



**Perth and Kinross  
Joint Strategy for  
Adult Carers and Parent Carers**

**2011 - 2014**

**April 2011**

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The Strategy is a working document and is developed throughout its 3-year life. Feedback is sought on a continuous basis through consultation with carers and other stakeholders through carer conferences. Carers and other stakeholders are involved, as a matter of course, in all subgroups established to develop the Action Plan.

## **Is the Strategy available in other formats?**

There is a shorter summary Strategy. It is available in Braille, large print, audio and in some community languages, upon request. Please use the contact details below for further information or copies.

## **How can you have your say on the Strategy?**

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# 1. Introduction

## 1.1 Introduction

This joint Strategy for the support of carers in Perth and Kinross, builds upon the achievements of our previous strategy. The principles, policy and practice which underpinned the previous Joint Carers' Strategy (2008–2011) continue to underpin this one and our new action plan should be seen as a continuation of commitment to deliver services which will:

- Consolidate, monitor and improve support already in place,
- Prioritise developments which are aimed at further enabling carers to lead an inclusive life within their local communities, as opposed to being isolated by their caring responsibilities

At the same time the Strategy has moved on to encompass the needs and wishes of all carers in Perth and Kinross. This strategy aims to respond to the needs of adult carers who may be:

- Caring for adults
- Parents, caring for children with special and complex needs
- Young carers aged 18 – 25 years, approaching adulthood but with clear rights as young people to further education and employment under the auspices of the Scottish Government policy 'Getting it Right for every Child'

In the last three years there has been a marked cultural change in the way in which carers are recognised, both nationally and locally. It is more readily accepted that carers have rights. In particular, carers have a right to be considered as equal partners in the provision of care, and who also have a specific right to a personal quality of life which will enable them to be included in society.

This is clearly acknowledged in the development of the National Carers' Strategy 2010 for Scotland, 'Caring Together'. This National Strategy sets out ten key actions to improve support to carers over the five years from 2010 – 2015. The focus of these actions is on improving:

- The identification of carers
- Better outcome - based assessment for carers
- Information and advice
- Health and wellbeing
- Carer support
- Carer participation and partnership

These outcomes are taken into account in this Perth & Kinross joint strategy.

The National Strategy also includes a specific national strategic plan for young carers, 'Getting it Right for Young Carers'. This has been reflected locally and a Young Carers' Strategy has been developed which aims to develop coherent and planned services for young carers. Together these two strategies form the full Perth and Kinross Joint Strategy for Carers. Copies of both strategies are available on the Council website, [www.perthshire.com/SocialCareandhealth/CareandCarers](http://www.perthshire.com/SocialCareandhealth/CareandCarers)

This commitment to provide support for all carers, whatever their age and whatever the age of those they are caring for, is reflected in the membership of the Carers' Joint Strategic Group which has representation from:

- Carers' focus group.
- Perth & Kinross Council Housing & Community Care Services.
- Perth & Kinross Council Education & Children's Services.
- Perth & Kinross Community Health Partnership.
- Young carers' services.
- Voluntary sector.

The purpose of this Joint Carers' Strategy, which is for adult carers of both adults and children with a long term illness or disability, is to:

- Provide the strategic framework for the continuing development of services for carers, through which carers and service providers can operate, so that needs and demands can be met more effectively with available resources.
- Consolidate and monitor the continuous improvement of the services already developed.
- Set priorities and show how progress will be monitored and evaluated.
- Specifically identify actions which will support the development of more seamless links across the statutory sector and other agencies to provide more effective support to carers.
- Begin the process of developing an effective transition service for young carers to adult services which ensures that their rights as young people to further education and a career are enshrined in local policies.
- Extend the services provided to support adult carers of adults to support parent carers of children with special needs.
- Identify how the Strategy contributes to the achievement of the Scottish Government's national priorities and the wider objectives as identified in the Single Outcome Agreement and Community Plan.

## 1.2 What Are Our Principles?

We recognise that:

**Carers have a human right to be included in their own social and family networks and in their own communities.**

We will therefore: -

- Listen to carers and involve them in the planning, development and provision of services.
- Recognise that we need to care for our unpaid carers if we are to enable them to be well enough, to continue to care as they wish.
- Work with carers to provide services and support for them, which will help them to maintain their own health and wellbeing.
- Recognise that the type of support carers need may vary, depending on the needs of those being cared for. This strategy links with the other local care group strategies in respond to carers on a more individual basis.

## 1.3 What are our aims?

Our overall aims, in line with the five outcomes outlined in the National Strategy, 'Caring Together', are to enable local carers to:

- Have improved emotional and physical well-being.
- Have increased carer confidence in managing the caring role.
- Have the ability to combine caring responsibilities with work, social, leisure and learning opportunities and retain a life outside of caring.
- Not experience disadvantage or discrimination, including financial hardship, as a result of caring.
- Be involved in planning and shaping the services required for the service user and the support for themselves.

'Outcomes focussed' carers' support plans will enable carers to identify what they want to be able to do, so that support is planned and arranged to meet the needs of individual carers'.

For parents of children with special needs, the updated child health matrix and the integrated assessment framework will take account of the needs of parents and siblings, as well promote a focus on better outcomes for children.

The previous Joint Perth and Kinross Carers' Strategy, (2008 - 2011), oversaw the development of a number of new services. Developed as a result of carer consultation and involvement. An outline of these services is included later in this Strategy.

#### **1.4 Carers Definition**

Carers are people who look after a partner, husband or wife, son or daughter, relative or friend, with a disability or long term illness. Many carers live with the person they care for, but many look after someone who lives independently, in supported accommodation, in hospital, or in a care home.

Carers are family members or friends who look after someone without pay or financial reward. They are sometimes known as 'informal' carers or more frequently as 'unpaid' carers. It should be noted that 'pay' does not include benefits, such as the Carers Allowance for adult carers, or the independent living allowance for children.

