



Clackmannanshire & Stirling

**Health & Social Care
Partnership**

Carers Strategy

2019 - 2022



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Foreword



Clackmannanshire and Stirling Health and Social Care Partnership is delighted to present its Carers Strategy. The Strategy seeks to set out how we as a Partnership will support Clackmannanshire and Stirling's 21,000 unpaid carers, and acknowledge the vital role that they play in the delivery of health and social care support in the area. Indeed, according to Carers Trust Scotland, 3 in 5 people in Scotland will provide care to a family member or friend at some point in our lives. Without carers, the health and social care system would likely fail.

This Strategy has been published in response to the Carers (Scotland) Act 2016, which aims to expand and improve upon the rights of unpaid carers. Although a formal document, it is hoped that this Strategy will be accessible and helpful to all unpaid carers.

It is the ultimate aim of the Partnership that unpaid carers are recognised both formally and in practice as equal partners in health and social care provision, and for carers to be supported in a way which is meaningful and will enhance their quality of life. For this to be achieved, the Strategy seeks to ensure carers' voices are heard and taken seriously.

It must be acknowledged that the ever-increasing challenges faced by public bodies, particularly in relation to finances and changing demographics, present difficulties. However, this only emphasises the importance carers play in the long-term sustainability of health and social care provision, and the Strategy hopes to illustrate this.

We have conducted a consultation process and when drafting the Strategy have factored in the thoughts and opinions of those consulted, particularly unpaid carers themselves. The Strategy will focus on four key areas: our broad Vision for unpaid carers; the main Priorities of the Partnership for unpaid carers; Short Breaks Services Statement; and assisting unpaid carers through key Transition periods of their life.

The Carers Strategy forms part of a broader framework that forms Partnership policy. The Clackmannanshire and Stirling HSCP Strategic Plan (<https://clacksandstirlinghscp.org/publications>) underpins all Partnership policy, and the Carers Strategy should be viewed in this light.

The Strategy will be continuously reviewed, with unpaid carers continuing to be involved in the development of our policy and providing the Partnership with a vital link in assessing how the Strategy is achieving its aims within communities. This is a commitment from Clackmannanshire and Stirling Health and Social Care Partnership to deliver the Carers Act objectives of promoting, defending and extending the rights of unpaid carers, and ultimately improve the lives of unpaid carers and those that they care for.

Ian Aitken - Interim Chief Officer
Clackmannanshire and Stirling Health and Social Care Partnership

Background - *The Carers (Scotland) Act 2016*



The Carers (Scotland) Act 2016 and Delegation of Functions

The Carers (Scotland) Act 2016, which came into effect on 1st April 2018, is designed to support carers' health and wellbeing and help make the role of caring more sustainable. Specifically, the Scottish Government is seeking to 'promote, extend and defend' the rights of unpaid carers across the country, bringing all rights, new and existing, under one piece of legislation. The Act therefore aims to recognise and enhances the rights of carers.

Clackmannanshire Council, Stirling Council and NHS Forth Valley have developed an Integration Scheme which details the services and functions that are delegated to the Clackmannanshire and Stirling Integration Joint Board, including the preparation for and delivery of elements of the Carers Act. Functions that relate to supporting young carers have also been delegated to the Children's Planning Groups in both Council areas.

Under the Carers Act, the Partnership is obliged to prepare and publish a local Carers Strategy.

What is a Carers Strategy?

The Clackmannanshire and Stirling Carers Strategy 2019-2022 is a key strategic plan that will outline how the Partnership will support unpaid carers and meet its statutory requirements as detailed in the Carers (Scotland) Act 2016.

The strategy acknowledges that both carers and those they care for come from all walks of life. They represent the diversity of Scotland's population. Carers themselves may also have care needs. Many carers are 'hidden' and may not be accessing the support and services that they are entitled to – for example within refugee, gypsy traveller and asylum seeker populations.

The strategy will outline our vision for unpaid carers in Clackmannanshire and Stirling and our key priorities for unpaid carers over the next 3 years.

