

REPORT

Carers Strategy – Performance and Evaluation Year 1 Report

Performance and Development Committee

02 March 2022

Executive Summary	<ol style="list-style-type: none"> 1. The purpose of this report is to provide the Performance and Delivery (P&D) Committee with: <ol style="list-style-type: none"> a. Detail on performance against the Key Performance Indicators, associated with delivering the agreed six key priority areas of the Carers Strategy. b. A summary of the spend plan of the Edinburgh Joint Carer Strategy 2019-22. 2. The Year 1 Report covers the period January to December 2021.
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Recommendations	<ol style="list-style-type: none"> 1. It is recommended that the P&D Committee: <ol style="list-style-type: none"> a. Consider the Year 1 Report and note the areas where performance has been impacted by the COVID-19 pandemic. b. Refer the Year 1 Report to the Edinburgh Integration Joint Board (EIJB).
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Directions

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

The extant Direction is **to continue implement the Edinburgh Joint Carers Strategy 2019-22 and associated implementation plans.**

Report Circulation

1. The Year 1 Report content has been discussed with the Executive Management Team, and the Edinburgh Carer Strategic Planning Partnership in advance of the P&D Committee.
2. At the March Committee, there will be a short presentation to complement the Year 1 Report, highlighting the key achievements, challenges, and next steps.

Main Report

3. The EIJB on 20 August 2019 ratified the Edinburgh's Joint Carers Strategy and implementation plans. Subsequently, the Performance and Evaluation Framework was discussed at Performance and Delivery Committee, with it being agreed that following further co-production with carer organisations, the year 1 Report would be delivered one year after the contract award. This will be further developed based on learning from collating information for the Year 1 Report.
4. The purpose of the Year 1 Report, is to revisit the key priority areas, and intentions within the Edinburgh Joint Carers Strategy 2019-22, providing an overview of progress associated with the original key performance indicators, (Appendix 1), in the year January – December 2021, in supporting unpaid carers, since the contracts for enhanced carer supports were awarded in January 2021.
5. The overarching spend plan, was ratified at March 2021 EIJB. The contract award was delayed owing to covid-19 pandemic, and was awarded in January 2021. The overview of the spend plan, and adjustments made owing to impact of covid-19 pandemic is described in Appendix 2.
6. The information in the Year 1 Report has been provided by our valued partners across both voluntary and statutory sectors, who have responsibility, through the awarded contracts, to provide much needed meaningful support for carers, and they are commended for their dedication and commitment to carers.
7. The Edinburgh Health and Social Care Partnership (EHSCP), Strategic Carer Partnership Group oversees the implementation of the strategy, and has provided comment the Year 1 Report, to ensure it reflects the efforts of all providers in delivering support for carers in what has been the most challenging of times over the last few years.
8. The Year 1 Report, (Appendix 3), summarises the key information set out in the Joint Carer Strategy, including our priority areas and guiding principles, and highlights some of the key challenges over the last few years associated with the covid-19 pandemic, impacting in particular, ability of people attending as drop in support and information, the level of face to face group and peer supports, our ability to provide planned breaks

from caring to the extent that had been planned, and the delay in the wide spread implementation of the Adult Carer Support Plans, and associated support.

9. The main part of the Year 1 Report indicates how carers have been supported across the six priority areas highlighting what the key challenge is for each priority area, what we said we would do, what has been achieved, and, draws on carer experience to highlight the difference support has made to them. Quotes from carers are also included throughout the Year 1 Report to provide an insight to qualitative aspects of how valuable carers support is to them.
10. The table below provides a summary of the RAG status against the total number of KPIs. Given the priority in the last year has been providing direct support for unpaid carers, there are a number of more detailed data sets associated within the priority areas under development. These will be progressed and reviewed based on the learning from year 1, and inform the Year 2 performance and evaluation framework. This will be undertaken through the Carers Strategic Partnership Group:

Table 1: Summary of Performance against Carer Strategy

Green	Green +	Green ++	Green +++	Amber	Red	Further detailed data under development	Total KPI
Fully Met	slightly exceeded	exceeded to a greater extent	considerably exceeded	underway, making reasonable progress	underway with minimal progress		
61	10	11	4	21	1	22	130
66.1%				16.2%	0.77%	16.9	

11. Despite the challenges faced, all of the priority areas has seen good levels of provision, and in some instances exceeding what was planned, with the exception of the highlighted areas above, that relied on face to face support. There is one red status area, which was a minimal number of people dropping into centres for advice and information, given that for the majority of the year, the centres themselves were closed. This has been counteracted by the enhanced level of telephone and other supports provided, against the same priority area.
12. The amber status areas have key actions indicated to achieve improvements going forward. This includes a particular focus on one to one and peer support across each of the four localities, where the same KPI applies.
13. Other key focus areas will include providing an increase in utilisation of the short breaks fund, for planned breaks, which despite the challenges of availability, carers were supported to just over 80% of the target. This has also been counteracted somewhat through the creative and flexible approach of providers, where day and

evening short breaks provision far exceed the target of 40 breaks, with 144 breaks being supported.

14. The wider roll out of the Adult Carer Support plans and increase in any associated payments will be another key focus area going forward. Key actions associated with progressing these aspects are detailed in Appendix 1.
15. The table below summarises the performance for each of the Lots and priority areas. As highlighted above, if the four KPIs in Lot 2 associated with locality support was measured as a city-wide provision, the report would have seen a reduction from 12 amber, to 3 amber RAG.

Table 2: Summary of KPI Performance against Carer Strategy

Lot/Priority Area	Green	Green +	Green ++	Green +++	Amber	Red	Further Detailed Data under development	Total KPIs
Lot 1 Identifying Carers/ Information & Advice	2	6	5	0	1	1	4	20
Lot 2 Health and Wellbeing	15	1	4	0	13	0	8	41
Lot 3 Short Breaks Programme	5	0	1	1	0	0	4	11
Lot 4 Short Breaks Fund	5	0	0	0	3	0	0	8
Lot 5 Edinburgh Integrated Support Team	10	0	0	0	8	0	6	24
Lot 6 Young Adult Carers	8	0	1	1	2	0	0	12
Lot 7 Young Carers (delivered through CEC C&Fs contract awards)	2	3	0	0	1	0	0	6
Lot 8 Parent Carers	14	0	0	2	1	0	0	17
TOTALS	61	10	11	4	21	1	22	130

Source: provider returns at Dec 2021

Implications

Financial Implications

16. The carer budget and spend plan was agreed at the EIJB in February 2021, indicating a total of £35.4m over 5 years:

Table 3: Carers Strategy 5 year budget

	2021/22 £m	2022/23 £m	2023/24 £m	2024/25 £m	2025/26 £m
Total funding available	5.84	7.51	7.51	7.51	7.51

17. The initial plan for 2021-22, indicated in the February 2021 EIJB paper highlighted that the budget was fully committed:

Table 4: Agreed Spend Plan for 2021-22 against Priority Areas

	2021/22 £m
Identifying Carers and Information & advice	1.22
Health and Wellbeing	0.63
Short Breaks	0.59
Young Carers	0.51
Personalising support	2.75
Contingency and Innovation	0.14
Total	5.84

18. Overall, the year has been challenging, given the nature of pandemic restrictions, and uncertainty about them easing, and then being reinstated, resulting in uncertainty for providers around availability of supports and staff. As indicated above, there has been impact has been associated with face to face support, planned

breaks from caring, and progressing the development and roll out of the Adult Carer Support Plans, and support.

19. The spend position was being monitored, with the forecast for year end more clearly indicating the level of funding associated with the areas where spend was just not possible the way intended. The response from all providers, and the carer support community throughout the pandemic, has been tremendous, and commended as indicated above, and is evident within the Year 1 Report, with creativity, changing forms of support, according to availability of staff and restrictions, allowing as much support as possible to be delivered for carers.
20. Of the £5.84m, it was forecast that 87.5% of the budget, just over £5.1m, would be committed, with the remaining uncommitted element of 12.5% equating to £730.4k, as indicated below:

Table 5: Projected Forecast of Carer Spend 2021-22

	2021 -22 Available Budget	Projected spend at P7	Projected unallocated at P7
TOTAL	5,841,116	5,110,716	730,400
%		87.5	12.5

Source; CEC Finance

21. Various discussions took place to determine how the unspent funding could be allocated in year, to optimise much needed support for carers. Appendix 2b, highlights how the £730k is being committed, and associated benefits, including aspects are being brought forward (49k); aspects that will enhance current provision, (£618k); and a minimal a carry forward element to 2022-23 (£63k =1.2% of total budget). Key spend areas include:
 - Bringing forward the 2022-23 plan to enhance advocacy provision for carers
 - Fulfilling the Carers Strategic Partnership Group request to secure more Planning and Commissioning Officer time, to allow a keen focus on developments, monitoring and recording going forward, given the complexity of the portfolio
 - Contributing to the funding of the VOCAL led carer survey, published in November 2021
 - Enhancing current provision, with one off payments, including:
 - matching City of Edinburgh Council's pledge of £250k bringing the Carer recovery fund
 - more generic Grant funded activity, where carers benefit, by 30% uplift of previous transitional grants
 - Lot 3, short breaks programme, as demand began to exceed supply, as provision remobilised
 - Lot 4 Short Breaks Fund, which is allocated directly to carers to support their requirement for short break and break from caring



- Lot 6, and the ability to reaching and supporting Young Adult Carers, aligning the 2021-22 value to the subsequent 3 years.
- Expediting the roll out of ACSPs and enhance how Lot 5 carer payments are allocated for an anticipated surge in spring 2022, with an additional allocation for this activity carried forward to 2022-23, to manage the surge, (63k = 1.2% of total budget)

Legal / risk implications

22. There is a risk of non-compliance with one of the duties of the Carers (Scotland) Act 2016 duty associated with *the offer and preparation of an adult carer support plan (ACSP), to identify carers' needs and personal outcomes*. A keen focus in the coming year will ensure much more widespread roll out of the ACSP, and subsequent needs being met and any associated carer payments being made.

Equality and integrated impact assessment

23. Edinburgh Joint Carer Strategy 2019-22 was subject to full impact assessment, with associated actions undertaken as part of that process. The upcoming refreshment of the strategy will be subject to the same process.

Environment and sustainability impacts

24. Social sustainability is an essential element of a sustainable city. The Year 1 Report outlines how providers contribute to a sustainable Edinburgh by helping improve the personal wellbeing of residents, ensuring carers who have a spectrum of issues affecting them are supported, those with mental health and wellbeing, alcohol and substance misuse issues, for example, helping to meet the diverse needs of communities.

Quality of care

25. There is no impact on quality of care arising from this report. The quality of supports provided have been subject to evaluation associated with the commissioning, procurement and grants processes.

Consultation

26. As part of the development of the Edinburgh Joint Carer Strategy, carers, families, and colleagues across both voluntary and statutory sectors were engaged, involved and consulted with, to inform the key priority areas, which the Year 1 Report contributes to.
27. The information in this report has been provided by our valued partners across both voluntary and statutory sectors, who have responsibility, through the awarded contracts, to provide much needed meaningful, and enhanced levels of support for carers.

28. As part of ongoing engagement and involvement, the recent VOCAL survey, reported in November 2021, indicates ongoing alignment with the key priority areas in the Carer Strategy, and is highlighted in more detail in the Year 1 Report. The EHSCP has agreed, through the Carer Strategic Partnership Group, to fund this process every 2 years, with the voluntary sector leading the co-design, for the next iteration in 2023.

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Background Reports

N/A

Appendices

Appendix 1	Performance against the priority areas, and original KPIs for the Joint Carer Strategy, agreed 2019.
Appendix 2a	2021-22 Carers Agreed Plan, Spend and Forecast at Period 7
Appendix 2b	Allocation of Carer Unspent Funds 2021-22, and associated benefits
Appendix 3	Edinburgh Joint Carers Strategy 2019-22, Year 1 Performance and Evaluation Report

Appendix 1 – Performance against 6 priority areas, recorded KPIs, RAG Status and actions

Lot 1 - Identifying Carers						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement & Next Steps	RAG Status
Employer support	Year 1	20 Employers	Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support	No. of employers supported	23 Employers supported	+
				No. Employers who achieve carer positive award	13 agencies either Engaged, Established or Exemplary	+
Workplace Carer Support	Year 1	Minimum of 120 carers supported in employment		No. and % of carers supported in paid employment	178 Carers supported in Employment (10.62% of carers)	++
				No. and type of supports carers are connected to following contact with service	Further detailed data under development	
Health and Social care Workforce Training	Minimum 24 sessions per year			No. of Health and Social Care workers trained.	47 “Think Carer” sessions delivered/ 1136 practitioners reached	++

Lot 1 - Information & Advice						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement & Next Steps	RAG Status
Drop-in information and advices session	Minimum 48 city wide sessions per year		Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support	No. carers accessing drop-in service	Minimal owing to covid – numbers expected to increase following restrictions easing further	
	Minimum of 48 sessions per locality per year					
	Minimum of 960 hours Daily telephone advice service		Carers know how to connect to information and advice	No. of telephone enquiries	2854 overall enquiries P&E framework development in year 2	+
	Year 1-2	2400 carer enquiries per year		No. Overall enquiries	2854 overall enquiries P&E framework development in year 2	+
	Of which 5% carers should be carers of someone whose			No. and % carers supporting someone with	60 Carers supported (16% Mental Illness)	++

One to one carer information and advice	Year 1-2	960 carers supported per year	Carers are well informed about their rights and how to access support Carers report economic wellbeing	addiction or mental illness	7.6% Addiction)	
				No. and type of supports carers are connected to following contact with service	1426 carers going on to receive various forms of support	
				No. and % of carers who advise of clear pathway to accessing information	Further detailed data under development	
				No. of carers supported	1891 Carers supported overall	++
				% Carers satisfied with support	Further detailed data under development	
				No. Adult Carer Support Plans	460 total for Edinburgh – Roll Out expected early 2022	
				Caring situation i.e. Caring for someone with	All caring situations supported	

				Dementia, addictions, mental health etc.		
Welfare Benefits and Financial Planning	Minimum of 360 carers per year			No. and % Carers supported who have maximised benefit entitlement	456 (24%) carers supported	+
				Total amount of benefits accessed for carers	£863,039 total benefits accessed	++
Carer Map and access to 24/7 information and advice	Carer map of supports to be live by end of year 1 of contract			Carer map live and accessible Annual hits to online information and advice	Further detailed data under development	
Carer training	Minimum of 230 training sessions per year			No. carers trained Type of training accessed	253 various Training Sessions delivered	+
				% carers satisfied with training	100%	

Lot 2 - Health and Wellbeing						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement & Next Steps	RAG Status
Peer and Group Based Support – city wide	96 sessions per annum	Year 1 & 2 = 245 carers	Carers are supported to look after their own physical, mental, emotional, and social wellbeing	No. of groups offered	62	
				No. carers accessing groups	414	++
	672 hours per annum	Carers feel listened to and heard as individuals	Types of groups offered	Mental health, addictions, Physical and/ or Learning disabilities, dementia, Employment, Previous carers, multiple caring roles		
			Carer stories of difference	See main report		
			No and % carers being supported to engage in activities that improve their wellbeing.	1950 (73%)		
		Carers feel well supported throughout their caring journey				

Learning and Development opportunities for health and wellbeing	144 sessions per annum			No. of hours delivered	In excess of specs (see below)	++
				No. sessions delivered	245	++
				No. carers accessing	579	++
				Type of sessions delivered	managing stress and anxiety- dealing with anger- changing relationships- sleep nutrition, healthy balanced diet - physical activity	
Counselling for Carers	Year 1	650 sessions		Carer stories of difference	See main report	
				No. counselling sessions provided	675	+
				No. carers supported	61	

				Carer stories of difference	See main report	
North West Locality 1:1 support, peer and group-based support	Year 1 & 2 = 300 carers per annum			No carers supported	405 Total for Edinburgh (101 average per locality)	
				No sessions delivered	222 Total for Edinburgh (55.5 average per locality)	
				Types of support delivered	building confidence in the caring role; keeping carers well informed about issues relevant to their caring role; offering carers practical and emotional support;	
				No. emergency plans completed	Further detailed data under development	
				No. ACSP's completed	460 total for Edinburgh – Roll Out expected early 2022	
				Carer stories of difference	See main report	

			No and % carers being supported to engage in activities that improve their wellbeing	Further detailed data under development	
North East Locality 1:1 support peer and group-based support	Year 1 & 2 = 215 carers per annum		No carers supported	405 Total for Edinburgh (101 average per locality)	
			No sessions delivered	222 Total for Edinburgh (55.5 average per locality)	
			Types of support delivered	building confidence in the caring role; keeping carers well informed about issues relevant to their caring role; offering carers practical and emotional support;	
			No. emergency plans completed	Further detailed data under development	
			No. ACSP's completed	460 total for Edinburgh – Roll Out expected early 2022	

			Carer stories of difference	See main report	
			No and % carers being supported to engage in activities that improve their wellbeing	Further detailed data under development	
South East Locality 1:1 support peer and group- based support	Year 1 & 2 = 215 carers per annum		No carers supported	405 Total for Edinburgh (101 average per locality)	
			No sessions delivered	222 Total for Edinburgh (55.5 average per locality)	
			Types of support delivered	building confidence in the caring role; keeping carers well informed about issues relevant to their caring role; offering carers practical and emotional support;	
			No. emergency plans completed	Further detailed data under development	

			No. ACSP's completed	460 total for Edinburgh – Roll Out expected early 2022	
			Carer stories of difference	See main report	
			No and % carers being supported to engage in activities that improve their wellbeing	Further detailed data under development	
South West Locality 1:1 Support peer and group-based support	Year 1 & 2 = 225 carers per annum		No carers supported	405 Total for Edinburgh (101 average per locality)	
			No sessions delivered	222 Total for Edinburgh (55.5 average per locality)	
			Types of support delivered	building confidence in the caring role; keeping carers well informed about issues relevant to their caring role; offering carers practical and emotional support;	

			No. emergency plans completed	Further detailed data under development	
			No. ACSP's completed	460 total for Edinburgh – Roll Out expected early 2022	
			Carer stories of difference	See main report	
			No and % carers being supported to engage in activities that improve their wellbeing	Further detailed data under development	