Carers can be of any age and live in all our communities. The person being cared for could have community care needs, such as ageing and frailty and/or have dementia. They may have a chronic illness, learning or a physical disability, mental health problem or have substance misuse problems. Children may have complex needs arising from developmental delay or autism. Anyone looking after a person with an illness or disability, whatever their situation, is considered a carer. All carers have the right to help, support, information and services and it is on that basis that this strategy has been developed.

#### **1.5 Monitoring and reviewing the strategy**

A multidisciplinary Carers' Strategic Group, including carer representatives, will ensure the effective roll-out of the action plan and will monitor progress on an ongoing basis. This Group will meet on a quarterly basis and will report progress to Perth & Kinross Council's Housing & Health committee, Perth and Kinross Community Health Partnership Board and the Perth & Kinross Strategic Health Partnership. To take into account the support of parents of children with special needs, progress will also be monitored and reported to the Integrated Children's Services Planning Group.

In the National Strategy 'Caring Together', the Scottish Government has stated that services and support for carers will be measured against the three outcome measures, within the Community Care Outcomes Framework, which are related to carers, namely:

- The percentage of carers who feel supported and capable of continuing in their role as carers.
- The percentage of carers who are satisfied with their involvement in the design of the care package for the person they care for.
- The percentage of carers' assessments completed to the national minimum information standard.

Specific attention will be paid to ensuring that local support services for carers of adults can be measured against these same outcomes. For parents of children with special needs, the main outcome measure will be the level of community based overnight respite. Local work already done to evaluate local support for carers would suggest that across Perth and Kinross in 2009:

- 64% felt able to continue caring but many were worried that ill health might intervene<sup>1</sup>.
- 50% of carers felt that receiving complementary therapies helped them to continue to care<sup>2</sup>.
- 70% carers felt happy with their involvement in the design of a care package<sup>3</sup>.

The monitoring and reviewing of the Strategy will be linked to the ongoing evaluation of existing and planning of new services. A detailed monitoring framework is linked to our action plan. Further consideration will be given to the ongoing involvement of key stakeholders in the monitoring and review of the Strategy.

## **1.6 Equalities**

The planning and delivery of good quality appropriate information, advice, care and support services in Perth and Kinross to embraces the principle of equal opportunities. Perth & Kinross Council Housing & Community Care Services, Education & Children Services and Perth and Kinross Community Health Partnership have Equalities Action Plans to ensure that all services, including this Strategy and related actions, take positive steps towards to support this agenda. This means that the Council and Community Health Partnership will strive to encourage equal opportunities and diversity, responding to the different needs and service requirements of people regardless of sex, race, colour, disability, age, nationality, marital status, ethnic origin, religion or belief, sexual orientation or gender re-assignment.

## **1.7 What is Our Vision?**

“It is our vision that carers, as partners in the planning and delivery of services, in Perth and Kinross, will have access to a range of relevant information, advice, support and care services. This will enable them, and those that they care for, to live independently and participate in their communities.”

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<sup>1</sup> Carers Satisfaction Survey October 2009

<sup>2</sup> Norwell Clinic Evaluation February 2009

<sup>3</sup> Carers Satisfaction Survey October 2009

## 2. The Strategic Planning Framework

### 2.1 Legislative context

There are several statutory Acts which influence the development of local carer services. While some relate specifically to carers, there are others which affect the delivery of more generic services that carers can use. These include:

- Social Work (Scotland) Act 1968
- Children (Scotland) Act 1995.
- Adults with Incapacity Act (Scotland) 2000.
- Regulation of Care Act 2001.
- Housing (Scotland) Act 2001.
- Community Care and Health (Scotland) Act 2002.
- Mental Health Act 2003.
- Changing Lives 2004.
- Care 21 report 2005.
- Work and Families Act 2006.
- Adult Support and Protection (Scotland) Act 2007.
- Self Directed Care (Direct Payments) 2007 guidance update.
- Equality Act 2010.

These Acts mean that carers have the right to have their need for help to continue caring taken into account, even if the people they are caring for refuse community care services. They also have the right to be treated without discrimination in the workplace if they need time off to fulfil caring responsibilities. The Community Care and Health (Scotland) Act 2002 recognised carers as ‘key partners in the provision of care’ and introduced the following rights for carers:

- Substantial and regular adult carers, including parent and guardian carers of disabled children, are entitled to an assessment of their own support needs, (‘carer assessment’), independent of any assessment of the person they care for.
- Young carers aged less than 18 years have the same right to an assessment.
- Local authorities have a duty to inform eligible carers of their right to an assessment.
- Local authorities have a duty to take account of the care provided by a carer, and the views of the person in need and their carer before deciding what services to provide.

Also, as a result of the 2002 Act, a Carers’ Information Strategy has been prepared by NHS Tayside in partnership with carers, representatives from the three local authorities in Tayside, staff from Princess Royal Trust for Carers and representatives from ‘Support in Mind’ Scotland.

The Strategy aims to ensure that carers involved with health services are treated as key partners in the provision of care and are provided with appropriate information about their rights as carers as well as receiving information, training and support to assist them in their caring role. Copies of the shortened version of the NHS Tayside Carers' Information Strategy are available from the Perth and Kinross Association of Voluntary Services (PKAVS) or from any Perth & Kinross Council Housing & Community Care Services locality team.

## **2.2 National policy context**

### **2.2.1 The 'Concordat'**

The Concordat is an agreement between the Scottish Government and the 32 Scottish local authorities. It includes the requirement to progress an additional 10,000 weeks of respite care nationally per annum in care homes or at home, provision of support and respite for an additional 1,000 young carers and additional resources for carers' centres. The concordat also contains several targets. Developing effective support to carers will assist local authorities and NHS boards to achieve these targets, which are:

- A reduction in the proportion of people aged 65 years or over admitted as emergency inpatients two or more times in a single year.
- An increase in the percentage of people over 65 years with high levels of care needs who are cared for at home.
- A reduction in the proportion of individuals living in poverty.