The Clackmannanshire and Stirling Health and Social Care Partnership has worked with Carers, the third sector and other stakeholders to develop this Carers Strategy which sets out how we will support Carers, whatever their age, over the next three years from 2019-2022. We expect, however, that the strategy and plans will be reviewed and changed over this time so that we invest more in what has worked well and avoid what has not been successful. We will monitor 'outcomes' – what difference our plans have made on the ground. We view this commitment to changing and adapting as a strength as it will necessarily involve ongoing collaboration with carers and with those that they care for. Carers told us in the engagement events that shaped this strategy that they valued the opportunity to share ideas directly and that this should continue even after the strategy is launched. We aim to be informed, accountable and transparent in the decisions we make.






Policy Context

We recognise that the Carers Strategy will only be effective if it also takes account of other national and local plans. Otherwise, 'silo working' occurs, which is frustrating, time consuming and a poor use of resources. It is therefore important that the Strategy is viewed in line with existing guidance and legislation.

At a national level, the 'National Health and Wellbeing Outcomes' aim to make a positive difference to the population's health and wellbeing. It states in relation to carers:



“...People who provide unpaid care are supported to look after their own health and well-being, including reducing any negative impact of their caring role on their own well-being”

NHS Education for Scotland (NES) and the Scottish Social Services Council (SSSC) were commissioned by the Scottish Government to develop the Equal Partners in Care (EPiC) core principles for working with carers and young carers. The Core Principles are based on six outcomes for carers, which are:

- Carers are identified
- Carers are supported and empowered to manage their caring role
- Carers are enabled to have a life outside of caring
- Carers are free from disadvantage and discrimination related to their caring role
- Carers are fully engaged in the planning and shaping of services
- Carers are recognised and valued as equal partners in care

The United Nations Convention on the Rights of the Child (UNCRC) states that all children and young people have an established set of rights. The Convention has four main principles:

- All the rights guaranteed by the UNCRC must be available to all children and young people without discrimination.
- The interests of the child or young person must always come first.
- The views of children and young people must be considered and taken into account in all matters affecting them.
- All children and young people have the right to life, survival and development.

The Partnership's Strategic Plan's priorities echoes those identified by carers during the engagement events for this Strategic Plan, namely:

- **Self-Management** - individuals, their unpaid carers and families will be enabled to manage their own health, care and wellbeing.
- **Caring, Connected Communities** – supports will be accessible and enable people, where possible, to live well for longer at home or in homely settings within their community
- **Safety** - health and social care support systems will help to keep people safe and live well for longer.
- **Decision Making** - individuals, their carers and families will be involved in and supported to manage decisions about their care and wellbeing.
- **Experience** – Individuals will have a fair and positive experience of health and social care.





A range of statutory guidance, including Local Eligibility Criteria, have also been produced to support the implementation of the Act. The way that these documents are being delivered in the Clackmannanshire and Stirling area are described in the following sections.

Some of the key elements of the Act and supporting guidance are detailed below:

Adult Carer Support Plans & Young Carer Statements

Carers now have the right to be offered or request an Adult Carer Support Plan (ACSP) or Young Carers Statement (YCS), setting out their personal outcomes and identified needs.

Information and Advice

Local authorities are required to establish and maintain an information and advice service for carers. They must also publish and keep under review a Short Breaks Services Statement (for more detail please see below).

Support to Carers

Local authorities have a duty to provide support to carers, based on the carer's needs which meet local eligibility criteria. Local authorities also have powers to enable them to provide support to carers who do not meet local eligibility criteria.

Break from Caring

Local authorities are required to consider whether any support provided should include, or take the form of, a break from caring. They must also have regard to the desirability of breaks being provided on a planned basis.

Hospital Discharges

Health boards have a duty to inform the carer and to invite their views before a cared-for person is discharged from hospital. These must be taken into account before the discharge of the cared-for person.

