

**DIRECTION FROM THE SHETLAND ISLANDS INTEGRATION JOINT BOARD (“IJB”)**

**ISSUED UNDER SECTION 26(1) OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014**

<b>Direction:</b> Unpaid Carers	<b>Direction to:</b> SIC and NHSS	<b>Overall Budget allocated by IJB for Direction:</b> SIC – budgets are spread across other service areas
<b>Reference Number:</b> 1.14	<b>Relevant Function(s):</b> All our services have a role in identifying and supporting unpaid carers. Specific functions noted in this Direction are provided by: Community Care Resources, Adult Mental Health, Adult Services (Learning Disability and Autistic Spectrum Disorder), Adult Social Work	<b>Review Date:</b> March 2024
<b>IJB Report(s) Reference Number:</b> CC-30-23		
<b>Date Direction issued/authorised by IJB:</b> 29 June 2023	<b>Date Direction takes effect:</b> 1 April 2023	<b>Does the Direction supersede, amend or revoke an existing Direction? If yes, include reference number of existing Direction:</b>
<b>Purpose of Direction</b>		
<p>To provide support to unpaid carers through a variety of methods in order to meet their needs/ personal outcomes and sustain their ability to provide care.</p> <p>To raise the profile of the <a href="#">National Carers Strategy</a> locally to encourage and guide action to support unpaid carers, on the understanding that to be effective support must be system wide.</p>		

## Overarching Directions to Function(s)

In line with the Equal Partners in Care (EPiC) model, as per the current strategy, the HSCP will work to -enable carers to be:

- Identified;
- Supported and empowered to manage their caring role;
- Enabled to have a life outside of caring;
- Free from disadvantage and discrimination;
- Fully engaged in the planning and shaping of services;
- Recognised and valued as equal partners in care.

Note Unpaid Carers are considered a key partner by individual services including social work, community care and social care (Community Care Resources, Community Mental Health and Adult Services (Learning Disability and Autistic Spectrum Disorder) – their work is no longer duplicated within this direction, however key parts are included and expanded on where appropriate.

Directions:	Performance / Objective(s):
Provide support for unpaid carers through the implementation of the Carers Act (Scotland) 2016.	<p>Carer's Strategy review scheduled for 2022/2023 was delayed awaiting publication of National Carers Strategy (December 2022) to ensure local alignment to best practice and focussed activity.</p> <p>Local strategy will be reviewed in 2023/24 to ensure future sustainability of support systems for unpaid carers, including:</p> <ul style="list-style-type: none"><li>• support for health, wellbeing and emotional impact of caring,</li><li>• greater control over resources to enable personalisation, choice and empowerment,</li><li>• alternatives to building based, fixed cost assets</li></ul> <p>Performance:</p> <ul style="list-style-type: none"><li>• Successful publication of reviewed strategy</li><li>• Monitor number of Carer Support Plans</li><li>• Ensure sustainability of 3rd Sector contracts that support people to access alternatives to in-house/ building based services</li></ul>

<p>Plan, design and provide services in a way that recognises and builds on the value and rights of unpaid carers, their role, and expertise:</p> <p>To deliver an ‘asset based’ approach to support planning, whereby the assessment of need starts from the premise of what a person is able to do for themselves, use of their support network and assets, then works outwards to statutory provision. This approach is person-centred by nature and includes unpaid carers as equal partners.</p>	<p>Objective: All staff are skilled in an asset-based approach to needs assessment, and undertake effective future care planning with service users and their support networks.</p> <p>Quantitative measures</p> <ul style="list-style-type: none"> <li>• Number of Carer Support Plans</li> <li>• Numbers of older people and those with disabilities or long-term conditions able to remain at home or in a homely setting in their community</li> <li>• Number of unpaid carers able to maintain or increase levels of independence and inclusion</li> <li>• Reduction in unplanned, emergency and inappropriate admission to hospital or other service</li> <li>• To facilitate discharge from hospital appropriately</li> <li>• To protect adults from abuse</li> </ul>
<p>To provide support for unpaid carers via the structure and accessibility of support services for the “cared for” person, including:</p> <ul style="list-style-type: none"> <li>• Short Break and Respite Services where the needs of the unpaid carer is the main focus, though provision can deliver positive benefit to the cared for person</li> <li>• Day opportunities where the needs of the cared for person is the main focus, though provision can deliver benefits to the unpaid carer</li> </ul> <p>Which will enable them to have a life outside caring.</p> <p>(This includes directly commissioned service and the requirement to facilitate and support community based, accessible and meaningful opportunities.)</p>	<p>Objective:</p> <p>Planning and redesign of these services will include input from unpaid carers to ensure they meet their needs within resource available.</p> <p>HSCP partners and representatives will advocate for the needs of unpaid carers in relevant forums. Impact Assessment of changes or development will include impact on Unpaid Carers as a distinct group.</p> <p>Measures:</p> <ul style="list-style-type: none"> <li>• Availability of short break and respite services (including balance of Planned:Emergency respite instances)</li> <li>• Availability, accessibility and knowledge of meaningful day opportunities – enriched breadth of options, and increased uptake (taken forward within Community Ethos strand of Shifting the Balance of Care)</li> <li>• Number of Short break grants paid out to unpaid carers</li> </ul>

