

DUNDEE CITY COUNCIL

REPORT TO: CHILDREN AND FAMILIES SERVICES COMMITTEE - 10 SEPTEMBER 2018

REPORT ON: CARERS (SCOTLAND) ACT 2016 AND YOUNG CARERS

REPORT BY: EXECUTIVE DIRECTOR OF CHILDREN AND FAMILIES SERVICE

REPORT NO: 286-2018

1.0 PURPOSE OF REPORT

This report provides details of the Council's response to Young Carers as outlined in the Carers (Scotland) Act 2016. The report explains how the local response to the legislation has been developed by partners in consultation with both Young and Adult Carers and seeks approval of A Caring Dundee: A Strategic Plan for Supporting Carers in Dundee 2017-2020 and an accompanying Support for Young Carers and the Young Carers Statement Guidance.

2.0 RECOMMENDATIONS

It is recommended that Committee:

- 2.1 Notes the duties and powers placed on Local Authorities in relation to Young Carers by the Carers (Scotland) Act 2016;
- 2.2 Approves 'A Caring Dundee' (Appendix A) and the 'Support for Young Carers and the Young Carers Statement Guidance' (Appendix B).
- 2.3 Instructs the Executive Director of Children and Families Service to provide an update report on the implementation of the Act in 12 months.

3.0 FINANCIAL IMPLICATIONS

A total of £12,463,000 funding for the implementation of the Carers (Scotland) Act 2016 has been provided nationally and £378,875 of this has been allocated to Dundee. This includes funding for Young and Adult Carer Support Plans, Information and Advice and Additional Short Breaks Support. This will add to a range of supports already available to 264 local children and young people who have identified themselves as a carer and as their numbers increase by implementing the Act the financial implications will be monitored.

4.0 CARERS (SCOTLAND) ACT 2016

- 4.1 The Carers (Scotland) Act 2016 came into force on 1st April 2018. The Act imposes new duties on both Local Authorities and Health Boards in relation to Young and Adult Carers respectively. The Act defines a Carer as anyone who provides, or intends to provide, care for another person. Carers can be any age and may be parents, spouses, grandparents, daughters, brothers, same sex partners, friends or neighbours of the person who is being cared for.
- 4.2 The Act requires both Young and Adult Carers to be better supported on a more consistent basis so that they can continue to care, if they so wish, whilst remaining in good health and leading their own independent lives. In respect of Young Carers, the intention is that they should experience a childhood similar to their non-carer peers and have access to relevant, proportionate support where necessary. Consistent with GIRFEC, this may, for instance, involve basic advice or it may require more intensive multi-agency support.

Local Implementation

- 4.3 In Dundee, a positive response to the legislation is outlined in A Caring Dundee: A Strategic Plan for Supporting Carers in Dundee 2017-2020 (Appendix A). This plan has been developed jointly by the Children and Families Service, Health and Social Care

Partnership, Third Sector and Carers, who have a committed to a shared vision to achieve 'A Caring Dundee in which all Carers feel listened to, valued and supported so that they feel well and are able to live a life alongside caring'. Based on what Carers said, the plan outlines 4 intended outcomes:

- I am identified, respected and involved
- I have had a positive caring experience
- I can live a fulfilled and healthy life
- I can balance the caring role with my life

The plan describes the range of both informal and formal supports which are presently available to Carers to meet these outcomes, from universal services through to mainstream additional support, targeted multi-agency care and specialist support. It also includes a range of actions being progressed in respect of each of the 4 intended outcomes for all Carers. The plan was approved by the Integration Joint Board for Adult Carers on 31 October 2017 and actions being jointly progressed include:

- Implement a Dundee Carers Charter which sets out a commitment to all Carers.
- Commission a Third Sector agency to co-produce a Young Carers Guide.
- Implement a Carers Quality Assurance Framework on the 4 key outcomes.

Young Carers Eligibility Criteria and Statements

4.4 Statutory Guidance relating to Carers Eligibility Criteria was published in November 2017 and sets out a recommended Eligibility Framework. Locally, as with the broader strategy, the Dundee Young Carers Eligibility Framework has similarly been developed following extensive consultation with Young Carers to ensure it reflects their needs and expectations. This consultation occurred throughout 2017-18 in the build up to commencement of the Act in April this year and has involved:

- Piloting of an outcome focused Eligibility Criteria in partnership with Carers and Carers Organisations.
- Consultation with Young Carers through a Young Carers Voices group facilitated by the Carers Centre Dundee.
- Meeting Young Carers on different occasions to listen to their views and ensure that they shape the approach.
- Consultation with stakeholders at other events, such as at a launch of Carers Voices at Baldrigon Academy
- Presentation at a Head Teachers Development Day and production and distribution of awareness raising posters and leaflets for schools.

4.5 Based on this, an 'Eligibility Criteria' has been developed, alongside guidance for officers, to ensure that Young Carers can be identified and relevant, proportionate support, based on a clear assessment of their needs, can be provided by the right person at the right time, with the full involvement of the child or young person. Rather than duplicate existing GIRFEC processes, the framework builds on local Team Around the Child arrangements and current methods of targeted support, including:

- An Involvement Worker at the Carers Centre to develop the Young Carers Voice
- Young Carer Coordinators in all schools acting as a champion and key point of contact.
- Awareness raising through school posters, notice boards, assemblies and classes.
- A named member of staff in the Carers Centre allocated to liaise with school clusters.
- Sign-posting and support from the Carers Centre for lower level concerns.
- Young Carer phone cards to identify themselves and contact home where necessary
- Multi-agency support where this is relevant and proportionate.
- Support from school based Family Support Workers and other school support staff.

4.6 Once identified, an assessment will be coordinated by a Lead Professional and where necessary, a 'Young Carers Statement' will outline the nature of additional support. Where necessary, this will also include arrangements for contingencies and emergencies. Where assessments indicate any concerns about any risk of harm to a child, they will be responded to under existing Child Protection Guidance and Procedures. A Lead Professional will always complete the statement with the child or young person.

- 4.7 The local consultation has served the additional purpose of raising awareness of the Act and has been complimented by roadshows in secondary schools developed by Young Carers Voice. In total, 1,134 pupils took part and were involved in activities such as giant genga, a young carers quiz and art work. Pupils have also taken part in a survey to further raise their awareness of the definition of a Young Carer and promote access to available services.

Going Forwards

Going forwards, a Dundee Carers Strategic Partnership, consisting of relevant partners and representatives of both Young and Adult Carers, will continue to coordinate the implementation of the Act and related developments. Priorities include further development of the Carers Voice as a means of engaging with and involving Carers; identification research in schools; involvement in the Year of Young People activities; and staff training in the requirements of the Act and local processes.

The Act also requires a protocol on short-breaks to be developed by December 2018 and partners are currently developing a framework in collaboration with Young Carers. It is likely that short-breaks, or respite, will be provided to those with higher levels of assessed need as part of wider support. As increases in the number of identified Young Carers and their assessed levels of need cannot be projected, it is not possible to quantify the resource implications of this but this will be monitored.

5.0 POLICY IMPLICATIONS

- 5.1 This Report has been screened for any policy implications in respect of Sustainability, Strategic Environmental Assessment, Anti-Poverty, Equality Impact Assessment and Risk Management. There are no major issues.

6.0 CONSULTATIONS

- 6.1 The Council Management Team were consulted in the preparation of this report.

7.0 BACKGROUND PAPERS

- 7.1 Dundee Young Carer's Statement Guidance.

Paul Clancy
Executive Director, Children and Families Service

Jane Martin
Head of Service (Chief Social Work Officer)

August 2018



A CARING DUNDEE

A STRATEGIC PLAN FOR SUPPORTING
CARERS IN DUNDEE

2017-2020



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ONE PAGE SUMMARY

<p>Where do we want to be?</p>	<p>A caring Dundee, in which all carers feel listened to, valued and supported so that they feel well and are able to live a life alongside caring.</p>			
<p>What will change look like?</p>	<p>Carers will say that they are identified, respected and involved</p>	<p>Carers will say that they have had a positive caring experience</p>	<p>Carers will say that they can live a fulfilled and healthy life</p>	<p>Carers will say that they can balance the caring role with their life</p>
<p>What will we do?</p>	<p>Develop supports and opportunities so that carers are:</p> <ul style="list-style-type: none"> Listened to and included in deciding how they and the person they look after are supported. Able to influence how services are developed and provided. Involved in the admission and discharge planning of the person they care for. Identified early and crisis is prevented. 	<p>Develop supports and opportunities so that carers feel that:</p> <ul style="list-style-type: none"> Services are well coordinated for the person they care for and themselves. Carers have had positive experiences of supports and services. Experience is used and valued 	<p>Develop supports and opportunities so that carers have:</p> <ul style="list-style-type: none"> Improved wellbeing Been supported to minimise the impact of financial hardship, as a result of caring. Access to a range of information and advice. Access to a range of targeted in formal supports which carers can directly access. 	<p>Develop supports and opportunities so that:</p> <ul style="list-style-type: none"> Young carers feel supported Adult carers feel supported Carers have access to short breaks and respite. Carers who are in employment and/ training or further education are supported.
<p>What will Carers say that shows a difference has been made?</p>	<p>I have been identified and recognised as a carer I feel listened to and respected I have a say in the services provided for the person I look after. I have a say in the services provided for me.</p>	<p>I have had a positive experience of services for the person I look after and of services I have a say in the services provided for me. Services are well coordinated for me and the person I look after. I am informed and able to access a range of information and advice.</p>	<p>I feel well and healthy I feel that I have achieved the outcomes I want to achieve. I have been able to maximise my income and manage my money.</p>	<p>I feel supported to continue caring I have a good balance between caring and other things in my life I feel supported to continue caring. I am able to spend enough time with people I want to spend time with.</p>

INTRODUCTION

“Carer involvement has to be meaningful not meaningless, which is about listening, responding and acting upon what carers are saying.

Nothing about us without us!” (Local Carer)

In Dundee, we recognise the significant and vital contribution that Carers make in supporting people they care for. Over the next few years changes in resources available, patterns of demand and support to Carers and the person they care for is anticipated. Our central task throughout this period is to focus on identifying, listening to, supporting and empowering unpaid Carers, of any age, in Dundee.

To ensure we maintain this focus, the Dundee Carers Strategic Planning Partnership (the Partnership) has produced this Strategic Plan (the Plan). This Plan builds upon the previous Dundee Carers Strategy and is for all Carers in Dundee, including young, adult and parent carers and was developed through listening to the views and experiences of Carers. This is so that our future direction reflects Carers priorities and provides all Carers with an opportunity to shape and influence how they are supported.

The Plan sets out the approach and actions by which the Partnership will deliver on our vision and outcomes for Carers living in Dundee and Carers caring for people in Dundee. It describes how we will implement the Carers (Scotland) Act 2016 and helps prepare for the requirements set out for local carers strategies which are contained within the statutory guidance which will accompany this Act.

Appendix 1 is a glossary of terms to assist you to understand some of the key terms used throughout this plan. Information about the Dundee Carer’s Partnership is in Appendix 2, The Carers Strategic Needs Assessment is in Appendix 3. Appendix 4 demonstrates the range of support that was available in 2016/7. Appendix 5 contains the Carers Strategic Outcome Delivery Plan and Appendix 6 has the Financial Statement.

OUR VISION

A Caring Dundee in which all Carers feel listened to, valued and supported so that they feel well and are able to live a life alongside caring.

We have developed four strategic outcomes based on what Carers and our stakeholders told us. The four strategic outcomes are:

I am identified, respected and involved

Carers will say that they have been identified, given a voice and feel listened to, understood and respected. They will be an equal partner in the planning and shaping services and supports. Carers will also say that they know and understand their rights and are respected as a Carer.

I have had a positive caring experience

Carers will say that they have had positive experiences of supports and services designed to support them and the person they care for. Carers will say that they feel services are well coordinated for them and the person they care for and that they have access to a range of information and advice.

I can live a fulfilled and healthy life

Carers will say that they have opportunities to lead a fulfilled and healthy life. This may include accessing supports to improve their health and wellbeing, financial security and identifying what is important to them and how they will achieve this.

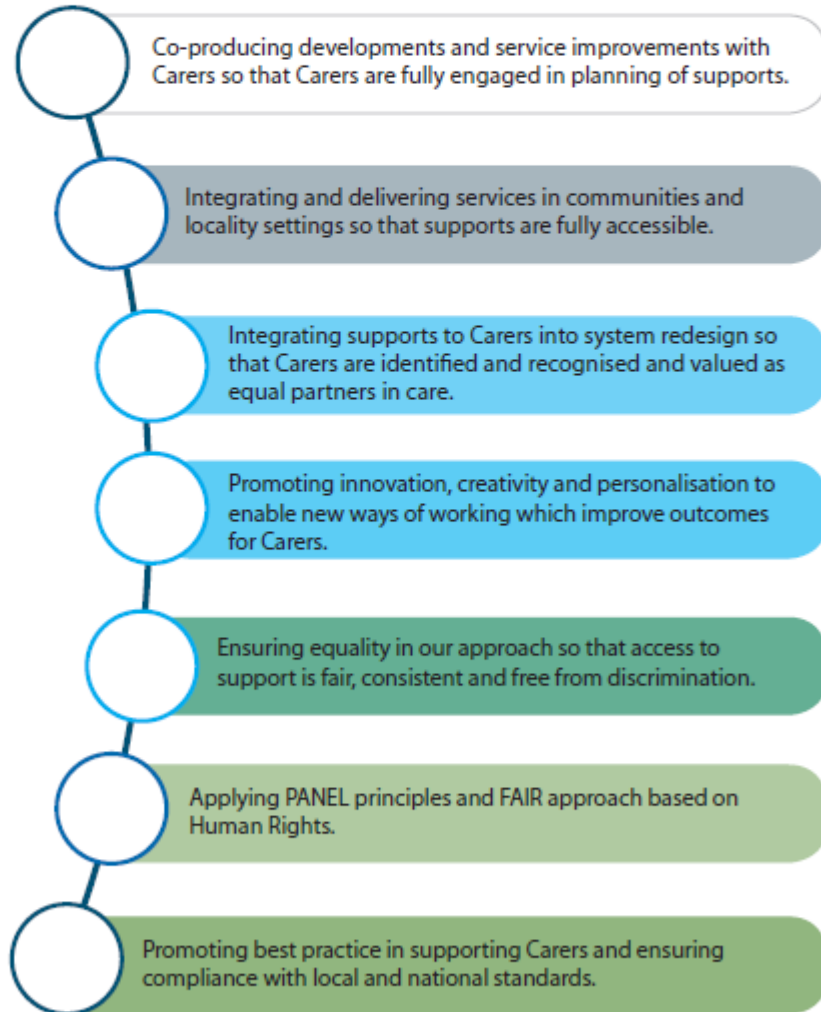
I can balance the caring role with my life

Carers will say that they have a good balance between caring and other things in their life and have choices about caring. Carers will say that they are able to spend enough time with people and activities they want to do and are able to continue in the caring role.