Carers Charter

Scottish Government have published a Carers' Charter which sets out the rights of carers in or under the Act. The Strategy acts in a complementary fashion to the Charter.

Definition of a Carer



A carer is:

‘a person of any age who provides 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)

One goal of the Act is to provide clarity on what the definition of a carer actually is, and the Strategy seeks to mirror this. We are proposing that the following definitions and age ranges are used for the purposes of this strategy and delivery of support to carers in the Clackmannanshire and Stirling area.

An **adult carer** is anyone over 17 years (and not still in school) who provides unpaid care to a friend or family member who is unable to manage without this care due to illness, disability, a mental health problem or addiction.

Clackmannanshire and Stirling Health and Social Care Partnership also recognises that the transition between young carers and adult carers can be difficult for many young people. For this reason we also recognise young adult carers as a distinct group of carers. Although there is no fixed definition of a young adult carer, we are proposing that this includes young people aged 16-25.

Young carers are under 18 years of age, or 18 years if still at school.

In relation to young carers, consideration will be given to the nature and extent of the care provided by the young carer being “appropriate”. The young person will have the opportunity to discuss if the care they are providing is appropriate to their age and circumstances.

Anyone can become a carer at any time of their life and possibly for more than one person at a time. A person may have more than one carer. They can be any age, from young children to older adults. Some carers provide an intensive amount of caring over a long time, others for a shorter period. To be considered as a carer, the individual does not need to be living with the cared for person. Carers may be parents, spouses, grandparents, children, siblings, same sex partners, friends or neighbours. Carers come from every community and culture. Some may have their own care needs.


Carers are not paid workers, who, although sometimes ‘support workers’ have been referred to as carers. Carers, however, may receive a payment for part of the time that they care- for example through a Carer’s Allowance. It is also important that carers are not thought of as volunteers.

Consultation and Needs Assessment

Consultation

To assist in developing our Carers Strategy the Partnership conducted a wide-ranging consultation to gather the thoughts and opinions of various stakeholders. This included holding consultation sessions with local Carers Centres, creating a survey which was circulated around staff members at the NHS, Stirling Council and Clackmannanshire Council, and the use of a presentation which was sent to carers and other relevant parties to help structure and gather responses. We specifically asked consultees to look at areas of concern in relation to the transition period, short breaks, priorities, and the overarching vision.

While the consultation responses are referenced throughout this strategy, some are detailed below:




“The school were aware of my situation [as a carer], but didn’t listen to me”

“Raising awareness is important – people within local communities, as well as within the health care system itself should be more aware of the role of carers”

“More focus should be placed on identifying carers, and intervening before carers reach a crisis point”

“Professionals sometimes think they know more than the carers. A change of mind set is needed”

“Health care staff should not be asking us ‘what do we need’. Instead, they should ask ‘what would make life better’ – we do not always know what we need”



While the consultation responses were varied, we were also able to identify common areas of concern. These common themes heavily guided the Strategy’s Vision and Priorities.

The Needs Assessment

As well as the consultation responses, the Partnership has relied on the facts and figures provided by the *Unpaid Carers Needs Assessment*, as well as the Strategic Needs Assessment for the Partnership more generally. These documents have provided significant statistics which have allowed us to determine where the specific areas of need are.


The figures from the Needs Assessments will be referenced frequently throughout the Strategy. For a more detailed summary of the statistics in relation to carers, please see the section '*Carers in Clackmannanshire and Stirling*' below.



Vision, Approach and Priorities

Our Vision

Our vision is to enable individuals in Clackmannanshire and Stirling to live full and positive lives within supportive communities. We acknowledge that in order to provide an effective and robust system of support to unpaid carers, a coherent and forward-thinking plan is essential. This Vision is our blueprint for achieving an environment in which carers are integral to health care culture and principles.



Carers are to be at the centre of the vision, acknowledging the need for a more personalised service and understanding that carers have needs separate from the person under their care. The vision can be summarised as follows:

Our Vision for carers in Clackmannanshire and Stirling is to enhance awareness and understanding of unpaid carers within the community and the health care profession, so that carers can be supported, valued, and enabled to live a more enjoyable life while continuing in their role as a carer.

