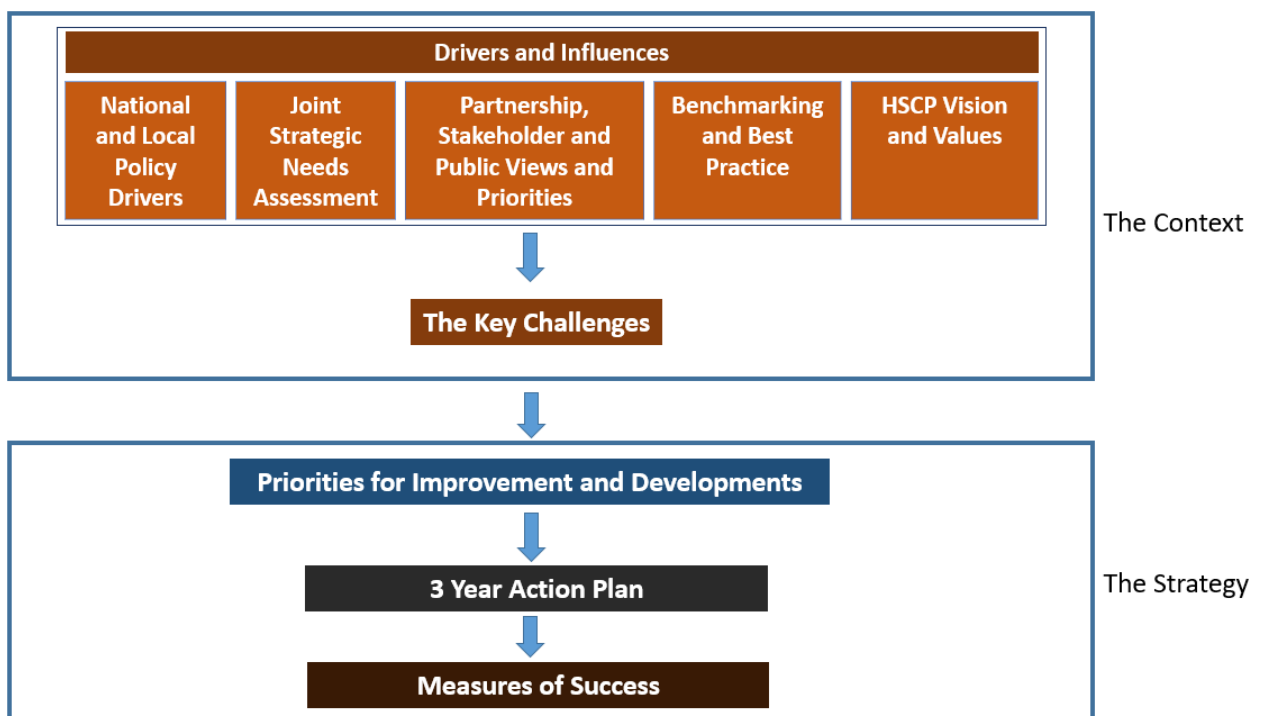
² <https://www.gov.scot/publications/national-health-wellbeing-outcomes-framework/>

effective as possible, we must prioritise people’s health, safety and welfare. In order to do this, the HSCP is adopting a virtual approach to communication, engagement and consultation during this time. If public safety permits, then a blended approach to consultative mechanisms may be possible, incorporating some in-person elements.

3 THE NEW CARERS STRATEGY - PROGRESS SO FAR

- 3.1 A lot of what the HSCP needs to do to support carers is already set out in national and local policy. But not all HSCPs are the same. Different HSCPs have different pressures and population needs. It is important that we ensure that our Carers Strategy reflects what all HSCPs need to do, but emphasises the priorities that are right for local needs and aspirations.
- 3.2 The diagram below attempts to illustrate the process that we are undertaking. The five boxes at the top are the main influences that should inform the context of the new Carers Strategy. By analysing these we should be able identify what the priorities should be for us.

EDHSCP Carers Strategy 2022 – 25: Outline Development on a Page



- 3.3 The HSCP has carried out initial work by looking at the main pressures (or “drivers”) for change and improvement. Analysis of carer numbers and circumstances has also been undertaken to ensure that the Carers Strategy identifies and reflects these local needs in the development of its priorities. We have also looked at what has been included in recent Carers Strategies elsewhere, to help to inform our early thoughts.
- 3.4 Crucially important, we have reviewed the expressed views of carers themselves over recent years, locally and nationally. We found that many of

the issues and priorities that have been raised in the past remain really important for carers. We wanted to ensure that we reflected these views and opinions before we re-engaged with carers once again, through this consultation.