Lot 3 - Short Breaks Programme						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement	RAG Status
Planned Short Breaks Programme - Day and Evening Breaks	Year 1	40 carers Supported, Min 4 events	Carers feel safe, rested and recharged Carers are supported to have a life outside and/or alongside their caring role Carers feel supported to maintain their caring relationships and sustain their caring role.	No. carers supported	144	+++
				% new carers	75 total for lot 3 (35%)	
				No. day/evening sessions	20+	
				No. and % carers reporting improvements in their health and wellbeing	Further detailed data under development	
				No. and % carers reporting improvement in their caring relationship	Further detailed data under development	
Planned Short Breaks Programme -	Year 1	35 Carers Supported		No. carers supported	67	++
				% new carers	75 total for Lot 3 (35%)	

Residential Breaks				No. Residential Breaks	9 stepping out Various via other means	
				No. of short break nights provided.	36+	
				No. and % carers reporting improvements in their health and wellbeing	Further detailed data under development	
				No. and % carers reporting improvement in their caring relationship	Further detailed data under development	

Lot 4 - Short Breaks Fund						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement	RAG Status
Short Breaks Fund	Year 1	100 carers	Carers feel safe, rested and recharged	No applications received	84	Yellow
			Carers are supported to have a life outside and/or alongside their caring role	No. of applications approved	83	Yellow
				No. new carers funded	83	Yellow
				lowest value of funded application	£38	Green
				Highest funded application	£500	Green
				Average funded application	£383	Green
				No. and % cares reporting improvements in their health and wellbeing	31 - 95%	Green
				No. and % carers reporting improvement in their caring relationship	31 - 95%	Green
Carers feel supported to maintain their caring relationships and sustain their caring role						

Edinburgh Integrated Carer Support Team – 5a North East						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement	RAG Status
Edinburgh Carer Support Team	Year 1	150 carers supported	Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support	No. carers supported	109 (95 new)	Green
			<p>Carers are supported to look after their own physical, mental, emotional, and social wellbeing</p> <p>Carers feel listened to and heard as individuals</p> <p>Carers feel well supported throughout their caring journey</p> <p>Carers are involved in support planning in the community and</p>	Type of support provided	<p>Short breaks or respite; Advice & information; Counselling or emotional support; Assistance with benefits, e.g. Carer's allowance; Peer support / Group activities; Advocacy; Emergency Planning; Future Planning</p>	

			<p>from hospital and have a choice of options to meet their own needs and the person they care for. Carers are confident in shaping services for themselves and those they support and are more in control of the support they receive.</p>	No. ACSP	3-Pilot 460 total for Edinburgh – Roll Out expected early 2022	
				No. Emergency plans	10	
				No. hours direct contact time	Further detailed data under development	
				Carer feedback/stories of difference	See main report	

Edinburgh Integrated Carer Support Team – 5b North West						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement	RAG Status
Edinburgh Carer Support Team	Year 1	150 carers supported	Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support	No. carers supported	91	
			Carers are supported to look after their own physical, mental, emotional, and social wellbeing	Type of support provided	Short breaks or respite; Advice & information; Counselling or emotional support; Assistance with benefits, e.g. Carer's allowance; Peer support / Group activities; Advocacy; Emergency Planning; Future Planning	
			Carers feel listened to and heard as individuals	No. ACSP	460 total for Edinburgh – Roll Out	
			Carers feel well supported throughout their caring journey			
			Carers are involved in support planning in the community and from hospital and have a choice of options to meet their own needs and the person they care for			

			Carers are confident in shaping services for themselves and those they support and are more in control of the support they receive		expected early 2022	
				No. Emergency plans	Further detailed data under development	
				No. hours direct contact time	Further detailed data under development	
				Carer feedback/stories of difference	See main report	

Edinburgh Integrated Carer Support Team – 5c South East						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement	RAG Status
Edinburgh Carer Support Team	Year 1	150 carers supported	Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support	No. carers supported	80	
			Carers are supported to look after their own physical, mental, emotional, and social wellbeing	Type of support provided	Short breaks or respite; Advice & information; Counselling or emotional support; Assistance with benefits, e.g. Carer's allowance; Peer support / Group activities; Advocacy; Emergency Planning; Future Planning	
			Carers feel listened to and heard as individuals	No. ACSP	460 total for Edinburgh – Roll Out	
			Carers feel well supported throughout their caring journey			
			Carers are involved in support planning in the community and from hospital and have a choice of options to meet their own needs and the person they care for			

			Carers are confident in shaping services for themselves and those they support and are more in control of the support they receive		expected early 2022	
				No. Emergency plans	Further detailed data under development	
				No. hours direct contact time	Further detailed data under development	
				Carer feedback/stories of difference	See main report	

Edinburgh Integrated Carer Support Team – 5d South West						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement	RAG Status
Edinburgh Carer Support Team	Year 1	150 carers supported	Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support	No. carers supported	104	
			Carers are supported to look after their own physical, mental, emotional, and social wellbeing	Type of support provided	Short breaks or respite; Advice & information; Counselling or emotional support; Assistance with benefits, e.g. Carer's allowance; Peer support / Group activities; Advocacy; Emergency Planning; Future Planning	
			Carers feel listened to and heard as individuals	No. ACSP	460 total for Edinburgh – Roll Out	
			Carers feel well supported throughout their caring journey			
			Carers are involved in support planning in the community and from hospital and have a choice of options to meet their own needs and the person they care for			

			Carers are confident in shaping services for themselves and those they support and are more in control of the support they receive.		expected early 2022	
				No. Emergency plans	38	
				No. hours direct contact time	Further detailed data under development	
				Carer feedback/stories of difference	See main report	

Lot 6 - Young Adult Carers					
Activity	Minimum Level	Outcome for Carers	Indicators/Measures	Achievement	RAG Status
Identifying Carers	8 information days across all five FHE providers annually	Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support	No. of information days	21	++
			No. young adult carers identified in FHE setting	4	
Health and Wellbeing	Minimum of 100 young adult carers supported per year	Carers know how to connect to information and advice	Total no. carers supported	83	+++
		Carers are well informed about their rights and how to access support	No. New Carers supported	55	
		Carers report economic wellbeing	No. 1:1 sessions	702	
		Carers are supported to look after their own physical, mental, emotional, and social wellbeing	No. of groups offered	107	
		Carers feel listened to and heard as individuals	No. carers accessing groups	75	
			Types of groups offered	Employability	
				Independent living	

		Carers feel well supported throughout their caring journey Carers are involved in support planning in the community and from hospital and have a choice of options to meet their own needs and the person they care for.		Activity agreements	
			Carer stories of difference	See main report	
			No and % carers being supported to engage in activities that improve their wellbeing	75 carers (90%) report wellbeing improvement	
Young Carer Statements & Adult Carer Support Plans	Minimum of 100 Young Care Statements or Adult Carer Support Plan completed.	Carers are confident in shaping services for themselves and those they support and are more in control of the support they receive.	No. Young Carer Statements	10 (YCS rolled out from 6-month point)	
			No. Adult Carer Support Plans	2 pilot - 460 total for Edinburgh – Roll out expected early 2022	

Lot 7 - Young Carers				
Activity	Minimum Level	Indicators/Measures	Achieved	RAG Status
Schools Support	120 Schools	No of schools with Young Carer Coordinators	124	
		No of staff attending CPD training	187 staff	
Young Carer Statements	Year 1 (Sep 20 – Aug 21) 821 statements completed	No of Young Carers receiving a Statement	52 started not completed 67 completed	+
Young Carers Grants Fund	40 Grant awards made	No of Young Carers receiving a grant	28 (YCS only in use since June 21)	
Support to Young Carers	Year 1 (Sep 20 – Aug 21) 738 Young carers supported	No. of groups offered	715	+
		No. young carers accessing	757	+

Lot 8 - Parent Carers						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement	RAG Status
Information and Advice enquiries	Provide information and advice to a minimum of 600 parent carers per year		Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support	No. of carers supported	1052	+++
	Financial Planning and Welfare benefit support		Carers know how to connect to information and advice	% Carers satisfied with support	100%	
	Year 1	120 carers	Carers are well informed about their rights and how to access support	No. and % Carers supported who have maximised benefit entitlement	376 carers (35%)	+++
			Carers report economic wellbeing	Total amount of benefits accessed for carers	£389,404	

Adult Carer Support Plans	Year 1	Min 330 plans	<p>Carers are involved in support planning in the community and from hospital and have a choice of options to meet their own needs and the person they care for.</p> <p>Carers are confident in shaping services for themselves and those they support and are more in control of the support they receive.</p>	No. adult carer support plans completed	460 total for Edinburgh – Roll out expected early 2022	
				Type of support required	Short Breaks, Information and advice, Practical support, Counselling/ emotional support, Training and learning, Assistance with Benefits, Group support, Advocacy, Emergency Planning, Future Planning	
				No. new carers to the service	505	
Health and Wellbeing	Year 1	Support min 250 carers	Carers are supported to look after their own physical, mental, emotional, and social wellbeing	No. of groups offered	17	
				No. carers accessing groups	58	
				Types of groups offered	Benefits for School Age Kids x2; Song and Rhyme; ASN child -	

			<p>Carers feel listened to and heard as individuals</p> <p>Carers feel well supported throughout their caring journey</p>		<p>challenging behaviour x2; Benefits for School Age Kids; Caring for a child with learning difficulties; Craft for parent carers; ASN child sleep; Not fine in school x 2; Parent Carers open Session; Craft Workshop for parents and Kids; Surviving the festive season as a parent carer; Paediatric first aid; Child gaming and gambling; Taking Care of Mental Health and Wellbeing for Carers of disabled children</p>	
				Carer stories of difference	See main report	

			No and % carers being supported to engage in activities that improve their wellbeing	438 (41%)	
			No carers supported	438	
			No sessions delivered	14	
			Types of support delivered	Short Breaks, Information and advice, Practical support, Counselling/ emotional support, Training and learning, Assistance with Benefits, Group support, Advocacy, Emergency Planning, Future Planning	
			No. emergency plans completed	2	

Appendix 2a – Forecast Spend against Agreed Spend at P7

Priority Area and activity	Agreed Spending Proposals per Feb 21 EIJB £	Forecast Spend £	Forecast Unallocated £
Identifying Carers & Information and Advice			
Contracted services (Lot 1, 6 and 8)	942,235	940,025	2,209
Communication and Engagement	20,000	0	20,000
EIJB Grant funded services	94,914	94,914	0
EHSCP Hospital Discharge Carer support team	158,020	158,020	0
Priority total	1,215,168	1,192,959	22,209
Carer Health and Wellbeing			
Contracted services (Lot 2)	490,523	490,494	29
EIJB Grant funded services	140,869	137,792	3,077
Priority total	631,392	628,286	3,106
Short Breaks			
Contracted services (Lot 3 and 4)	147,649	139,171	8,478
EIJB Grant funded services	98,185	98,185	0
Short Breaks Strategy	340,000	0	340,000
Priority total	585,834	237,356	348,478
Young Carers			
Contracted services	514,065	514,056	9
Personalising Support			
Contracted services (Lot 5a, 5b, 5c and 5d)	146,508	143,633	2,875
Hospital Discharge Carer Support Team	368,712	368,712	0
Estimated Carer Payments (linked to ACSP)	235,938	25,714	210,223
Replacement Care - contributions to Purchasing Budget	2,000,000	2,000,000	0
Priority total	2,751,158	2,538,059	213,099
Other activity			
Performance and Evaluation	43,500	0	43,500
Contingency Fund	100,000	0	100,000
Priority total	143,500	0	143,500
TOTAL	5,841,116	5,110,716	730,400
%		87.5	12.5

Source: CEC Finance: Period 7 Forecast 11.11.21

Appendix 2b - Allocation of Carer Unspent Funds 2021-22

Below is a table indicating how the £730k is proposed to be utilised including what has already been agreed (49k); the proposals to enhance current provision, (£618k); a carry forward element to 2022-23 (£63k). An outline of benefits is also indicated:

Table 2 – Spend Plan for Unallocated Carers Funding 2021-22

	Area of Proposed Spend	2021-22	Comments and Benefits
	Already Agreed		
1.	Bring forward allocation for independent advocacy for carers, as agreed at 11 Nov EMT, for 2021-22	34k	£34k, is split between two providers (PIA & Advocard), for 4 months activity for the remainder of 2021/22, up to March 2022 from uncommitted carer funds 2021/22, being proportionate to the new annual investment from April 2022. New Advocacy contract expires end July 2022. Allocation for Carers IA will be allocated thereafter. £34k committed April – July 2022 from 2022-23 allocation, to cover this period.
2.	Allocation to Carer specific PCO – Business Case ratified 2021, commencing Jan 2021, for last quarter of 2021-22	15k	New Older PCO planned to start Jan 2022, with Carer PCO working full time on Carers thereafter. Allocation yet to be accounted for given start of Jan 2022
	Section total	49k	
	Enhancing current provision	2021-22	Comments and Benefits
	One Off Payments		
3.	Match City of Edinburgh Council’s pledge of £250k bringing the Carer recovery fund to £500k to be delivered by partner agency VOCAL.	250k	Purpose: Personalising Support - Carer Payments “In recognition of the challenging impact the Coronavirus pandemic had on many carers and their families, the

			<p>City of Edinburgh Council approved a £250,000 Carers Recovery Fund in its 2021-22 budget to help carers and their families in greatest need.”</p> <p>Specifically targeting delivery of improved:</p> <ul style="list-style-type: none"> • opportunities for breaks from caring • personal health and wellbeing • economic (financial) wellbeing <p>The above has allowed VOCAL, to reach and support 600+ beneficiaries across Edinburgh, by matching this using unallocated funds, a further 600+ beneficiaries can be reached.</p> <p>An agreed allocation for the CEC grant reaches BAME and young carers. The same allocation will apply for the matched funding.</p>
4.	Enhance more generic Grant funded activity, where carers benefit, current total c£298k, by 30% uplift of previous transitional grants	90k	<p>Purpose: Personalising Support - Carer Payments</p> <p>Benefit to carers by aiming to address social isolation, promoting healthy lifestyles, improving mental wellbeing, supporting self-management of long-term conditions, Information and advice, income maximisation, reducing digital exclusion, building strong, inclusive and resilient communities.</p> <p>It has been reported that current grant providers have pent up demand</p>

			associated with covid, with carers benefiting greatly from provision.
5.	Uplift the current Lot 3, short breaks programme, as demand is currently exceeding supply.	100k	Purpose: Short Breaks Additional funding would allow Lot 3 provider to increase capacity and enhance opportunities for short breaks
6.	Uplift Lot 4 Short Breaks Fund, which is allocated directly to carers to support their requirement for short break and break from caring	60k	Purpose: Short Breaks Additional short breaks for carers, alleviating pressure for them, and preventing pressure to the purchasing budget
7.	Enhance Lot 6, and the ability to reaching and supporting Young Adult Carers, aligning the 2021-22 value to the subsequent 3 years. 2021-22 value = 40.8k subsequent years just over 72.2k, 73.4k, 74.5k	31k	Purpose: Short Breaks Young Adult Carers are one of the most marginalised carer groups, and enhancing Lot 6 would result in much needed short breaks for young carers
8.	EHSCP contribution to the survey carried out, and led by VOCAL	5k	
9	Additional 30% uplift to existing carer support grants from contingency funds	£82k	Purpose: Personalising Support Benefit to carers by aiming to address social isolation, promoting healthy

			lifestyles, improving mental wellbeing, supporting self-management of long-term conditions, Information and advice, income maximisation, reducing digital exclusion, building strong, inclusive and resilient communities.
	Section Total	618k	
Areas of Proposed Carry Forward to 2022-23			
10.	<p>Expedite roll out of ACSs and enhance how Lot 5 carer payments are allocated for an anticipated surge in spring 2022.</p> <p>Currently on 4-week trial basis, expected to be rolled out early 2022 increasing access to carer payments.</p> <p>Carry forward £100k to next year's budget for Carer Payments</p>	63k	<p>Purpose: Personalising Support- Carer Payments</p> <p>As restrictions continue to ease, Carers who have managed for so long with very little direct support are likely to come forwards more readily meaning demand for carer payments in the coming year could well be more than what is allocated.</p> <p>Carried forward allocation will allow Lot 5 to respond to anticipated surge in demand in early 2022.</p>
	Section Total	63k	
	TOTAL	730k	

Appendix 3 – Carers Strategy Priorities Year 1 Report 2021



Edinburgh **Health and
Social Care** Partnership



Working together for a caring,
healthier, safer Edinburgh



• EDINBURGH •
THE CITY OF EDINBURGH COUNCIL

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Introduction

The purpose of this Report is to revisit the key priority areas, and intentions within the Edinburgh Joint Carers Strategy 2019-22, providing an overview of progress in the year January – December 2021, in supporting unpaid carers, since the contracts for enhanced carer supports were awarded in January 2021.

The Report will summarise the key information set out in the Joint Carer Strategy, including our priority areas and guiding principles, and will highlight some of the key challenges over the last few years associated with the covid 19 pandemic, impacting in particular, our ability to provide breaks from caring, and wide spread implementation of the Adult Carer Support Plans.

The main part of the report will indicate how carers have been supported across the six priority areas highlighting what the key challenge is for each priority area, what we said we would do, what has been achieved, and, draws on carer experience to highlight the difference support has made to them. Quotes from carers are also included throughout this report to provide and insight to how valuable their support is to them.

In the main, most priority areas have met, and in some instances exceeded what was planned, with the exception of the two highlighted areas above, where actions to achieve improvements in these specific areas is highlighted.

The information in this report has been provided by our valued partners across both voluntary and statutory sectors, who have responsibility, through the awarded contracts, to provide much needed meaningful support for carers, and they are commended for their dedication and commitment to carers.

The Edinburgh Health and Social Care Partnership (EHSCP), Strategic Carer Partnership Group oversees the implementation of the strategy, and has provided comment on this report, to ensure it reflects the efforts of all providers in delivering support for carers in what has been the most challenging of times over the last few years.