OUR APPROACH

Our approach to strategic planning is based on our recognition of the vital contribution made by Carers and the value of each individual Carer and the person they care for. We believe that any support provided in Dundee to Carers must be based on the Carers views and their individual preferences, outcomes and strengths.

To enable implementation of our strategic plan we have adopted a set of guiding principles so that Carers feel valued, supported and fully engaged in what we do. The principles are based on Equal Partners in Care core principles listed below.



WHO IS A CARER?

A Carer is anyone who cares, unpaid, for a friend or family member who is affected by illness, disability, frailty, mental health or alcohol or drug use.

The circumstances of each Carer are unique. Carers can be any age, from children to older people, and carers are part of every community and culture. Carers may be parents, spouses, grandparents, daughters, brothers, same sex partners, friends or neighbours. Some Carers may be disabled or have care needs themselves. Sometimes two people with care needs are carers for each other. Some Carers can provide care and support for more than one person.

A Young Carer is a child or young person under the age of 18 who has a significant role in looking after someone in their family. They may have practical caring responsibilities or be emotionally affected by a family member's care needs". (Caring Together – the Carers Strategy for Scotland 2010-2015; Carers (Scotland) Act 2016)

We know through our discussions with Carers that support to Kinship Carers is also important. A Kinship Carer is an extended family member or close friend who looks after a child, if they cannot remain with their birth parents. Support to Kinship Carers in Dundee is undertaken through the Dundee Children and Families planning arrangements. In addition to their Kinship Care responsibilities some Kinship Carers may also be Carers like the type of Carer described above. There will also be some Young Carers living with Kinship Carer as part of their family.



CONTEXT OF CHANGE

Strategic Overview

This Plan has been written in national and local policy context that services should be “outcome-focused, integrated and collaborative. They must become transparent, community-driven and designed around users’ needs. They should focus on prevention and early intervention” (Commission on the Future Delivery of Public Services (2011)).

The Carers (Scotland) Act 2016 has been introduced in a context of legislation and policies such as Integration of Health and Social Care, Getting It Right For Every Child (GIRFEC) and Community Empowerment Legislation and Policy. These developments mean that the introduction of the Carers (Scotland) Act 2016 presents an ideal platform to establish collaborative opportunities. There is potential for these opportunities to:

- enhance the identification, support and empowerment of Carers in Dundee,
- support a shift towards prevention, early intervention and health equality for Carers,
- promote improved outcomes for Carers, the people they care for and our communities,
- increase the accessibility, flexibility and efficiency of services so that people can gain the right support at the right time,
- increase opportunities for people to be involved in the design and development of supports and services.

Locally, Dundee has embraced this opportunity and articulated its plans for improving outcomes for Carers and the people they care for through the Dundee Health and Social Care Partnership Strategic and Commissioning Plan, Tayside Plan for Children, Young People and Families and the draft Local Outcome Improvement Plan.

Through these plans services and supports for Carers and the people they care for should be delivered locally, tailored to meet personal outcomes, developed in partnership with people and communities and should work together in the best way possible.

Demand for Support

Dundee Population Strategic Needs Assessment

The Strategic Needs Assessment accompanying the Dundee Health and Social Care Partnership Strategic and Commissioning Plan provides an analysis of Dundee's demographics and what this means for the future delivery of health and social care in Dundee. The document highlights important information about Dundee.

- The population is projected to rise by 15% to 170,811 by 2037. Within this growth, it is anticipated that with increased life expectancy there will be an increase by 45% of people aged over 75, but because of other factors, a decrease in people aged between 16 to 29 and 50 to 64.
- In future, it is anticipated that, there will be an increase number of people are aged over 75 living with two or more long term health conditions.
- In comparison with other areas there are a higher level of people under 65 with one or more long term condition. This is thought to be due to the effects of deprivation and health and social inequalities,
- Dundee ranks in the five local authorities in Scotland who are highest for the prevalence of learning disabilities, physical disabilities, mental health issues and substance misuse.

Through analysing the Strategic Needs Assessment we know that, in Dundee, new approaches and interventions are required alongside system redesign to enable citizens of Dundee to achieve their outcomes and live a fulfilled life.

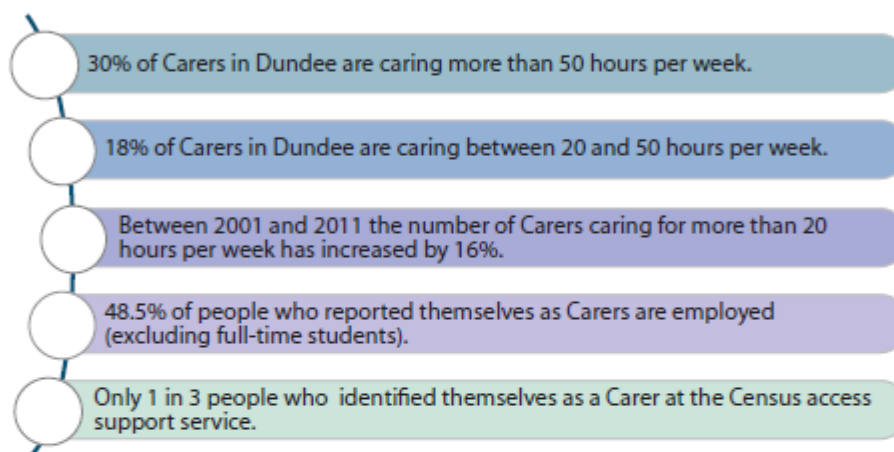
There are priorities identified within the Dundee Health and Social Care Partnership Strategic and Commissioning Plan, Tayside Plan for Children, Young People and Families along with associated care group strategic planning groups and the draft Local Outcome Improvement Plan. These priorities are expected to support a shift towards:

- o improving outcomes for the Citizens of Dundee,
- o protecting people who are most vulnerable from harm,
- o providing services which are experienced as integrated and effective,
- o reducing inequalities and disadvantage,
- o intervening early to prevent needs arising in the first place,
- o providing the right support to meet needs at the earliest appropriate time,
- o developing personalised locally based services which citizens can access easily.

This Plan reflects these priorities and ambitions and our commitment as a partnership is to work collaboratively towards achieving outcomes for Carers and those they care for.

Carers Strategic Needs Assessment

The Full Strategic Needs Assessment is available in Appendix 3. The 2011 Census indicates that there were 13,072 residents of Dundee who identified themselves as a Carer. 12,808 of these Carers were over 16; 264 children under age of 16 were recorded as Carers. The Strategic Needs Assessment for Dundee indicates that women and people aged 50 to 64 are most likely to be Carers. See below for other information about Dundee Carers.



Through the strategic needs assessment and information gathered in a review of local resources we can predict some changes over the next 10 years.

- The number of Adult and Young Carers identified and seeking support will continue to increase.
- The number of hours spent caring and complexity of the caring role will increase within the caring population.
- Carers who have complex responsibilities and greater number of hours caring are more likely to reside in specific areas of the city.
- The numbers of people in employment who are also Carers will continue to increase.

Key priorities identified in the strategic needs assessment are to:

- build capacity through local communities and provide a range of locally based personalised supports so that all Carers can access the right type of support, at the right time, at the right place,
- support Carers in employment, education or training so that they can continue in the caring role and balance that role with a life of their own,
- ensure that the supports and services that are developed are responsive to Carers own circumstances, with an aim of reducing variation and address differences between levels of inequalities between areas of Dundee.

Carers Resources

Carers can currently access both formal and informal supports from a range of resources across Dundee. The Triangle of Support in Appendix 4 describes the type of resources provided by organisations and services in Dundee.

Our workforce and partners across statutory, third sector and private sector identify, support and work in partnership with Carers on a day to day basis. The supports Carers engage with can include local services and supports available to all citizens; supports designed for and accessible only to Carers; and supports and services for the person cared for which provide respite or relief for Carers.

As a Partnership we have developed integrated health and social care budgets and contracts which relate to Carers so that we can use our resources effectively to meet Carers outcomes. Our integrated budget statement is available in Appendix 6.

It is anticipated through promoting a collaborative and integrated approach we will build on our current partnerships and resources so that Carers can achieve their outcomes in the way that suits their individual circumstances. Through this we intend to build our capacity to support Carers in Dundee and Carers caring for people in Dundee.

Through the implementation of this Plan and our preparations for the Carers (Scotland) Act 2016 that, as a Carers Partnership, we seek confirmation of resources allocated to Dundee from Scottish Government for Carers so that we can fully implement the new duties. Once resources are confirmed the Carers Partnership will then agree future commissioning intentions and use of these resources. This will be reported as part of the Carer Partnership reporting arrangements.

The Triangle of Support identifies the type of support that was available in 2016 for local carers. See Appendix 4- Triangle of Support 2016/7. This will be updated in 2018 when funding commitments are confirmed by Scottish Government and as a Partnership we have agreed commissioning intentions.

John's Story

*John is 15 years old and lives at home with his mum and dad and younger sister in Dundee. At the age of 3 John was diagnosed with Autism.

His family took a long time to come to terms with this diagnosis and have always relied upon their own resources and not really asked for help. As the years have passed however they have become increasingly concerned about the lack of friends John has, the few social opportunities he has out with school, his future beyond school and the impact which his disability has had on his sister while growing up. They also report feeling at times tired and stressed and would really benefit from a break, but feel guilty about asking.

After much persuasion from family and friends they contacted the Barnardo's Family Support Team who introduced a family worker to them to look at what help would really make a difference.

After much discussion the family chose to pursue a Section 23 Assessment of Need, (Children's Act, Scotland 1995) which importantly gives them the opportunity to have their views heard and needs expressed as it includes a section on the views of carers and young people. John now accesses planned short breaks, which he loves, and weekly enabling support – which aims to introduce him to new activities and challenges – such as travelling on public transport, which will help prepare him for life beyond school. Relationships at home have improved and John's sister now attends the Young Carers Project which has really helped.

Both parents feel more optimistic about the future and have recently become very actively involved in both the Barnardo's Advisory Group and School Council. Indeed dad has also played an important part in the interviewing of new staff with Barnardo's.

Life is not perfect but with a little help and support they feel better able to manage and also feel they have an important role to play in shaping the future for their son through Self-Directed Support and in developing and improving the services which he currently attends.

*John's name has been changed to protect confidentiality

DELIVERING ON OUR VISION AND OUTCOMES

“Support should be available to any carer who needs it irrespective of hours spent caring” (Local Carer)

As a Partnership, we believe that support should be available to any Carer who needs it. The Vision is that we will have A Caring Dundee in which all Carers feel listened to, valued and supported so that they feel well and are able to live a life alongside caring. Listed below are a number of factors which will support us in achieving this vision.

- ✓ Considering how we are doing against our four strategic wellbeing outcomes, (I am identified, respected and involved; I have had positive caring experiences; I can live a fulfilled and healthy life; I can balance my life with the caring role).
- ✓ Identifying actions and shifts we need to take to achieve these outcomes.
- ✓ Setting out the model which will support us to achieve these shifts.
- ✓ Understanding the investment that is required to support completion of the actions and development of our model

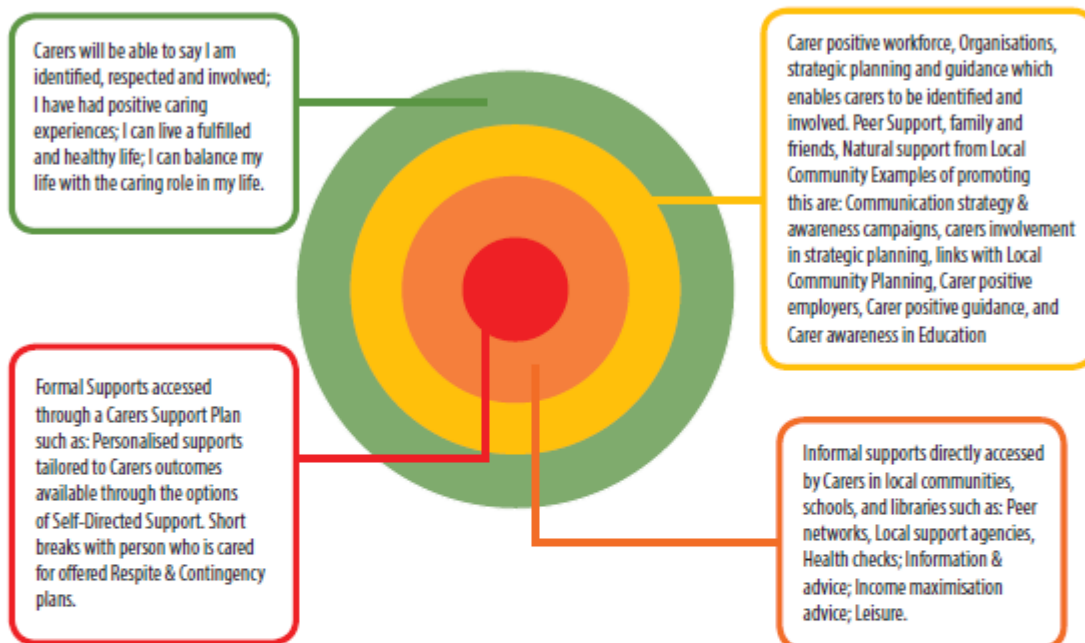
A Carers Strategic Outcome Delivery Plan outlining how we will achieve our outcomes and investment required is located in Appendix 5.