To achieve the above vision we have to look at the term 'community' in its broadest sense. This will involve engaging with and working in partnership with a wide-range of people, including unpaid carers, healthcare professionals, social care professionals, third sector services, employers, housing departments, care providers, and job centres. This is not an exhaustive list, and broad cooperation and engagement will always be encouraged.

This is integral to the success of a Carers Strategy as well as ensuring the appropriate information and support is offered to unpaid carers in a timely fashion to support them in their caring role.



Our Approach

Our approach to achieving our vision for unpaid carers will be underpinned by three key principles:

1. There will be a focus on prevention and early intervention so that those with a caring role are identified and supported at the earliest opportunity.
2. We will adopt a person centred approach to support the carer and the person(s) that they are caring for because we recognise that carers have individual needs and caring circumstances.
3. We will ensure that carers are always treated as equal partners in care, both in terms of the support they receive for themselves as well as the person(s) they are caring for.

Our Priorities

Our Carers Strategy will focus on delivering the following key priorities over the next few years:

1. Recognising Carers
2. Including Carers
3. Supporting Carers
4. Health and Wellbeing of Carers
5. Creating Carer Aware Communities





“I wasn’t identified as a carer until I was in 3rd year at school”

Recognising Carers

This priority focuses on recognising and identifying people who are carers at the earliest possible opportunity, ensuring that support can be offered at an appropriate stage. This can be achieved by improving the capability of health and social care staff and professionals to quickly recognise and signpost potential carers.

Moreover, the Adult Carer Support Plans, and Young Carer Statements can be used to clearly identify the specific needs of the carer. Finally, it is clearly important that ‘hidden carers’ can be identified – there are estimated to be around 8,000 in the Clackmannanshire and Stirling area. Closer working and communication with where hidden carers are likely to be is key to recognising carers.

What we intend to do: The Partnership has set up a Carers Operational Group, which is currently developing a plan which will detail practical measures for improving carer identification. There are also plans to increase the involvement of groups who are aware of and work closely with carers, such as dementia support groups and the Alcohol and Drug Partnership. It is the intention of the Partnership that all areas where carers might be found form part of the overall Carers Strategy – for example, this might mean greater interaction with Forth Valley’s Dementia Strategy to ensure carers are a key part of the plan moving forward.

Including Carers

Carers should be included in the key decisions about the support they receive, as well as decisions on the care and support the cared for person needs. Indeed, carers should not only be involved in areas which impact them specifically, but also be included in the development and review of the wider carer policies and strategies.

Allowing and encouraging carer input in key decisions, such as transitions, hospital discharges, decisions on changes to care needs is key to greater levels of involvement. Placing a greater emphasis on involvement in the design and development of local carer services is also important. In other words, carers will be co-producers in planning and shaping carer services. Essentially, carers will be treated as equal partners – whether that be throughout the health and social care process, or at a strategic level.

What we intend to do: The simplest solution is to include carers in the groups that determine future policy and strategies. A carer’s representative currently sits on the Integration Joint Board, the main decision making body of the Partnership. A carer’s representative has also been included in the Partnership’s Carers Act Implementation Group, along with staff working at Clackmannanshire and Stirling Carers Centres. This ensures that the thoughts of carers are never overlooked, and this is something that will continue to guide carer policy over the next three years.



Supporting Carers

This priority seeks to ensure that carers are supported in their role, and are supported well-enough to continue in that role should they wish to do so. This may take the form of enabling carers to have access to advice and information in a timely manner, and that all Partnership staff are able to assist carers when needed. This priority also focuses on making sure carers feel supported throughout their time as a carer, as well as when their caring role comes to an end. Importantly, carers should not experience disadvantage or discrimination, including financial hardship, as a result of their caring role.