### **2.2.2 Single Outcome Agreement**

The Concordat includes the development of a Single Outcome Agreement whereby Councils deliver on national outcomes. This Strategy helps to deliver outcome numbers 6 and 15 which are 'We live longer, healthier lives' and 'our public services are high quality, continually improving, efficient and responsive to local people's needs' respectively. Our proposals contribute to Perth and Kinross Council local outcomes numbers 10 and 12 which are 'our people will have improved health and well being' and 'our communities will have access to the services that they need' respectively.

### **2.2.3 Reshaping Care for Older People**

Population projections show that the ways in which older people's care is delivered must change significantly over the next two decades. There will be not only greater numbers of older people, but also greater numbers of carers, and also greater numbers of older people providing unpaid care. As part of shifting the balance of care from institutional to community settings, Perth and Kinross Council and NHS Tayside are implementing a 'Reshaping Care for Older People' Change Fund which will help to reduce the number of bed days lost through delayed discharge and unplanned hospital admissions alongside developing better joint working with care homes and significantly empowering communities to engage in and support co-production in areas to support carers.

## **2.2.4 Getting It Right For Every Child (GIRFEC)**

This is a national programme to improve outcomes for all children and links seamlessly with the Perth and Kinross 'Integrated Children's Services' vision of helping children to live 'the best that they can be'.

Nationally, too many children and families were not receiving the help they needed when they needed it. Many services either duplicated or overlapped with one another, and there were a variety of different assessments and plans leading to duplicate meetings for parents and their children. GIRFEC ensures that all agencies in touch with children and young people must play their part in ensuring that children are safe, healthy, active, nurtured, achieving, responsible, respected and included. Services which are appropriate, proportionate and timely should be delivered from within existing universal services of health and education, receiving additional support through coherent joint agency assessment. Getting it Right for Every Child is based on a set of shared values and principles including:

- Working in partnership with families.
- Respecting confidentiality.
- Sharing information.
- Making the most of bring together each worker's expertise.
- Co-ordinating assistance and support.

## **2.2.5 National Carers' Strategy for Scotland**

The national strategy for carers, 'Caring Together' sets out ten key actions to improve support to carers over the five years from 2010 – 2015. They are as follows:

- Develop a Carers' Charter.
- Development of measures to help professionals in the health and social care workforce to identify carers.
- Improve the uptake and quality of carer assessments/support plans.
- Improve the provision of information and advice.
- Ensure carer representation on Community Health Partnerships.
- Produce a bespoke resource on issues relating to stress and caring.
- Invest in carer and workforce training through grant to national carer organisations.
- Invest in innovative short breaks through the voluntary sector.
- Encourage and promote carer-friendly employment practices.
- Ensure better strategic planning and collaborative working between health and social care services to ensure the delivery of co-ordinated services and supports.

'Caring Together' is driving a culture shift within service commissioners and providers by encouraging them to concentrate on providing preventative support rather than on providing crisis driven services. It has provided guidance for determining the eligibility of a carer for services by suggesting that, in the future, 'greatest need' will not correlate with crisis but with specific indicators demonstrating vulnerability, such as being:

- In poverty
- In poor health
- Socially isolated

The National Carers' Strategy also promotes actions to provide support for young carers and the transition of young carers to adult carer support services. These national action points are complemented by the objectives and actions contained within this Strategy.

### **2.3 Local policy context**

This Strategy complements, and is consistent with, other Perth and Kinross plans and strategies including the following:

- Community Plan.
- Perth and Kinross Council Corporate Plan.
- Perth and Kinross Council Housing and Community Care Services Equalities Action Plan.
- Perth and Kinross Community Health Partnership Equalities Action Plan.
- Perth and Kinross Council Corporate Equalities Plan.
- Perth and Kinross Council Housing and Community Care Services Business Management Information Plan.
- Perth and Kinross Education and Children's Services Integrated Children's Services Plan.
- NHS Tayside Carers' Policy.
- NHS Tayside Carer Information Strategy.
- Development of joint care group strategies by Perth and Kinross Council, Perth and Kinross Community Health Partnership and NHS Tayside for:
  - Older people.
  - People with dementia.
  - People with learning disabilities.
  - People with mental health problems.
  - People with physical disabilities.
  - People who misuse substances.
  - People in palliative care.

## 3. Needs and Resources

Unpaid carers provide a very large part of the care and support needed by many of those who use our services. Carers need the right information, advice and support to help them continue to care without detriment to their own health and wellbeing. The resources provided to support adult carers depend on whether the person being supported is an adult or a child.

All support for parents of children with complex needs is delivered through the holistic approach of GIRFEC. It is delivered in partnership by the local NHS, the voluntary sector and the Council. Within the Council that support is delivered through Education and Children's Services. While support, for carers of adults, is also delivered through a similar partnership, the Council's main delivery agent is Housing and Community Care Services.

It is an important strand of this strategy to ensure that the support offered to all carers is targeted at their specific and individual needs and the specific and individual needs of those being cared for. While there are a variety of needs which are common to both sets of carers such as the need for time to themselves and for relief from overbearing stress, there are other needs which reflect the needs of those for whom care is being provided.

Children, first and foremost, need to be considered as a part of their families and support needs to be provided to the family as a whole. Adults, with long term disabilities, may be seeking independence from their parents, who are also their carers, and this requires a different kind of support for the carer. Carers, who are caring for spouses and partners, with long term illnesses, may want time to themselves to reflect, relax and recuperate but they also want to continue to share a life with their partner where possible. This section is therefore divided into two parts:

- (3.1) looks at the needs and resources targeted at carers of adults.
- (3.2) looks at those targeted at children and families.

### 3.1 Carers of Adults

#### 3.1.1 Introduction

There is evidence that there is a social and health impact on carers as a result of their caring role. 'The Future of Unpaid Care in Scotland', (2006 - Care 21 Report), advised that over 60% of carers experience depression, anxiety, sleep disturbance or stress as a result of providing care. Carers will often seek help only when their caring situation has deteriorated to a crisis point. The report recommended that carers should have access to relevant information and advice that would enable them to seek support when required, thus avoiding a crisis situation arising and the possible need for emergency provision or unscheduled care. In addition, the detrimental impact on their health and wellbeing could be lessened.