DELIVERING ON OUR VISION AND OUTCOMES

Our Model

We will prioritise investment in projects and supports which enable our strategic outcomes, duties under the Carers (Scotland) Act 2016 and model of delivery.



This model will support us to achieve the four strategic outcomes for carers in a number of ways.

- Embedding person centred and carer positive practice through developing our workforce, organisations, strategic planning and guidance. It is aimed that this will build on developments to date so that in Dundee we evidence an increase in Carers being identified, involved and respected.
- Enabling decisive shift towards prevention, early intervention and health equality through developing a range of informal supports which can be directly accessed by Carers in their local communities which enables Carers to achieve their personal outcomes.
- and having positive experiences as a Carer
- Building capacity, so that Carers health checks are easily accessible to all Carers and through these checks Carers health and wellbeing is promoted.
- Further developing our short breaks model as a model of early intervention and support which enables Carers to continue in their Caring role and have positive experiences as a Carer.
- Developing integrated models of locality based and personalised support which enable Carers

CARERS STRATEGIC OUTCOME 1

Carer Strategic Outcome 1: I am Identified, Respected and Involved

Carers will say that they have been identified, given a voice and feel listened to, understood and an equal partner in the planning and shaping services and supports. Carers will also say that they know and understand their rights as a Carer.

How Are We Doing?

47% of Carers during period 2013 - 2014 and 53% Carers during period 2015 - 2016 who responded to the Scottish Health and Care Experience Report told us that they feel they have a say in the services provided for the person they look after.

This is slightly above the Scottish average and demonstrates a slight increase during 2015 - 2016.

What Did You Tell Us?

Discussions with Carers, Carers Organisations and stakeholders you told us several key priorities for the Carers Strategic Plan.

- All Carers will be listened to, respected and have a say in the supports required for them and the person they care for.
- Carers should have information provided when the person they care for becomes unwell or is being admitted or discharged from hospital so that Carers can be involved in decision making,
- The workforce must be provided with information, support and training to identify Carers and enable Carers to feel an equal partner in care,
- Carers will be seen as individuals and recognised as Citizens.

The IRISS Hospital to Home research, also highlighted that involving Carers and the person they care for in discharge planning can improve their experience of services and enable Carers and the person they care for to achieve their outcomes.

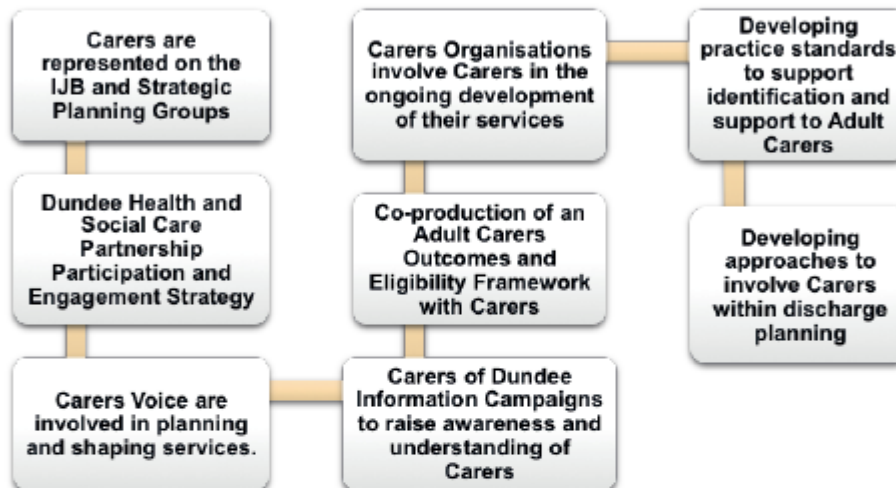
Based on this information it is a priority for the Carers Partnership to increase the percentage of Carers who feel they have a say in the services provided for the person they look after and who feel involved in discharge planning.

CARERS STRATEGIC OUTCOME 1

What Are We Doing Now?

Within Dundee, we have undertaken a range of activities to identify Carers and involve Carers in planning and shaping services and supports required for person they care for and themselves.

See below for examples of activity within Dundee.



Good Practice Example

Dundee City Council Children & Families Services involved Young Carers through Dundee Carers Centre in reviewing their Policy on Provision for Young Carers. Following a young carers engagement meeting, the following was agreed:

1. A new policy for supporting Young Carers was launched in January 2017 with the support of young carers and the distribution of awareness raising posters/leaflets to schools (pupils will design the publicity material).
2. Young people who access Young Carers services will support the production of Young Carer lesson materials aimed at raising awareness of young carer responsibilities; these will be distributed to schools.

By undertaking this approach, Young Carers will be supported to be identified, respected and involved when at School.

CARERS STRATEGIC OUTCOME 1

What Will We Do?

Through local engagement and discussion we know that we need to develop our workforce, pathways and supports so that Carers are:

- listened to and included in deciding how they and the person they look after are supported,
- able to influence how services are developed and provided,
- involved in the admission and discharge planning of the person they care for,
- identified early helping prevent crisis.

The aim is that by focusing on these key themes we will be able to achieve our strategic wellbeing outcome that Carers will say I am identified, respected and included. Here are the actions we will take to make this shift.

- ✓ Develop and implement a Dundee multi-agency guidance which provides guidance to our workforce on identifying, supporting, listening to and involving Carers in planning of services and supports as an equal partner in care. This will include guidance on how we communicate and work together.
- ✓ Implement and embed a workforce development strategy to support implementation of the Carers (Scotland) Act 2016, the multi-agency guidance and to build confidence and skills of our workforce in supporting Carers.
- ✓ Develop a pre assessment information booklet/checklist that enables individuals to identify that they are Carers. Publish the booklet via the refreshed 'Carers of Dundee website'.
- ✓ Implement a Carers participation and engagement statement which sets out how Carers will be promoted and encouraged to be meaningfully involved in the strategic planning and shaping of services to support them and the person they care for.
- ✓ Further develop 'Carers Voice', which is a Carers Involvement Group, as a means of engaging with and involving Carers in the planning and shaping of services.
- ✓ Implement a statement, pathway, guidance and a workforce strategy for identifying and involving Young and Adult Carers in admission to hospital and discharge planning process in line with section 28 of the Carers (Scotland) Act 2016.
- ✓ Commission a third sector agency to develop and implement a communication strategy which includes continuation of annual Carers of Dundee campaigns to increase awareness, understanding and identification of Carers.
- ✓ Commission a third sector agency to co-produce with Carers and stakeholders a model which supports early identification of Carers and prevention of crisis situations.
- ✓ Develop and implement clauses within commissioned services contracts that they have a responsibility to identify and signpost Carers to appropriate supports.

CARERS STRATEGIC OUTCOME 2

Carer Strategic Outcome 2: I have had a Positive Caring Experience

Carers will say that they have had positive experiences of supports and services designed to support them and the person they care for. Carers will say that they feel services are well coordinated for them and the person they care for.

How Are We Doing?

46% Carers during period 2013 - 2014 and 46% Carers during period 2015 – 2016 who responded to the Scottish Health and Care Experience Report told us that they feel that services are well coordinated for the person the carer looks after.

This is slightly above the average Scotland response and through this and other feedback, has been identified as area of priority.

What Did You Tell Us?

Discussions with Carers, Carers Organisations and stakeholders you told us several key priorities for the Carers Strategic Plan.

- Carers must be Equal Partners in Care.
- Supports must work better together and should be accessible and flexible to suit the circumstances of the Carer and person they care for.
- Carers should only have to tell their story once and not have to tell their story time and time again to new people and new professionals
- Carers should have a named contact person and/or information and advice which can enable easy access supports and not be passed from pillar to post and having to navigate services which work to different criteria and function
- Carers should feel listened to and have good relationships with people who support them and the people they care for

Based on this information it is a priority for the Carers Partnership to work with Partners so that Carers feel that services are well coordinated for the person/s they look after and they have a positive experience.

CARERS STRATEGIC OUTCOME 2

What Are We Doing Now?

Within Dundee, we have undertaken a range of activities to enable Carers to feel that services are well coordinated and have positive experiences of supports and services designed to support them and the person they care for. Here are some examples of good practice within Dundee.

- Positive feedback about the support provided by Carers Organisations in Dundee.
- Carers Organisations such as Dundee Carers Centre, Penumbra, SAMH, PAMIS, Dundee Mental Health Cairn Fowk and Barnardo's who can support and signpost Carers to appropriate services and resources.
- Dundee Health and Social Care Partnership First Contact Team who act as a first point of contact, who can assist citizens to be signposted or able to access the right service.
- Improvement planning by way of Children & Families and Health and Social Care Strategic Plan to improve the experiences of Carers and the people they care for.
- Development of the lead professionals models as a way of coordinating supports and care for people with a complexity of needs.

Good Practice Example

Active Women Swimming - August 2016 to present

Dundee Carers Centre played a lead role along with the Dundee International Women's centre via the BME Forum to enable access to ladies only swimming sessions. Many meetings and discussions with Leisure and Culture took place regarding having a service that would be inclusive of women with modesty requirements during swimming. Lots of consultation had been done previously and a request for ladies only swimming had been a priority.

An 8 week pilot took place in Lochee Leisure Centre with ladies only access to the gym, sauna and swimming pool. This was monitored and facilitated by Dundee Carers Centre, DIWC and Leisure and Culture. The sessions are open to women from all cultures and backgrounds and a lot of new friendships have been formed in the process. This has been a huge success and very popular therefore Leisure and Culture are continuing this for the foreseeable future.

CARERS STRATEGIC OUTCOME 2

What Will We Do?

Through local engagement and discussion we know that we need to develop our workforce, pathways and supports so that Carers can say that:

- services are well coordinated for the person they care for and themselves,
- they have had positive experiences of supports and services,
- their experience is listened to, used and valued.

The aim is that by focusing on these key themes we will be able to achieve our strategic wellbeing outcome that Carers will say I have had a positive caring experience. Here are the actions we will take to make this shift.

- ✓ Support the development of models for cared for persons which enable Carers to feel that services for the person they care for are well coordinated, joined up and integrated.
- ✓ Support the development of community based models which will enable the people Carers care for to gain or regain skills, build upon their strengths and enable them to live independently, recover from illness and stay safe. This will include use of equipment, adaptations and technology.
- ✓ Co-produce with Carers a model and supports which enables Carers of all ages to be identified, have a named contact person and feel that supports for Carers are coordinated and easy to access.
- ✓ Implement a Dundee Carers Charter which sets out commitments to all Carers in Dundee.
- ✓ Commission a third sector agency to co-produce a Young Carers Guide which summarises our commitments to supporting Young Carers.
- ✓ Through implementation of multi-agency guidance and workforce development, develop a consistent approach to supporting Carers, recording and evidencing Carers personal outcomes and views.
- ✓ Commission a third sector agency to develop and co-produce a model which enables Young and Adult Carers, Families and Professionals to learn from each other's experiences, skills and use this learning so that being a Carer in Dundee is a positive experience and Carers feel supported.
- ✓ Commission a third sector agency to capture 'what matters' to Young and Adult Carers in a structured way, which includes on-line feedback opportunities and advocacy, so that this informs ongoing service developments and improvements.
- ✓ Implement a Carers Quality Assurance Framework which provides assurances regarding achievement of standards and Carers outcomes on a regular basis.
- ✓ Implement a Carers Quality System as a quality assurance standard which all commissioned services delivering support to Carers are expected to achieve so that Carers can expect to receive a service which provides a positive experience.

Simon's Story

"I started to attend Penumbra Carers Support Service when I was in a very dark place and frankly did not have much faith in services designed to assist me in my caring role...

I am now in a far better frame of mind than I was when I started and while there have been many positives brought to me by Penumbra, I would like to focus on what I see as the centrepiece of the toolkit, the I.ROC (Individual Recovery Outcomes Counter) tool. I.ROC allowed me to quantify at first just how bad I was feeling over a number of areas, giving not only a baseline to measure future progress (or lack of) but also helping with the creation of clear, measurable goals. I.ROC is divided into four 'areas of HOPE', and into each area there are a number of categories.

In the area of 'Opportunity', I have made great strides in achieving purpose and direction for myself. When I started Penumbra I had no hope for the future and felt I had absolutely no purpose. Through examining my caring role and creating a better balance between caring and time for myself I have been able to make great progress towards an Open University degree in order to keep my mind active and feel I have some sense of purpose.

In the area of 'People', I have been able to better value myself. As I said, I felt I was worthless but through my time at Penumbra I have been able to better accept my caring role and see that there is a lot of value in what I do.

In the area of 'Empowerment', I have made good progress in self-management. When I started Penumbra I made no time for myself and was completely swamped by my caring role. Through discussing these initial findings and seeking out respite time, I have been able to take better care of myself and have a little 'me' time.

Lastly, in the area of 'Home', I have been able to better address my mental health by using I.ROC to see exactly where I was and just how much progress I have made in order to get to where I am now. I can now gladly look forward to the future."

Simon's name has been changed to protect confidentiality.

CARERS STRATEGIC OUTCOME 3

Carer Strategic Outcome 3: I can live a Fulfilled and Healthy Life

Carers will say that they have opportunities to lead a fulfilled and healthy life. This may include accessing supports to improve their health and wellbeing, financial security and identifying what is important to them and how they will achieve this.

How Are We Doing?

43% Carers during period 2013 - 2014 and 42% Carers during period 2015 - 2016 who responded to the Scottish Health and Care Experience Report told us that they have experienced a negative impact on their health and wellbeing.

This feedback is consistent with the average Scotland response and tells us that Carers health and wellbeing is an area of priority for Dundee.

A survey carried out by Carers Scotland in 2011 (Sick, Tired and Caring), 96% of Carers who responded reported that caring had impacted negatively on their health and well-being.

What Did You Tell Us?

Discussions with Carers, Carers Organisations and stakeholders you told us several key priorities for the Carers Strategic Plan.

- Carer's health and their wellbeing: including promoting ways of enabling Carers to maintain or improve their own health and wellbeing, as appropriate to their own circumstances.
- Positive relationships: including carers having positive relationships with family and friends including the supported person.
- Future planning opportunities for Carers including career and employment support, training and education opportunities.
- Good accommodation for Carers and safe and suitable physical environment to provide care.
- Financial advice and guidance for Carers including welfare rights and financial security.
- Time for Carer to do things for self, including time with other family and friends or other interests and a chance to get a break.
- Increase identification and support to Young Carers within school or other educational or training establishments, particularly so that Young Carers are enabled to improve their own wellbeing.