“It is so important that carers are identified, and support is offered, before their situation reaches a crisis point”

To enable this, there must be a flexible outlook, which allows carers to be supported in a way which can work around standard working and educational hours. The Partnership is looking at taking a preventative approach by aiming for early intervention, allowing support to be offered as soon as possible. Investing in prevention activities aims to avert a crisis. Examples of support a carer may expect might involve making sure carers can have access to the condition specific training they need to act as a carer, particularly in complex situations.

Giving carers the appropriate advice and guidance, giving carers access to breaks from their role and identifying their specific needs can all ensure carers are adequately supported. In addition, a key focus of the Partnership is to ensure appropriate support can be given to young carers making the transition to becoming an adult carer.

What we intend to do: There are numerous actions the Partnership will seek to implement that will help support carers. Currently, the Partnership is working on a staff-development plan that will improve the knowledge and understanding of staff of the needs of carers. This applies to all Partnership staff – from Clackmannanshire, Stirling, and NHS Forth Valley. The Partnership is also looking to set-up a Short-Breaks Sub-Group, which will aim to ensure Short Breaks are as diverse, accessible, and ultimately as beneficial as they can possibly be. Finally, the Partnership is exploring ways to harmonise the access to support for carers when palliative care is needed. There are various ways in which carers can be supported, and the Partnership is seeking to implement these in the best way possible.



“I always sort everyone else out first, and sometimes don’t have time to look after myself”

Health and Wellbeing of Carers

The Partnership is keen that carers see a genuine improvement to their health and wellbeing, and are enabled to have a life outside of caring.

This can be achieved in a variety of ways, from improving carer’s knowledge on the health risks of the caring role, to enabling access to counselling, to increasing GP involvement. The Partnership will always encourage carers to have an active life outside of their caring role, including fulfilling their education, employment and/or training potential. In other words, carers should have the ability to combine their caring responsibilities with work, social, leisure and learning opportunities.

Young carers can be particularly susceptible to detrimental health and wellbeing, so protecting them from taking on inappropriate caring roles is critical.

What we intend to do: Carers Centres in both Clackmannanshire and Stirling offer other means of support for carers. Sessions aimed to help with the physical and mental demands of caring - such as Keep Well Checks, Complementary Therapies, and general carer training sessions. The Partnership is also looking to advance the range of support available in terms of short breaks – through exploring and expanding the short break opportunities available, and utilising a short breaks sub-group that can inform the Partnership of exactly what carers are looking for. Finally, the Partnership will endeavour to ensure staff are well aware of the health risks that can often accompany caring, and support carers accordingly.

Creating Carer Aware Communities

Well-informed and supportive communities can go a long way to improving the lives and wellbeing of people within that community who need care and support. It is therefore a priority of the Partnership to promote carer aware communities, where the hardships that can accompany being a carer are well understood.

Raising awareness is the most effective way of achieving this priority, both locally and amongst the wider public. Using professionals, such as those working in health, social care, and education, to clearly signpost carers to advice and information is also effective. Indeed, making employers more aware of carers and the demands placed on them will also go a long way.

What we intend to do: Local communities are key in raising awareness and support. The Neighbourhood Care Team will have an increased focus on carers, and work to develop local, community-based approaches to support carers. This may include offering more local carer support services (we understand attending the Carers Centres can sometimes be difficult). It is also important that key community groups are aware of carers and their respective needs. Therefore, the Partnership will seek to ensure schools, social clubs and other local bodies are as well informed as they possibly can be.

Transitions



“[As a young carer becoming an adult carer], it felt like there was less support available”

Transitions

Within the context of carers, Transitions are often viewed as the period when a young carer becomes an adult carer. Transitions can amount to any significant change in circumstances however, and these changes can also be unexpected. Therefore, it is essential that the Carers Strategy acknowledges the need for transitional planning, so the correct support can be made available at a time when carers need it the most.