### 3.1.2 Carers in Perth and Kinross

According to the 2007/08 General Household Survey, over 19,000 people were recorded as providing some care across Perth and Kinross. In research carried out for Perth and Kinross Council's Housing Needs and Demand Assessment in 2009, 2.8% of households identified themselves as having at least one unpaid carer. This equates to around 1,900 households. Within those households, around 1,400 unpaid carers are providing over 50 hours of care a week to another person within the household, and a further 200 are providing 20 to 49 hours a week.

The population of Scotland is ageing and, in Perth and Kinross, the number of older people (over 65) is projected to rise from around 32,000 (by 2013) to over 48,500 by 2033, the highest proportionate increase in Scotland.

While the numbers of local working age population (people aged 16 – 64) is also projected to rise, the rate of increase will be much smaller. Thus while, in 2013, number of working aged people is projected to be 63% of people living in Perth and Kinross, by 2033 they are projected to be only 56% of the population<sup>4</sup>. It is therefore very likely that there will be fewer local people, of working age, able to provide paid support and care.

The 2001 Census suggested that around 10.5% of the working population also had an unpaid caring responsibility. Applying these figures to the projections above, would suggest that, locally, the number of carers of working age is likely to rise from around 9,900 in 2013 to around 10,800 in 2033. For the local economy to prosper, it will be important to enable as many of those carers as possible to remain in work, while caring. As such there is an emphasis, in this strategy, on developing more effective ways of supporting carers so that they can continue to work.

If the number of older people living in Perth and Kinross is expected to rise, then we can expect the number of older people who have dementia to also rise significantly. Dementia UK suggests that 1 in 6 of people aged over 65 is likely to have dementia. Applying these figures to the local population of older people, would suggest that the numbers of local older people likely to have dementia may well rise from around 1,900 in 2013 to 2,900 in 2033.

As numbers of older people, and therefore those with dementia, are both projected to rise above the national average in Perth and Kinross, the numbers of people caring for them may also rise above the national average level.

While many of the carers, of this group of people, may be sons and daughters of working age, the rise in the number of people with dementia will also have a considerable effect on the number of older carers. This group of carers are those who are most likely to become isolated as a result of their caring responsibilities. Over time, both their physical health and their emotional health are likely to be seriously affected. Yet this group of people is less likely to present to their GP for help because they will become immersed in their role as carers and will tend to dismiss ill health as a sign of ageing. This means that another significant strand of the strategy will need to address how local carers can be assisted to maintain their health.

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<sup>4</sup> GRO(S) 2008 based projections

### **3.1.3 Overview of Current Resources**

A wide range of services are available for carers of adults. Assessment and care management services are available from Perth and Kinross Council's Housing and Community Care Services, Perth and Kinross Community Health Partnership and NHS Tayside. Specific services dedicated to carers take the form of:

- Residential care respite directly provided with dedicated places at the three local authority care homes, namely Dalweem, Parkdale and Beechgrove care homes for older people. If the carer prefers, this respite can be accessed as 'flexi respite'. This means that a number of respite nights are allocated to the carer and the carer can then book ahead directly, with the care home of choice. This allows the carer to plan ahead and take account of his/her own social needs.
- Community resources for home support are available through services such as:
  - Crossroads Carer Attendant Scheme and Dementia Care Attendant Scheme.
  - Home support for people with dementia through Health Care Assistants.
  - WRVS Good Neighbours Scheme.
- Community resources for day care are available at Rannoch Road, Lewis Place, Dalweem and Parkdale care homes. In addition day care is provided at Blairgowrie Day Hospital. Pitlochry Tryst (Crossreach) and PKAVS provide day services, affiliated to the Princess Royal Trust for Carers, in Blairgowrie, Crieff, Perth and Pitlochry.
- Additional support services and training are provided by Support in Mind Scotland, and complementary services are provided by the Norwell Clinic.
- Information and advice services are provided by Perth and Kinross Council and the Perth and Kinross Community Health Partnership.

#### **3.1.3.1 Carers Support Planning Framework**

Outcomes focussed assessment has now been established, throughout Perth and Kinross Council community care services, for people who are having a community care assessment of their needs. This approach now also influences the way in which carers are helped to develop their own support plans. This means that carers are now being supported to identify what they want out of life. Thus the aim is to improve the quality of life of carers, rather than find out what services they want for the person being cared for.

The processes were launched with all relevant stakeholders including nursing staff within the Community Health Partnership and specialist social workers employed by the Tayside Association for the Deaf and the Perth and Kinross Society for the Blind. The purpose of this was to increase awareness of the issues and encourage all stakeholders to refer a greater number of carers to be supported in the future.

### **3.1.3.2 Carers Health Checks**

Carers are now provided with information, during the development of their support plan, on how to access health checks from their GP within the services already available at health centres. Nurses visiting patients at home, who have long term conditions:

- Give the patients' Carers a Carer Information Pack.
- Offer basic health checks to the patients' carers.
- Advise carers, if they think that the carers should visit their GPs.
- Advise carers, if they think carers should be asking for a carer support plan from Housing and Community Care Services.
- Provide information to carers about the types of support available from the Council.

It is anticipated that this approach will help to identify hidden carers and provide them with information and support which will help to prevent crises developing.

### **3.1.3.3 Respite**

A range of respite services are available including:

- Twelve local care homes working in partnership with the Council to deliver flexible respite. Each home maintains a bed which can be used specifically for respite. Once carers have been allocated a number of respite nights, they may then make arrangements directly with one of these homes and this gives them the advantage of being able to plan ahead and maintain some control over their lives.
- A short breaks bureau has been established in partnership with Cornerstone Care. This will provide access to individual short breaks for people with learning disabilities and will be extended, in the future, to include provision for young adults with physical disabilities.
- A day care for older people and people who have dementia group has been established at the Bankfoot Church Centre.
- Carers of people, who misuse substances, can access bed and breakfast breaks away from home.
- A 'Vouchers for Respite' scheme has been piloted, in partnership with Crossroads, which enables carers to book small periods of day/evening or weekend respite so that they can have time to themselves, meet friends or attend other events which are important to them.