CARERS STRATEGIC OUTCOME 3

Consultation activities undertaken by Dundee Carers Centre found that Carers valued support for themselves and the person they care for. One Carer described support services as “a safety net” which help to signpost and support carers through difficult times. When this is in place, Carers can then focus on meeting other needs such as finance, and breaks from caring, before they can meet their own outcomes.

From this work we have increased our understanding of how issues that affect the person they care for also affects the Carer. For example, with Welfare Reform, the person who the Carer supports is more likely to be subject to varied changes to how they apply and receive benefits, and listening to the Carers have demonstrated that in many cases the Carer will also be directly affected.

What Are We Doing Now?

Within Dundee, we have undertaken a range of activities to enable Carers to have opportunities to lead a fulfilled and healthy life.



CARERS STRATEGIC OUTCOME 3

Good Practice Example

The Dundee Keep Well Team offer free health checks to Carers because taking on a caring role can impact on a Carer's health.

The health check can take up to 45 minutes and can include measuring blood pressure, cholesterol (if required), height, weight and Body Mass Index (BMI), as well as assessing lifestyle, social and wellbeing factors.

The nurse will explain the results of the tests and can offer support to prevent or reduce health and wellbeing risks. They can also refer Carers to other services for ongoing support.

What Will We Do?

Through local engagement and discussion we know that we need to develop our workforce, pathways and supports so that Carers will have

- improved wellbeing (this may include physical, emotional or mental wellbeing as appropriate to Carers circumstances),
- support to minimise the impact of financial hardship, as a result of caring,
- access to a range of information and advice,
- access a range of targeted informal supports which they can access directly.

The aim is that by focusing on these key themes we will be able to achieve our strategic wellbeing outcome that Carers will say I Can Live a Fulfilled and Healthy Life and meet our forthcoming duties from the Carers (Scotland) Act 2016. Here are the actions we will take to make this shift.

Carers Health and Wellbeing

- ✓ Consolidate provision of manual handling training to Carers so the risk of injury to Carers through manual handling is reduced.
- ✓ Continue to promote and embed Carers Health Checks for Adult Carers as a means of preventing ill health and promoting Carers health, wellbeing and resilience. (This links to Dundee Health and Social Care Partnership Strategic Plan - Prioritise and invest in models of support that help to support life style changes which improve health)
- ✓ Implement models which promote Young Carers health, wellbeing and resilience through implementation of Getting It Right for Every Child (GIRFEC) and Tayside Plan for Children, Young People and Families in Dundee.
- ✓ Through implementation of multi-agency guidance and workforce development, develop a consistent approach to supporting Carers around their own health, wellbeing, resilience and relationships and signposting to information, advice and support.

CARERS STRATEGIC OUTCOME 3

Access to Information and Advice

- ✓ Develop a range of access points in localities across Dundee so that all Carers can easily access advice, information about supports and information about independent financial, benefit and income maximisation advice in their local community.
- ✓ Review outcome of targeted benefits advice and work with Welfare Rights Service to continue if effective.
- ✓ Keep up to date with changes in welfare benefits and ensure all Carers are aware of opportunities to share their views with Scottish Government.
- ✓ Commission a third sector agency to refresh and develop Carers of Dundee website so that it provides a range of advice and information to all Carers, in line with Carers (Scotland) Act 2016.
- ✓ Develop and provide information and training to Carers which will support Carers to feel supported to continue caring e.g. medication information, personal care, dealing with conflict to support Carers, who are undertaking these roles, to do so safely.

Access to Specialist Informal Supports

- ✓ Through implementation of the Tayside Plan for Children, Young People and Families and Getting It Right for Every Child develop supports which enable Young Carers with transition from Primary to Secondary Education and into further education or a career.
- ✓ Through implementation of the Tayside Plan for Children, Young People and Families and Getting It Right for Every Child, develop support which enables Young Carers to achieve and realise their potential and outcomes.
- ✓ Commission a third sector agency to co-produce and implement models of specialist informal support. The support will be based in Carer's local community and will promote Carers wellbeing and Carer involvement ,enable Carers to access educational or employment opportunities and support Carers to undertake activities on their own or with the person they care for. The process of developing this support should consider local opportunities for development of Peer Support, Volunteering and Social Enterprise!
- ✓ Support developments which promote access and development of accommodation which will enable Carers to have a safe and suitable physical environment to provide care.
- ✓ Promote Carers homes being fitted with smoke alarm and advice and information given by Scottish Fire and Rescue and Police Scotland to improve home safety.
- ✓ Develop a range of leisure and social activities including drop in centre's which carers and cared for persons can directly access and have a positive experience with when accessing.
- ✓ Support development of models of support which enable Carers and those they care for to pursue their interests and activities at that same place and time.

A Carers Poem on Short Breaks (Laura's Story*)

Who am I, where did I go? I am on a fast train with nowhere to go, I look in the mirror my reflection has changed, my eyes are tired and my body feels strained.

My thoughts were mine but got lost on the way, life had opportunities but disappeared day to day.

Having a shower and getting dressed was a delight, no time for me now I am always in flight.

Meal times come and go not as enjoyable as before, we lose our appetite through exhaustion and more.

Night time arrives still no rest for us, our caring is not over it's like catching the bus.

I'm not giving up, Short Breaks rescued me for a while. It helped me stand still and breathe for a while.

I forgot the voice in my head that is mine, it was like a lost friend who came back in mind.

I stood still and did see with fresh eyes – sky, birds and trees, how beautiful the world is looking around through the breeze.

A smile and new friends willing to listen again, I heard birds chirping if it was a new beginning.

It was time for me to remember me again, that old friend who's inside who now knows it will come again.

**Laura's name has been changed to protect confidentiality*

CARERS STRATEGIC OUTCOME 4

Carer Strategic Outcome 4:

I can balance my life with the caring role

Carers will say that they have a good balance between caring and other things in their life and have choices about caring. Carers will say that they are able to spend enough time with people and activities they want to do and are able to continue in the caring role.

How Are We Doing?

71% Carers during period 2013 - 2014 and 70% Carers during period 2015 – 2016 who responded to the Scottish Health and Care Experience Report told us that they have a good balance between caring and other things in their life.

In addition, 43% Carers during period 2013 - 2014 and 44% Carers during period 2015 – 2016 who responded to the Scottish Health and Care Experience Report told us they feel supported to continue caring.

This feedback is consistent with the average Scotland response and are key priorities in going ahead for the partnership.

What Did You Tell Us?

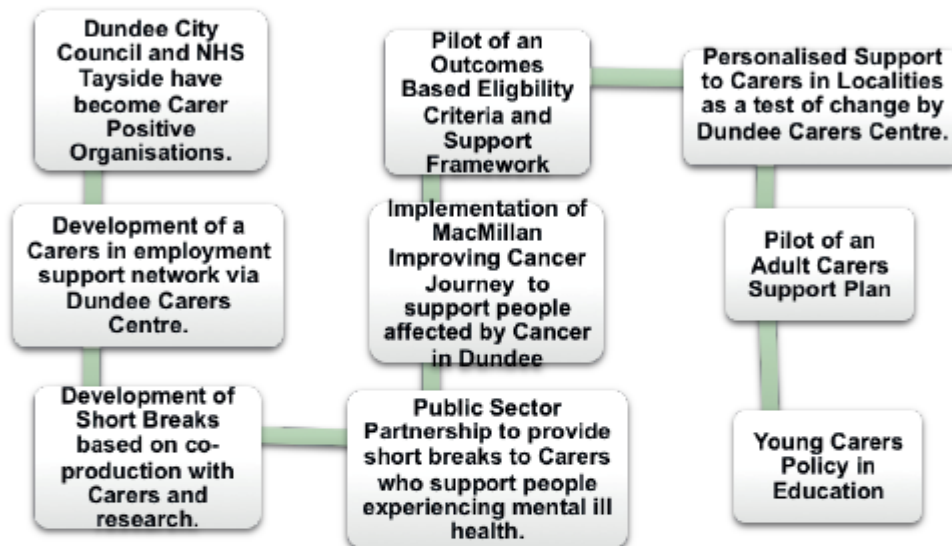
We listened to what you told us and undertook an analysis of supports available to Carers. The following actions will progress towards meeting demand and providing the right support Carers to achieve their outcomes.

- Personalised local supports through which Carers can access support where they live.
- More flexible options for all Carers to access short breaks so that Carers can have a break when they need it.
- An increased range and number of employers and academic institutions who are Carer Positive organisations so that Carers in employment or who are students feel supported.
- Development of our workforce across health, social care, 3rd and independent sector, housing and communities to increase awareness of Carers so that Carers are identified, feel respected and have positive experiences of services for them and the person they care for.
- Making sure more Carers can be confident, recognised, valued and working well with professionals and have access to advice/expertise in order to give best care or understand condition/behaviour of the person they care for.

CARERS STRATEGIC OUTCOME 4

What Are We Doing Now?

Within Dundee, we have undertaken a range of activities to support a good balance between caring and other things in their life and feel supported to continue caring. Here are some examples of good practice.



Good Practice Example

The Carers Positive Award is presented to employers in Scotland who have a work environment where Carers are valued and supported. It is managed by Carers Scotland.

Three awards levels (Engaged, Established and Exemplary) are presented to employers in Scotland who have a working environment where Carers are valued and supported, and who recognise the importance of retaining experienced members of staff.

Employers wishing to become a Carer Positive employer are required to undertake a self-assessment process to demonstrate how they meet each of the 3 award levels.

Dundee City Council, NHS Tayside and Dundee Carers Centre have recently attained the Engaged level and are working towards becoming exemplary.

CARERS STRATEGIC OUTCOME 4

What Will We Do?

Through local engagement and discussion we know that we need to develop our workforce, pathways and supports so that:

- Young Carers are supported,
- Adult Carers are supported to continue caring,
- Carers have access to short breaks and respite,
- Carers who are in employment and/training or further education feel supported.

The aim is that by focusing on these key themes we will be able to achieve our strategic wellbeing outcome that Carers will say I Feel Supported to Continue Caring and meet our forthcoming duties from the Carers (Scotland) Act 2016. Here are the actions we will take to make this shift.

Young Carers Are Supported

- ✓ Implement a Young Carers Statement which sets out Young Carers identified personal outcomes, timescales for completion of the statements and review timescales in line with the requirements set out by the Carers (Scotland) Act 2016 and Children and Young People (Scotland) Act 2014.
- ✓ Through implementation of procedures and workforce development, ensure that self-directed support options are offered to all Young Carers who have been identified as eligible for support so that Young Carers can choose how their support is provided.
- ✓ Through implementation of Tayside Plan for Children, Young People and Families and the Children and Young People (Scotland) Act 2014, develop a range of supports are integrated from their perspective and promote their wellbeing and safety.
- ✓ Commission a third sector agency to co-produce and implement a model with Young Carers that enables Young Carers to feel supported to both continue caring and have a life alongside caring.
- ✓ Through implementation of the Tayside Plan for Children, Young People and Families, develop ways in which Young Carers can be confident about emergency planning and future care of the person they support and through this enable Young Carers to feel nurtured, safe, and supported.

Adult Carers are supported to Continue Caring

- ✓ Implement an Adult Carers Support Plan which sets out Adult Carers identified personal outcomes, timescales for completion of the Support Plan and review timescales in line with the requirements set out by the Carers (Scotland) Act 2016.
- ✓ Implement an outcomes based eligibility criteria which sets out what support will be provided to Adult Carers to meet their identified needs in line with the requirements set out by the Carers (Scotland) Act 2016.
- ✓ Through implementation of procedures and workforce development, ensure that self-directed support options are offered to all Adult Carers who have been identified as eligible for support so that Adult Carers can choose how their support to achieve their outcomes is provided.

CARERS STRATEGIC OUTCOME 4

- ✓ Develop use of self-directed support options which enable Adult Carers who need this support to achieve their outcomes.
- ✓ Test a Carer Support Service for Adult Carers in localities across Dundee which enables Carers to manage the caring role and achieve their outcomes. This will inform development of locality based personalised Carers Support Services for Carers who need this support.
- ✓ Commission a third sector agency to co-produce and implement a model with Adult Carers that enables Adult Carers to feel supported to both continue caring and have a life alongside caring.
- ✓ Through implementation of the outcome focused assessment and support planning for supported persons and their Carers, develop ways in Adult Carers can be confident about emergency planning and future care of the person they support.

Short Breaks and Respite

- ✓ Co-design and implement a short breaks statement with Carers which sets out short breaks provision in Dundee and meets the requirements of the Carers (Scotland) Act 2016.
- ✓ Review current models of respite support and remodel in line with findings. (This is an action identified for the Carers Partnership from the Dundee Health and Social Care Partnership Strategic Plan).

Carers who are in Employment and/Training or Further Education Are Supported

Work with local organisations to increase the number of Carer Positive Organisations in Dundee so that Carers are able to manage the caring role and continue in employment.

Request that that all services commissioned by Dundee Health and Social Care Partnership become Carer Positive Organisations.

Achieve exemplary Carer Positive Status within Dundee City Council and NHS Tayside.



Anna's Story

Anna* is 64 and cares for her daughter who has mental health problems and physical health problems. Anna also has her own health problems. Because of her daughter's varying needs Anna cannot make plans as she doesn't know when she will need to help her daughter.

A Support Broker from the Short Breaks Service at Dundee Carers Centre met with Anna a couple of times to chat about how to help her to have breaks from her caring role, during these conversations it was discovered that Anna lacked confidence due to her poor literacy skills and this was impacting on her overall wellbeing and ability to cope as a Carer, the support broker was able to identify suitable literacy classes and helped Anna book these.

It was also identified during the brokerage process that Anna really enjoys cooking but is lacking some basic cooking skills; the broker was able to identify suitable cookery classes for Anna to attend.

Anna was delighted with this and is able to pay the small cost of this. Anna also said that she felt that her life was one of a Carer and nothing else and rarely felt that she had time to enjoy the things she used to love doing such as visiting the theatre. Anna and her broker applied for a grant of £200 which would cover 3 massage therapies and 3 trips to the theatre which Anna could take throughout the year, this would allow Anna the opportunity to visit these places when time allowed.