Summary of key elements of Edinburgh Joint Carer Strategy 2019-2000

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

(Scottish Government)

The Edinburgh Health and Social Care Partnership (EHSCP), City of Edinburgh Council and NHS Lothian recognise the crucial contribution young and adult carers make to their communities across Edinburgh. A range of good quality support for all carers needs to be available at the right time and place.

Carers who are supported to carry out their role in a way that supports their own health and wellbeing are key to achieving the EHSCP’s vision to deliver together “a caring, healthier and safer Edinburgh” and Communities and Families vision for all children and young people in Edinburgh to enjoy their childhood and fulfil their potential.

The Joint Carers strategy, ratified by the Edinburgh integration Joint Board, and launched in 2019, was therefore informed by national and local context, and outlined, local priorities and associated areas for improvement, outcomes for carers, as well as details of the activities needed to achieve them. The strategy supports the EHSCP, and Communities and Families within City of Edinburgh Council, to demonstrate impact on Outcome 6 of the National Health and Wellbeing Outcomes;

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

The strategy remains focused on six priority areas:

1. Identifying carers
2. Information and Advice
3. Carer health and wellbeing
4. Short Breaks
5. Young carers
6. Personalising support for carers.

It also incorporates the duties placed on the EHSCP, Local Authority and NHS Lothian by the Carers (Scotland) Act 2016. The strategy was developed in partnership with the third sector and unpaid carers across Edinburgh and built on learning from the 2014-2017 Edinburgh Joint Carer Strategy (EJCS), and associated review.

The following section describes the influences that have developed the strategy, with further detail available in Appendix 1

Carers (Scotland) Act 2016

The Carers (Scotland) Act 2016 is designed to support carers' health and wellbeing and help make caring more sustainable. New duties for local authorities from 1 April 2018 include:

- The provision of support to carers, based on the carers' identified needs which meet the local eligibility criteria.
- The offer and preparation of an adult carer support plan and young carer statement to identify carers' needs and personal outcomes.
- The provision of an information and advice service for carers in areas such as; emergency and future care planning, advocacy, income maximisation and carers' rights.

The legislation is accompanied by a [Carers' charter¹](#) which sets out carers' rights under the Act.

In addition to the Carers (Scotland) Act 2016 there is a range of legislation and national policy that impacts on the delivery of this strategy, see fig 1 below.

Fig 1: Summary of national legislation and Policy relating to EJCS 2019-2022



¹ <https://www.gov.scot/publications/carers-charter/>

The Edinburgh Integration Joint Board's (EIJB) Strategic Plan 2019-2022²

The strategic plan sets out how health and social care services will evolve over the coming years so the EHSCP is an affordable, sustainable, and trusted health and social care system that takes a person centred, home first approach and optimises partnerships with the third and independent sectors. The plan focuses on four central elements that are mutually supporting:

- The definition of a modern Edinburgh Pact between health and social care providers and our citizens,
- The *Three Conversations* approach to facilitate and support people who need help and empower staff. The approach offers three clear and precise ways of interacting with people focusing on what matters to them. It recognises the power of connecting people to the strengths and assets of community networks, and the necessity to work dynamically with people in crisis.
- Continuing to shift the balance of care from hospital services to the community under the banner of *Home First*
- A Transformation Programme, led by senior managers across operations and strategy, which focuses on a broad range of services aimed at rapid redesign.

Carers are recognised as equal partners in care, supporting people of all ages in their own homes and community and in supporting the achievement of the EHSCP's vision.

² https://consultationhub.edinburgh.gov.uk/hsc/draft-strategic-plan-2019-2022/supporting_documents/EIJB%20Draft%20Strategic%20Plan%20201922.pdf

Definition of a Carer

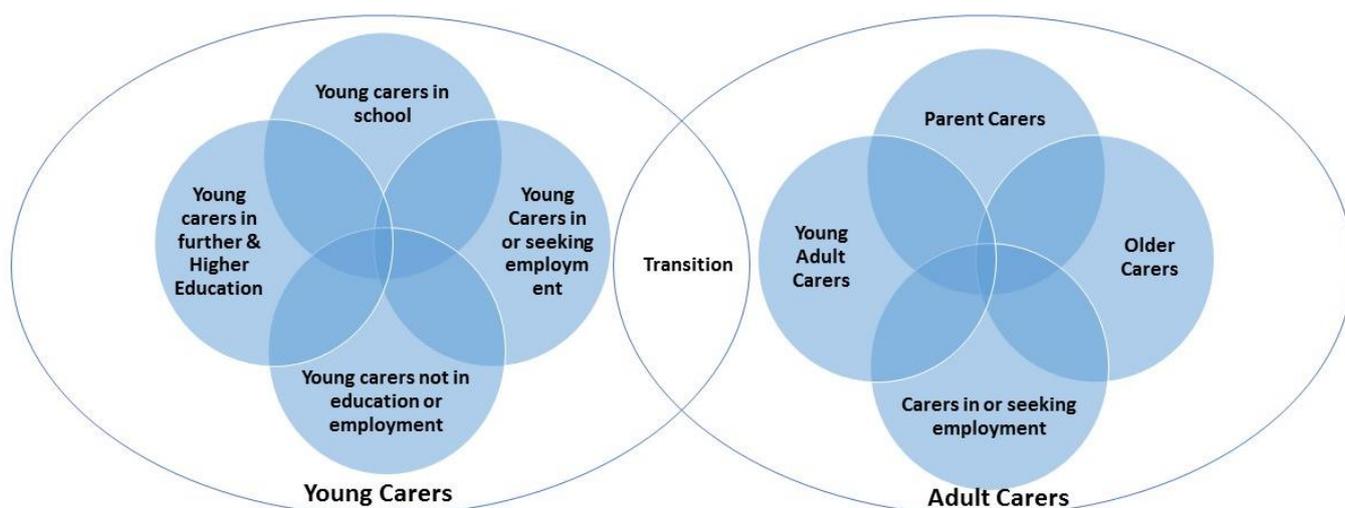
This strategy has adopted the following definition of a carer:

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

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

- A young carer is a carer who is under 18 years old or is 18 years old and is still at school.
- An adult carer is a carer who is at least 18 years and not a young carer.

Fig 2: Range of different carer life stages, all of which may have a degree of shared needs and/or needs specific to their caring situation.

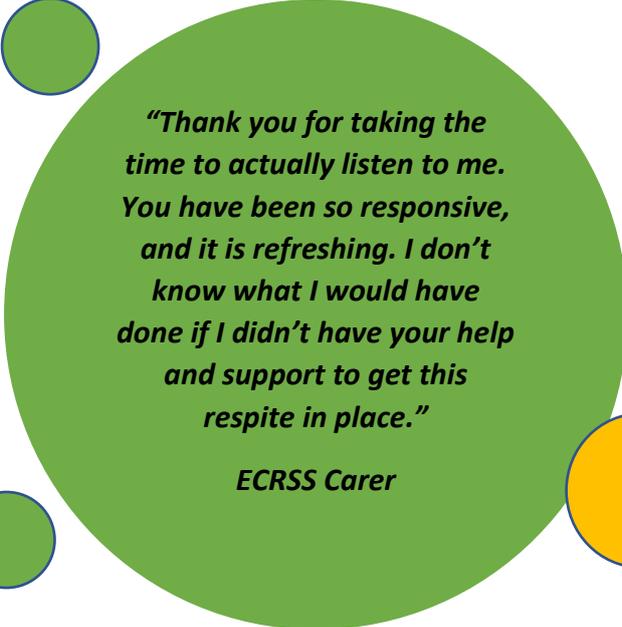


EHSCP also recognises that with these definitions there are a range of needs depending on the life stage of the carer. This strategy aims to encompass the support needs of;

- Young carers who are in school, or further or higher education
- Young carers aged 16-17 who may be in or seeking employment
- Young carers aged 16-17 who may not be in education or employment
- Young adult carers who are aged 18-25, who have needs around the transition from children and young people’s services into adulthood and accessing age appropriate adult supports. Young adult carers also require

support to create a life beyond caring and explore opportunities for employment, further education, or moving into their own homes;

- Parent carers who are parents of children who have a disability or additional needs. Evidence shows this group of carers experience disproportionately greater negative impacts of caring than other carers.
- Carers who are managing both a caring role and trying to start, sustain, or return to employment
- Older carers who in addition to caring for someone with support needs may also be managing their own health needs and impacts of ageing.



“Thank you for taking the time to actually listen to me. You have been so responsive, and it is refreshing. I don’t know what I would have done if I didn’t have your help and support to get this respite in place.”

ECRSS Carer



“I really appreciate everything and am a bit overwhelmed at how much you have improved things for us already. You really do take action”

Parent Carer



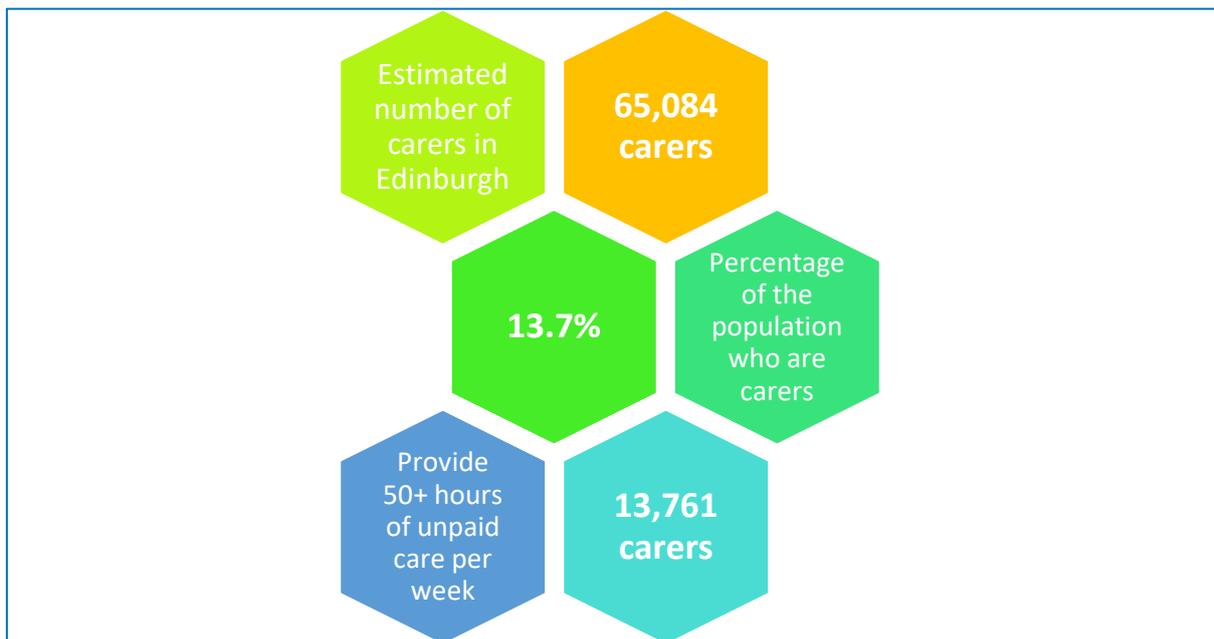
“Caring is a very rewarding as well as challenging and isolating role that only people in similar circumstances can understand”

Carer

Who are Edinburgh's carers, and how are they impacted?

The Scottish Health Survey 2016³ estimated that there are 788,000 people caring for a relative, friend or neighbour in Scotland, 44,000 (5.6%), of these people are under the age of 18. It also indicated that a third of carers have reported that caring has a negative impact on their health. The Scottish Household Survey (2011) estimates there are 65,084 carers living in Edinburgh, this is 13.7% of the population.

Fig. 3 Edinburgh's carers, source: Scottish Household Survey 2011



The population in Edinburgh is projected to increase faster than any other city in Scotland over the next 20 years. Based on historical trend analysis, the annual population growth for the city is estimated to be between five to six thousand, with those aged 85+ projected to grow by 28% between 2012 and 2022. By 2037, the number of those aged 85+ is set to more than double. The number of people living with Dementia could rise by 61.7% to 11,548 people by 2035.

In addition, the proportion of people with two or more long term conditions increases with age. recent study for instance suggests 1/3 (66.3%) of people aged 46-48 years have two or more long term conditions in the 2021 Edinburgh Joint Strategic Needs Assessment.⁴

As indicated above, carers are recognised within EIJB's Strategic Plan 2019-2022 as equal partners in care, supporting people of all ages in their own homes and

³ The Scottish Health Survey (2016) <https://www.gov.scot/publications/scottish-health-survey-2016-volume-1-main-report/pages/60/>

⁴ <https://www.edinburghhsc.scot/the-ijb/jsna/>

community now and in the future. We expect to see an increase in the number of people who are carers in the city over the coming years as a direct result of predicted changes in Edinburgh's population, and our ability to get better at identifying carers. The agreed enhanced investments aim to address ongoing need.

What carers told us to shape the Strategy

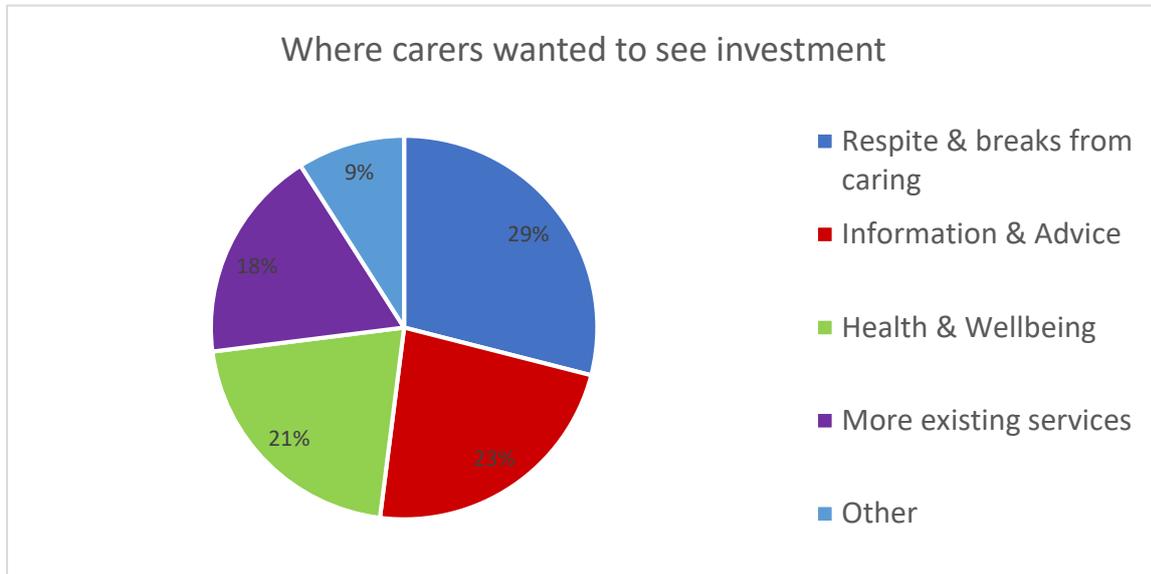
In developing the Carer Strategy, a total of 196 carers participated in some form of engagement, involvement, or consultation. Young carers made up 38% of the responses, and 62% were adult carers. Several themes, that mattered to the people who responded emerged helped shape the strategy and implementation plans.

Fig 4: Themes from consultation with Edinburgh's Carers, that shaped the Strategy



When asked where additional investment should be made, those involved highlighted:

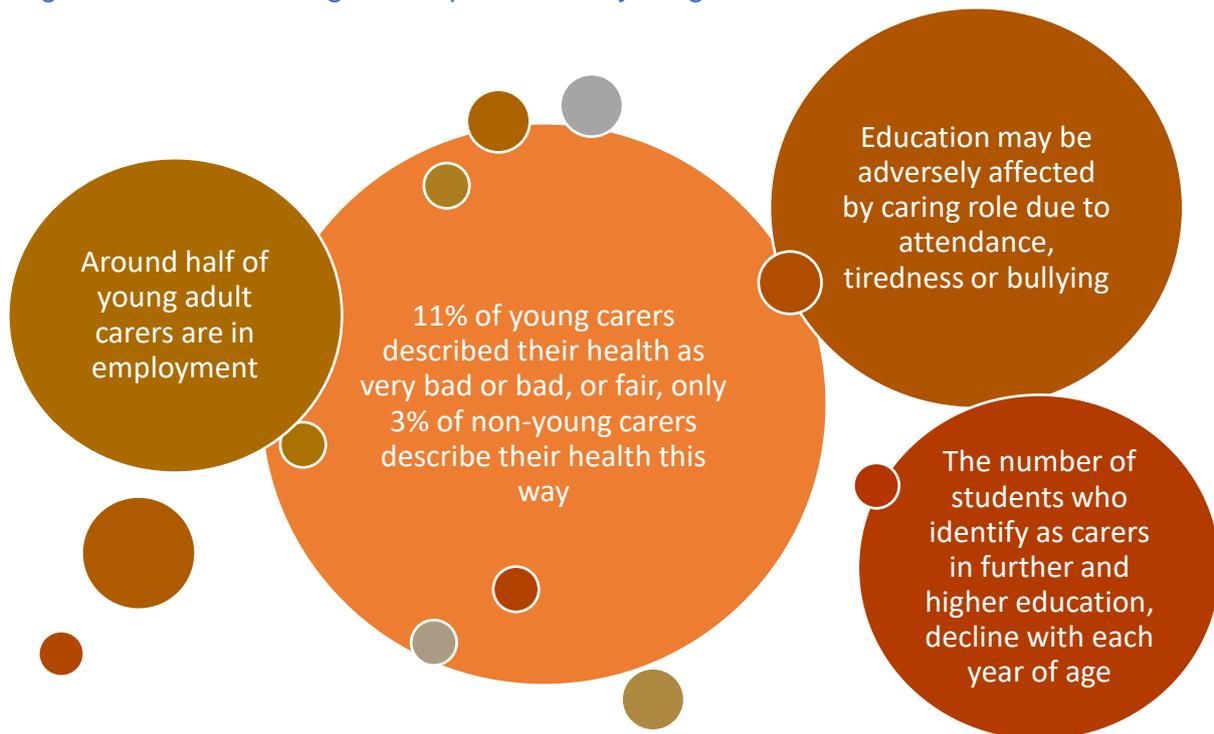
Fig 5: Consultation responses to where additional investments will make the most difference to carers.