- 3.5 The Scottish Government has been preparing a new National Carers Strategy during 2022, due for publication in the Spring, but unfortunately this has been delayed. At the time of writing, this new national strategy is still to be published. Once the final national strategy has been complete, its contents will contribute to the developing East Dunbartonshire Carers Strategy 2023-26.
- 3.6 Evolving national policy on carer support and the development of the National Care Service are rapidly developing agendas at the time of writing. This makes it a bit more difficult to predict what the landscape will be like over the period of the strategy and how this may change the action plans and resources available to implement the agreed priorities. As it stands, we have to make plans based upon what we know and what finance is made available to the HSCP at the time of writing the Carers Strategy. However, if the Scottish Government makes available additional resources to support carers, then this can then be targeted towards meeting the priorities set out in our local Carers Strategy, which makes it all the more important to get it right.

Section 2: The Conversation

4 THE CONVERSATION

- 4.1 Now that this initial work has been completed, we have been able to set out what we believe to be:
- The key challenges that have been identified
 - The proposed areas for priority action
- 4.2 At this point we want to pause and share these findings with partners, stakeholders and the general public. We would like this to take the form of a conversation:

The Conversation:

We will share from our early work what we understand to be the key challenges for carers of all ages, and what changes and improvements need to be made to meet those challenges. We will also share what we think will make these changes possible.

We will ask carers and other interested stakeholders what they think about these ideas and what is most important for them. We will encourage ideas about other changes and improvements that people think are important, as well as things that people would like to keep the way they are.

We will also ask people what they think would be the most important successes for them, if these changes and improvements were to happen.

- 4.3 We will arrange to engage with a range of existing organisations and groups within the HSCP, including:
- The Public, Service User and Carer Group
 - Carerslink
 - Other carers groups and networks
 - The Strategic Planning Group
 - The Locality Planning Groups
 - The Third Sector Interface, via East Dunbartonshire Voluntary Action
 - The HSCP Staff Leadership Forum
 - The Joint Staff Partnership Forum
 - The Clinical and Care Governance Group
- 4.4 We will also engage with the general public using a range of approaches. These are set out in more detail in a supporting Communication, Engagement & Participation Plan.

Section 3: Our Analysis and Proposals So Far

5 KEY POLICY DRIVERS

- 5.1 The box below sets out what we consider to be the key policy drivers for the next three years. This list does not include everything that the HSCP does on a daily basis; that would be a much longer list. Rather, we wanted to identify what we think would be the main drivers for change over the medium term.

Key Policy Drivers: National

The Carers (Scotland) Act 2016	A Scotland Where Everybody Thrives: Public Health Scotland's Strategic Plan 2020–23 (Dec 2020)
The Carers Charter (2016)	Re-mobilise, Recover, Re-design: the framework for NHS Scotland
The National Carers Strategy 2022 (draft)	Framework for supporting people through Recovery and Rehabilitation during and after the COVID-19 Pandemic
United Nations Convention on the Rights of the Child	Audit Scotland: Health and Social Care Integration - Update on progress (Nov 2018)
Human Rights Act 1998	Digital Strategy For Scotland (2021)
A Fairer Healthier Scotland (June 2012)	Ministerial Strategic Group for Health and Community Care: Review of Progress with Integration of Health and Social Care (Feb 2019)
Public Bodies (Joint Working) (Scotland) Act 2014	Scottish Govt: Framework for Community Health and Social Care Integrated Services (Nov 2019)
National Clinical Strategy for Scotland (2016)	
A Fairer Scotland for Disabled People: Delivery Plan (Dec 2016)	
Health and Social Care Delivery Plan (Dec 2016)	