	<ul style="list-style-type: none"> <li>• Number of respite breaks provided to unpaid carers</li> </ul>
<p>To provide support to unpaid carers, recognising that they may have poorer health, wellbeing, social and financial outcomes associated with their caring role.</p>	<p>Offer services in a way that is accessible to people who may find it difficult to access support normally, e.g. via Community Led Support.</p> <p>Advocate for needs and rights of carers as part of role in local partnerships, and via input into relevant Impact Assessments related to service change.</p> <p>Measures:</p> <ul style="list-style-type: none"> <li>• Unpaid carers feel supported to continue in their caring role</li> <li>• Increased number of people accessing support through Shetland Carers/Shetland Care Attendant Scheme/Community Connections/Shared Lives</li> <li>• Unpaid carers actively identified as a priority group in Impact Assessment of local policy and service change</li> </ul> <p>Services will be asked to reflect:</p> <ul style="list-style-type: none"> <li>• What difference have you made to unpaid carers through your work?</li> <li>• How have your systems been reviewed to identify and support unpaid carers?</li> </ul>

## Improvement Plan

Expected Outcomes	Key Actions/ Milestones (inc dates)	Target (inc. dates)	Risks (detail in risk table below)	Savings/ funding (amount and source)	Ref. and linked priorities
People are supported and empowered to continue in their caring role by our health and social care system	<p>Review of local Carers Strategy to update in line with National Carers Strategy (Dec 2022). Co-development with range of relevant stakeholders.</p> <p>Communication and sharing of strategy within Shetland Partnership and with wider community via effective communication strategy and sharing of good practice.</p>	<p>Strategy reviewed and published end 23/24</p> <p>Comms ongoing</p>	Workforce capacity for improvement work (1)		<p>StBoC</p> <p>Tackling Inequalities</p> <p>Prevention/Early Intervention</p> <p>Meaningful Engagement</p>
Unpaid carers are identified, have their rights recognised supported, and are valued as equal partners in care.	<p>Expand scope of Good Conversations and approach across Health and Social Care.</p> <p>Delivery of cascade training in Good Conversations to support sustainability of approach.</p> <p>Targetted recruitment of cascade trainers to maximize impact on system change.</p>	End 23/24	<p>Workforce capacity for improvement work (1)</p> <p>System/workforce acceptance of change (3)</p>	Funding for training secured through IJB reserves	<p>StBoC</p> <p>Tackling Inequalities</p> <p>Prevention/Early Intervention</p>
Services are provided in a way that supports unpaid carers.	Complete Impact Assessment of planned service changes to consider breadth of impact on unpaid carers and mitigate any risk.	Ongoing	Workforce capacity for improvement work (1)	Funding for supported/ external review secured	<p>StBoC</p> <p>Tackling Inequalities</p>

	<p>Review of Self-Directed Support to inform improvement, to meet reviewed SDS guidance and standards, and to improve equity of service across Shetland – supported by In Control Scotland.</p> <p>Evaluation of Community Led Support approach to understand acceptability and accessibility for unpaid carers, to inform next steps.</p>	<p>23/24</p> <p>Q2 23/24</p>	Impact Assessment skill/capacity in workforce (2)	through IJB reserves	<p>Prevention/Early Intervention</p> <p>Meaningful Engagement</p>
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#	Risk	Consequences	Control Measures
1	Workforce capacity for improvement work	Improvement work not progressed – particular risk for cross service/cross-organisation work where coordination of action is required.	Communicate clear and achievable expectations of services. Incorporate Unpaid Carers as a key strand within Shifting the Balance of Care programme to support collaboration and coordination.
2	Impact Assessment skill/capacity in workforce	Unknown impacts of change on unpaid carers, increased inequalities due to unintended consequences.	Engage with SIC Community Planning Colleagues on emerging impact assessment work stream. Connect with Public Health Scotland colleagues around support for Health Impact Assessment and potential for including Unpaid Carers as key target group.
3	System/workforce acceptance of change	Culture change and change in approach does not happen. Unpaid carers are not identified and supported at earlier opportunities, inequalities increase and outcomes worsen.	Identify and communicate Unpaid Carers as a priority group for service improvement/development. Clear and implementable expectations of services, i.e. feedback described in overarching directions, inclusion of this in performance monitoring and feedback in a supportive way.