The Scottish Health Survey 2016 provides the best estimate of the number of young carers aged 4-24 for Scotland, 93,000 (7% of the population). In their review of research and data for young carers, the Scottish Government⁵ states 22% of young carers in this age range provided 35 hours or more of unpaid care per week. The report also acknowledges the number of young carers and young adult carers within the Scottish Household Survey are too few to provide any more detailed analysis. The report contains a review of wider research for young carers and the impact caring has on their life. Some of the evidence is summarised in fig 4.

⁵ <https://www.gov.scot/publications/young-carers-review-research-data/pages/3/>

Fig 6: Research findings for experience of young carers.



What Carers are saying in 2021

Voice of Carers Across Lothian (VOCAL) are a local carer support organisation and since 2011, they have carried out a bi-annual survey of unpaid carers in Edinburgh and Lothian. The most recent survey, **published in November 2021**, received responses from 826 carers in Edinburgh⁶ and identified the priority areas listed in fig 7, for carers in Edinburgh. In all these areas carers of children and young adults reported disproportionately greater negative impacts of caring and greater barriers for accessing support than those in other caring situations.

The themes indicated below, continue to be aligned with key priority areas, including: health and wellbeing, optimising financial health through information and advice, and, getting a break from caring:

6. <https://www.vocal.org.uk/news/2021-carer-survey-results/>

Fig 7. Priority areas from VOCAL's carer survey November 2021.



Guiding Principles

The Edinburgh Carers Strategic Partnership Group alongside the EHSCP and City of Edinburgh Council's Communities and Families Service, have focused on working with young and adult carers to develop supports and services which are personalised and offer choice within the communities where they live. We have supported carers as early as possible focussing on what matters to them. This has contributed to managing avoidable differences in people's health (health inequalities) through the Three Conversations approach. The approach recognises the power of connecting people to the strengths and assets of community networks as early as possible, and the necessity to work dynamically with people in crisis.

The delivery of the strategy and associated implementation plans continues to be achieved by working with carers themselves with partners in the third sector, education, and health and social care, playing crucial roles, to support and meet the needs of young and adult carers.

A strong partnership approach exists between young and adult carer services with EHSCP, communities and families and third sector partners to providing appropriate and timely support for carers in transition between children and young people's services and adult services. This applies to both young adult carers and parent carers.

Furthermore, the strategy embraces the importance of the wide range of agencies, businesses, employers, and communities, who all have a role to play in developing a more carer friendly Edinburgh.

The Edinburgh Health and Social Care Partnership, and Communities and Families Service recognise carers as equal partners in care and support the principles developed in partnership with carers and other stakeholders by Equal Partners in Care (EPiC)⁷.

⁷ <https://www2.gov.scot/Topics/Health/Support-Social-Care/Unpaid-Carers/ProgrammesandInitiatives/Equal-Partners-in-Care>

Fig. 8 Equal Partners in Care Principles



Statement on the Covid 19 Pandemic

The Covid 19 pandemic has had a devastating effect on the lives of carers, those they support and the services seeking to support them through extremely challenging times. Closure or significant reduction in support provision for supported people, reduction in the workforce due to workers isolating, and criteria for accessing support becoming available only to those in significant/ critical hardship, have impacted carers in all areas. National groups are hearing of particular challenges for women who care, employment being impacted, and subsequent financial hardship.

A particular area of difficulty has been in the provision of short breaks. With strict guidance around travel and physical mixing over the first half of 2021, the ability to arrange or take a short break at that time was near-impossible. The knock-on effect of that being carers feeling exhausted, drained, isolated and fearful with their mental and physical health all feeling the strain. The fact that provision has been delivered to the extent it has by the year's end, says much of the dedication and commitment of those partners involved in this area of carer support.

Adult Carer Support Plans have also represented an area of challenge resulting from the pandemic. With attentions largely re-directed to supporting carers cope

emotionally with the lack of services and support, the development of these has been delayed. The knock-on effects of this include carers not benefitting fully from the supportive conversations that flow from these documents, nor from action planning that these lead to, in turn giving carers a sense of direction and hope for the future. Critically however, the access to Carer Payments that these can lead to have been restricted, meaning carers have not benefitted from them in the numbers expected.

Other challenges have included work with Schools, Further and Higher Education providers and employers, since all have had to adapt in some way to reach and support students and employees with new ways of working.

Throughout the pandemic, the fact that carer providers have supported them to the extent that they have, sends a clear message around their commitment to Edinburgh's carers.

Pandemic effect on Carer Spend

The effect that these challenges and difficulties have had upon service provision was significant and unavoidable. Of an overall budget of **£5,841,116** for carer support, **£730,400**, representing 12.5% remained "unspent". The identification of these unspent funds and their proposed redistribution was agreed by Executive Management Team (EMT) in late 2021 meaning all carer funding for the year was realised. See appendix 1.1 (p44) for proposed year 1 spend and appendix 1.2 (p45) for details on the redistribution of unspent funds.



Priorities and outcomes for carers in Edinburgh

The Carers (Scotland) Act 2016 is designed to support carers' health and wellbeing and makes provisions for enhanced carers' rights for support in the caring role. The previous sections demonstrate the scale of current and future demand locally for Edinburgh's carers and the impact caring has on carers' lives.

The following pages outline a strategic framework which has enabled the delivery of improvements for Edinburgh's carers, underpinned by the EPiC principles.

Alongside the 6 key priorities, there are a number of outcomes for carers. The outcomes provide a description of the difference in carer's lives that the strategy set out to achieve, and how this has been managed, despite the most challenging of times over the last few years.

The section that follows provides an overview of some of the key areas we set out to improve against the 6 priority areas:

1. Identifying carers
2. Information and Advice
3. Carer health and wellbeing
4. Short Breaks
5. Young Carers
6. Personalising support for carers

In Appendix 2 (p50), there are two implementation plans, with more detail of how we planned to work with carers and partners, towards achieving the outcomes for both adult and young carers. This demonstrates the key differences for these groups who have been recognised in the development of this strategy and taken into consideration. Appendix 3 (p62) details the achievements made against each of the identified Key Performance Indicators for contracted carer support over this year.



Identifying carers

What is the key challenge?

One of the greatest barriers to offering help and support to carers is that many people do not identify themselves as being in a caring role. This applies to young carers and adult carers alike.

Although there has been much work to identify carers the feedback from the carer consultation shows this is still a challenge. The Carers

(Scotland) Act 2016 has broadened the definitions

of who a carer is, this means there are many more people who are carers but do not identify themselves as such.

Outcomes for Carers

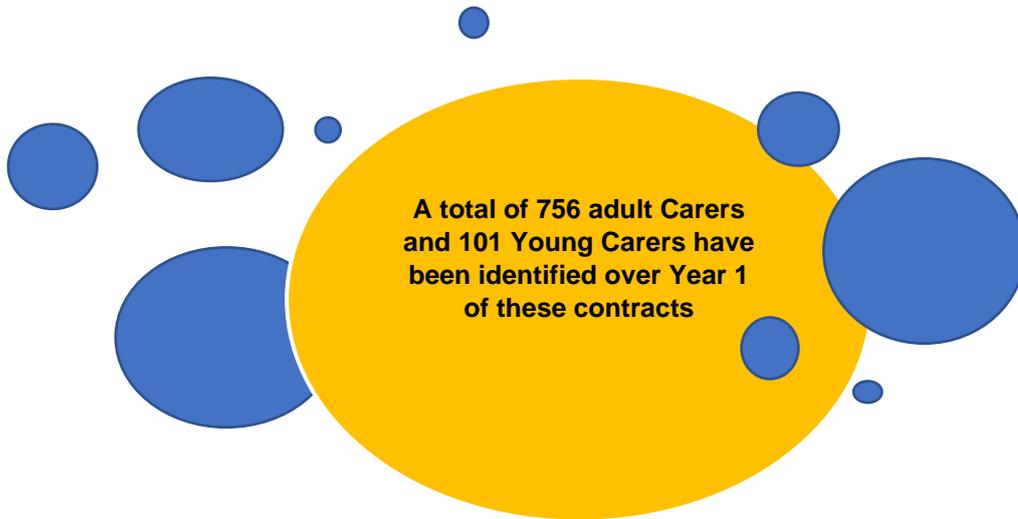
- Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support

What did we say we would do?

- Work with a minimum of **20** businesses and employers to identify a minimum of **120** carers per annum
- Raise awareness of carers and the Carer Positive Employers Award
- Identify and support carers in the workplace and those who wish to return to employment
- Provide training to health and social care staff working within the Edinburgh Health and Social Care Partnership, City of Edinburgh Council NHS Lothian and Third and Independent sector within the City of Edinburgh
- Deliver **8** information days across all FHE providers in Edinburgh annually to help identify Young Adult Carers.

What has been achieved?

- Awareness raising activities, for example info circulation via, EHSCP communications team, twitter, colleague newsletters, Edinburgh Carer Network and Vlogs see appendix 4 (p91) for more details
- Lockable, glass-fronted information cabinets were procured and placed in each of Edinburgh's hospitals
- Information stalls have also been set up around the city e.g. in libraries, a large supermarket, hospital foyers and some GP Practices
- Strong links made with Hospital Discharge team facilitating carer identification
- Supported **23** employers, exceeding target of **15** and Identifying **178** new carers as a result
- Raised awareness of Carer Positive award – **13** agencies now “engaged” in this initiative
- Delivered **47** “Think Carer” training sessions; nearly double the contracted expectation and reaching **1136** participants
- Delivered **19** FHE information days, more than twice the expected number
- Identified **101** new Young Carers



Stories of difference 1 – Identifying Carers (Employers)

We have been using the annual Carers Week to raise even more awareness about the challenges facing working carers across, introducing new Carers champions, training and additional support for colleagues. Our colleague champions will be undergoing a specially designed training programme with VOCAL (Voice of Carers Across Lothians) to understand what it is like to be a carer and access additional resources – Phoenix Group

Stories of Difference 2 – Identifying Carers (Young Carers)

When we began working with LK he was about to sit his exams and was looking at applying for courses in the future. We supported him to look at his university offers and which would work best for him. Also, the logistics and managing the emotions which could come with reducing his caring role and move to university halls. LK cares for his mum who has a heart condition and misuses alcohol. At the end of August 2021 LK had to leave his caring role after family breakdown with the cared for person. He was due to begin university but had three weeks to wait until he could access university halls. LK was homeless and sofa surfing with family friends but felt he wasn't able to do this for three weeks. EYC were able to liaise with the university accommodation staff and arrange for an early entry preventing LK for remaining homeless. We were also able to link LK in with further emotional and financial support at university and ensured he felt supported and able to make the transition from school to university. LK has since voiced how supported he felt during this time and how he does not know if he would have been able to take his place if he was not able to access halls early.

Information and Advice

What is the key challenge?

Carers and those supporting them need to know what their rights are and where to access information that is relevant, up to date and, available when they need it, to make informed decisions. A simple and clear approach for carers to access information when they require it will be developed further to meet the wide range of carers needs.

Economic wellbeing is a significant aspect of this priority. VOCAL's carer survey found that a quarter of respondents had reduced their working hours. This has significant long-term financial implications, from impact on household income to pension contributions for later in life.

Outcomes for Carers

- Carers know how to connect to information, advice.
- Carers are well informed about their rights and how to access support
- Carers report economic wellbeing

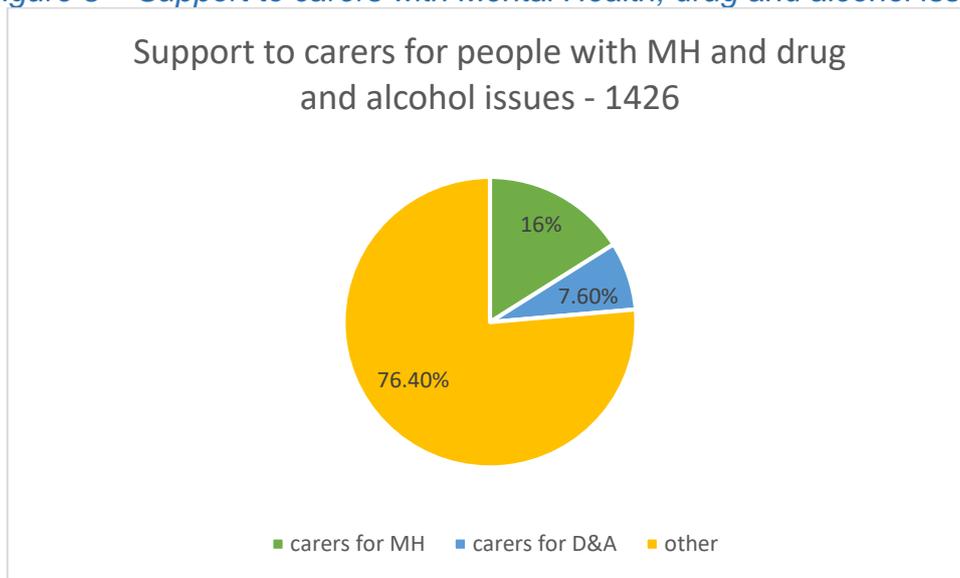
What did we say we would do?

- Set up and Information and advice service
- Manage **2,400** carer enquiries for information and advice over year 1 with **960** carers going on to receive support
- **5%** of these should be caring for someone with mental health issues and the same for people with drug and alcohol issues
- Support **360** carers around benefits and welfare advice
- Deliver **230** training sessions to carers to improve confidence in caring

What has been achieved?

- An Information and Advice service has been created
- The service managed **2,854** enquiries with **1,426** carers going on to receive support
- **16%** and **7.6%** of these were carers supporting people with Mental Health or drug and alcohol issues, respectively see Figure 8 below
- **456** Carers have been supported around welfare and benefits advice realising a total value of **£863,039** for Edinburgh's carers
- **253** carer training sessions were arranged seeing a total of **578** carers benefitting

Figure 8 – Support to carers with Mental Health, drug and alcohol issues



A total value of £863,039 has been realised for Edinburgh's adult carers through welfare support

Story of Difference 1 – Information and Advice

Mr Chen lives with his mother in Edinburgh who is 86 years of age. In addition, he has a brother who has recently been diagnosed with terminal cancer. Mr Chen first contacted VOCAL following a recommendation from his GP who had identified him as a carer.

The carer was employed on a full time basis but not on a long term contract and had been off sick for a few weeks from his employer and his sick pay was ending the following week.

On initial contact with the Carer Support Practitioner (CSP) there was a brief conversation about his caring roles and how his health was impacted. It was agreed to meet face to face, as was Mr Chen's preference, and this was organised to discuss issues he was finding challenging and reasons for contacting VOCAL. The CSP met Mr Chen at VOCAL's office and they discussed his health and how his caring role and responsibilities made it impossible to work full time and the resultant financial pressure he was facing because he felt unable to continue working. Mr Chen was keen to find out what financial support would be available to him and allow him to provide fulltime care to his mother.

Due to his limited English written skills, Mr Chen reported challenges in reading any correspondence from third parties and to complete any benefit applications. Providing support face to face had helped overcome the issues around communication but further COVID restrictions meant these re-emerged. Mr Chen was offered an interrupter but turned this down due to his anxiety and his difficulties being more around written language.

After a discussion with Mr Chen about his income and savings it was established the best route for him was to make a claim for Universal Credit to provide him with an income. He informed the CSP he had been on this benefit before so had to reclaim the benefit once again. It was important for Mr Chen to receive a benefit as he was not in receipt of any other income as his sick pay had stopped.

At this point it was also established his mother did not receive any disability benefit, despite being a frail older person. Attendance Allowance was identified as the appropriate disability benefit to claim and Mr Chen was then supported to complete and apply on behalf of his mother.

It was highlighted to Mr Chen that an attendance allowance award would allow him to identify as a carer on Universal Credit, claim Carers Allowance and qualify for the Carers Supplement as he would meet all the criteria. This would both increase his income and remove any claimant commitment from the Universal Credit claim.

Story of Difference 1- (Continued)

The attendance allowance was granted for his mother at the higher rate, which then allowed Mr Chen to apply for both the carer's element of Universal Credit and the Carers Allowance. Due to Mr Chens limited written skills the CSP completed the Carers Allowance form online over the telephone, as due to COVID rules we could not complete this face to face.

Due to the Attendance Allowance being awarded, Mr Chen then qualified for the carers element of Universal Credit claim in addition to his standard allowance. The carer was also able to claim for Council Tax reduction also due to him being on Universal Credit.

The support provided maximised both the income of Mr Chen and his mother. Also claiming the correct benefits meant Mr Chen could provide care to his mother without worrying about having to work to generate an income.

When the CSP reviewed the advice and information given to Mr Chen he commented he could not have done this himself as he lacked the knowledge. He said he found it so difficult to know what to do and was under a lot of stress when he first came to VOCAL and the support he received had been invaluable.

Story of Difference 2 - Advice and Information

C lives with his mother (86) in Edinburgh. He also has a brother who has recently been diagnosed with terminal cancer. C first contacted VOCAL following a recommendation from his GP who had identified him as a carer. He has been employed on a full time, temporary contract but had been off work sick for several weeks due to his caring role and his sick pay was ending.

Following referral, a face to face meeting was arranged to discuss the issues C was having. The CSP met C at VOCAL's office. They discussed how C's health, caring role and responsibilities made it impossible to work full time leading to significant financial pressures. C wanted to know what financial support would be available allowing him to care for his mother full time.

C's English language skills are underdeveloped meaning there are challenges in reading any correspondence from third parties and to complete benefit applications. Providing support face to face had helped overcome these but further COVID restrictions meant these had to cease. C was offered an interpreter, but this was refused due to C's anxiety and since his issues centred on the written word.

Story of Difference 2 (Continued)

After a discussion with C about his finances it was agreed a Universal Credit application was required and since his mother received no income, attendance allowance was also applied for which in turn would allow him to apply for carers allowance plus Carer's Supplement. This also allowed for Council Tax reduction. These were completed by the CSP over the phone due to C's limited writing skills.