<p>The National Care Service (Scotland) Bill 2022</p> <p>Healthcare Improvement Scotland: Making Care Better - Better Quality Health and Social Care for Everyone in Scotland: A strategy for supporting better care in Scotland: 2017–2022</p> <p>National Mental Health Strategy 2017-2027 (March 2017)</p> <p>Rights, Respect and Recovery: Alcohol and Drug Treatment Strategy</p> <p>National Learning Disability Strategic: The Keys to Life</p> <p>Coming home: complex care needs and out of area placements 2018</p> <p>The Fairer Scotland Duty (April 2018)</p> <p>Best Value: revised statutory guidance 2020</p>	<p>The Promise: action to take forward the findings of the independent care review for care experienced children and young people (Oct 2020)</p> <p>Coronavirus (COVID-19): Strategic Framework</p> <p>The Independent Review of Adult Social Care (March 2021)</p> <p>Community Mental Health and Wellbeing Supports and Services Framework (Children and Young People)</p> <p>Transforming nursing, midwifery and health professions roles</p> <p>Suicide Prevention Action Plan: Every Life Matters</p>
<p>Key Policy Drivers: Local</p>	
<p>East Dunbartonshire HSCP Strategic Plan 2018-21</p> <p>The East Dunbartonshire Local Outcome Improvement Plan (2017-27)</p> <p>NHSGG&C Health and Social Care Strategy: Moving Forward Together (July 2019)</p> <p>Turning the Tide through Prevention: NHSGG&C Public Health Strategy 2018-28</p>	<p>NHSGG&C and East Dunbartonshire Council Covid-19 Recovery and Remobilisation Plans</p> <p>East Dunbartonshire HSCP Recovery and Transition Plan</p> <p>NHSGG&C Board-wide strategies: Mental Health, Learning Disability, Unscheduled Care, Health Visiting, School Nursing, District Nursing, Rehabilitation</p> <p>Joint Inspection of HSCP Adult Services in East Dunbartonshire (July 2019)</p>

6 CARERS IN EAST DUNBARTONSHIRE

- 6.1 Scotland's carers make a huge contribution to the people they care for and our communities. The Scottish Government estimate that there are more people caring full time for relatives or friends than staff working either in the NHS or in social care³. The actual number of carers is not known but it was estimated that there were 700,000 to 800,000 unpaid carers in Scotland

³ NHS workforce stats are published here: <https://www.isdscotland.org/Health-Topics/Workforce/Publications/2019-06-04/2019-06-04-Workforce-Summary.pdf?83424013854>

before the COVID-19 pandemic, which equates to around 15,000 carers in East Dunbartonshire⁴.

- 6.2 The 2020 Scottish Health telephone survey results suggest there were 839,000 adult carers living in Scotland in August – September 2020 during the pandemic, equating to nearly 17,000 carers in East Dunbartonshire. This increase in carer numbers during the pandemic is indicative of the increased level of informal care families and friends undertook, particularly during the initial periods of lockdown.
- 6.3 The 2021 Scottish Government Census identified 1174 adult carers and 195 young carers under the age of 18, in East Dunbartonshire. However, the census relies on an adult to complete the form, so in both cases this is known to be way higher.

Age and gender (data based on Scottish Govt prevalence rates)

- 6.4 Of the 17,000 carers in East Dunbartonshire (using the Scottish Health Survey figure), 748 can be estimated to be under the age 18. Although people can become carers at any stage, they are most likely to be caring between the ages of 45-54. In this age group, over a quarter of all women and around a sixth of all men are carers.
- 6.5 There are over 2,660 carers aged 16+ caring for 35 hours a week or more in East Dunbartonshire. Around a quarter of older carers (aged 65 and over) provide 35 hours of care a week or more compared with just under a tenth of carers under 24.
- 6.6 Overall, 59% of carers are women and 41% are men. Throughout the working years, women are more likely to be carers than men. With gender stereotypes surrounding caring still present in our society, there is a risk that women feel more pressured to undertake caring roles. This pressure can negatively impact on a woman's career path and be a key driver of the gender pay gap.

Demographic pressures (data based on Scottish Govt prevalence rates)

- 6.7 Scotland's population is ageing, with numbers of very old people predicted to continue growing and a proportionately smaller working age population. In East Dunbartonshire, the numbers of older people aged 85+ has increased faster than any other HSCP area in Scotland, with this fastest growth expected to continue for the next 10 years. This is a success story in terms of improved health and wellbeing and longer life expectancy, but it has significant implications for the future of care and support in Scotland.
- 6.8 With demand for health and social care services predicted to grow by 25% by 2031⁵, the role and contribution of carers will be even more critical in the future.