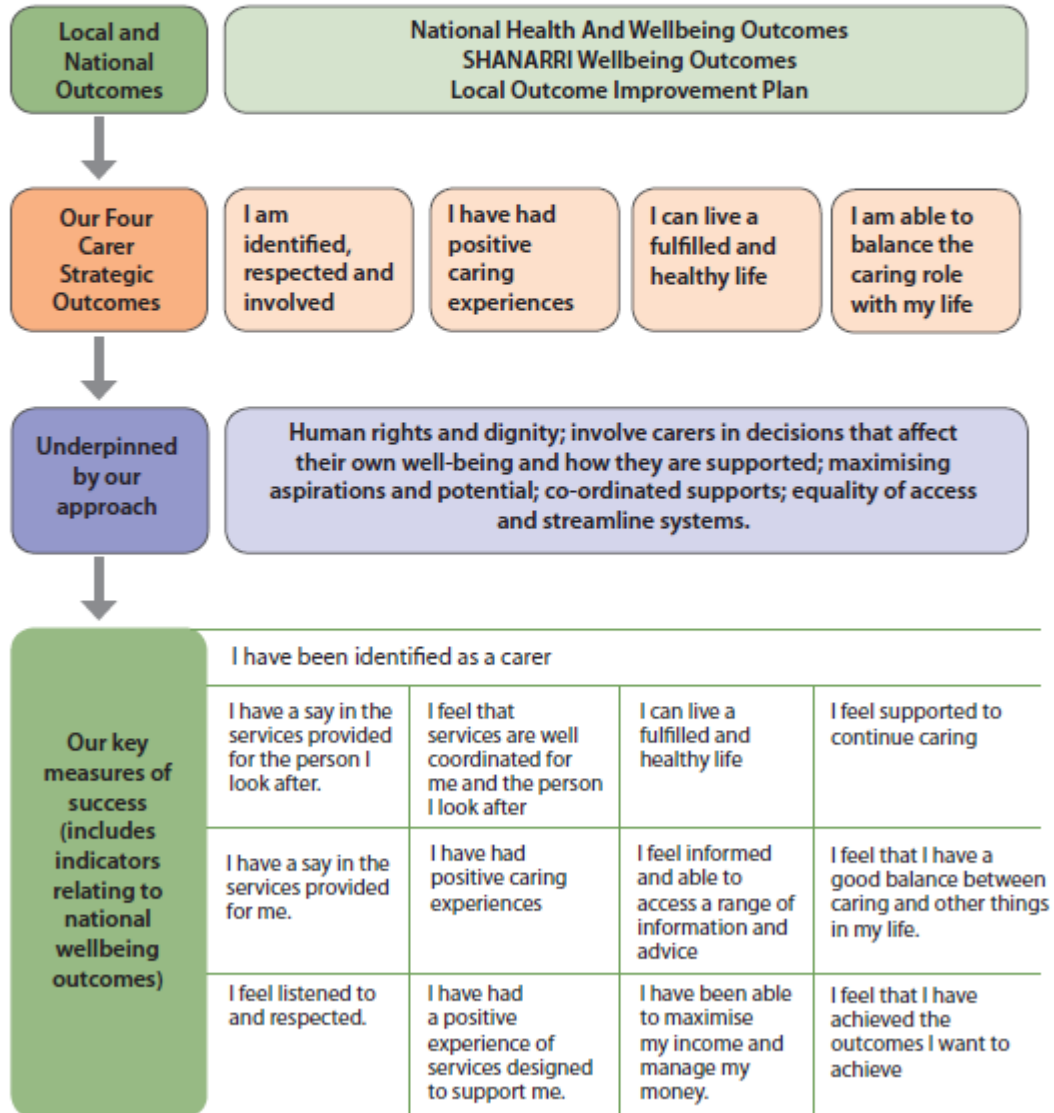
Outcomes Achieved

- Improved carer's health, confidence and self-esteem.
- Carer is more able to combine role of carer with social, leisure and learning opportunities

Anna's name has been changed to protect confidentiality.

DEMONSTRATING ACHIEVEMENT OF OUR VISION AND OUTCOMES

Progress towards achieving the outcomes identified in this Strategy will be monitored by the Dundee Carers Partnership using our measures of success set out below and Implementation Plan. The Partnership will provide an annual report to Carers and relevant authorities which sets out our performance, impact on Carers, resource use annual budget and unmet demand as way of ensuring a continued focus on achieving outcomes for Carers.



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- Health and Social Care Strategic and Commissioning Plan**
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- Strategic Needs Assessment for Health and Social Care Strategic and Commissioning Plan**
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Dundee City Health and Social Care Partnership**
<http://www.hace15.quality-health.co.uk/index.php/reports/health-and-social-care-partnership-reports/2440-dundee-city-pdf/file>
- Hospital to home -Supporting the transition from hospital to home for older people across Scotland**
<https://www.iriss.org.uk/resources/multimedia-learning-materials/hospital-home>
- Children and Young People (Scotland) Act 2014**
<http://www.legislation.gov.uk/asp/2014/8/contents/enacted>
- Tayside Plan for Children, Young People and Families**
http://www.dundeeecity.gov.uk/sites/default/files/publications/Tayside_Plan_Final.pdf

Glossary of Terms

Agency/ Agencies	In social care, this term is often used to mean an organisation that is set up to provide child care and/or community care services and support.
'Cared for' Person	Person to whom the carer provides support. *see also 'supported person'.
Carer	Someone who provides unpaid support to a family member or friend. Although the term carer is sometimes used to describe "care workers" it can be less confusing to keep this term for carers who are not employed to look after the person. Young carer: a child or young person who has a significant role in looking after someone. This can include practical caring responsibilities but also includes when the child has a supportive role or is emotionally affected by a family member's care needs. Young adult carer usually describes a carer between 16 years - 24 years of age.
Carer Support Plan	Individual carers (Adults) can be offered/request their own support plan related to their caring role and responsibilities. The plan will be based on an outcome focussed/assessment discussion with the carer and information from colleagues identified by the carer as knowing their circumstances well. (See also Young Carer Statements)
Carer Positive	Carer Positive promotes 3 levels of awards to encourage employers to create a supportive working environment for staff who are carers.
Commissioning	Outcome based Commissioning – the services commissioned are defined on the basis of a set of agreed outcomes that will achieve better health and wellbeing outcomes and reduce inequalities. Strategic Commissioning - this takes a long term and whole-system approach, which is different to commissioning for individuals. It includes a process of identifying groups of service users and/or whole populations and a strategic approach to analysing needs and aligning resources.
Consultation	This is an opportunity for people to express their views and opinions in a constructive manner.
Co-production	This relates to developing and transforming public services with people using services, their families and carers alongside professionals.

Glossary of Terms (continued)

Engagement	Engaging with people means ensuring that individuals are effectively involved in decision-making. This requires communicating in ways that make sense to people, bringing everyone's knowledge into consideration in negotiating how best to achieve outcomes or objectives.
FAIR Approach	An approach developed by the Scottish Human Rights Commission The basic steps are - Facts: The experience of the individuals involved and important facts; Analyse human rights; Identify responsibilities; Review actions.
Health and Social Care Integration	The term 'health and social care' is used to encompass the full breadth of policies, programmes, services and facilities relating to health and social care. In order to deliver the best services to the public it has been agreed to align Health and Social Care services and support at a local level in Dundee through a Joint Integration Authority (or Integrated Joint Board). Most Social Work and Health Community Care services will be integrated services.
Health and Social Care Partnership	Health and Social Care Partnerships, (HSCPs) are the organisations formed as part of the integration of some services provided by Health Boards and Councils in Scotland.
Independent Sector	Includes both private and voluntary social care providers, who may be contracted to provide services on behalf of statutory agencies.
(Joint) Strategic Commissioning Intention Plan	Strategic commissioning is the term used for all the activities involved in assessing and forecasting needs, links investment to agreed desired outcomes, considering options, planning the nature, range and quality of future services and working in partnership to put these in place. In Dundee Health and Social Care in the Integrated Authority will be considered together in a Joint Strategic Commissioning process.
(Joint) Strategic Planning	Organisations within or across sectors (for example, health and social care) agree objectives and meeting regularly to develop and implement them. In Dundee these groups are often called Strategic Planning Groups (SPG).
Local Authority	This is a term for any local administrative body and is often the term used to describe a local council. Dundee City Council is a Local Authority who provides a range of services including social care for people of all ages.
Locality	A smaller area within the borders of an Integration Authority. The purpose is to provide an organisational mechanism for local leadership of service planning, and have an influence on how resources are spent in their area.

Glossary of Terms (continued)

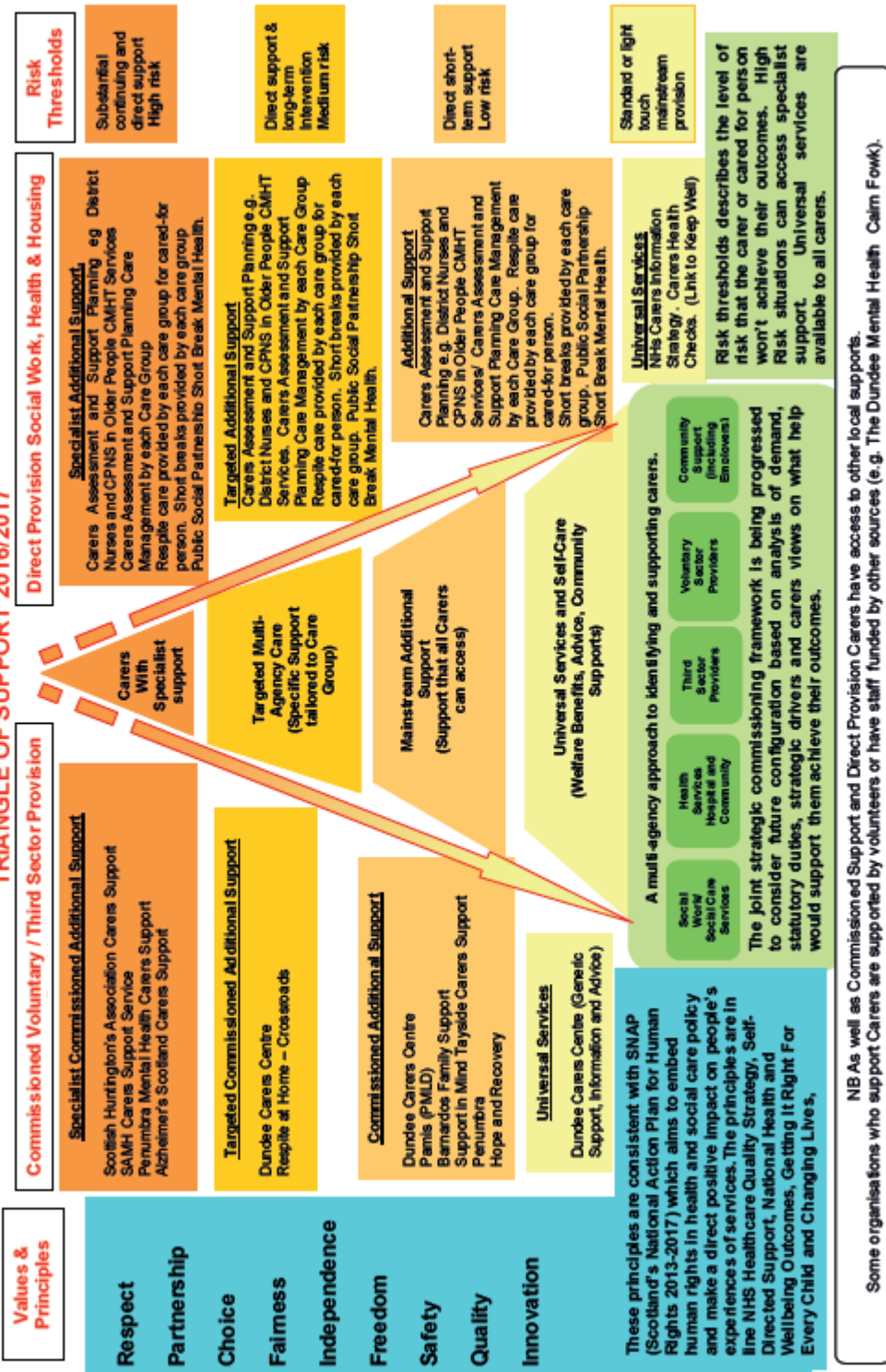
National Health and Social Care Standards	<p>The new National Health and Social Care Standards: My support, my life aims are that people in Scotland receive high standard of care and support, which should reflect their own personal needs and circumstances. There are five principles (dignity and respect; compassion; included; responsive care and support; and wellbeing).</p> <p>Dundee Carers Partnership Strategic plan</p> <p>Personal Outcomes: 'Outcome' is often used to refer to the results of the social care and support a person has received during outcome focussed assessment individuals are supported to identify what is important to them; why these things/outcomes are important; how to go about achieving these things; and who will be involved, when and where etc. See also SHANARRI.</p> <p>Carers' Outcomes: Research on the outcomes important to unpaid carers has identified distinct outcomes relevant to managing the caring role and quality of life for the carer, as well as carer concerns about outcomes for the cared for person. These can be built into outcomes focused support plans and review tools for unpaid carers.</p>
PANEL Principles	<p>These principles a way of breaking down what a human rights based approach. PANEL stands for Participation, Accountability, Non-Discrimination and Equality, Empowerment and Legality</p>
SHANARRI	<p>The overarching policy for children and young people in Scotland is Getting it Right for Every Child (GIRFEC). Under GIRFEC, there are eight 'SHANARRI wellbeing indicators,' identified as areas in which all children need to progress in order to do well, and which allow practitioners to structure planning.</p>
Stakeholders	<p>People or organisations, which have an interest in the Dundee Carers Partnership and plans that are developed</p>
Strategic Needs Assessment	<p>This is a document which include some statistics and information about people (carers) and there circumstances and comments about these. There is a more detailed Carers Strategic Needs Assessment for this plan.</p>
Social Care	<p>There is no simple definition of (adult) social care. However, it is agreed it covers a wide range of services provided by local authorities and the independent sector to adults either in their own homes or in a care home.</p>

Glossary of Terms (continued)

Supported Person This can describe people who receive support from carers and/or from care staff or a combination of both.