### 3.1.3.4 Social Support

Funding has been allocated by the Scottish Government to enable councils to deliver on national outcomes for carers. After consultation with carers, (e.g. through carer conferences), some of this funding has been used to support a number of new groups, by contributing to costs of venues and/or transport.

Evaluation has indicated that they play a significant role in sustaining carers' ability to care and reducing their sense of isolation. The majority of these groups support carers of people with dementia, which is a growing area of need in Perth and Kinross. They include:

- The Happy Highlanders in North West Perthshire.
- The Friday Friends in Strathmore area.
- St Margaret's Hospital in Auchterarder.
- Supported excursions for carers from Rannoch Road.

Other groups support carers of:

- Older people, through Parkdale care home in Auchterarder.
- People who misuse substances, through the establishment of the group 'EPICS' which is a carer support group run by carers and for carers.

### 3.1.3.5 Information and Advice

A range of information and advice services are available including:

- Carer Conferences are now regular events, happening at least twice a year, which involve and inform local carers while also providing them with opportunities for fun and peer support. They are now being developed to reach carers in rural and more remote areas. After every conference, a feedback booklet is sent out to every carer on the Council database. This includes:
  - ⇒ A summary of the workshops at the conference.
  - ⇒ Any important information which is current at the time.
  - ⇒ An updated list of contact details for useful agencies.
- A section of the Council website has been developed specifically for carers and is maintained by our communications service. It can be accessed at [www.pkc.gov.uk/carers](http://www.pkc.gov.uk/carers).
- A Dementia Café has been established in Perth, which serves as a place for carers and people with dementia to drop in and discuss issues with professionals in a relaxed and informal atmosphere.

- Carers' Information Packs are provided to every person seen to be in a caring role, whether or not they decide to take advantage of carer support planning. Over a thousand are now issued annually.
- Alzheimers Scotland has established two dementia advisor posts to signpost carers of people with dementia to appropriate support.
- The Minority Ethnic Access Development project will, during this strategy period, develop information services for minority ethnic group carers, some of whom are isolated by language, culture and caring responsibilities. The service is provided for the Polish, South Asian and Chinese origin communities.

### **3.1.3.6 Health and Wellbeing**

Additional services are available including:

- Support to maintain carers' wellbeing, through complementary therapies, has been extended to enable carers to access the service at a number of locations across Perth and Kinross.
- Life coaching is available for a limited number of carers each year. This empowers carers, who are ready, to set and achieve goals for how they want to change their lives.
- Carer Advocacy is provided by Independent Advocacy in Perth and Kinross (IAPK).
- Regular training is available for carers on how to cope with challenging behaviour and handling and moving.

### **3.1.3.7 Workforce Development**

Further developments include:

- Sixty Perth and Kinross Council community care staff have attended training sessions entitled 'The Carer Journey' in order to inform and develop their work practice.
- A Carer Social Worker post has been established to provide individual and group counselling and support to carers.
- One full time Outreach Worker post for dementia has been established at Rannoch Road.
- One carer support worker was appointed to work with the substance misuse services to raise awareness of the service and increase accessibility to carers affected by substance misuse. The support worker will also work with carers to develop a range of information, therapeutic and respite options to meet their needs.

- Several Community Support Worker posts have been established to provide day/evening and weekend respite to carers.

### 3.1.4 What Are We Spending on Services for Carers of Adults?

There is a mixed economy of services for carers in Perth and Kinross. Carers can use community care and health as well as more generic services, while some services are dedicated specifically to carers. Total annual expenditure on dedicated carer services both provided directly and commissioned externally is shown below.

Table 1: Expenditure on Services for Carers of Adults (2011/12)

<b>Organisation</b>	<b>Amount (£) (2011/12)</b>
<b>Perth and Kinross Council</b>	
Carers Strategy funding and respite for Older People and Learning Disabilities	1,119,853
Day Care and Home Care (30% of the total budget)	2,915,077
SLA (PKAVS Carer Services)	196,512
<b>Perth and Kinross Council sub - total</b>	<b>4,231,442</b>
<b>NHS Tayside/ Perth and Kinross Community Health Partnership</b>	
<b>Grants to Carer Agencies</b>	103,000*
<b>Total</b>	<b>4,334,442</b>

\*Total spending on carers by NHS Tayside/ Perth and Kinross Community Health Partnership will include a proportion of universal services. However this is unable to be identified by client group.

This shows that a total of £4.334 million is being spent on services to support carers of adults.

### 3.2 Children and Families Services

Social work services for children and families affected by profound and enduring disabilities are provided primarily by the Child Health Team consisting of four social workers, a Senior Care officer and Team Leader. This team is a core part of the Children and Families Services and has a very particular role in assessing the needs of children with, and affected by, a disability under section 23 of the 1995 Children (Scotland) Act. Included within this is the responsibility to take account of carers and young carers as part of the support for a family. Currently there are 80 children receiving assessment and respite support through this team with 39 new referrals being received in year 2010/11.

### **3.2.1 Assessment and Individual Planning**

Wherever possible, agencies wish to intervene early to support families. Much of this may be additional to, but still provided from, universal services such as education and health services. Where there are additional family supports required, social workers with colleagues from these other agencies, undertake assessments with children and young people and parent/carers to identify the individual needs of the children and wider family. These assessments are supported by the Child Health 'Matrix of Need' which identifies the areas, and degrees, to which a child requires additional non-age appropriate support. This ensures that resources are targeted at children and families most in need.