⁴ Scottish Govt 2022

⁵ <http://www.healthscotland.scot/population-groups/older-people>

Intensive caring and deprivation (data based on Scottish Govt prevalence rates)

- 6.9 29% of carers in the most deprived areas care for 35 hours a week or more – more than double the level in the least deprived areas. The impact of caring may be exacerbated by existing inequalities of low incomes and poor health in these areas⁶.

Carers Known to Services

- 6.10 At the time of preparing this consultation document, there were 1402 carers known to the HSCP's Social Work Services. The number of carers known to services remains at around only 8% of the estimated number of people undertaking informal care in East Dunbartonshire. Around 270 new carers are identified by the HSCP each year, with around 225 supported to complete an Adult Carer Support Plan. More than half of the carers known to services are over 65 years old, with the gender split almost exactly that of the nation balance at 61% being female.
- 6.11 Carers Link supported 1363 carers in 2021. Each year Carers Link attracts an average 380 - 420 new carer referrals. Since 2018, 6100 referrals have been received to the service.

Young Carers Known to Services

- 6.12 529 carers under the age of 24 are registered with Carers Link, although not all are active cases. Notably 383 are under the age of 15, which far exceeds the estimate of the Scottish Government Census. Over 14% come from the most deprived areas. 51% are caring for a sibling. 227 young carers received 1-1 or group support from the service in the last year.
- 6.13 At the time of preparing this consultation document, there were 110 pupils with caring responsibilities known to Education Services in East Dunbartonshire. Those are all pupils whose caring responsibilities result in them receiving additional support from the school. This is only a subset of a much larger number of young carers who are not in receipt of additional support.

Increasing Demand for Health and Social Care

- 6.14 Most of our health and wellbeing needs will be common to most other HSCP areas, but there are particular issues for every area. It is important that we understand what our population needs and priorities are. We have recently updated our Joint Strategic Needs Assessments, which provide a detailed analysis of our population's health and social care circumstances. The box below sets out some of the headlines from this work. These trends will inevitably impact on families and carers now and in the future.

⁶ Hirst, M. (2005) Health Inequalities and Informal Care - End of Project Report. University of York, Available at: <http://www.york.ac.uk/inst/spru/pubs/pdf/healthinequalities.pdf>

Increasing Demand for Health and Social Care

- 85 years+ population is increasing by 5% per year – highest in Scotland
- Care at home and care home service demand is increasing by 5% per year (pre-Covid)
- East Dunbartonshire has higher proportion of some long term conditions such as cancer, arthritis and coronary heart disease. This contributes to an elective hospital admissions rate around 20% higher than Greater Glasgow and Clyde and 50% higher compared with Scotland.
- Outpatient attendance rate is around 10% higher than Greater Glasgow and Clyde and Scotland.
- Mental health in younger people is a growing area of concern with high numbers of CAMHS referrals and waiting times, and increasing prescribing for depression and anxiety for young people.
- East Dunbartonshire has the highest rate of falls resulting in hospital admission, in Greater Glasgow and Clyde
- 8% of East Dunbartonshire adults identified at increasing risk of alcohol related harm
- Hospital-related pressures:
 - 162% increase in Hospital Assessment Team referrals 2008-2018
 - Demand pressures and complexity increases: 40% increase in unscheduled older people care projected to 2025 (from 2018). Orthopaedics increase of 31%.

7 BENCHMARKING WITH OTHER HSCP AREAS

7.1 We looked at the most recently prepared Carers Strategies in other HSCP areas within Greater Glasgow and Clyde, to find out the priority areas for improvement and development identified by them. There was considerable commonality, with almost half of the development priorities common to all 6 HSCPs

8 WHAT WE THINK ARE THE MAIN PRIORITY AREAS FOR DEVELOPMENT AND IMPROVEMENT FOR LOCAL CARER SUPPORT

8.1 After analysing the main policy drivers, the local needs analysis and the priority work being progressed elsewhere, we think that the priorities for development and improvement over the next few years will be:

Suggested Priorities

- Better information and advice on formal and informal supports
- Better and earlier identification of carers
- Carers should be involved in planning for their support
- Carers should be supported to continue to care, building on their strengths and assets
- Carers should have a balance with life outside of caring