Planning appropriately for transitions is something that was considered as being very important to carers involved in our consultation, with many noting the changes are often not very smooth, and life can become more difficult – often at no fault of their own. Some examples of transitions for carers include:

- Moving from a young carer to an adult carer
- Changes in education (moving to high school, university, college etc.)
- Changing or giving up employment
- Having a child
- Marriage
- Changes to benefits
- Declining health
- Hospital discharge
- Moving to a care home

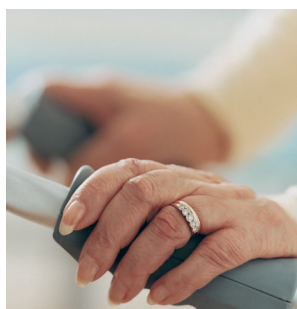


“Having information and support available, and having friends who could help, was so important [in making jump from primary school to high school]”

Clearly not all transitions require the same level of support and guidance, but it is important to always consider that any significant changes in circumstances may amount to a transitional period in which some level of support is needed. It is also important to remember that changes in circumstances for the cared-for person can also likely have a significant impact on the carer, such as declining health or new care requirements.

This Strategy acknowledges the importance of well-structured support during critical times of a carer's life, but also appreciates the need for continuous support throughout.

"I would have liked to have gone to university, but I didn't have the time [due to caring role]"



Short Breaks



“Short Breaks should take your mind off of your caring role”

“I like the idea of a Short Break being any time away from the usual routine – something different”

Short Breaks

Short Breaks – something commonly associated with respite – are immensely important to a carer’s emotional and physical wellbeing. Under the Carers (Scotland) Act 2016, the Partnership was required to produce a Short Breaks Services Statement by 31st December 2018, which covers both the traditional models of respite, as well as the more flexible, modern, and innovative takes. While more specific details of Short Break provision can be found in the Short Break Statement, the Strategy recognises the importance of respite periods, and this is something made abundantly clear during the consultation process. The Statement aims to set out information on Short Break services available for local carers and those that are cared for, ensuring carers have a clear understanding of:

1. What short breaks are

2. Who can access them

3. What is available

4. How they can be accessed

A Short Break is not to be defined restrictively, but rather as any break from the regular caring role. This includes breaks both with and without the cared-for person. Therefore, the perhaps more commonly-used term ‘respite’ is still apt, as this also constitutes a short break.

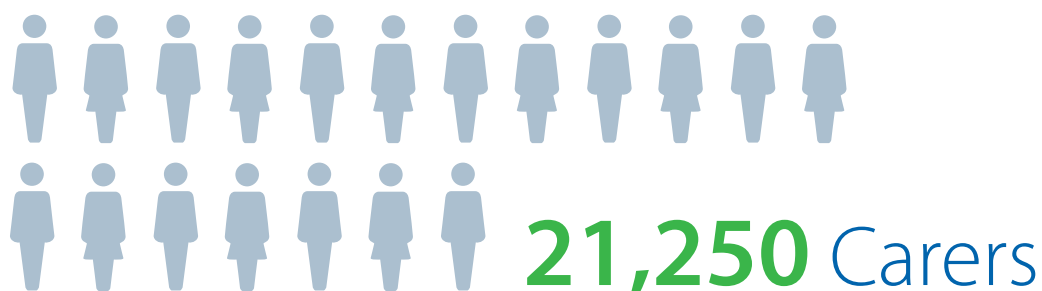
For some carers, the break might encompass a week or two of non-caring, in order to “recharge the batteries”. For others, this might mean having the means and the time to go to the cinema, or out with friends for a few hours. The definition is intentionally open, with the idea of giving carers a flexible way to break from the often rigorous demands of their caring responsibilities.

The ultimate aim is that Short Breaks will be accessible and planned by carers, and be viewed in a positive light, as opposed to something that is only used in exceptionally rare circumstances. In other words, Short Breaks are something carers, and perhaps the cared-for person, can look forward to and enjoy.