Currently there is a national move towards more personalised services and Perth and Kinross Council Education and Children Services will work with families to try to ensure that this is progressed. The increased uptake in services provided through Direct Payments, where parents can commission support from their own chosen provider, is a start in this process.

### **3.2.2 Current Respite Services**

There is a broad range of services currently available to support children with disabilities in Perth and Kinross. These include:

- Flexible community based respite arranged through Direct Payments, currently made use of by the families of 29 children and young people.
- Individual community based respite provided through voluntary agencies such as Enable and Crossroads being used by families of 29 children and young people.
- The new purpose built Woodlea Cottage which brings together the school enhanced curriculum through residence, and respite experience. Both work to maximise the independence of children and young people and provide regular planned respite. In addition this facility is also part of Children and Families Services crisis support. Presently 22 children and young people are accessing this as respite with proposals to extend this. Emergency respite has been provided on a number of occasions.
- Short Breaks with paid carers as a planned and consistent arrangement is provided for 4 children at present with a recruitment campaign for more carers in process.
- The 'Groovy Gang', run by the Child Health Team, offers fun and activities during the Easter, Summer and Autumn school holidays.
- 'We Care Perthshire' is a project offering befriending and a 'sitting' service using trained and supported volunteers in the same locality.
- Pilot projects are in place exploring the value of flexible hourly support and the provision of alternative therapy to carers.

# 4. What Do Carers Want?

## 4.1 Consultation arrangements

A great deal of consultation has taken place with carers at a local and national level (e.g. surveys, interviews, focus groups and stakeholder group work), which helped identify this Strategy's priorities. In addition there was a carers' conference and a service provider seminar in late 2010 where participants were asked to identify issues which they would like to see addressed.

### 4.1.1 Carers' conference

The themes for consultation at the conference were planned by the Carers' Focus Group and were designed around considering ways in which agencies could provide more 'joined up' responses to carer needs which would help them access the help they need more quickly. The main issues were:

- Creating better links between community care and local NHS services. Two major areas for improvement were proposed:
  - People with dementia receiving care through a Direct Payments Scheme could continue to be supported in hospital by those paid carers. This would help to maintain a sense of familiarity for the people concerned and provide a relief from worry and stress for their carers.
  - Although there is a Tayside protocol for discharging people home from hospital, local carers sometimes find that they may not always be included in the processes. It was proposed that all the relevant services work to set up a local hospital discharge process which would ensure that carers' needs and concerns were taken into account at a time that can be very stressful.
- Better links between housing and community care services were required with more information being made available regarding housing services, such as Care and Repair, mediation with neighbours and fuel poverty. The forthcoming review of Care and Repair will include comments and feedback from carers.
- Developing a more meaningful assessment process for carers through 'personalisation'. This was an opportunity for carers to discuss the support provided through the carer support planning process. The assessment for carers has been reviewed and relaunched with the process now enabling carers to speak about what they would like to gain from life, as opposed to the services and support they wanted. Local carers were very interested and those who had been involved in the pilot were very positive.
- Exploring the potential of telecare to be made more widely available.
- Establishing a single contact for re-ablement in home care services and making available home care schedules.

- Developing prevention support for carers rather than crisis intervention, finding innovative ways of reaching carers before they reach crisis point. Carers acknowledged this was difficult and suggested that using local radio and the press more effectively could be useful.
- Developing more effective communication and processes among the various statutory and independent agencies which support carers. Carer support can falter when the provision of support moves from one agency to another, (e.g. when a person is discharged from hospital by the NHS and support has to be put in place in the home by Perth and Kinross Council community care services).

#### **4.1.2 Service providers' seminar**

Service providers receiving funding from the Carers' Strategy funding were invited to the carers' conference to take part in the discussions and were then invited to a seminar to share with relevant professionals and the Carers' Focus Group how they had used their funding to date and any proposals they might have for the future.

#### **4.2 What parents tell us they need**

In a range of consultation settings parents have advised that they require:

- Flexibility around their individual circumstances rather than fitting them into services (e.g. develop additional opportunities for self directed care).
- Improved availability of support in rural areas and increased availability of holiday provision especially at Christmas.
- Improve access to home care support and 'After School Care.'
- Purposeful and enjoyable activity for children during respite using a range of services.
- A co-ordinated approach to the planning for the individual child through joint planning arrangements such as a 'Single Child's Plan'.
- Extend respite provision as appropriate and maximise the opportunities afforded by Woodlea Cottage.
- Integrate elements of National Carer Assessment into Child Health Assessment.
- Ensure services take account of brothers and sisters as young carers.
- A parent/carer Peer Support Group, including creche facility and focus on autism.
- Providing 'CALM' awareness training for parents to support the management of challenging behaviour in the home.

## 5. What Progress Have We Made?

During the lifetime of the previous Joint Carers' Strategy actions were based around statutory requirements placed on local authorities and recommendations adopted as priorities by the Government in the Care 21 report. These included prominent areas, such as respite, training, health and young carers. New services were developed in line with government guidelines and through consultation with, and involvement of, carers in the following areas:

- Increased respite options.
- Carer advocacy and support.
- Training for carers.
- Carers' health checks.
- Carers' support planning.
- Information for carers.

These specific services are now a part of mainstream carer support. Services have been developed in consultation with a range of stakeholders, such as carers, the independent care home sector and the Healthy Communities Collaborative. Services are designed to work together with those developed through other joint care group strategies. The aim is to provide personalised carer support, which is detailed in the Carers' Support Plan.

Much of the mainstream services for clients, including homecare, daycare and short breaks, provide support for carers in the valuable role they play in the care of people with community care needs. The development of services for carers therefore encompasses:

- An enhancement of existing services, resulting in more personalised outcomes for people receiving services and their carers.
- The creation of new services promoting the well being of carers.

Capital funding has been secured for the re-provision and development of dementia day care services currently provided from Rannoch Road. These services are highly regarded both by service users and carers and we plan to secure larger accommodation to provide easier access and more flexible services for this group of service users.