With both C and his mother now receiving all the benefits they were entitled to, it meant C did not have to work and could continue to care for his mother without having to worry about work. At Review C noted that he valued the support he'd received and would not have managed this by himself.

Story of Difference 3 – Information and Advice

George lives with and cares for his mother who is 98 years old and has a diagnosis of Alzheimer's. George was referred to VOCAL by a Community Care Assistant (CCA) as he was finding the caring situation increasingly challenging and stressful.

A carer support practitioner (CSP) contacted George who indicated he might benefit in talking about his feelings about his caring role. The CSP made a referral to VOCAL's counselling service for George and sign-posted him to Alzheimer Scotland for specific dementia support. George was also finding it difficult during COVID as he had a faulty computer. He was therefore also sign-posted to 'People Know How' to get him appropriate equipment to enable him to get back online.

At a subsequent session with his CSP, George reflected on the care being provided through Social Work and by a care agency for his mother and felt this was inadequate in terms of providing respite for him. The care worker allocated as part of his mother's package of care used English as a second language and this was presenting communication difficulties between his mother and the worker, to the extent George felt he could not relax and have spare time, he had hoped to have, to himself to obtain a short break.

The CSP involved highlighted options available under the Social Care (Self Directed Support) (Scotland) Act (2013). George expressed an interest in pursuing opportunities under Option 1 (through a direct payment) to obtain a break from caring. This involved George becoming an employer and employing a particular individual who knew the family and their circumstances. The potential for this individual to become a paid employee was extremely encouraging to George and it was also suggested he ask for the care package to be reviewed.

George was given information on who he needed to approach to have the care package reviewed and, on the services provided by Lothian Centre for Inclusive Living (LCIL). They would be able to support the recruitment of a Personal Assistant, set up employers' liability and indemnity insurances and help manage the finances.

When he first contacted VOCAL George reported being stressed due to the lack of time for himself and although George is still working with VOCAL, he feels less stressed and sees the possibilities of a different way of life in the future for himself

Carer Health and Wellbeing

What is the key challenge?

The role and identity of those with caring responsibilities is complex and not often planned for. Becoming a carer can be a slow process as health gradually deteriorates or because of sudden unexpected events with life changing consequences. No carer is the same and so we need to ensure our offer of health and wellbeing supports is broad, varied and flexible.

Delays to the full roll out of ACSPs has meant the outcomes based conversations and action plans, (which include actions for the carer to take responsibility for their own health and well-being) have not been fully realised; Carer payments too that may have paid for technology for addressing social isolation, short breaks/ breaks from caring or Gym Membership for example, have also been in limited use.

Outcomes for carers

- Carers are supported to look after their own physical, mental, emotional, and social wellbeing
- Carers feel listened to and heard as individuals
- Carers feel well supported throughout their caring journey

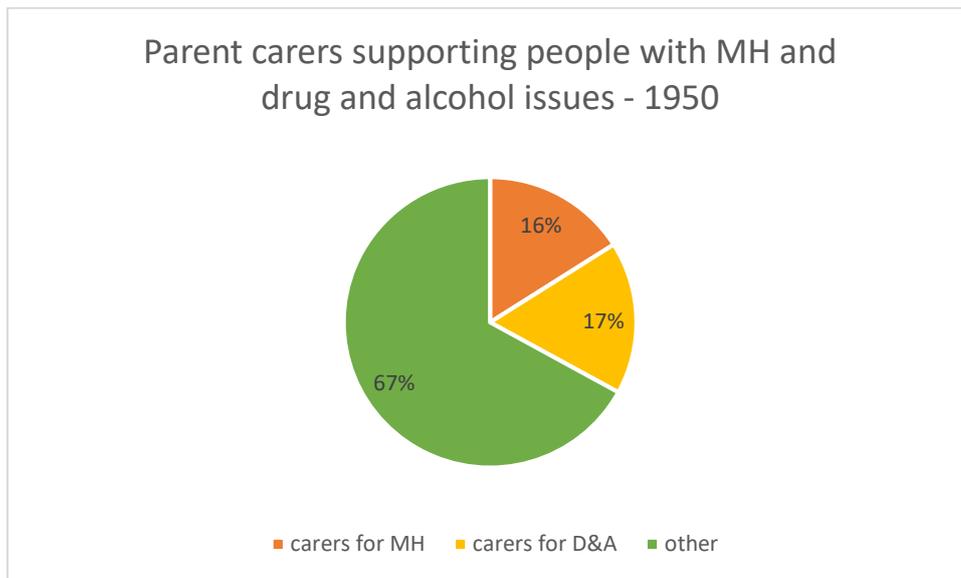
What did we say we would do?

- Set up a Carewell Partnership
- Support **1200** carers to maintain their health and sense of wellbeing
- **5%** of these should be caring for someone with mental health issues and the same for people with drug and alcohol issues
- Provide **96** citywide peer and group-based wellbeing sessions
- Provide Locality peer and group-based wellbeing sessions
- Deliver a programme of personal learning and development opportunities, minimum **144** events
- Deliver **487** sessional or 1:1 counselling sessions

What has been achieved?

- Creation of the Carewell Partnership
- Supported **1950** Carers through the Carewell Partnership
- Of these, **16%** were carers for people with mental Health issues and **17%** were caring for people with drug and alcohol issues see figure 9 below

Figure 9: Parent carers supporting people with mental health, drug and alcohol issues



- Delivery of **62** citywide peer and group-based wellbeing sessions; lower than expected but benefitting **414** carers
- Delivered **222** locality peer and group-based wellbeing sessions benefitting **503** carers
- Delivered **245** personal learning and development events benefitting **579** carers
- Delivered **675** group counselling sessions, with 1:1 counselling benefitting a further **61** carers



Story of Difference 1 – Carer Health and Wellbeing

A is carer for her husband with alcohol addiction. This had gotten worse over lockdown leading to disruption and distress to her and her daughter. She received support from Vocal's Family Support Addictions (FSA) service.

Time and space was given to A allowing her to express her anger and emotion around her relationship. Other supports were also considered/ offered including peer support groups, wellness groups and one to one support, the latter being her preferred choice. Fortnightly conversations was the arrangement.

While early conversations focused upon the drinking habits of A's husband over time a fuller appreciation of his repeated alcohol use and her own expectations at this point developed. She also developed understanding around how she might support him to change. Understanding around how to improve her and her daughter's situation, such as maintaining boundaries, avoiding conflict and limiting contact at flash points also developed.

A was also encouraged to consider what self-care meant to her resulting in improved connections with her faith group and friends, taking time for herself and is now planning a holiday for her and her daughter. She has taken up counselling through Vocal and is also planning to connect with a wellness class run again, through Vocal.

Separation from her husband has been a consideration recently for A however she has ultimately decided to remain with him as she feels more empowered and knowledgeable around his drinking habit and no longer feels trapped by it as a result of Vocal support.

Story of Difference 2 – Carer Health and Wellbeing

Caroline is 26 years old. When she first contacted VOCAL via email, she explained she had been living in her home country during the pandemic in order to complete her postgraduate education. However, she moved to Edinburgh to move in with her long-distance partner of 4 years and had obtained a job in the city. Caroline had been aware that her boyfriend had fallen into a depression during the pandemic (he had been signed off work with stress) but she had not been aware of the extent of its effect until moving in with him. Caroline described being "super overwhelmed, I haven't managed to finish my thesis because of it and I am really struggling to cope and feel lonely because his depression isolates him away from me".

Caroline explained whilst her family were supportive of her and her partner, they lived abroad and could not be of any practical assistance. She also did not know many people in Edinburgh and found it difficult to meet new friends due to lockdown.

Story of Difference 2 (continued)

Her partner's family were already struggling with other matters and so Caroline felt alone in dealing with her boyfriend's emotional state. Caroline was concerned about the impact of the caring role on her own mental health, given the stress she was absorbing. She was also unable to immediately register with a GP and this was worrying her, since she was previously undergoing tests for high levels of a hormone associated with stress.

When asked what would make a difference to Caroline, she mentioned wanting to learn ways of managing her stress better. She also wanted to understand what financial help may be available to her, given her boyfriend was no longer working and she would unexpectedly need to become the main earner to cover all private rent and bills. Therefore, Caroline was booked onto three relevant courses by her Carer Support Practitioner - Compassion Fatigue; Stress Management; and Benefits Q&A.

Attending these courses, Caroline says was "super helpful". The Compassion Fatigue course was very beneficial because she could "see other people with the same problems and understand that we all go through trauma when caring for someone else". She learned some of the Emotional Freedom Technique and has since been utilising the tapping behaviours, finding that this helps her to calm down or to fall asleep when she is struggling. The Stress Management course was also beneficial because it allowed her to think of ways she can look after herself, when she had so often been thinking of others. Caroline said she met a lady who was in a similar position to her whilst at the event, they exchanged numbers and have met in person since. She explained that being "in person for the training was so nice" and helped to alleviate some of the isolation she was feeling.

At present, Caroline is now looking forward to attending a complementary therapy session through VOCAL, where she hopes that a massage will provide her with time to relax by herself and do something that will demonstrate care for herself and time away from her caring role, which will ultimately sustain her in supporting her partner when he needs this.

Short Breaks

What is the key challenge?

Aside from the challenges associated with covid 19, Carers have told us that regular breaks from caring are a priority. We know from feedback that short break options need to be flexible, individual and meet personal outcomes. The consideration of a carers' need for a short break is a requirement of the Carers Act and all carers who wish to complete an adult carer support plan or young carer statement should have their individual needs discussed in relation to having time away from caring.

Outcomes for carers

- Carers feel safe, rested and recharged
- Carers are supported to have a life outside and/or alongside their caring role
- Carers feel supported to maintain their caring relationships and sustain their caring role

A Short Breaks Service Statement⁸ has been published and provides information about short breaks available locally and across Scotland and how carers can access these.

What did we say we would do?

- Provide a coordinated programme of short day, evening and residential breaks for adult carers, with and without the supported person benefitting at least **40** carers over a minimum of **4** breaks
- Manage a Short Breaks fund for carers to arrange their own Short Break
- Complete an Adult Carer Support Plan if necessary/ desired by carer
- Offer “micro grants” (up to £500 per carer in a 12-month period) to carers who’s need for creative breaks from caring cannot be met via any other form of carer support on offer
- Set Short Breaks Fund criteria in line with criteria used by local providers of the Time to Live fund operated on behalf of Shared Care Scotland⁹
- Produce statement on reaching carers in greatest need
- Manage a fund of **£40k** to support **100** carers

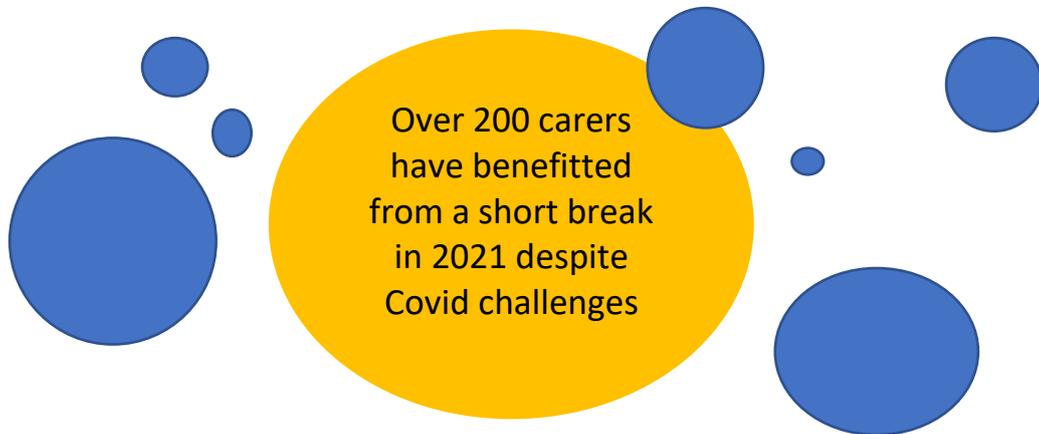
What has been achieved?

- **2** contracted Lots implemented to deliver on this important priority
- **67** carers have benefited from residential (overnight) short breaks via Stepping out programme, respitality or Care Free Breaks
- **54** carers benefitted from a respitality day or evening event over 2021

⁸ http://www.edinburgh.gov.uk/downloads/file/12591/short_break_services_statement

⁹ <https://www.sharedcarescotland.org.uk/wp-content/uploads/2015/01/02292-Short-Breaks-Fund-evaluation-report-on-Time-to-live.pdf>

- **90** carers have benefitted from a Still Caring day/ evening event over 2021
- A total of **211** carers benefitted from the short breaks programme over 2021
- Criteria and statement around meeting the needs of carers in greatest need produced see Appendices 5.1 (p92) and 5.1 (p95) for details
- **84** carers benefitted from the Short Breaks Fund with **£32,219** spent



What we will do to achieve further improvement?

Given the restrictions associated with the pandemic, this is a specific area of focus going into the next year, with investment available in the spend plan to enhance opportunities to provide a variety of short breaks and breaks from caring, to improve outcomes.

Story of Difference 1 – Short Breaks Programme

Example of creativity - Stepping Out

Enabling carers to take a residential break away this year has produced new and unexpected outcomes. Carers made new friendships and connections leading to a level of peer support that we have not seen before. For instance, one group of carers who met on a carer short break have now come together to collectively plan and share a short break with the people they care for, giving them all respite and a short break at the same time. The carers in this group had not had a short break with or without their cared for people in over 18 months.

Story of Difference 2 – Short Breaks Programme

Example of creativity - Still Caring

Moving events and activities online has worked well for some carers, particularly because the cared for person could be present or not far away and there was no travel time or replacement care to worry about. Outside face to face events have been hugely popular when able to run them and we have ensured that many of these are open to the carer to bring along the cared for person as well so they can have a short break together. This has been well received particularly from carers who were unable to access a break because they did not have replacement care cover available.

Story of Difference 3 – Short Breaks Programme

Carer in relation to his situation had said ‘things have moved so fast that I don’t feel I’ve been able to process emotions and grief’ and ‘I very much do not feel like myself at the moment’. After the break he stated; ‘Often times I felt like the sole carer, and had all the responsibility. As far as family goes that was the situation really, and I resented it. That said, I cannot take sole credit for all the care and support I gave my mum. I had you, Vocal, her GP, district nurses, community care, a care manager, the care home staff and more. It was a bit of a team effort. Thank you again’.

Story of Difference 4 – Short Breaks Programme

A is a full-time carer for their partner who had a severe stroke several years ago and is now wheelchair bound and reliant on 24 hr care and support, they are unable to do anything for themselves. They have paid carers who come in four times a day, but the rest of the time A is providing the required care and support. A had taken part in many of our ‘virtual’ activities over the course of the pandemic, participating over Zoom. This was easier for them to schedule in to their day and could pop away when their partner needed some support.

Whilst the online activities have provided A with much needed interaction throughout the Covid pandemic, they were encouraged to apply for our Stepping Out programme. A was allocated a space on a break to the Island of Lismore, for a 4 night break. Staff were regularly in telephone contact with A prior to the break, ensuring they were happy with our Covid19 guidance and compliance and felt safe with us as well as providing support and advice.

Story of Difference 4 (Continued...)

As the respite care required for A's partner, was very specific with additional requirements for nursing care, this made it even more difficult to access and arrange replacement care than for some other carers.

A's Social worker was heavily involved and replacement care was arranged. Then just 3 days before the planned trip, the planned respite care was cancelled due to there being a case of Covid19 within the respite establishment. A was distraught after all the planning that had been done and arrangements made. Their Social worker stepped up and was instrumental in frantically searching for alternative respite accommodation that was suitable. They found some suitable accommodation but there was a shortage of staff, they didn't feel able to take on the care needs required and had to refuse the placement. A was distraught and ready to collapse, in tears, near breakdown, the social worker had one last option. They agreed to provide care but A was informed that their partner would have to be confirmed as Covid19 free, by having a negative PCR test prior to entering the respite facility. This was the day before the break to Lismore began, 24 hours before A needed to be on the minibus! A then had to drive their partner to a testing facility asap and get a PCR test completed. It was then an anxious wait until they received the negative result, which came in at 8am the next morning. Just in time for A to get the cared for person into their respite placement and to hop in a taxi to get to Care for Carers in time to get on the minibus and away!

A was understandably exhausted, desperate but also very anxious and unsure about going away at this point. When they arrived at the minibus, the group did not know anyone else, other than having met them previously on Zoom (this is something we have been doing this year in order to minimise carer stress, bringing the group together online before we meet in person), which definitely helped to alleviate some concerns. A quickly relaxed and chatted with the other carers, bonding immediately with a small group of them.

A loved being on the Ferry and informed us that this was their first trip to a Scottish Island, as it was for most of the carers on the trip. The carer's were all allocated accommodation in small groups, establishing one household for the duration of the break.

A was in accommodation with a group of 3 other carer's. A immediately formed a bond with these carer's and was laughing and joking. The carer's cooked breakfasts together and the foursome quickly forged a working team, helping each other and supporting each other. The carer's are all from different social, ethnic and cultural backgrounds. They shared cultural differences and A managed to learn some new Scottish words, some funny and some rude which caused a lot of laughter and was shared with all the other carers when we got together as a whole group for evening meals.

Story of Difference 4 (continued...)

By the end of the trip, A had created new memories with their new friends and shared telephone numbers, they created a 'what's app' group so that they can keep in touch and were sharing photographs with each other. They all agreed to meet up and within weeks after returning, they met and enjoyed each other's company, reliving the fun that they had.

A could not believe what a difference this short break made to how they felt and admitted they were almost at crisis point and if the respite care had fallen through, they think it would have pushed them over the edge. The group loved having the chance to get away to a Scottish Island where they would never have gone on their own and the fact that they made new friends was an added bonus.

They all discussed how difficult it was to access replacement care for their cared for people. Individually they felt unsure about going away with their cared for person alone, they were not sure they could manage and it would certainly not be a break for themselves. However, they discussed the possibility of going away together. Could they go together with the people they care for and support each other with their caring responsibilities and getting a break together as carers at the same time? They have decided this would work and when a Respitality offer came up this month which provided fully accessible accommodation and bathrooms they enquired about it.