<ul style="list-style-type: none"> • Adult Carer Support Plans and Young Carer Statements uptake should be increased
<ul style="list-style-type: none"> • Carers health and wellbeing should be prioritised
<ul style="list-style-type: none"> • The impact of financial hardship and inequality should be recognised
<ul style="list-style-type: none"> • Earlier engagement and prevention of crisis should be prioritised
<ul style="list-style-type: none"> • Carers should be involved in planning for cared for person, including hospital discharge
<ul style="list-style-type: none"> • The choice of support available should be increased
<ul style="list-style-type: none"> • Carer-friendly communities should be promoted
<ul style="list-style-type: none"> • Carers should be involved in the planning of new services and supports
<ul style="list-style-type: none"> • The impact of the pandemic for carers should be recognised and prioritised

Section 4: Your Thoughts and Comments

9 HOW TO SHARE YOUR VIEWS

9.1 As has been outlined above, the proposals set out in this report are suggestions only at this point. We have tried to explain why we have arrived at the proposed priorities that are set out above. But we are very conscious that there will be other points of view. We want to open the process up to a fuller debate at this point. Quite soon we will have to settle on what our Carers Strategy priorities are and then do more work to build the plan around these. So this is the opportunity to influence the foundations of the plan that will take forward the work to support carers better over the next three years.

9.2 We have arranged to work in partnership with Carers Link to gather people's views. You are welcome to share your views in a number of ways;

There will be a number of virtual meetings held over the next few weeks, as explained above. In addition, we have set up an online survey which can be accessed by clicking this link:

<https://www.smartsurvey.co.uk/s/edcarerstrategy/>

We are also very happy to receive your thoughts in an email if you prefer, at:

enquiry@carerslink.org.uk

or by post to

FREEPOST Plus RLYC-ETCK-ZSRY
Carers Link East Dunbartonshire
Enterprise Centre
Ellangowan Road
Milngavie G62 8PH

The questions in the survey are set out on the next page. You might find these useful in preparing your response, but we are happy to hear from you in your own words if that suits you better.

If you would like to engage in another way, please email in the first instance (using the email address above) and we will get back in touch to discuss your needs.

The deadline for response is 31 December 2022.

East Dunbartonshire Carers Strategy 2022-25: Consultation

Survey Questions

1. There is no requirement to leave your name or contact details unless you wish to be entered into the free draw for an iPad or Chromebook. If you do choose to leave your details, they will only be used for the purposes of this draw. No personal information will be shared with the local authority or HSCP; any information you provide will be completely anonymised before being passed on. At all times we will keep your information confidential and there will be limited access even within Carers Link. A full copy of our privacy policies can be found on our website.

- I wish to respond anonymously
- I wish to enter the free prize draw and note my contact details below

Prize Draw details (please provide your name, address and a phone number or email by which we can contact you):

2. Please can you tell us about your interest in Health and Social Care Services?
You can select more than one.

- Service user / patient
- Carer
- Volunteer
- Council employee
- Health Board employee
- Care provider / employee
- Board member / partner representative
- Member of the public
- Other (please specify):

3. Please can you tell us what carers support services in your area work well for you?

4. Please can you tell us where you think carer support services in your area could do better?

5. Do you think that the **priorities for development and improvement** identified in the consultation report are the right ones?

- Fully agree
- Partly agree
- Undecided
- Disagree

Please can you tell us more about your answer and any suggestions you may have?

6. Do you have any other comments that you'd like to provide on the development of the Carers Strategy and what it means for you? Please tell us in the space below:

Accessibility

This document can be provided in large print, Braille or on CD and can be translated into other community languages. Please contact the Council's Communications Team at:

本文件可按要求翻譯成中文，如有此需要，請電 0300 123 4510。

اس دستاویز کا درخواست کرنے پر (اردو) زبان میں ترجمہ کیا جاسکتا ہے۔ براہ مہربانی فون نمبر 0300 123 4510 پر رابطہ کریں۔

ਇਸ ਦਸਤਾਵੇਜ਼ ਦਾ ਮੰਗ ਕਰਨ ਤੇ ਪੰਜਾਬੀ ਵਿੱਚ ਅਨੁਵਾਦ ਕੀਤਾ ਜਾ ਸਕਦਾ ਹੈ। ਕਿਰਪਾ ਕਰਕੇ 0300 123 4510 ਫੋਨ ਕਰੋ।

Gabhaidh an sgrìobhainn seo cur gu Gàidhlig ma tha sin a dhìth oirbh. Cuiribh fòn gu 0300 123 4510

अनुरोध करने पर यह दस्तावेज़ हिन्दी में भाषांतरित किया जा सकता है। कृपया 0300 123 4510 पर फ़ोन कीजिए।