Carers in Clackmannanshire and Stirling

It is important that the Partnership has a firm grasp on the demographic make-up of its population in order to make informed and logical policy decisions, and this also applies to carers. The Clackmannanshire and Stirling Unpaid Carers Needs Assessment, as well as the more general Strategic Needs Assessment, was produced aiming to look at what is currently known about carers in Clackmannanshire and Stirling as well as service provision while considering factors which will impact on demand and will support in the development of this Carers Strategy. While many figures have been referenced throughout this document, a brief summary in relation to carers is provided below:

Clackmannanshire and Stirling Carer Make-Up (Percentage of Carers)

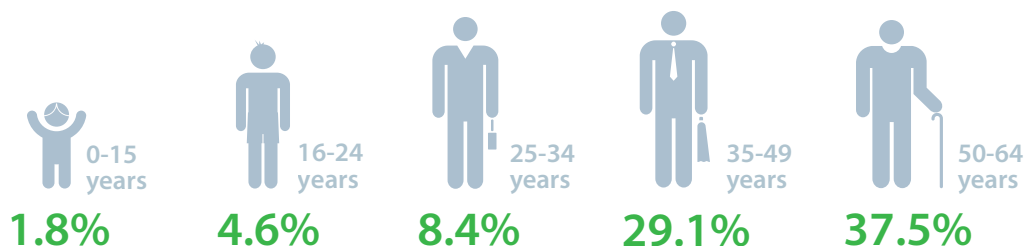


Hours of Care per Week (of self-identifying carers):

57% - 19 hours
9% - 20-34 hours
34% - 35+ hours

Carers over 16:

55% - Employed
19% - Unemployed/Not working
26% - Retired





Further Detail

- With the exception of Hours of Care per Week, the figures above relate to the number of estimated carers, and not the number of carers who identify as such. For the reasons explained in the next paragraph, it should be noted that many of the figures are estimates based on projections.
- The Scotland's Carers 2015 report considers 17% of the adult population (16+) and 4% of children aged 4-15 as the best estimate of the number of carers in Scotland. Applying this in Clackmannanshire and Stirling, there may be around 20,500 adults (16+) and 750 young carers (4-15) which would mean that there could be over 8,000 'hidden' carers.
- In 2016/17 there were 878 adult carers across Clackmannanshire known to the Falkirk and Clackmannanshire Carers Centre, and the Young Carers Project are currently in contact with 78 young carers in Clackmannanshire. In 2016/17 there were 1,947 adult carers and 362 young carers supported by Stirling Carers Centre (this includes out of area carers). Stirling Carers Centre completed 101 Carers Assessments in 2016/17 and Falkirk and Clackmannanshire Carers Centre 110 Adult Carers Support Plans for Clackmannanshire Carers.
- Information from Stirling's social care system showed that there were 98 carers assessments completed in 2016/17. Further investigation would be required to determine the extent to which these were the same carers as those included in Stirling Carers Centre assessments. In Clackmannanshire Local Authority Carers Assessments are given to carers for self-completion and return and numbers completed are consistently very low. Given the number offered a change to the current process is likely to result in an increase in assessments and support.
- As at February 2017 there were 1,200 carers entitled to Carers Allowance in Clackmannanshire and 1,612 in Stirling.
- The 2011 Census showed that women were more likely to report being carers than men and around a third of carers provided 35 hours or more care a week, equivalent to working full time. Over half of adult carers were employed or self-employed and around a quarter retired. A greater proportion of carers in the most deprived areas reported more substantial caring and while a higher percentage of the population in Rural Stirlingshire provided unpaid care there was a larger number of people in the other two localities who provided care and more intensive caring.