The original Respitality offer was for one family to get a break but the staff member contacted the provider and asked if there was any chance that they would consider supporting 8 people to get a break together, 4 carers and 4 cared for people. The provider has agreed which is fantastic and the group of four carers are planning their shared break which they are very excited about.

Outcomes for young carers

- Young carers are identified as close to the start of the caring journey as possible and are connected to opportunities and support
- Young carers can access good quality, age appropriate information and advice using a range of media and are well informed about their rights and how to access support
- Young carers and their families report economic wellbeing
- Young carers sustain their physical, mental, emotional, and social wellbeing
- Young carers feel listened to and heard as individuals
- Young carers feel well supported throughout their caring journey
- Young carers feel safe and rested and are able to be children and young people first
- Young carers are supported to have a life outside and/or alongside their caring role
- Young carers feel supported to maintain their caring relationships and sustain their caring role
- Young carers are supported into a positive destination from school
- Young carers are involved in support planning and have choice and options to meet their needs and the person they care for.
- Young Carers are confident in shaping services for themselves and those they support and are more in control of the support they receive
- Young carers feel supported to move into a life after caring and feel supported with the transition into adulthood

The development and delivery of young carers priorities lies with City of Edinburgh Council Children and Families Department.

What have been the key challenges?

Young Carers are children and young people first. It is important to remember that each young carer is a unique individual; A child or young person who is entitled to find and reach their full potential. There are various circumstances that can arise within the home environment that makes a child or young person a carer and can occur at any point in time in a child's life. The earlier a young carer is identified the better as this can provide crucial support to alleviate the impact caring can have on a young carers life.

Another key challenge has been the implementation of Young Carer Statements as these had to be re-written. The final documentation was finalised in June 2021 meaning these have only been in use for a short time. See appendix 6 and 6.1 for the templates (p91).

The Young Carer Support Service partnership took effect from 1 October 2020 meaning there is misalignment with the other reporting timeframes. These figures are therefore based on their year 1 which runs October 2020 - 31 September 2021

What did we say we would do?

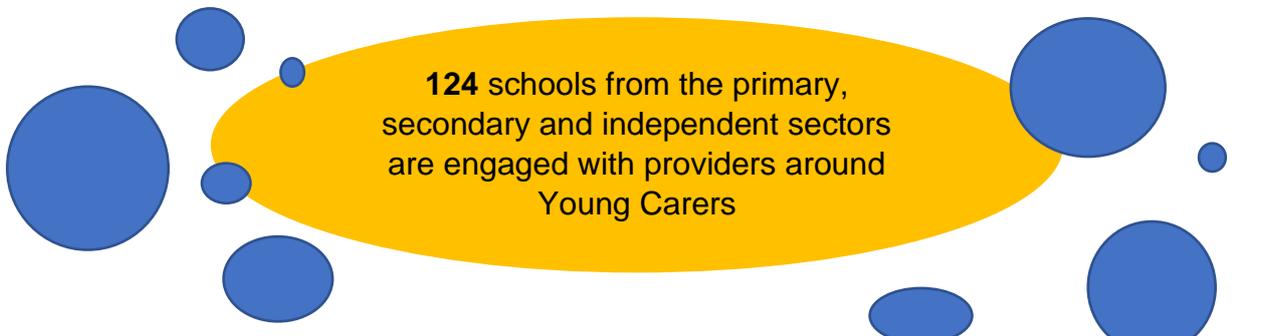
- Work with at least **120** schools
- Provide support to schools to develop Young Carer Coordinators
- Provide **1** Continuing Professional Development training opportunity per term with places available to **20** schools staff
- **821** Young Carer Statements should be completed by end of year 1
- Administer a Young Carer grant fund of **£12k** over the life of the contract making at least **40** awards per annum
- **738** Young Carers should receive direct support following YCS completion

What has been achieved?

- **124** schools from the primary, secondary and independent sectors are engaged with the partnership
- All **124** schools are involved in Young Carer Coordinator initiative. **3** meetings of the Young Carer Network have taken place during the reporting period
- **12** CPD sessions delivered across Edinburgh's schools benefitting **187** staff
- A total of **257** young carer statements had been offered to young carers since 1 October 2020, with **67** completed and another **52** started (see fig.10 below)
- **14** information sessions around Young Carer Statements have taken place
- **28** grants amounting to **£3370** have been awarded
- **349** 1:1 sessions have been offered to Young Carers and **182** Group session

Figure 10 – Young Carer Statements

Number of YC Statements offered	257
Number of YC Statements started, not completed	52
Number of YC statements completed	67
Number of YC statements declined	8
Number of YC statement Reviews Completed	2



124 schools from the primary, secondary and independent sectors are engaged with providers around Young Carers

Stories of Difference 1 – Young Carers

Jamie was initially referred to young carers' services in 2019 at the age of seven. He was the main carer for mum who has complex health needs including seizures, minimal sight and mobility issues. Jamie provided emotional support, support to physically guide mum when out of the home and practical support to monitor seizures and contact emergency services if needed. The household comprised of mum and Jamie only, with minimal support from family living locally.

Jamie was assessed and identified as having severe anxiety, experiencing loneliness and having little opportunity for respite. He was provided a space in group work provision, in the form of weekly young carer support groups.

Jamie attended regularly, enjoying the groups and presenting well over all. Anxiety seeming to be less of a barrier than initially thought. In 2020, during lockdown, Jamie's anxiety was heightened and a unique view of his anxiety through lack of attendance in group sessions, particularly digital sessions, was observed. Jamie was subsequently offered one-to-one sessions in the community to provide mum and Jamie with respite. Jamie formed a closer relationship with staff during these sessions and began to disclose more concerns over mum's health, separation anxiety and concerns about the implications of Covid-19 on his family.

Through liaising with mum and Jamie, meals were provided to support them. Jamie returned to face-to-face provision in 2021 and this, alongside the relationship with mum allowed staff to continue to support Jamie to attend groups. Jamie was assessed through his YCS and this allowed a further insight into his concerns over mum's wellbeing whilst he was out of the home. Through discussions with mum, Jamie and school we were able to provide Jamie with additional reassurances and strategies to attend school, groups and leave mum to play with friends. Jamie attended our recent residential which was an enormous milestone for him and mum, as Jamie was previously unable to leave due to anxiety. In order to make this a success there was a clear plan put in place for Jamie to feel reassured of mum's wellbeing whilst away for two nights. This included evening calls to mum, facilitated by staff.

Feedback from mum:

"young carers are an amazing service the support they provide is incredible not just to my son but us as a family! It means so much to me to see how much they genuinely care about my boy. He always has so much fun and comes home happy and care free after each session"

After residential:

"Just want to say a massive thank you for being so accommodating for his needs and making it so much easier for him and myself. You really are amazing! I'm so proud of him for going and thankful he has the opportunity. Thank you so much for letting him call me"

Story of Difference 2 – Young Carers

X was very isolated during the first lockdown. I met X for a F2F meeting before the 2nd lockdown struck. I was worried that this would push X into becoming more isolated and X would experience a drop in their mental health. To help isolated and less confident YCs access our online sessions, I made it clear that if a YC was new and/or nervous they would be able to keep their camera off for a few sessions. I also offered that they use the chat function to communicate if speaking was too nerve racking. X came along to all 7 of my online groups, started with both their camera and audio off progressing to participating (loudly) with a treasure hunting activity. The regular session worker noted, as part of our feedback on how sessions have been going: "I'm definitely noticing a boost in confidence in a few of the girls."

Personalising Support for Carers

What is the key challenge?

The Social Care (Self-directed Support) (Scotland) Act 2013 and the Carers (Scotland) Act 2016 have paved the way for the personalisation of carer support, recognising the support needs and aspirations of people in need of care and their carers vary greatly and no two caring situations are the same.

What are we doing already?

An outcome focused; strengths based Adult Carer Support Plan (ACSP) had been tested with a number of carers in the City in 2018/19 however the paperwork needed to be updated to ensure they were fit for purpose. The ACSP was again piloted in late 2021 and preparations for roll out is underway. These are expected to be in full use in Spring 2022. Meanwhile the previous version has been in limited use allowing carers access to carer payments.

Covid 19

As noted in the introduction, the Covid 19 Pandemic has further impacted upon ACSP use over the past 12 months meaning carer payments and personalisation of support has been significantly affected. Attentions were turned to providing emotional support for carers during the most challenging periods of the Pandemic, while the ACSP remained in limited use; a result of its continued development.

Carer's social isolation, fear and anxiety (of contracting and/or spreading the disease to loved ones), lack of short break options, need for advice and information through a constantly shifting picture and financial and employment worries have left many of them isolated, exhausted and distraught. In addition, workers being unable to close cases due to lack of follow-on support has led to increasing caseloads, increased complexity and for lengthy periods all culminating in a significant impact to the team members' individual sense of wellbeing and resilience. These challenges are in line with the National Picture¹⁰

Outcomes for carers

- Carers are involved in support planning in the community and from hospital and have a choice of options to meet their own needs and the person they care for.
- Carers are confident in shaping services for themselves and those they support and are more in control of the support they receive.

¹⁰ <https://carers.org/resources/all-resources/127-covid-19-in-scotland>

What did we say we would do?

- Work preventatively with carers via provision of brief intervention (level 1), to higher intensity support (level 2) the balance expected to be **60%** and **40%** respectively
- **25%** of completed ACSPs would lead to a carer payment
- Work closely with the Hospital Discharge Team supporting carers of people leaving hospital

What has been achieved?

- Level 1 interventions have averaged 53.6% and Level 2 Interventions have averaged 46.4% overall (see fig.11 below)
- **555** ACSPs were completed over 2021 and **51** of those lead to a carer payment representing around **9%**
- **20** Emergency Plans have been completed over the past year
- Strong relationships built with the Hospital Discharge Team ensuring carers are identified and receive the necessary support at the right time

Figure 11 – Level 1 & 2 interventions

Agency	Target Number	Actual Number	Level 1 Number	Level 1 %	Level 2 Number	Level 2 %
Care for Carers	150	122	36	29.5%	86	70.5%
Vocal (NW)	150	91	59	65%	32	35%
Vocal (SE)	150	80	48	60%	32	40%
SPACE	150	104	70	67.3%	34	32.7%
Total	600	397	213	53.6%	184	46.4%

What we will do to achieve further improvement

- Extend the wider roll-out of Adult Carer Support Plans across the Edinburgh Health and Social Care Partnership including our provider organisations. This will in turn increase opportunity to access carer payments.
- More deliberately involve carers in the development of the Edinburgh Pact
- Focus on increasing the variety and access to Short Breaks

Stories of Difference – Personalising Support

Mr Z was referred to the Carer Support Team for an Adult Carer Support Plan as he was caring for his wife who had a recent diagnosis of dementia which he was struggling to come to terms with. An Adult Carer Support Plan was completed with Mr Z via telephone, which he chose over video call, due to the ongoing COVID restrictions. He spoke about how they had always been an active couple and holidayed abroad every year and the change in lifestyle had caused great stress and anxiety for Mr Z. He was finding it very difficult to witness the deterioration in his wife's condition and was unsure how to respond to her mood swings and how to reassure her when she was confused and agitated. He worried that he was not caring for her in the best way and as they had no family living locally was worried what would happen to Mrs Z if he became unwell. Mr Z had enjoyed swimming and golf and had said that this was like a lifeline for him but the financial cost was prohibitive and he was not able to continue to do both. He was concerned that if he was unable to swim regularly and play golf that his mental health and wellbeing would suffer greatly. Mrs Z was reluctant to accept support but was starting a Steady Steps programme which would give her some social contact and have a regular activity to go to.

Emergency Planning was discussed with Mr Z and as he had had conversations with his son who lived in England and it had been agreed that he would come up and stay with Mrs Z if Mr Z became unwell and that she would go to live with him if longer term care was needed. Mrs Z sister lived nearby and would stay with Mrs Z until their son arrived. Mr Z held Power Of Attorney which would pass to his son if Mr Z was incapacitated.

The outcomes to meet the support identified in the Adult Carer Support Plan required by Mr Z were that he applied for a carer payment for £288 to pay for his swimming which also meant that he would be able to meet the cost of the golf membership allowing him a break from caring and to improve his mental and physical health and wellbeing. A Carer's Emergency Card was registered and a Carer's Anticipatory Care Plan document was forwarded to his GP to be uploaded in his Key Information Summary in case of emergency. An Emergency Plan was completed with the Community Carer Support Worker so that all Mrs Z's information was readily available. Mr Z was connected to the Community Carer Support Team for information and advice on training events and support for caring for someone with dementia and he had support from VOCAL's counselling service. He was also connected to a Dementia Advisor with Alzheimer's Scotland for support and advice and onward referral to a Dementia Link Worker if wanted.

Story of Difference – Personalising Support (Continued)

Day services and respite options were discussed with Mr Z but he did not feel they needed these services at that time but was pleased to be aware that they could be available and how to access them in the future if required.

Mr Z commented that he was delighted and relieved that the carer payment allowed him to remain active and continue to do what he loved. He felt reassured that he had support to help him in to continue more confidently in his caring role and that he was much better informed of the support and services that could be available and that he no longer felt alone and forgotten about.



'I just wish that everyone I have been in contact with regarding my wellbeing in the care of my mother were as diligent, professional, dedicated and invested in the service they provide. The support from my CSW means everything to the quality of my life in my role as a full-time carer'

Hospital Discharge Carer Support Service

Appendix 1.1: Proposed full year spend

Table 1 - 2021/22 Carers Agreed Plan, Spend and Forecast - Period 7

Priority Area and activity	Agreed Spending Proposals per Feb 21 EIJB £	Forecast Spend £	Forecast Unallocated £
Identifying Carers & Information and Advice			
Contracted services (Lot 1, 6 and 8)	942,235	940,025	2,209
Communication and Engagement	20,000	0	20,000
EIJB Grant funded services	94,914	94,914	0
EHSCP Hospital Discharge Carer support team	158,020	158,020	0
Priority total	1,215,168	1,192,959	22,209
Carer Health and Wellbeing			
Contracted services (Lot 2)	490,523	490,494	29
EIJB Grant funded services	140,869	137,792	3,077
Priority total	631,392	628,286	3,106
Short Breaks			
Contracted services (Lot 3 and 4)	147,649	139,171	8,478
EIJB Grant funded services	98,185	98,185	0
Short Breaks Strategy	340,000	0	340,000
Priority total	585,834	237,356	348,478
Young Carers			
Contracted services	514,065	514,056	9
Personalising Support			
Contracted services (Lot 5a, 5b, 5c and 5d)	146,508	143,633	2,875
Hospital Discharge Carer Support Team	368,712	368,712	0
Estimated Carer Payments (linked to ACSP)	235,938	25,714	210,223
Replacement Care - contributions to Purchasing Budget	2,000,000	2,000,000	0
Priority total	2,751,158	2,538,059	213,099
Other activity			
Performance and Evaluation	43,500	0	43,500
Contingency Fund	100,000	0	100,000
Priority total	143,500	0	143,500
TOTAL	5,841,116	5,110,716	730,400
%		87.5	12.5

Source: CEC Finance: Period 7 Forecast 11.11.21

Appendix 1.2: Carer Unspent Funds

Below is a table indicating how the £730k is the plan to commit, including aspects being brought forward (49k); aspects that will enhance current provision, (£618k); and a minimal a carry forward element to 2022-23 (£63k). An outline of benefits is also indicated:

Table 2 – Spend Plan for Unallocated Carers Funding 2021-22

	Area of Proposed Spend	2021-22	Comments and Benefits
	Bringing Forward Aspects		
1.	Bring forward allocation for independent advocacy for carers, as agreed at 11 Nov EMT, for 2021-22	34k	£34k, is split between two providers (PIA & Advocard), for 4 months activity for the remainder of 2021/22, up to March 2022 from uncommitted carer funds 2021/22, being proportionate to the new annual investment from April 2022. New Advocacy contract expires end July 2022. Allocation for Carers IA will be allocated thereafter. £34k committed April – July 2022 from 2022-23 allocation, to cover this period.
2.	Allocation to Carer specific PCO – Business Case ratified 2021, commencing Jan 2021, for last quarter of 2021-22	15k	New Older PCO planned to start Jan 2022, with Carer PCO working full time on Carers thereafter. Allocation yet to be accounted for given start of Jan 2022
	Section total	49k	
	Enhancing current provision	2021-22	Comments and Benefits
	One Off Payments		
3.	Match City of Edinburgh Council's pledge of £250k bringing the Carer recovery fund to £500k to be	250k	Purpose: Personalising Support - Carer Payments

	delivered by partner agency VOCAL.		<p>“In recognition of the challenging impact the Coronavirus pandemic had on many carers and their families, the City of Edinburgh Council approved a £250,000 Carers Recovery Fund in its 2021-22 budget to help carers and their families in greatest need.”</p> <p>Specifically targeting delivery of improved:</p> <ul style="list-style-type: none"> • opportunities for breaks from caring • personal health and wellbeing • economic (financial) wellbeing <p>The above has allowed VOCAL, to reach and support 600+ beneficiaries across Edinburgh, by matching this using unallocated funds, a further 600+ beneficiaries can be reached.</p> <p>An agreed allocation for the CEC grant reaches BAME and young carers. The same allocation will apply for the matched funding.</p>
4.	Enhance more generic Grant funded activity, where carers benefit, current total c£298k, by 30% uplift of previous transitional grants	90k	<p>Purpose: Personalising Support - Carer Payments</p> <p>Benefit to carers by aiming to address social isolation, promoting healthy lifestyles, improving mental wellbeing, supporting self-management of long-term conditions, Information and advice, income maximisation, reducing</p>

			<p>digital exclusion, building strong, inclusive and resilient communities.</p> <p>It has been reported that current grant providers have pent up demand associated with covid, with carers benefiting greatly from provision.</p>
5.	Uplift the current Lot 3, short breaks programme, as demand is currently exceeding supply.	100k	<p>Purpose: Short Breaks</p> <p>Additional funding would allow Lot 3 provider to increase capacity and enhance opportunities for short breaks</p>
6.	Uplift Lot 4 Short Breaks Fund, which is allocated directly to carers to support their requirement for short break and break from caring	60k	<p>Purpose: Short Breaks</p> <p>Additional short breaks for carers, alleviating pressure for them, and preventing pressure to the purchasing budget</p>
7.	<p>Enhance Lot 6, and the ability to reaching and supporting Young Adult Carers, aligning the 2021-22 value to the subsequent 3 years.</p> <p>2021-22 value = 40.8k</p> <p>subsequent years just over 72.2k, 73.4k, 74.5k</p>	31k	<p>Purpose: Short Breaks</p> <p>Young Adult Carers are one of the most marginalised carer groups, and enhancing Lot 6 would result in much needed short breaks for young carers</p>

8.	EHSCP contribution to the survey carried out, and led by VOCAL	5k	
9	Additional 30% uplift to existing carer support grants from contingency funds	£82k	Purpose: Personalising Support Benefit to carers by aiming to address social isolation, promoting healthy lifestyles, improving mental wellbeing, supporting self-management of long-term conditions, Information and advice, income maximisation, reducing digital exclusion, building strong, inclusive and resilient communities.
Section Total		618k	
Areas of Proposed Carry Forward to 2022-23			
10.	Expedite roll out of ACSPs and enhance how Lot 5 carer payments are allocated for an anticipated surge in spring 2022. Currently on 4-week trial basis, expected to be rolled out early 2022 increasing access to carer payments. Carry forward £100k to next year's budget for Carer Payments	63k	Purpose: Personalising Support-Carer Payments As restrictions continue to ease, Carers who have managed for so long with very little direct support are likely to come forwards more readily meaning demand for carer payments in the coming year could well be more than what is allocated. Carried forward allocation will allow Lot 5 to respond to anticipated surge in demand in early 2022.
Section Total		63k	
TOTAL		730k	

Appendix 2: Implementation Plans

There are two distinct implementation plans; adult carers and young carers. This demonstrates the key differences for these two groups of carers that have been recognised in the development of this strategy and taken into consideration.