# 6. What Are Our Service Priorities?

## 6.1 Introduction

Our service priorities are informed and influenced by the Scottish Government's agenda and carer's views and are shown below:

- (1) Improve respite service options.
- (2) Improve carer's access to advocacy.
- (3) Improve support services for individual carers.
- (4) Improve carers support planning including enabling options for greater personalisation of services.
- (5) Improve training for carers.
- (6) Improve carer's health.
- (7) Improve information and advice services to help the identification of carers.
- (8) Develop more effective communication and processes between statutory and independent agencies which support carers.
- (9) Promote equalities.
- (10) Promote services for young adult carers, which take account of their rights, as young adults, to further education and employment.
- (11) Promote support for working carers.
- (12) Maximise income for carers.
- (13) Monitor, review and evaluate the effective delivery of services.

These priorities shape our action plan as set out in the next section.

## 7. What Will Be Our Key Actions? (NSAP refers to the relevant National Strategy Action Point)

No.	NSAP	Action/Activity	Timescales			Lead
			2011/12	2012/13	2013/14	Agency
<b>(1) Improve respite service options</b>						
1	-	Maintain access to flexible respite at care homes for carers of older people	✓	✓	✓	HCC
2	-	Maintain delivery of short breaks bureau	✓	✓	✓	HCC
3	-	Develop respite services for young people with a physical disability through short breaks bureau		✓	✓	HCC
4	-	Maintain respite access for carers of people misusing substances through bed and breakfast accommodation	✓	✓	✓	ADP
5	-	Maintain and develop Vouchers for Respite Service and ensure that it meets the needs of both carers of adults and parent/carers of children with complex needs	✓	✓	✓	HCC ECS
<b>(2) Improve carers access to advocacy</b>						
6	17	Maintain carer advocacy within independent advocacy	✓	✓	✓	HCC
7	12.1	Enable delivery of complementary therapies service	✓	✓	✓	HCC
8	-	Maintain existing social respite through groups such as: <ul style="list-style-type: none"> <li>• Happy Highlanders</li> <li>• Friday friends</li> <li>• Dementia Café</li> <li>• Support in Mind</li> </ul>	✓	✓	✓	HCC
9	-	Maintain and monitor delivery of life coaching service	✓	✓	✓	HCC
10	-	Maintain carer social worker support service	✓	✓	✓	HCC
11	-	Maintain dementia outreach worker service	✓	✓	✓	HCC

No.	NSAP	Action/Activity	Timescales			Lead Agency
			2011/12	2012/13	2013/14	
12	-	Maintain community support workers service	✓	✓	✓	HCC
13	-	Maintain support worker for carers of individuals with substance misuse problems	✓	✓	✓	ADP
14	5.2	Support local conferences for carers	✓	✓	✓	HCC
15	5.2	Expand access to support available at carer conferences to those living in rural areas	✓	✓	✓	HCC
<b>(4) Improve carers support planning including enabling options for greater personalisation of services</b>						
16	4.3	Expand availability of outcomes focussed carer support planning	✓	✓	✓	HCC
17	4.3	Ensure the implementation of the GIRFEC outcomes approach for children and families	✓			ECS
18	18	Develop improvements to carer support processes which will enable unpaid carers to continue to work	✓	✓	✓	HCC
19	-	Establish systems whereby health professionals can be enabled to develop carer support plans	✓	✓	✓	CHP
20	-	Develop effective local process for Hospital Discharge	✓	✓	✓	CHP
21	-	Develop local processes whereby carer can support patient in hospital; in particular: <ul style="list-style-type: none"> <li>Enabling paid carers (under direct payments) to support people with dementia</li> <li>Enable carers/volunteers to help feed patients who have difficulties feeding themselves.</li> </ul>	✓	✓	✓	HCC CHP
<b>(5) Improve training for carers</b>						
22	14.3	With NHS Education for Scotland (NES): <ul style="list-style-type: none"> <li>Review training, education and learning modules for working with carers and young carers.</li> <li>Identify core competencies for NHS staff in supporting carers.</li> <li>Identify packages and materials to be incorporated within core induction, education and training curricula.</li> </ul>	✓	✓	✓	NHS

No.	NSAP	Action/Activity	Timescales			Lead Agency
			2011/12	2012/13	2013/14	
23	12.3	Deliver moving and handling training for carers	✓	✓	✓	HCC
24	-	Deliver training for carers of people with dementia	✓	✓	✓	HCC
25	-	Deliver training support for carers regarding health and medication issues	✓	✓	✓	NHS
<b>(6) Improve carer's health</b>						
26	-	Maintain regular health checks for carers	✓	✓	✓	NHS
27	-	Enable carers and those that they care for to make greater use of Perth and Kinross Leisure facilities	✓	✓	✓	LIVE ACTIVE
<b>(7) Improve information and advice to help the identification of carers</b>						
28	4.3	Regularly update the carers section of the Perth and Kinross Council website	✓	✓	✓	HCC
29	16	Ensure quicker contact times between carers and home care services through e-mailing of home care schedules	✓			HCC
30	4.4	Establish press releases and local radio slots, on a regular basis, inviting people to sign up to the Council carers mailing list	✓			HCC
31	6.2	Ensure carers informed on Self Directed Support and develop local policies in accordance with guidance		✓		HCC
32	8.2	Ensure that all local generic carer consultation includes carers of people who misuse substances and that the relevant information is passed to the ADP and the Substance Misuse Team Ensure that carer consultation and involvement is a part of the Substance Misuse Strategy	✓	✓	✓	HCC HCC ADP
<b>(8) Develop more effective communication and processes between statutory and independent agencies which support carers</b>						
33	-	Ensure that carer's interest groups are consulted in the development of housing and community care group strategies	✓	✓	✓	HCC