Young Carer Statement The Carers (Scotland) Act makes provisions for a Young Carers Statement (YCS) to be prepared for carers who are under 18, or over 18 but still at school. Not all young carers will have a wellbeing need that requires a Child's Plan, but if a Child's Plan is already in place for a young carer, the YCS will be developed in addition to this so there is a document with a focus on their needs as a carer.

Services and Support – Adult Carers 16+ TRIANGLE OF SUPPORT 2016/2017





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INTEGRATED CHILDREN'S SERVICES

Support for Young Carers and the Young Carers Statement (YCS) Guidance

April 2018

Relevant Legislation: Children and Young People (Scotland) Act 2014; Carers (Scotland) Act 2016

Main Responsibility: All Lead Professionals and Young Carer Co-ordinators

Legal Context

This guidance provides an outline of legal duties and good practice requirements for practitioners who will have a responsibility to work in partnership with Young Carers to ensure they receive the best support possible. The provisions relating to Young Carers contained within Part 2, Chapter 2 and Sections 12-20 of the Carers (Scotland) Act 2016, referred to in this guidance as 'the Act', commenced on 1st April 2018. The Act gives Local Authorities and other Responsible Authorities specific duties when assessing, preparing, agreeing and reviewing support for Young Carers. The purpose of the Act is to ensure that the role of being a Young Carer does not serve as a barrier to a child or young person's health, wellbeing and educational attainment.

Definition of a Young Carer

A Young Carer is someone who is under the age of 18, or over the age of 18 if they are still at school, who provides or intends to provide care for another person. This will not apply, however, if that care is being provided under a contract or as voluntary work. We know that the majority of Young Carers are undertaking a caring role for other members of their family (parents, grandparents, siblings, and extended family) or friends. This may be due to the fact that the person they are providing that caring role for is ill or disabled including having mental health issues or is using substances. It may be that they have a caring role for a younger sibling or siblings due to disability or health issues that affect adults who would otherwise provide the caring role. A young carer can be caring for more than one person and they do not need to live in the same household.

Local Authority and Responsible Authority

The Act defines the duty to support Young Carers that a Local Authority has and this guidance will explain this further for the Dundee context. Responsible and Directing Authorities also have these responsibilities. A Responsible Authority can also be the Local Authority where a Young Carer attends school if it is different from where they stay at home. This means in effect that if a Young Carer lives in Dundee but attends school in Angus or Perth and Kinross Council areas then those are the Responsible Authorities and must provide any support. A Directing Authority has the same meaning as Section 45 of the Children and Young People (Scotland) Act. That is to say the managers of a grant aided or independent (private) school will be responsible for supports to the Young Carer.

Section 12: Duty to prepare a Young Carer Statement

Section 12 of the Act places a duty on responsible authorities to offer a Young Carer Statement to all identified Young Carers and prepare a statement for those that take up this offer, as well as any Young Carer that requests one. This is in effect the plan that will outline what the assessed supports for the Young Carer are to be and how, by whom and by when they will be provided. The Local Authority may also ask another organisation to provide further support to a Young Carer on their behalf. These organisations could include Dundee Carers Centre, Third/Voluntary Sector organisations, Health Services or any other local or national services.

Preparation of the YCS in Dundee

In Dundee, support for Young Carers and the preparation of the Young Carers Statement will be a key part of the delivery of the Getting It Right for Every Child (GIRFEC) framework. The responsibility for preparing a Young Carers Statement sits within the Children and Families Service and will be undertaken by the Lead Professional for the child or young person. This will be either a Teacher or Social Worker.

When the need for a YCS has been established for a child or young person who attends school, then the Lead Professional and the Young Carers Co-ordinator must liaise with each other and engage with the Young Carer to prepare the YCS. An existing policy for Young Carers in School, where the role of the Young Carer Co-ordinator is explained, can be found on the link below. The coordinator has a key role relating to Young Carers.

<https://www.dundee.gov.uk/service-area/children-and-families-service/publications/policy-provision-young-carers-74kb-pdf>

If a Young Carer has an existing Child's or Young Person's Plan (CYPP) that has been agreed through the Team Around the Child process then the existing CYPP should be reviewed to include the desired outcomes and actions that will acknowledge that the child or young person is a Young Carer.

The CYPP and the YCS will in effect be the same document and should be named as such. If a Young Carer does not have an existing CYPP then the current CYPP format on Mosaic should be used to prepare the YCS.

The Local or Responsible Authority must offer and prepare a Young Carers Statement to any child or young person identified as a Young Carer and in agreement with a YCS being prepared. A child or young person can also request a Young Carers Statement and these requests may come from children and young people who Local and Responsible Authorities have not yet identified as Young Carers. If this happens then a Young Carers Statement must be offered.

If the young carer cares for another child there are likely already to be some shared professional contacts between the supported child and the young carer. If not, appropriate arrangements should be made to liaise with the relevant professionals. When the Young Carer cares for an adult, where appropriate, it will be important to liaise with the adult they care for and the lead professional for the adult in order to find out more about the nature of the caring role and how the diagnosis and prognosis will affect the person.

Section 13: Young Carers of terminally ill cared for persons

Scottish Ministers will prescribe timescales in forthcoming regulations for the preparation of a Young Carers Statement in relation to young carers of terminally ill cared for persons. Although these timescales have not yet been prescribed it is important to recognise that the terminally ill persons care and support needs are likely to change rapidly and every effort should be made to make sure the young carers support is appropriate at each stage, including following the bereavement.

The terminal illness of a parent, grandparent, close family member, sibling or friend is an emotionally traumatic time for a child or young person. This will be compounded if that child or young person is also a young carer for that terminally ill person. It may also affect the household circumstances of the young carer and whether alternative living arrangements/guardian(s) need to be made for them. In these circumstances, it is very important that the young carer is identified early and the preparation of a Young Carers Statement is prioritised.

As with all care and support responsibilities it is also very important that if a Young Carer is caring for a terminally ill supported person an assessment is made as to the appropriateness of the tasks the Young Carer intends to, or is expected to, undertake.

Section 14: Young Carers: Identification of Outcomes and needs for support

In identifying a Young Carer's personal outcomes the responsible Local Authority must take into account any impact that having one or more Protected Characteristics has on the Young Carer. Protected Characteristics are defined by Section 149(7) of the Equality Act 2010 and are:

- Age
- Disability
- Gender Reassignment
- Marriage and Civil Partnership
- Pregnancy and Maternity
- Race
- Religion or Belief
- Sex
- Sexual orientation

Section 15: Content of Young Carers Statement

This section defines the information about the Young Carers personal circumstances at the time which has to be included in the Young Carers Statement. This must include:

- The nature and extent of the care provided or to be provided
- The impact of caring on the Young Carer's wellbeing and day-to-day life
- Information about the extent to which the young carer is able and willing to provide care

- Information about the extent to which the Responsible Authority considers that the nature and extent of the care provided by the Young Carer is appropriate. It is necessary to ensure that young carers are children and young people first and foremost and that they are protected from undertaking caring responsibilities and tasks which are inappropriate for their age and maturity
- Information about whether the young carer has arrangements in place for the provision of care to the cared for person in an emergency
- Information about whether the young carer has arrangements in place for the future care of the cared for person
- Information about the identification of the Young Carer's personal outcomes, including those outcomes identified by the Young Carer her/himself.
- Information about the identification of the young carer's needs for support including:
 - What the identified needs are
 - If there are no identified needs for support this must also be stated
- Information about the support available to young carers and the person they are caring for in the Responsible Local Authority area
- If the young carer does not reside in the responsible local authority's area, information about the support available to Young Carers in the area where the Young Carer resides
- If the young carer's identified needs meet the local eligibility criteria, information about the support which the responsible local authority provides or intends to provide to the Young Carer to meet those needs
- If the Young Carer's identified needs do not meet the local eligibility criteria, information about the support which the responsible local authority provides or intends to provide to the Young Carer to meet those needs
- Information about whether support should be provided in the form of a break from caring
- Information about the circumstances in which the young carer statement is to be reviewed.

The format to be used when preparing a YCS is the Child's/Young Person's Plan. This can be found on the Early Intervention and Child Protection Work streams on Mosaic. If a YCS is being prepared as a standalone document i.e. if the Young Carer does not meet the criteria for a CYPP then this should be acknowledged by giving the Plan the title "Young Carers Statement".

If a CYPP and a YCS exist simultaneously i.e. a child or young person meets both criteria then this should be acknowledged also on the title page of the CYPP. There should only be one single Plan regardless of whether it is a CYPP, a YCS or both. All the above content for the YCS should be included in the completed version using the CYPP format on Mosaic.

Section 16: Review of Young Carer Statements

This section contains a regulation making power about the review of a YCS, particularly Section 16(a) which the circumstances in which the YCS is to be reviewed. There are unlikely to be regulations set relating to Sections 16 (b) (c) and (d) which relate to: the frequency of review, procedure of the review and arrangements for obtaining the views of the Young Carer and cared for person(s).

Good practice standards in Dundee however should relate to each part of Section 16 as follows:
Section 16(a) Circumstances under which a YCS should be reviewed could include:

- If the Young Carer requests a review of their YCS
- If there is a significant change in the remit, appropriateness or availability of a particular resource provided as part of the YCS
- If there is a significant change in circumstances for the Young Carer or cared for person
- If an individual partner providing support to the Young Carer can no longer provide this support e.g. change of employment
- Any other reason the Lead Professional or Young Carer considers necessitates a review of the YCS.s

Section 16(b) Frequency of YCS Review

A YCS should be reviewed as a minimum standard 3 months after the YCS is first agreed and then at 6 monthly intervals thereafter.

Section 16(c) Procedure for the review of a YCS

A YCS should be reviewed as per current procedures for a Team Around the Child meeting (See Appendix 4).

Obtaining and sharing the views of Young Carers and cared for persons will be based on engagement with all partners to the YCS and consent to share information. These principles are already established in the Team Around The Child process.

Section 17: Young Carer Statement: Provision of information

The Carers (Scotland) Act does not contain a duty to share information with the Young Carer's Lead Professional. This provision is contained within Section 26 of the Children and Young People (Scotland) Act 2014. An illustrative Code of Practice for Information Sharing in relation to Parts 4 (Lead Professional), 5 (Child's Plan) and Part 18, Section 96 (Wellbeing) is being prepared by the Scottish Government. In the interim, officers will act in accordance with existing data protection legislation and will not share information without consent unless there are concerns about a significant risk of harm to a child or young person or another statutory requirement to share information.

This means in effect that a professional decision should be made regarding sharing information that will promote, support or safeguard the wellbeing of a child or young person. The rationale for sharing that information, or not to share the information, should be noted and discussion undertaken with a responsible manager. The principles of consent and engagement with the Young Carer throughout all stages of preparing and composing and reviewing the YCS are very important also. Good engagement leads to informed consent which results in proportionate, appropriate information sharing.

Section 18: Continuation of Young Carer Statement

If a Young Carer has reached the age of 18 the YCS will continue until they are provided with an Adult Carer Support Plan. Good transitions are very important in these circumstances. An appropriate adult service who will be responsible for the Adult Carer Support Plan should be invited to Team Around the Child meetings held to review the YCS no less than six months before the Young Carer's 18th birthday to ensure appropriate transition planning takes place.

Section 19: Responsible Authority: General

Where the Young Carer is a pre-school child residing in Dundee the Responsible Authority is Tayside Health Board. The Responsible Authority for the YCS can be a different Authority than the one providing support. A "pre-school child" has the meaning given by Section 36(3) of the Children and Young People (Scotland) Act 2014 below. A "pre-school child" is a child who:

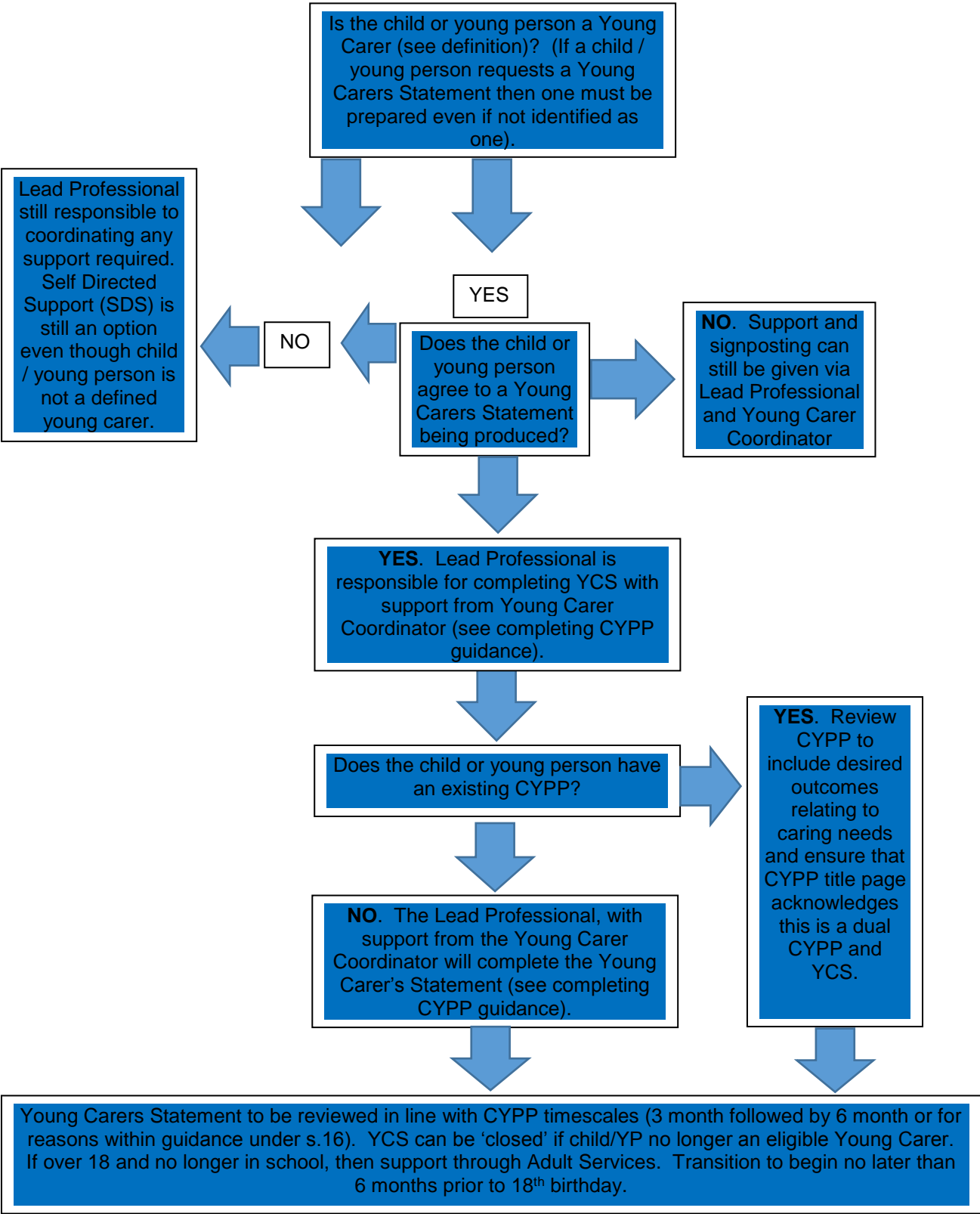
- a Has not commenced attendance at a primary school and
- b If the child is of school age, has not commenced attendance at a primary school because the relevant local authority has consented to the child's commencement at primary school being delayed."