Appendix 2a: Adult carers implementation plan			
Priority Area	Outcomes for Carers	Actions that will contribute to these outcomes	How success will be measured
1. Identifying Carers	<ul style="list-style-type: none"> Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support 	<p>We will identify people who care as early in their caring role as possible by undertaking the following activities:</p> <ol style="list-style-type: none"> 1.1 Working with third sector, EHSCP, City of Edinburgh Council and NHS Lothian services to identify carers at point of diagnosis 1.2 Increase the number of partnership initiatives with Edinburgh employers to identify and support carers in the workplace and support carers to return to work. 1.3 Continue to work in partnership with Edinburgh colleges, universities and further education providers to support young adult carers who are studying. 	<p>We will see an increase in the number of carers identified through the following sources:</p> <ul style="list-style-type: none"> The no. of referrals received by partner organisations for carer support <p>We will measure the impact of identifying carers by recording:</p> <ul style="list-style-type: none"> The number and type of supports carers are connected to following

		1.4 Ensure all identified adult carers are offered an Adult carer support plan as soon as possible in their carer journey.	our involvement with them
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Priority Area	Outcomes for Carers	Actions that will contribute to these outcomes	How success will be measured
<p>2. Information and Advice</p>	<ul style="list-style-type: none"> • Carers know how to connect to information, advice. • Carers are well informed about their rights and how to access support • Carers report economic wellbeing 	<p>2.1 Expand our offer of information and advice to include digital solutions and 24/7 access for carers including, but not restricted to information and advice on:</p> <ul style="list-style-type: none"> • Financial planning • Welfare benefits and income maximisation • Self-directed support • Carer grants for young carers and young carer ID card • Advocacy • Peer Support <p>2.2 Continue to offer a range of carer training opportunities through 3rd sector partners and use of carer personal budgets</p>	<p>We will see an increase in the number of people accessing information and advice services through the following sources:</p> <ul style="list-style-type: none"> • No. of requests for information and profile of people making the request, e.g. carers, health and social care professionals, employers

		<p>2.3 Provide information and advice in a range of formats accessible to carers whatever their background and location across the city.</p> <p>2.4 The third sector, EHSCP, City of Edinburgh Council and NHS Lothian, and further and higher education providers working together to continue to raise public awareness of carers, their contributions, and the role communities can play in supporting carers</p> <p>2.5 Develop and maintain a map of carer support services across the city</p>	<ul style="list-style-type: none"> • Number of carers attending training
<p>3. Carer Health and Wellbeing</p>	<ul style="list-style-type: none"> • Carers are supported to look after their own physical, mental, emotional, and social wellbeing • Carers feel listened to and heard as individuals • Carers feel well supported throughout their caring journey 	<p>3.1 The third sector, EHSCP, and City of Edinburgh Council will work together to further develop our offer of health and wellbeing supports that are flexible and meet need depending on carers personal circumstances for example; 1:1, group, emotional support and/or counselling and digital supports, support for minority communities</p> <p>3.2 Every identified carer will be offered support with Emergency planning</p> <p>3.3 Carers will be supported to make plans for the future, for example with Power of Attorney/guardianship, anticipatory care planning.</p>	<p>We will see an increase in the percentage of carers who feel supported to continue in their caring role from the biannual Health and Social Care survey</p> <p>We will use the following data to analyse changes in the above outcome:</p> <ul style="list-style-type: none"> • No. of counselling sessions • No. emergency plans completed

		<p>3.4 We will work with carers whose caring role has ended either through bereavement or change in circumstances to support them with this transition, including young adult carers who are seeking to create a life beyond caring.</p> <p>3.5 Report on inappropriate referrals to services so we can develop an informed view of unmet carer need across the city which will inform ongoing and future planning</p>	<ul style="list-style-type: none"> • Economic Wellbeing measures? <p>As part of the annual carer census return the following information will also contribute to analysis of the impact of health and wellbeing supports:</p> <ul style="list-style-type: none"> • Care Duration • Care Hours • Care Type • Care Impact
<p>4. Short Breaks</p>	<ul style="list-style-type: none"> • Carers feel safe, rested and recharged • Carers are supported to have a life outside and/or alongside their caring role • Carers feel supported to maintain their caring relationships and sustain their caring role 	<p>4.1 Development and implementation of a Short Breaks Statement</p> <p>4.2 Short breaks and time out from caring are integrated into all conversations with identified carers and most appropriate support is identified</p> <p>4.3 Carers will be supported to access a range of flexible, responsive, and creative short breaks by developing brokerage options with third sector partners and use of self-directed support</p>	<p>We will see an increase in the percentage of carers who feel supported to continue in their caring role from the biannual Health and Social Care survey.</p> <p>We will use the following data to analyse changes in the above outcome:</p> <ul style="list-style-type: none"> • No. carer breaks – <i>from carer census</i> • Type of carer Breaks

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<p>5. Personalising Support for Carers</p>	<ul style="list-style-type: none"> • Carers are involved in support planning in the community and from hospital, and have a choice of support options to meet their own needs and the person they care for. • Carers are confident in shaping services for themselves and those they support and are more in control of the support they receive 	<p>5.1 Extend the Adult carer support plan across the city to replace the existing carers assessments, ensuring timescales to access this are in line with partnership standards.</p> <p>5.2 All Young adult carers transitioning into adult services are provided with an Adult Carer Support Plan</p> <p>5.3 Establish a partnership approach for young carer supports and young adult carer supports to ensure a smooth transition between young people and adult services when required.</p> <p>5.4 Implement successful self-directed support processes used in the initial testing of the Adult carer support plans to all carers whose needs meet eligibility criteria.</p> <p>5.5 Involve carers in Edinburgh Health and Social Care Partnership's transformation programme and development of</p>	<p>No. of Adult carer support plans completed – <i>from carer census</i></p> <p>No. personal budgets, cost, SDS option chosen and type of support in place – <i>from carer census</i></p>
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		the Edinburgh offer for adult health and social care supports.	
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Appendix 2b: Young carers Implementation Plan			
Priority Area	Outcomes for Carers	Actions that will contribute to these outcomes	How success will be measured
1. Identifying Young Carers	<ul style="list-style-type: none"> Young carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support 	<p>Applying the principles of GIRFEC, We will identify young people who care as early in their caring role as possible by undertaking the following activities:</p> <p>1.1 Working with schools to identify young people who care as early as possible, this will include a range of awareness raising and training activities to ensure appropriate identification of young carers</p> <p>1.2 Ensure all identified young carers are offered a young carers statement as soon as possible in their carer journey</p> <p>1.3 Continue working with schools and further and higher education providers to raise awareness of young carers and young adult carers needs and improve the support offered to this group of carers at points of transition such as:</p>	<p>We will see an increase in the number of young carers identified through the following sources:</p> <ul style="list-style-type: none"> The no. of referrals received by partner organisations for carer support No. young carer statements completed – Carer census <p>We will measure the impact of identifying carers by recording:</p> <ul style="list-style-type: none"> The number and type of supports young carers are connected to following our

		<ul style="list-style-type: none"> • Primary to secondary school • Secondary school to college/university/employment • When the caring role comes to an end 	<p>involvement with them</p> <ul style="list-style-type: none"> • Feedback from young carers regarding the difference support has made
2. Information and Advice	<ul style="list-style-type: none"> • Young carers can access good quality, age appropriate information and advice using a range of media and are well informed about their rights and how to access support • Young carers and their families report economic wellbeing 	<p>2.1 Develop digital offers of information and advice that young carers can access as and when they need to including, but not restricted to information and advice on:</p> <ul style="list-style-type: none"> • Self-directed support • Carer grants for young carers and young carer ID card • Career Advice • Advocacy • Peer Support <p>2.2 Ensure all schools have an identified young carers coordinator who can share information across the wider school community and provide advice on support available.</p> <p>2.3 The third sector, EHSCP, City of Edinburgh Council and NHS Lothian working together to continue to raise public awareness of young carers,</p>	<p>We will see an increase in the number of people accessing information and advice services through the following sources:</p> <ul style="list-style-type: none"> • No. of requests for information and profile of people making the request, e.g. carers, health and social care professionals, employers

		their contributions, and the role communities can play in supporting young carers	
3. Young Carer Health and Wellbeing	<ul style="list-style-type: none"> • Young carers sustain their physical, mental, emotional and social wellbeing • Young carers feel listened to and heard as individuals • Young carers feel well supported throughout their caring journey 	<p>3.1 The third sector, EHSCP, and City of Edinburgh Council will work together to further develop our offer of health and wellbeing supports that are flexible and meet need depending on young carers personal circumstances for example; 1:1, group, emotional support and/or counselling and digital supports, support for minority communities</p> <p>3.2 Young carers get information on the other things young people need to know about growing up, e.g. digital safety, healthy relationships, access to C Card, LGBT issues, and others</p> <p>3.3 Every identified young carer will be offered support with Emergency planning</p> <p>3.4 Young carers will be supported to make plans for the future, for example moving into further or higher education, employment or their own home.</p> <p>3.5 Report on inappropriate referrals to services so that we can develop an informed view of unmet carer need across the city which will inform ongoing and future planning</p>	<p>SHANNARI indicators for:</p> <ul style="list-style-type: none"> • Healthy • Achieving • Active • Included <p>We will use the following data to analyse changes in the above outcome</p> <ul style="list-style-type: none"> • No. peer support groups • No. 1:1 support • No. family support sessions <p>As part of the annual carer census return the following information will also contribute to analysis of the impact of health and wellbeing supports:</p> <ul style="list-style-type: none"> • Care Duration

			<ul style="list-style-type: none"> • Care Hours • Care Type • Care Impact Young carer feedback
4. Short Breaks	<ul style="list-style-type: none"> • Young carers feel safe and rested and are able to be children and young people first • Young carers are supported to have a life outside and/or alongside their caring role • Young carers feel supported to maintain their caring relationships and sustain their caring role 	4.1 Development and implementation of a Short Breaks Statement 4.2 Short breaks and time out from caring are integrated into all conversations with identified young carers and most appropriate support is identified 4.3 Young carers will be supported to access a range of flexible, responsive, personalised, and creative short breaks. This may include breaks at times of transition or support to continue their studies or gain employment.	<ul style="list-style-type: none"> • No. carer breaks – <i>from carer census</i> • Type of carer Breaks
5. Personalising Support for Young Carers	<ul style="list-style-type: none"> • Young carers are supported into a positive destination from school • Young carers are involved in support planning and have choice and options to meet their needs and the person they care for. • Young carers are confident in shaping services for themselves and those they support 	5.1 Implement young carer support plans using learning from early testing with Third Sector 5.2 Develop an approach and quality standard for young carer transitions so that transitions are planned and supported 5.3 Establish a partnership approach for young carer supports and young adult carer supports to ensure a smooth transition between young	No. of young carer statements completed – <i>from carer census</i> No. personal budgets, cost, SDS option chosen and type of support in place – <i>from carer census</i>

	<p>and are more in control of the support they receive</p> <ul style="list-style-type: none"> • Young carers feel supported to move into a life after caring and feel supported with the transition into adulthood 	<p>people and adult services when required.</p>	<p>No. of transition plans completed (life after caring)</p> <p>No. planning sessions tailored to help young carers onto positive destinations e.g. college applications, UCAS applications, job applications</p>
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Appendix 3: Key Performance Indicators

Lot/Priority Area	Green	Green +	Green ++	Green +++	Amber	Red	Further Detailed Data under development	Total KPIs
Lot 1 Identifying Carers/ Information & Advice	2	6	5	0	1	1	4	20
Lot 2 Health and Wellbeing	15	1	4	0	13	0	8	41
Lot 3 Short Breaks Programme	5	0	1	1	0	0	4	11
Lot 4 Short Breaks Fund	5	0	0	0	3	0	0	8
Lot 5 Edinburgh Integrated Support Team	10	0	0	0	8	0	6	24
Lot 6 Young Adult Carers	8	0	1	1	2	0	0	12
Lot 7 Young Carers (delivered through CEC C&Fs contract awards)	2	3	0	0	1	0	0	6
Lot 8 Parent Carers	14	0	0	2	1	0	0	17
TOTALS	61	10	11	4	21	1	22	130

Lot 1 - Identifying Carers						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement & Next Steps	RAG Status
Employer support	Year 1	20 Employers	Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support	No. of employers supported	23 Employers supported	+
				No. Employers who achieve carer positive award	13 agencies either Engaged, Established or Exemplary	+
Workplace Carer Support	Year 1	Minimum of 120 carers supported in employment		No. and % of carers supported in paid employment	178 Carers supported in Employment (10.62% of carers)	++
				No. and type of supports carers are connected to following contact with service	Further detailed data under development	
Health and Social care Workforce Training	Minimum 24 sessions per year			No. of Health and Social Care workers trained.	47 "Think Carer" sessions delivered/ 1136 practitioners reached	++

Lot 1 - Information & Advice						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement & Next Steps	RAG Status
Drop-in information and advices session	Minimum 48 city wide sessions per year		Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support	No. carers accessing drop-in service	Minimal owing to covid – numbers expected to increase following restrictions easing further	
	Minimum of 48 sessions per locality per year					
	Minimum of 960 hours Daily telephone advice service		Carers know how to connect to information and advice	No. of telephone enquiries	2854 overall enquiries P&E framework development in year 2	+
	Year 1-2	2400 carer enquiries per year				
Of which 5% carers should be carers of someone whose primary presenting issue alcohol or drug dependency and 5%		Carers are well informed about their rights and how to access support	No. and % carers supporting someone with addiction or mental illness	60 Carers supported (16% Mental Illness 7.6% Addiction)	++	

	carers of someone with mental illness		Carers report economic wellbeing	No. and type of supports carers are connected to following contact with service	1426 carers going on to receive various forms of support	
				No. and % of carers who advise of clear pathway to accessing information	Further detailed data under development	
One to one carer information and advice	Year 1-2	960 carers supported per year		No. of carers supported	1891 Carers supported overall	++
				% Carers satisfied with support	Further detailed data under development	
				No. Adult Carer Support Plans	460 total for Edinburgh – Roll Out expected early 2022	
				Caring situation i.e. Caring for someone with Dementia, addictions, mental health etc.	All caring situations supported	
				No. and % Carers supported who have	456 (24%) carers supported	+
Welfare Benefits and						

Financial Planning	Minimum of 360 carers per year		maximised benefit entitlement		
			Total amount of benefits accessed for carers	£863,039 total benefits accessed	++
Carer Map and access to 24/7 information and advice	Carer map of supports to be live by end of year 1 of contract		Carer map live and accessible Annual hits to online information and advice	Further detailed data under development	
Carer training	Minimum of 230 training sessions per year		No. carers trained Type of training accessed	253 various Training Sessions delivered	+
			% carers satisfied with training	100%	