No.	NSAP	Action/Activity	Timescales			Lead Agency
			2011/12	2012/13	2013/14	
34	-	Establish a single named contact person for unpaid carers where the cared for person is supported by a number of paid carers	✓			HCC
35	16	Ensure that carers have better access to information and training on: <ul style="list-style-type: none"> <li>• Equipment and adaptations</li> <li>• Telecare</li> </ul>	✓	✓	✓	HCC
36	9.2	Continue to arrange and publicise annual staff training sessions to update local Perth and Kinross Council and Perth and Kinross CHP staff on carer issues	✓	✓	✓	HCC
37	7.1	Develop carer representation (e.g. enabling carers representation on CHP)	✓	✓	✓	CHP
38	-	Enable services for carers within the voluntary sector which will avoid duplication and gain best value	✓	✓	✓	VAP
<b>(9) Promote equalities</b>						
39	8.3	Support BME carers by organising a BME Carers Conference	✓			MEAD
40	8.3	Support BME carers by provide training in the cared-for person's illness to carers from BME communities	✓	✓	✓	MEAD
41	8.3	Ensure the needs of local migrant workers, caring for family living in the home country, are included within the plans developed to support local working carers		✓	✓	MEAD
42	8.3	Ensure that the needs of Chinese working carers are included when developing support for working carers		✓	✓	MEAD
43	8.3	Develop processes which will support South Asian wives, living locally, who are expected to care for older relatives with no knowledge of local support systems, or of the language	✓			MEAD
<b>(10) Promote services for young adult carers</b>						
44	-	Develop transition support processes for young carers reaching adulthood	✓	✓	✓	HCC ECS PKAVS

No.	NSAP	Action/Activity	Timescales			Lead Agency
			2011/12	2012/13	2013/14	
<b>(11) Promote support for working carers</b>						
45	18	Review and ensure consistent implementation of council and NHS procedures relating to the support of unpaid carers who are also staff with the Council or the NHS/CHP	✓	✓		HCC CHP
<b>(12) Maximise income for carers</b>						
46	19	Maximise income for carers through welfare rights advice	✓	✓	✓	HCC
47	-	Maximise income for carers through fuel poverty assistance	✓	✓	✓	HCC
<b>(13) Monitor, review and evaluate the effective delivery of services</b>						
48	12.1	Develop cost benefit analysis of the complementary therapies and life coaching services	✓	✓		HCC
49	2.3	Monitor and review services to ensure continuous improvement	✓	✓	✓	HCC
50	2.3	Publish progress against the three main outcome measures. <ul style="list-style-type: none"> <li>• The % of carers who feel supported and capable of continuing in their role as carers<sup>5</sup></li> <li>• The % of carers who are satisfied with their involvement in the design of the care package for the person they care for<sup>6</sup></li> <li>• The % of carers assessments completed to the national standard.</li> </ul>	✓	✓	✓	HCC

<sup>5</sup> 64% felt able to continue caring – but many were worried that ill health might intervene – Carers Satisfaction Survey Oct 2009  
50% of carers felt that attending the Norwell clinic helped them to continue to care – Norwell Clinic Evaluation Feb 2009

<sup>6</sup> 70% in Satisfaction Survey Oct 2009

# 8. How Will We Monitor Progress?

## 8.1 Introduction

Set out below are the main areas showing how we will measure the positive impact and success of this Strategy. We will monitor service delivery on the following.

## 8.2 Continue to Improve Respite Service Options

Increase the numbers of respite hours, nights and carers supported for those who care for people with a learning disability.

### Learning Disability Short Breaks

- Number of respite hours.
- Number of respite nights.
- Number of carers supported.

Increase the numbers of flexible night respite care and carers supported through care home provision.

### Independent Care Homes

- Number of nights
- Number of carers

### Parkdale Home

- Number of nights
- Number of carers

### Dalweem Home

- Number of nights
- Number of carers

### Beechgrove Home

- Number of nights
- Number of carers

Increase day/evening respite delivered through the Voucher Scheme

- Number of users
- Number of vouchers/hours

Increase numbers of respite episodes.

- Number of users
- Number of nights

Increase numbers of carers receiving home care services.

### **8.3 Improve Carers Access to Advocacy**

Increase the numbers of carers gaining access to advocacy.

- Number of issues.
- Number of carers.

### **8.4 Improve Support Services for Individual Carers**

Increase numbers of carers receiving alternative therapies.

Alternative Therapies Norwell Clinic Service Level Agreement

- Number of carers (Perth City).
- Number of carers (rural).
- Number of sessions booked.
- Sessions by Care Group.

Alternative Therapies Approved provider List

- Number of carers
- Number of sessions booked.
- Sessions by Care Group.

Princess Royal Trust

- Number of carers per session

Increase numbers of carers receiving social respite.

Dementia (Friday friends)

- Number of carers
- Number cared for
- Number volunteers
- Number of sessions

Dementia (Happy Highlanders)

- Number of carers
- Number cared for
- Number volunteers
- Number of sessions

## Dementia Café

- Number of carers
- Number cared for
- Mental health
- Number new referrals
- Number of support group meetings
- Number of social outings/activities

Increase numbers of carers receiving support from community support workers.

## Carer Social Worker

- Number of new referrals
- Number Carers seen per month
- Number sessions per month
- Number of Carer support assessments
- Number of presentations

## Community Support Workers

- Number carer support sessions
- Number of hours
- Number of hours travel time

Increase numbers of day care opportunities for those cared for by a carer.

## Day Care

- Public sector numbers
- Voluntary sector numbers

## **8.5 Improve Carers Support Planning Process**

Increase numbers of carers receiving a support needs assessment.

- Number of assessments.
- Number of carer support plans.

## **8.6 Increase preventative support through the timely provision of information**

- Number of carers applying to be on carer mailing list.
- Number of carer information packs distributed.
- Number of carers attending rural conferences.
- Number of carers attending Perth Conferences.

## **8.7 Community Care Outcomes Framework**

- The percentage of carers who feel supported and capable of continuing in their role as carers.
- The percentage of carers who are satisfied with their involvement in the design of the care package for the person they care for.
- The percentage of carer's assessments completed to the national minimum information standard.

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