- The number of children who said they provided care rose with age and they generally rated themselves in lesser health than their non-carer peers.
- Carers are more likely to have health conditions and perceive their health as poorer than non-carers. For example, 6% of Clackmannanshire Carers and 5% of Stirling Carers are said to have a mental health condition expected to last 12 months or more, compared to 4% of non-carers. Moreover, young carers are twice as likely to have a long term health condition compared to non-carers of the same age.
- There is room for improvement in the quality of carers' experiences with health and care services. While around 7 out of ten said they had a good caring/life balance only around a third said that local services were well coordinated for the people they look after and that they felt supported to continue caring.
- An increasing number of carers are accessing information and/or support from the Carer's Centre and the number claiming Carer's Allowance has been increasing.
- Many factors will impact on demand, and indications are that the cared for population in Clackmannanshire and Stirling is likely to grow. The growth in the older age population is known, with the elderly population (75+) estimated to increase dramatically by 2039, particularly in Clackmannanshire. People are living for longer and long term conditions including dementia, diabetes and strokes as well as those with multiple long term conditions are all projected to increase. The majority of people with a physical disability are also older. The potential for the number of people providing unpaid care in turn is likely to increase as will the number who may require help and support.



“There should be a greater focus on identifying carers. A lot of people are unaware of the help available.”

Getting it Right for Carers in Clackmannanshire and Stirling



The initial work of the multiagency Clackmannanshire and Stirling Carers Act Implementation Group focussed on preparations for when the Act came in force from April 2018. This included the:

- Development of Local Eligibility Criteria in discussion with local carers
- Development of Adult Carer Support Plan (ACSP), Young Carer Statement (YCS) and associated assessment processes
- Completion of the Unpaid Carers Needs Assessment – to be formally published by the end of 2018 (see summary in previous section)
- Mapping and review of resources
- Establishment of enhanced support for carers
- Development of a Short Breaks Statement.

Many of the above, as well as the drafting of this strategy, are substantial pieces of work which aim to ensure that the correct framework needed to support carers can be delivered.



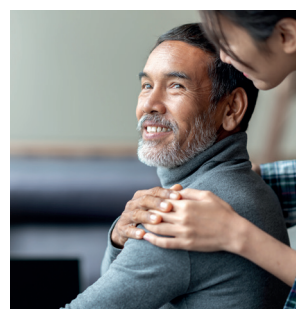
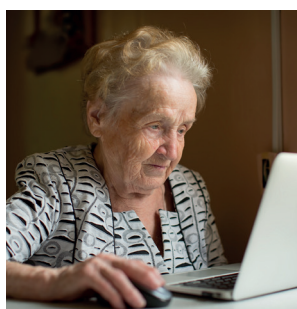
“To improve things we need a clear strategy – nothing nebulous”

Quality Improvement - Performance Management

Unpaid Carers are a key group within the community who care for many of the most frail and vulnerable residents in our Partnership. The impact on their health and wellbeing can be considerable. Health and Social Care Partnerships have been identified as having the lead role in the effective implementation of new legislation to support this group which came into effect on 1st April 2018. Leading up to this date we worked together with Carers Centres to prepare for implementation of the Act, and will continue this work over the next year. This co-production approach involving carers in our planning processes is something the Group will continue to promote over the coming years.

The Carers Centres in Clackmannanshire and Stirling play an essential role in implementing the Act. Over the next year we will commission a review of the services within the Partnership.

- Identification of carers and awareness of supports remains a challenge particularly with some groups of carers.
- Further work is required to scope the elements required in acute NHS services including the duty to involve carers in discharge planning.





National Performance Indicators

The Scottish Government has developed a national performance measure relating to Carer's health and wellbeing outcomes which is measured through the Health and Social Care Experience Survey every two years. The measures consider:

- the balance between caring and other things in the Carer's life
- the impact of caring on the Carer's health and wellbeing
- how well services are co-ordinated to support the cared for person
- the involvement of Carers in decisions
- how well Carers feel they are supported to continue caring.

We will measure these outcomes using a variety of methods including:

- through Adult Carer Support Plans/Young Carer Statements
- the number of carers having a break when the cared for person uses a type of respite service
- surveys and questionnaires e.g. the bi-annual carers' survey
- Joint Health and Wellbeing Strategy proposed measures/targets relating to carers.

If you need help or this information
supplied in an alternative format
please call 01786 404040.



Web: clacksandstirlinghscp.org