Lot 2 - Health and Wellbeing						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement & Next Steps	RAG Status
Peer and Group Based Support – city wide	96 sessions per annum	Year 1 & 2 = 245 carers	Carers are supported to look after their own physical, mental, emotional, and social wellbeing Carers feel listened to and heard as individuals Carers feel well supported throughout their caring journey	No. of groups offered	62	
				No. carers accessing groups	414	++
	Types of groups offered			Mental health, addictions, Physical and/ or Learning disabilities, dementia, Employment, Previous carers, multiple caring roles		
	Carer stories of difference			See main report		
	No and % carers being supported to engage in activities that improve their wellbeing.			1950 (73%)		
Learning and Development opportunities for health	144 sessions per annum			No. of hours delivered	In excess of specs (see below)	++

and wellbeing				No. sessions delivered	245	++
				No. carers accessing	579	++
				Type of sessions delivered	managing stress and anxiety- dealing with anger- changing relationships- sleep nutrition, healthy balanced diet - physical activity	
				Carer stories of difference	See main report	
Counselling for Carers	Year 1	650 sessions		No. counselling sessions provided	675	+
				No. carers supported	61	
				Carer stories of difference	See main report	
North West Locality 1:1 support, peer and group-	Year 1 & 2 = 300 carers			No carers supported	405 Total for Edinburgh (101 average per locality)	
				No sessions delivered	222 Total for Edinburgh (55.5 average per locality)	

based support	per annum		Types of support delivered	building confidence in the caring role; keeping carers well informed about issues relevant to their caring role; offering carers practical and emotional support;	
			No. emergency plans completed	Further detailed data under development	
			No. ACSP's completed	460 total for Edinburgh – Roll Out expected early 2022	
			Carer stories of difference	See main report	
			No and % carers being supported to engage in activities that improve their wellbeing	Further detailed data under development	
North East Locality 1:1 support peer and group-based support	Year 1 & 2 = 215 carers per annum		No carers supported	405 Total for Edinburgh (101 average per locality)	
			No sessions delivered	222 Total for Edinburgh (55.5 average per locality)	
			Types of support delivered	building confidence in the caring role; keeping carers well informed about issues	

				relevant to their caring role; offering carers practical and emotional support;	
			No. emergency plans completed	Further detailed data under development	
			No. ACSP's completed	460 total for Edinburgh – Roll Out expected early 2022	
			Carer stories of difference	See main report	
			No and % carers being supported to engage in activities that improve their wellbeing	Further detailed data under development	
South East Locality 1:1 support peer and group- based support	Year 1& 2 = 215 carers per annum		No carers supported	405 Total for Edinburgh (101 average per locality)	
			No sessions delivered	222 Total for Edinburgh (55.5 average per locality)	
			Types of support delivered	building confidence in the caring role; keeping carers well informed about issues relevant to their caring role;	

				offering carers practical and emotional support;	
			No. emergency plans completed	Further detailed data under development	
			No. ACSP's completed	460 total for Edinburgh – Roll Out expected early 2022	
			Carer stories of difference	See main report	
			No and % carers being supported to engage in activities that improve their wellbeing	Further detailed data under development	
South West Locality 1:1 Support peer and group-based support	Year 1 & 2 = 225 carers per annum		No carers supported	405 Total for Edinburgh (101 average per locality)	
			No sessions delivered	222 Total for Edinburgh (55.5 average per locality)	
			Types of support delivered	building confidence in the caring role; keeping carers well informed about issues relevant to their caring role; offering carers practical and emotional support;	

			No. emergency plans completed	Further detailed data under development	
			No. ACSP's completed	460 total for Edinburgh – Roll Out expected early 2022	
			Carer stories of difference	See main report	
			No and % carers being supported to engage in activities that improve their wellbeing	Further detailed data under development	

Lot 3 - Short Breaks Programme						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement	RAG Status
Planned Short Breaks Programme - Day and Evening Breaks	Year 1	40 carers Supported, Min 4 events	Carers feel safe, rested and recharged Carers are supported to have a life outside and/or alongside their caring role Carers feel supported to maintain their caring relationships and sustain their caring role.	No. carers supported	144	+++
				% new carers	75 total for lot 3 (35%)	
				No. day/evening sessions	20+	
				No. and % carers reporting improvements in their health and wellbeing	Further detailed data under development	
				No. and % carers reporting improvement in their caring relationship	Further detailed data under development	
Planned Short Breaks Programme -	Year 1	35 Carers Supported		No. carers supported	67	++
				% new carers	75 total for Lot 3 (35%)	

Residential Breaks				No. Residential Breaks	9 stepping out Various via other means	
				No. of short break nights provided.	36+	
				No. and % carers reporting improvements in their health and wellbeing	Further detailed data under development	
				No. and % carers reporting improvement in their caring relationship	Further detailed data under development	

Lot 4 - Short Breaks Fund						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement	RAG Status
Short Breaks Fund	Year 1	100 carers	Carers feel safe, rested and recharged Carers are supported to have a life outside and/or alongside their caring role Carers feel supported to maintain their caring relationships and sustain their caring role	No applications received	84	Amber
				No. of applications approved	83	Amber
				No. new carers funded	83	Amber
				lowest value of funded application	£38	Green
				Highest funded application	£500	Green
				Average funded application	£383	Green
				No. and % cares reporting improvements in their health and wellbeing	31 - 95%	Green
				No. and % carers reporting improvement in their caring relationship	31 - 95%	Green

Edinburgh Integrated Carer Support Team – 5a North East						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement	RAG Status
Edinburgh Carer Support Team	Year 1	150 carers supported	Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support	No. carers supported	109 (95 new)	
			Carers are supported to look after their own physical, mental, emotional, and social wellbeing	Type of support provided	Short breaks or respite; Advice & information; Counselling or emotional support; Assistance with benefits, e.g. Carer's allowance; Peer support / Group activities; Advocacy; Emergency Planning; Future Planning	
			Carers feel listened to and heard as individuals			
			Carers feel well supported throughout their caring journey			
			Carers are involved in support planning in the community and from hospital and have a choice of options to meet their own needs and the person they care for.	No. ACSP	3-Pilot 460 total for Edinburgh – Roll Out	

			Carers are confident in shaping services for themselves and those they support and are more in control of the support they receive.		expected early 2022	
				No. Emergency plans	10	
				No. hours direct contact time	Further detailed data under development	
				Carer feedback/stories of difference	See main report	

Edinburgh Integrated Carer Support Team – 5b North West						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement	RAG Status
Edinburgh Carer Support Team	Year 1	150 carers supported	Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support	No. carers supported	91	
			Carers are supported to look after their own physical, mental, emotional, and social wellbeing	Type of support provided	Short breaks or respite; Advice & information; Counselling or emotional support; Assistance with benefits, e.g. Carer's allowance; Peer support / Group activities; Advocacy; Emergency Planning; Future Planning	
			Carers feel listened to and heard as individuals			
			Carers feel well supported throughout their caring journey			
			Carers are involved in support planning in the community and from hospital and have a choice of options to meet their own needs and the person they care for	No. ACSP	460 total for Edinburgh – Roll Out	

			Carers are confident in shaping services for themselves and those they support and are more in control of the support they receive		expected early 2022	
				No. Emergency plans	Further detailed data under development	
				No. hours direct contact time	Further detailed data under development	
				Carer feedback/stories of difference	See main report	

Edinburgh Integrated Carer Support Team – 5c South East						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement	RAG Status
Edinburgh Carer Support Team	Year 1	150 carers supported	<p>Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support</p> <p>Carers are supported to look after their own physical, mental, emotional, and social wellbeing</p> <p>Carers feel listened to and heard as individuals</p> <p>Carers feel well supported throughout their caring journey</p> <p>Carers are involved in support planning in the community and from hospital and have a choice of options to meet their own needs and the person they care for</p>	No. carers supported	80	
				Type of support provided	Short breaks or respite; Advice & information; Counselling or emotional support; Assistance with benefits, e.g. Carer's allowance; Peer support / Group activities; Advocacy; Emergency Planning; Future Planning	
				No. ACSP	460 total for Edinburgh – Roll Out	

			Carers are confident in shaping services for themselves and those they support and are more in control of the support they receive		expected early 2022	
				No. Emergency plans	Further detailed data under development	
				No. hours direct contact time	Further detailed data under development	
				Carer feedback/stories of difference	See main report	

Edinburgh Integrated Carer Support Team – 5d South West						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement	RAG Status
Edinburgh Carer Support Team	Year 1	150 carers supported	<p>Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support</p> <p>Carers are supported to look after their own physical, mental, emotional, and social wellbeing</p> <p>Carers feel listened to and heard as individuals</p> <p>Carers feel well supported throughout their caring journey</p> <p>Carers are involved in support planning in the community and from hospital and have a choice of options to meet their own needs and the person they care for</p>	No. carers supported	104	
				Type of support provided	Short breaks or respite; Advice & information; Counselling or emotional support; Assistance with benefits, e.g. Carer's allowance; Peer support / Group activities; Advocacy; Emergency Planning; Future Planning	
				No. ACSP	460 total for Edinburgh – Roll Out	

			Carers are confident in shaping services for themselves and those they support and are more in control of the support they receive.		expected early 2022	
				No. Emergency plans	38	
				No. hours direct contact time	Further detailed data under development	
				Carer feedback/stories of difference	See main report	

Lot 6 - Young Adult Carers					
Activity	Minimum Level	Outcome for Carers	Indicators/Measures	Achievement	RAG Status
Identifying Carers	8 information days across all five FHE providers annually	Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support	No. of information days	21	++
			No. young adult carers identified in FHE setting	4	
Health and Wellbeing	Minimum of 100 young adult carers supported per year	Carers know how to connect to information and advice	Total no. carers supported	83	
		Carers are well informed about their rights and how to access support	No. New Carers supported	55	
		Carers report economic wellbeing	No. 1:1 sessions	702	+++
		Carers are supported to look after their own physical, mental, emotional, and social wellbeing	No. of groups offered	107	
			No. carers accessing groups	75	
			Types of groups offered	Employability	

		Carers feel listened to and heard as individuals		Independent living	Green
		Carers feel well supported throughout their caring journey		Activity agreements	
		Carers are involved in support planning in the community and from hospital and have a choice of options to meet their own needs and the person they care for.	Carer stories of difference	See main report	
		Carers are confident in shaping services for themselves and those they support and are more in control of the support they receive.	No and % carers being supported to engage in activities that improve their wellbeing	75 carers (90%) report wellbeing improvement	Green
Young Carer Statements & Adult Carer Support Plans	Minimum of 100 Young Care Statements or Adult Carer Support Plan completed.		No. Young Carer Statements	10 (YCS rolled out from 6-month point)	Yellow
			No. Adult Carer Support Plans	2 pilot - 460 total for Edinburgh – Roll out expected early 2022	Yellow

Lot 7 - Young Carers				
Activity	Minimum Level	Indicators/Measures	Achieved	RAG Status
Schools Support	120 Schools	No of schools with Young Carer Coordinators	124	
		No of staff attending CPD training	187 staff	
Young Carer Statements	Year 1 (Sep 20 – Aug 21) 821 statements completed	No of Young Carers receiving a Statement	52 started not completed 67 completed	+
Young Carers Grants Fund	40 Grant awards made	No of Young Carers receiving a grant	28 (YCS only in use since June 21)	
Support to Young Carers	Year 1 (Sep 20 – Aug 21) 738 Young carers supported	No. of groups offered	715	+
		No. young carers accessing	757	+

Lot 8 - Parent Carers						
Activity	Minimum Level		Outcome for Carers	Indicators/Measures	Achievement	RAG Status
Information and Advice enquiries	Provide information and advice to a minimum of 600 parent carers per year		Carers are identified as close to the start of their caring journey as possible and are connected to opportunities and support	No. of carers supported	1052	+++
	Financial Planning and Welfare benefit support			% Carers satisfied with support	100%	
	Year 1	120 carers	Carers know how to connect to information and advice	No. and % Carers supported who have maximised benefit entitlement	376 carers (35%)	+++
			Carers are well informed about their rights and how to access support Carers report economic wellbeing	Total amount of benefits accessed for carers	£389,404	

Adult Carer Support Plans	Year 1	Min 330 plans	<p>Carers are involved in support planning in the community and from hospital and have a choice of options to meet their own needs and the person they care for.</p> <p>Carers are confident in shaping services for themselves and those they support and are more in control of the support they receive.</p>	No. adult carer support plans completed	460 total for Edinburgh – Roll out expected early 2022	
				Type of support required	Short Breaks, Information and advice, Practical support, Counselling/ emotional support, Training and learning, Assistance with Benefits, Group support, Advocacy, Emergency Planning, Future Planning	
				No. new carers to the service	505	
Health and Wellbeing	Year 1	Support min 250 carers	Carers are supported to look after their own physical, mental, emotional, and social wellbeing	No. of groups offered	17	
				No. carers accessing groups	58	
				Types of groups offered	Benefits for School Age Kids x2; Song and Rhyme; ASN child -	

			<p>Carers feel listened to and heard as individuals</p> <p>Carers feel well supported throughout their caring journey</p>	<p>challenging behaviour x2; Benefits for School Age Kids; Caring for a child with learning difficulties; Craft for parent carers; ASN child sleep; Not fine in school x 2; Parent Carers open Session; Craft Workshop for parents and Kids; Surviving the festive season as a parent carer; Paediatric first aid; Child gaming and gambling; Taking Care of Mental Health and Wellbeing for Carers of disabled children</p>	
			Carer stories of difference	See main report	
			No and % carers being supported to engage in activities that improve their wellbeing	438 (41%)	
			No carers supported	438	

			No sessions delivered	14	
			Types of support delivered	Short Breaks, Information and advice, Practical support, Counselling/ emotional support, Training and learning, Assistance with Benefits, Group support, Advocacy, Emergency Planning, Future Planning	
			No. emergency plans completed	2	

Appendix 4: Publicity and awareness activities

During the pandemic

- May 2020- Rachel McNeill: Carer Support services are open: <https://www.youtube.com/watch?v=KamOyeUyqtQ&feature=youtu.be>
- June 2020: Carers Week, Keith Lugton: <https://youtu.be/e6yhS0F81PM>
- November 2020, Carers Rights Day, Gavin Bisset: <https://youtu.be/-fsA5YIMeoM>

Podcast

- Carers Week 2021, Keith Lugton-: <https://www.youtube.com/watch?v=4jDlcUt6mdl&t=1038s>

National Ad Campaign:

<https://www.nhsinform.scot/campaigns/support-for-unpaid-carers>

Appendix 5.1: Short Breaks Fund Eligibility Criteria

Eligibility – Direct carer grants

Edinburgh

Carer beneficiaries

Time to Live, SCS – carers of people aged 21 or over and young carers (caring for children or adults) [NB this fund excludes carers caring for a person aged 20 or less – such carers should be signposted to one of the other funds or ‘Take a Break’ - <https://takeabreakscotland.org.uk/>. Further, kinship carers are excluded].

Carers may choose to use their grant to pay for an activity for the cared for person if this enables the carer to have a break.

Must be able to evidence how grants made to carers benefit both the carer and the person they care for.

Carers do not have to have an Adult Carer Support Plan or be registered with VOCAL before a grant can be awarded.

Outcomes specified:

- Carers will have more opportunities to enjoy a life outside of their caring role
- Carers will feel better supported to sustain their caring role
- Carers and the people they care for will have improved wellbeing

Amounts awarded:

Average grant £300

Maximum grant £600

HSCP Lot 4 –

Carer beneficiaries:

The Short Breaks fund will be for those carers whose needs and outcomes cannot be met through the planned short breaks programme, respite or other funding routes. ‘The service provider shall ensure that prior to submitting the application other means to fund a short break have been explored and discounted on the basis that alternative options would not fully meet the carers needs or their outcomes. Other means of funding or accessing a short break includes but not restricted to the planned short breaks programme or respite options available from other carer support organisations.’ In addition, the service provider shall be able to set criteria to prioritise the allocation of funds. These criteria should be developed and agreed with the EHSCP and in line with criteria used by local providers of the Time to Live fund operated on behalf of Shared Care Scotland.

To include: young carers, adult carers, parent carers. All carer groups.

The Service shall NOT be provided if the cared for person does not reside in Edinburgh.

Amounts awarded:

‘It is anticipated that the average award from the Short Breaks Fund will be around £300, this is based on information from Shared Care Scotland Evaluation of Time to Live. A maximum of one funded application per carer will be awarded in a 12-month period, the maximum value of this award shall be no more than £500.’

Minimum levels: 100 carers year 1; 110 carers year 2; 125 carers year 3.

Outcomes specified:

- Carers feel safe, rested and recharged
- Carers are supported to have a life outside and/or alongside their caring role
- Carers feel supported to maintain their caring relationships and sustain their caring role

COVID recovery fund – Time to Live - SCS COVID recovery fund HSCP Lot 4

Main purpose:			
Short breaks	YES	YES	YES
Financial wellbeing	NO	YES	NO
Health and wellbeing	NO	YES	NO
Specific purpose:	Time to Live - SCS	COVID recovery fund	HSCP Lot 4
Residential or day trip	YES	YES (check)	YES
Relaxation or wellbeing therapies	YES	YES (check)	YES
Gaming or recreational equipment	YES	NO (check)	YES
Transport	YES – if it facilitates a short break	YES – if it could help secure employment	YES - if it facilitates a short break
Driving lessons	YES	YES (check)	YES
Garden equipment e.g. games, furniture, hut	YES	YES (check)	YES
Electronic equipment e.g. laptop, iPad, phone	YES	YES (check)	YES
Payment towards utility bills debt	NO	YES (check)	NO
Help securing employment e.g. clothes	NO	YES (check)	NO
White goods	NO	YES (check)	NO

Appendix 5.2: Statement on Carers in Greatest Need

VOCAL Statement: 'carers in greatest need'

This text/narrative is the basis and process through which VOCAL will identify 'carers in greatest need' in future conversations and application forms, for accessing limited funds or shorts breaks

VOCAL provides a wide range of support: information, care planning, training, emotional and counselling support and more. These are universally accessible – open to all carers, free of charge. Some supports are, however, limited to a maximum number of beneficiaries. These include holiday and short breaks opportunities and funds for financial support. Where opportunities are limited, VOCAL take measures to reach carers **in greatest need** of a break or of financial support.

By **carers in greatest need** we mean carers at risk of isolation, exclusion or disadvantage, whose caring role and lack of support impact on their

- physical, emotional and mental health and wellbeing
- ability to balance the caring role with a life of their own
- financial wellbeing and ability to afford basic necessities

VOCAL allows carers to self-define need, by asking and assessing what difference the support they apply for would make to their lives

We do not apply **formal** means-testing, i.e. a process which qualifies a person for support only if their own financial means are below a threshold where they do not need to contribute to the cost of a service. VOCAL does, however, ask carers if they are in receipt of any welfare benefits. These are key indicators of risk of financial exclusion, and critically, allow VOCAL staff to explore a range of income maximisation measures in addition to assessing one-off support.

VOCAL will therefore ask the following questions in all conversations and application processes:

"The following questions will allow us to fully understand your individual situation when assessing your application:

o **Please describe in your own words, what difference it would make to your caring situation and your own health and wellbeing, if you were successful with this application:**

- **What difference would this support make to your financial situation?**
- Are you in receipt of any means tested benefits?
- Not in receipt of any benefit
- Universal credit (UC)
- Income Support
- Income related ESA
- Child Tax Credit
- Working Tax Credit
- Housing Benefit
- Pension Credit