Section 20: Responsible Authority: Special Cases

If a Young Carer attends a public school in a different Local Authority area from where they normally live then that Local Authority is the Responsible Authority for the YCS and co-ordinating the accompanying supports to the Young Carer. If a decision is taken by a Local Authority or Health Board that a pre-school Young Carer should reside in a different Health Board area, then the Health Board in which the Young Carer would normally reside is the Responsible Authority. This situation may arise when an Accommodated Young Carer of pre-school age is placed out with their home Local Authority and Health Board area. In this case the existing Child's Plan will also be the YCS and the Lead Professional will be the co-ordinator.

When the Young Carer attends a grant aided or independent school i.e. a school not managed by a Local Authority then the Directing Authority of that school is the Responsible Authority for the YCS. If the child or young person is accommodated then the same principles apply for the YCS as outlined in the paragraph above and the grant aided or independent school is not the Responsible Authority. "Public" "grant-aided" and "independent" schools have the same meanings given as section 135 of the Education (Scotland) Act 1980.

Appendix 1 - Young Carers Statement: Flowchart



Eligibility Criteria

Part 3, Chapter 1, Section 21 of the Carers (Scotland) Act places a duty on Local Authorities to set eligibility criteria which in the case of Young Carers are the criteria by which a requirement exists to provide supports to meet a Young Carers assessed needs and acknowledge their strengths.

The Act defines eligible needs for support as those which cannot be met through the provisions of services available generally and/or by information and advice services, and/or by services to the cared for person (with the exception of replacement care). This means that if it is assessed that a “targeted intervention” as defined by the Getting It Right For Every Child framework is assessed as necessary to promote support or safeguard the wellbeing of a Young Carer then they are eligible for supports.

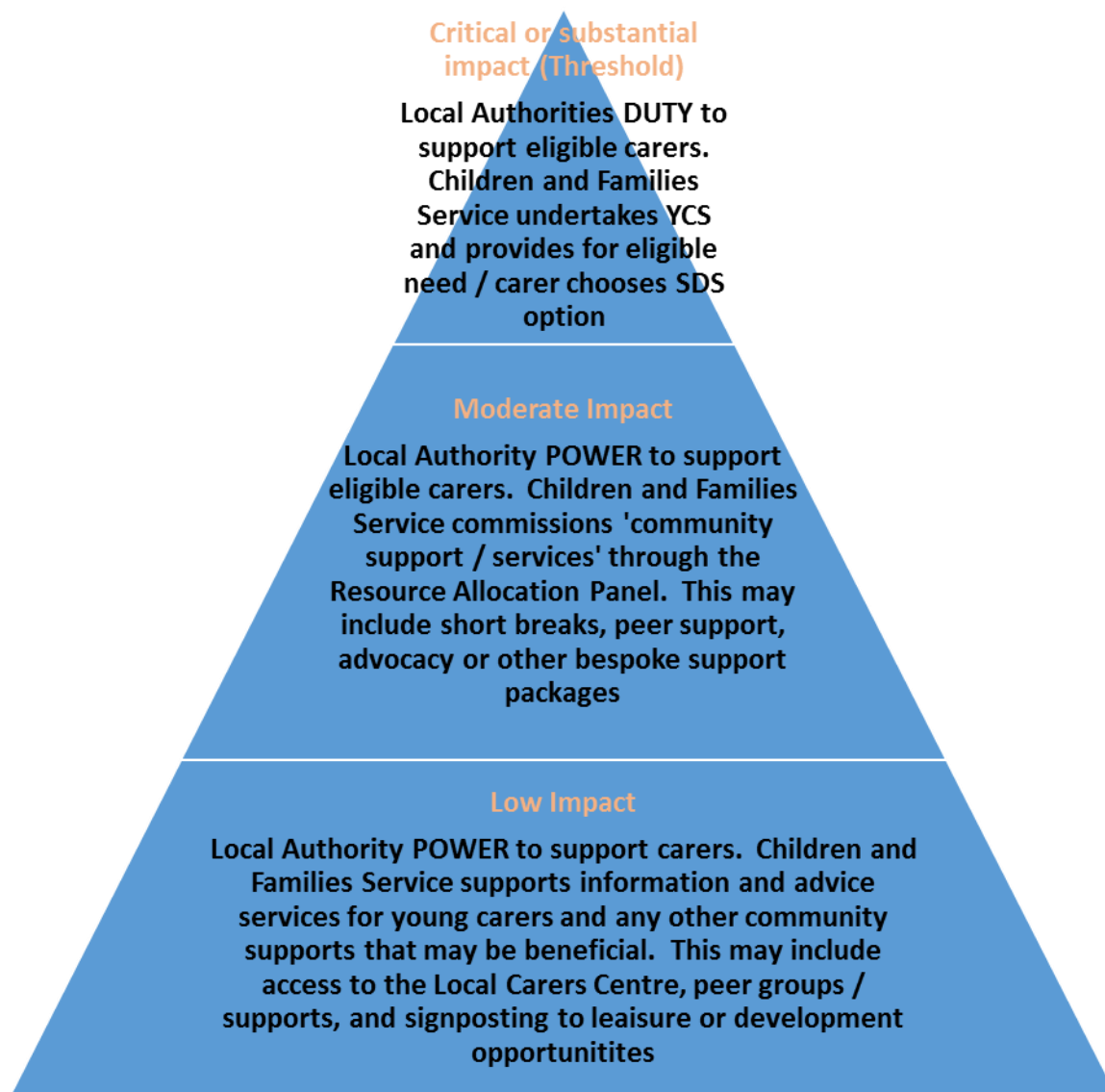
The principles of Primary Prevention and Early Intervention are well established in current plans, policies, procedures, guidance and good practice within Dundee. These principles are established in the current Tayside Plan for Children, Young People and Families which can be found on the link below:

<https://www.dundee.gov.uk/service-area/children-and-families-service/publications/tayside-plan-children-young-people-and-families-1059mb-pdf>

Young Carers are therefore entitled to the same universal services and opportunities as any other child or young person residing in Dundee. Section 12 of the Act however states that Responsible Authorities must offer a YCS if local Eligibility Criteria is met. Dundee will therefore offer a YCS to every Young Carer who meets the definition defined in this Guidance and Part 1 of the Act. If the Young Carer does not wish a YCS then the Young Carer will be signposted to access to any supports deemed relevant within universal and community based services.

Eligibility Criteria: Staged Interventions

The staged interventions for a YCS will follow the same guidelines as the CYPP and the TATC process (see Appendix 4 for TATC procedures). In the case of a YCS this will relate to the level of co-ordination required for the targeted interventions in the YCS i.e. single or multi agency not a staged intervention process that de-escalates towards possible closure as may be the case with a CYPP. A YCS will remain in place until a young person is no longer assessed as being a Young Carer or completes a transition to having an Adult Carer Support Plan.



The Eligibility Threshold will be where a young carer's life has **critical or substantial** impact stemming from their role as a young carer. Indicators of impact are contained in the table below in line with the Well-being Indicators that are universally used within the SHANARRI framework and the Child and Young Person's Plan.

Indicator	No Impact	Low Impact	Moderate Impact	Substantial Impact (Eligibility Threshold)	Critical Impact (Eligibility Threshold)
Safe (home, school and community)	Young Carer free from abuse, neglect or harm in the community, school and at home	Young Carer's circumstances are stable and the situation in the community, school or home is manageable	Young Carer's situation is causing difficulty and potential risks are identifiable for the young carer and or the person receiving care	Young carer's situation is of concern and there are safety risks that cannot be managed or resolved in the short term	Young Carer's situation at home is unsuitable and there are clear safety risks for the young carer and the person receiving care

Healthy	Young carer is in good physical and mental health. No identified medical needs	Young Carer is managing most aspects of the caring role with a possibility that their health is being affected	Young Carer is managing some aspects of the caring role, but their health is being affected	Young Carer is having difficulty managing most aspects of the caring role and their physical and mental health are suffering as a result	Young Carer has significant physical and / or mental health difficulties due to the impact the caring role has had which may cause life threatening harm to the young carer or the person receiving care
Achieving	Young Carer continues to access education / training and has no difficulty managing the caring role and education / training	Young Carer has some difficulty managing caring and education / training with a small risk of not sustaining education / training in the short term	Young Carer has difficulty managing caring and education / training with a risk of not sustaining education / training in the medium term	Young carer is missing education / training and there is a risk that this will end in the near future	Young Carer is at significant risk of leaving or has now left education / training
Nurtured	Young Carer lives in a nurturing environment and has a positive relationship with the person receiving care	Young Carers role is beginning to have an impact on their emotional well-being with a risk of detrimental impact on the relationship with the person receiving care and may require support	Some impact on the Young carer's well-being and the relationship with the person receiving care and they need additional help or support.	Major impact on the young carers wellbeing with clear detrimental impact on the person receiving care. The young carer is unable to sustain most aspects of their caring role and requires additional help or support in a suitable care setting.	There is a complete breakdown in the relationship between the young carer and the person receiving care and the young carer has difficulty sustaining or is unable to continue caring. Further / sustained input is required for both the young carer and the person receiving care.
Active	The young carer has and takes opportunities to play, take part in sport or other physical activities at home, school and in the community	The young carer has and takes some opportunities to play, take part in sport or other physical activities at home, school and in the community	The young carer has limited opportunities to play, take part in sport or other physical activities at home, school and in the community	The young carer has few opportunities to play, take part in sport or other physical activities at home, school and in the community and this may	The young carer has no opportunities to play, take part in sport or other physical activities at home, school and in the community and this is

				have a negative effect on healthy growth and development	having a negative effect on healthy growth and development
Respected / Responsible	The Young Carer has regular opportunities to be heard and involved in decisions and have an active and responsible role in decisions that affect them	The Young Carer has some opportunities to be heard, involved in decisions and have an active and responsible role in decisions that affect them	The caring role is impacting the young carer, limiting their opportunities to be heard, involved in decisions and have an active and responsible role in decisions that affect them	The Young Carer has few and irregular opportunities to be heard and involved in decisions that affect them.	The Young Carer has no opportunities to be heard and involved in decisions that affect them.
Included	<p>The Young Carer feels accepted as part of the community that they live and learn and is able to take part in community activities.</p> <p>The young Carer is free from financial worries</p>	<p>The Young Carer feels some acceptance and part of the community that they live and learn but is unsure how to take part in community activities.</p> <p>There is a small risk of financial worries</p>	<p>Due to the caring role, the young carer has limited acceptance as part of the community in which they live and learn.</p> <p>There is a risk of financial pressure</p>	<p>The young carer feels isolated and not confident in the community they live and learn.</p> <p>Needs financial support</p>	<p>The young carer does not feel accepted as part of the community in which they live and learn in.</p> <p>There is financial hardship</p>

Appendix 3

Self-Directed Support (SDS)

Section 24 of the Act provides for a duty on responsible local authorities to support Young Carers who have eligible needs. There is also a power to support Young Carers to meet needs that do not meet Eligibility Criteria.

Where a Young Carer is deemed eligible for support this may take the form of a personal budget and offer of SDS options.

The Social Care Self-Directed Support (Scotland) Act 2013 (SDS) has provisions to offer, if a child/young person/adult is assessed to meet appropriate criteria, the following SDS options:

- **Option 1** - Direct Payment funding given by the Local Authority and given to child/young person/family to employ care staff or pay for a service.
- **Option 2** - The child/young person/family directs the available support, they choose the care provider. The Local Authority will make payments.
- **Option 3** - The Local Authority arranges the support. The child/young person/family requests that the Local Authority selects and arranges the support and makes the payments.
- **Option 4** - A mix of the above a child/young person/family can pick options 1-3 for different elements of the support provided.

The assessment of a child or young person as a Young Carer should focus on the supports that they will require to develop into a happy, healthy young adult whilst they provide the caring role. The assessment should not focus on a SDS option to the detriment of that overall desired outcome. The Responsible Authority should assess the value that a SDS option will bring to this and carefully consider the Young Carers best interests.

Similar to the assessment of Young Carers for a terminally ill cared for person the Responsible Authority has a duty to listen to and consider the views of the Young Carer when considering SDS. A SDS option may not always be assessed as being in a Young Carers best interests.

Full details of Young carer SDS can be found here:

<http://directpayments.org/self-directed-support>

<http://guidance.selfdirectedsupportscotland.org.uk/service-users/options-for-self-directed-support>

INTEGRATED CHILDREN'S SERVICES GUIDANCE THE SINGLE PLANNING PROCESS SUPPORTING THE SINGLE CHILD'S PLAN (TEAM AROUND THE CHILD)

VERSION 10 – December 2017

Main Responsibility: All Lead Professionals

Relevant Legislation: Children and Young People (Scotland) Act 2014

LEGAL CONTEXT

The Children and Young People (Scotland) Act became law on 27th March 2014 and is one of the most important pieces of legislation affecting children, young people and their families since the Children (Scotland) Act 1995. The Act will also have a significant impact on the way we practice across the whole Integrated Children's Services Partnership in Dundee. The specific parts of the Act this guidance relates to are: **Part 4 Provision of Lead Professionals and Part 5 the Child's Plan.**

INTRODUCTION

This guidance is suitable for all practitioners and managers with Lead Professional functions as part of their responsibilities and all other Partners to a Child's/Young Person's Plan (CYPP) regardless of the agency they are based in. The Team Around The Child (TATC) is the operational embodiment of the Single Planning Process supporting the Single CYPP within Dundee's Integrated Children's Services Partnership. As such it is a key delivery mechanism for Getting It Right For Every Child (GIRFEC) in Dundee City. This guidance should be read in conjunction with the [TATC Process Map](#) and the guidance for completion of the Tayside CYPP.

THE LEAD PROFESSIONAL

Those practitioners and managers who have Lead Professional functions as part of their responsibilities have a key role in GIRFEC delivery and the Single Planning Process. In Dundee we have agreed that those who have Lead Professionals functions as part of their responsibilities will be:

- Birth to P1 entry – Health Visitor or Family Nurse
- P1 entry to S1 entry – Head/Depute/Principal Teacher
- S1 to S6 – Depute Head/Guidance/Support for Learning Teacher
- 15 – 18 year olds who have left school – Discover Work Service

The agreed roles and responsibilities of Lead Professionals in Dundee can be viewed [here](#).

WELLBEING

Using the GIRFEC framework Wellbeing is defined under the indicators of:

- Safe
- Healthy
- Achieving
- Nurtured
- Active
- Respected
- Responsible
- Included

[Scottish Government Guidance](#) gives a very useful overview of GIRFEC and the role that Lead Professionals have in it.

If a wellbeing concern/information has been shared with the Lead Professional they must ask five key questions:

1. What is getting in the way of this child or young person's wellbeing?
2. Do I have all the information I need to help this child or young person?
3. What can I do now to help this child or young person?
4. What can my agency do to help this child or young person?
5. What additional help, if any, may be needed from others?

On receipt of a wellbeing concern, and having asked the five key questions, the Lead Professional must make two decisions. The first decision is whether or not to call a Team Around the Child meeting in relation to the wellbeing concern. If the decision is not to call a meeting then the reasons for this decision, and any other action taken, must be recorded by the Lead Professional's agency. If the decision is to call a Team Around The Child meeting then the Lead Professional must decide what level of meeting to call (see page 4).

If wellbeing information/concern(s) are received by practitioners who are not Lead Professionals then they should decide whether or not to appropriately and proportionately share that wellbeing information/concern(s) with the Lead Professional as per the attached guidance below.

PREPARATION FOR THE TATC MEETING

Engagement with the child/young person and family is an extremely important part of the TATC process at every level. Parents, carers, children and young people need to be prepared for a TATC meeting and their views sought. Therefore it is good practice for the Lead Professional (or another practitioner delegated by them eg Meetings Buddy) to contact the family before the TATC meeting and explain the purpose of the meeting, who is to attend and what is to be discussed.

It is recommended that the Lead Professional, or a Partner to the Child's Plan delegated by them, complete the [Demonstrating Outcomes in Dundee wellbeing wheels](#) with the child/young person and their parent/carer in advance of the meeting. This will give the family an overview of the wellbeing indicators to be discussed at the meeting and allow them to state their own views regarding what is potentially to be discussed at the meeting. This will also allow the family to be informed about who is to attend the meeting.

It is very important to note that whilst preparing for the TATC meeting that individual children and young people are assessed using a **whole family perspective**. There will be aspects of a child's or young person's life that are unique to them as individuals and there will be aspects that are very much dependent on how their family functions.

This applies equally to any siblings in the family (immediate or extended). Therefore any subsequent concerns that emerge for siblings should be assessed and actioned as per this guidance regardless of whether the initial concern relates to another child. These concerns should be discussed with the appropriate Lead Professional in the first instance or with MASH if the concern is of a serious or child protection nature.

INFORMATION SHARING

Information sharing for the Team Around the Child Process in Dundee is based on **seeking the consent** of the child or young person and their parent/carers and should be undertaken in conjunction with the engagement process which is part of the preparation for the TATC meeting.

It is good practice to discuss with a child/young person and their family information relating to the wellbeing concern(s) that will be passed on to a Lead Professional and discussed at the TATC meeting as part of the consent process. It may be the case however that consent is not given but wellbeing concerns continue to escalate. Under these circumstances decisions can be taken to share information referring to Schedules 2 and 3 of the Data Protection Act 1998. If the decision is that the wellbeing concern is such that information must be passed onto the Lead Professional then the reasons, rationale and management decision, if necessary, should be noted and held within single agency records.

Reference should be made to the Integrated Children's Services [Practitioners Guide to Information Sharing](#) in all situations where wellbeing concerns have escalated and consent to share information has not been agreed.

Information relating to Child Protection issues should be immediately discussed and actioned under existing Child Protection Procedures.

YOUNG CARERS STATEMENT

The provisions relating to Young Carers contained in the Carers (Scotland) Act 2016 will commence on 1st April 2018. Included in these provisions is the duty to prepare a Young Carers Statement (YCS) ([YCS guidance](#)).

In Dundee support for Young Carers will be assessed, agreed and planned within the Getting It Right For Every Child framework. This will entail the Lead Professional being the first and central point of contact for Young Carers. For school aged children each school will have a Young Carers Co-ordinator who will liaise with the Lead Professional for the assessment, preparation, delivery and review of the YCS.

If it is agreed with the Young Carer that a meeting is the best method of agreeing, preparing and planning a YCS then that will happen using the TATC framework. It is important to note that not every Young Carer will meet the criteria for a Child's/Young Person's Plan but they will be entitled to a YCS.

THE TEAM AROUND THE CHILD (TATC)

TATC meetings are conducted on four levels depending on the assessed status of the wellbeing concern(s). If on receipt of a wellbeing concern and having asked the five key questions above the Lead Professional decides that additional help may be needed from others the first decision they must make is whether or not a TATC meeting is required to plan this additional help. If the decision is a TATC meeting is not required then the reasons for this must be recorded and stored securely by the Lead Professional's agency. If the decision is that a TATC meeting is required then the first decision is - what level should it be convened at? It is important to note that the TATC process is not linear ie it does not always have to start at Level 1 it can begin at any level depending on the assessed wellbeing concern.

[TATC Level Definitions Document](#)

TATC Level 1

A TATC Level 1 meeting should be convened when the Lead Professional's assessment is that mainstream resources within their own agency are not sufficient to address the wellbeing concern(s) identified, but there are sufficient other resources from within that agency to provide effective support to the child or young person. For example within Education the Lead Professional may seek the assistance of Dundee Educational Psychology Service, the Outreach Service (0–18), Multi-Sensory Support Service or Bilingual Pupils Support Service in providing support to a child or young person and their family. Similarly within Health a Lead Professional may seek the assistance of Speech and Language Therapy or an Occupational Therapist in providing support to a child and their family. These support packages may be relatively complex but they are still within a single agency.

ABLe planning is the universal tool for addressing barriers to learning in educational settings (see www.ableschools.org.uk). For many children and young people, concerns about their wellbeing can be met through adaptations to the learning environment, as described in the ABLe framework. An ABLe plan is used to record the barriers to learning, the impact on the child/young person and the strategies used to overcome the barriers. Should a CYPP be required in order to coordinate targeted interventions, reference can be made to the ABLe plan within the CYPP.

At the TATC Level 1 meeting should there be a need to co-ordinate targeted interventions from within the single agency then a CYPP should be opened.

Where there is a need for a child or young person to have some of their education provided out with the school environment or by another provider, they may require a Flexible Learning Package (FLP). CYPP should form the basis of the FLP, outlining the wellbeing concerns which have led to it; and including desired outcomes to be achieved as a result of having a FLP. Approval for a FLP for pupils who have compulsory measures (LAAC; Child Protection) or for those pupils who are receiving educational provision for less than 50% of their week should still be sought from the relevant Education Manager.

Lead Professionals should record and store wellbeing information and/or Level 1 CYPPs on SEEMiS within Dundee City Council.

TATC Level 2

A TATC Level 2 meeting should be convened when the Lead Professional's assessment is that there are insufficient resources within the single agency to address the Wellbeing Concern(s) and that one or more targeted interventions from other service providers that require significant co-ordination are necessary. For example a Lead Professional within Education services may assess that a Health Practitioner and a Voluntary Sector agency may play an important role as Partners to the CYPP. Similarly a Lead Professional within Health may assess that a Nursery Head Teacher and a Voluntary Sector agency may play an important role as Partners to the CYPP. An Options referral can also be discussed and made at Level 2 for a young person.

It is important to note at this stage that the Team Around the Child Single Planning Process is designed to be integrated and inclusive. This means that the Lead Professional can contact any agency from the Statutory or Voluntary sectors and make a reasonable request for their assistance, or attendance at a TATC meeting, as potential Partners to a Child's Plan regardless of whether or not that agency has prior knowledge of the child, young person or family. If a Request for Assistance is made the service provider, must comply with the request unless to do so would be incompatible with other duties or unduly prejudice the exercise of any function of the relevant or listed authority.

An important task for the TATC Level 2 meeting is to allocate a Lead Professional who will construct, co-ordinate, review and communicate with all partners involved the CYPP that will emerge. It is important to note that there will only be one CYPP. This does not exclude other specialist assessments taking place, or if there is a Co-ordinated Support Plan in place, but they must be incorporated into the single CYPP.

Statutory CYPPs will be recorded and stored on MOSAIC within Dundee City Council. Health will have access to MOSAIC through an appropriate portal if they are partners to a CYPP that is recorded and stored on MOSAIC.

TATC Level 3

A Level 3 TATC is where the voluntary integrated approach implemented at Level 2 has not resolved the issues and the wellbeing concerns will have escalated or the child may be deemed to be at risk. At this stage referral to the Scottish Children's Reporter Administration or to Options is being seriously considered. An Options referral for LAC and children whose names are on the Child Protection Register should be discussed at Level 3 or 4.

If a level 2 TATC meeting considers after exhausting all other reasonable possibilities, a referral for compulsory measures ie to the Scottish Children's Reporter Administration is advisable, discussion in the first instance should be sought with the Social Work Duty Team Manager at Care and Protection Intake Services, Seymour House (01382 307940). The Social Work Duty Team Manager will then take a decision about whether or not the situation meets Social Work criteria for referral and if so, will attend the TATC Level 3 meeting. If agreement cannot be reached between the current Lead Professional at Level 2 and the Social Work Duty Team Manager, then reference should be made appropriate line managers.

Given the possibility of compulsory measures, consideration should be given to whether or not Social Work representation is appropriate at the TATC meeting. **If a child protection concern/incident is noted at any time then a referral should be made immediately to MASH. Do not wait until the TATC meeting.**

Dispute resolution/arbitration can happen at any TATC level in relation to the involvement of any service requested by the Lead Professional. The same process as outlined above will take place.

TATC Level 4

In line with the principles of the Children and Young People (Scotland) Act, TATC is Dundee City's single planning process supporting a single CYPP. This means that meetings held in relation to children and young people subject to compulsory measures and whose names are on the Child Protection Register will also be part of the process.

Meetings for these children and young people eg LAC Reviews and Child Protection Case Conferences will be held at Level 4 of the TATC process. Guidance and an expanded Process Map for Level 4 TATC meetings will be included in an updated version of this guidance.

REVIEWING THE TATC MEETING

After the TATC meeting has taken place, and in advance of any review date set, it is good practice to maintain contact with the child/young person and their family to monitor the progress of what has been agreed at the TATC meeting. This will ensure that the child/young person and their family are partners to their own plan which will make achieving good outcomes much more likely.

If a partner agency is considering ending their involvement, a review TATC meeting should be held particularly if that agency are providing the Lead Professional role. The review TATC meeting should consider the implications for the CYPP of any agency ceasing to be a partner to the plan and review the plan accordingly. It is particularly important for a child/young person and their family that they are aware of who their new Lead Professional is (if required) or whether the Lead Professional is to resume the main responsibility for the CYPP or any continuing support if the CYPP is closed.

Agencies should not unilaterally withdraw from being Plan Partners or Lead Professionals without a TATC meeting to discuss the implications of this for the CYPP and the child or young person and their family.

ADMIN SUPPORT

TATC Administration will provide admin support to coordinate invites to TATC Level 2 and 3 meetings. Where possible, they will also attend TATC Level 2 and 3 meetings to provide admin support.

If admin support is not available or you do not wish to use central admin support, then the Lead Professional should identify the Chair and minute taker for the meeting.

The CYPPs noted from Level 2, 3 and 4 meetings will be securely held on MOSAIC. This is for self-evaluation, quality assurance and continuous improvement purposes and will ensure a database is established that can be used to monitor outcomes that emerge for children and young people on a longer term basis. This will also help us identify gaps in services and resources and highlight good practice examples.

WHO SHOULD ATTEND A TATC MEETING

The Team Around the Child is exactly that! It is to establish or review a Child's Plan with the **child at the centre** of that planning process. All partners to the CYPP should attend the TATC meeting, including the child/young person and their family. Only those who are directly involved in providing support to the child/young person and their family should be in attendance or those who the Named Person or Lead Professional is of the opinion can enhance the TATC process. This is specifically intended to make the process as meaningful as possible for the child/young person and their family.

Please note that it may be appropriate in certain circumstances ie if wellbeing concerns are significant but have not yet met the level of Child Protection to convene a TATC meeting to discuss wellbeing concerns even if a parent/carer or child/young person declines to attend. The Named Person/Lead Professional or another Plan Partner can then feedback the outcome of the meeting to the child/young person and their family, share the CYPP with them and elicit any opinion the family might have.

This guidance is intended for the TATC process as it is in operation currently ie April 2018. We intend to learn from good practice experiences and will amend this guidance accordingly.

Should you have any comment OR suggestion in terms of improving this guidance please forward to ics.team@dundee.gov.uk

