



APPENDIX A

OVERVIEW OF ENGAGEMENT WORK TO INFORM THE ABERDEEN CITY CARERS STRATEGY 2023 -2026 & PLANNED CONSULTATION ON THE FINAL CARERS STRATEGY

Introduction

'A City for All Carers' has been developed by a core group of partners who form the Carers Strategy Implementation Group (CSIG). The group members have had the opportunity to be involved at all stages of development of this strategy. This includes representation as follows;

- Lead Strategy and Performance Manager
- Transformation Programme Manager (Strategy)
- Senior Project manager Strategy
- Nursing (Community Nurses, School Nurses, Health Visitors)
- Allied Health Professionals
- Social Work
- Development Officer
- Commissioning
- ACC Children's Services (Young Carers)
- ACVO
- Scottish Care
- IJB Carer Rep
- Adult Carer Support Service
- Young Carer Support Service

Development of the Strategy took place from July 2021 to December 2022. An overview of Engagement so far was provided to the IJB on 11th October 2022. This overview incorporates further feedback from the Consultation process.

Engagement phase – July 2021 – October 2022

Phase 1

The engagement phase of this strategy has been influenced by fluctuations in capacity of those required to be involved as a result of the ongoing COVID-19 pandemic. Considerable work took place between July and December 2021 which gathered an overview of views from Carers in Aberdeen. Carers were told that their feedback would inform the strategy and that further engagement would take place when a more detailed overview of the new priorities for Carers was prepared. The requirement to contribute to the pandemic response then delayed the development of a document.

Phase 2

In March 2022 ACHSCP were given the opportunity to participate, as one of five HSCPs, in a national Care Inspectorate Inquiry into Adult Carer support services. This provided a vehicle to further gauge the views of Carers in Aberdeen on their experience of Carer Support services. This focused specifically on Adult Carers (excluding Young Carers and Parent Carers) and included input from the Adult Carer Support Service and Adult Social Work Staff. In order to ensure that Carers were not being overwhelmed by requests to participate in engagement no further events / requests were made of



Adult Carers at this stage beyond what was coordinated by the Care Inspectorate. The Care Inspectorate published their, '[Inquiry into adult carers' experiences of social work and social care services](#)' in December 2022.

Further targeted sessions were then offered to Parent and Young Carer Groups via the support services to give their views on the proposed priorities within the draft Strategy. Targeted sessions and a specific survey were also available for workforce groups, including those from the third sector, to gather their views.

Consultation Phase October to December 2022

The final phase in developing the strategy was the consultation phase. This provided an opportunity for all with an interest to see the draft Strategy and Action Plan and provide comment in advance of this being finalised.

The Consultation focused on three main things;

- The content and style of the Strategy and Action Plan documents (views gathered via survey only)
- The priorities and actions within the Strategy and Action Plan
- A series of 'Carer Experience' Questions which will form a baseline for the strategy.

Consultation activities which took place include;

- Public Consultation Survey on Citizen Space
- Open Consultation Events (In person and Online)
- Targeted promotion of the Consultation to relevant identified groups
- An open offer of targeted Consultation Events with interested groups
- Opportunistic promotion and discussion in public spaces, e.g. We Too relaxed session, Library session
- Open routes to direct feedback via phone and email.
- Attendance at partner board meetings, including the Aberdeen City Council (ACC) Children's Services Board, ACC Strategy Board, ACHSCP Operational Leadership team meeting and IJB Development Workshop.

The below shows a range of partners who have been directly contacted or participated in promoting the Carer Strategy Consultation;

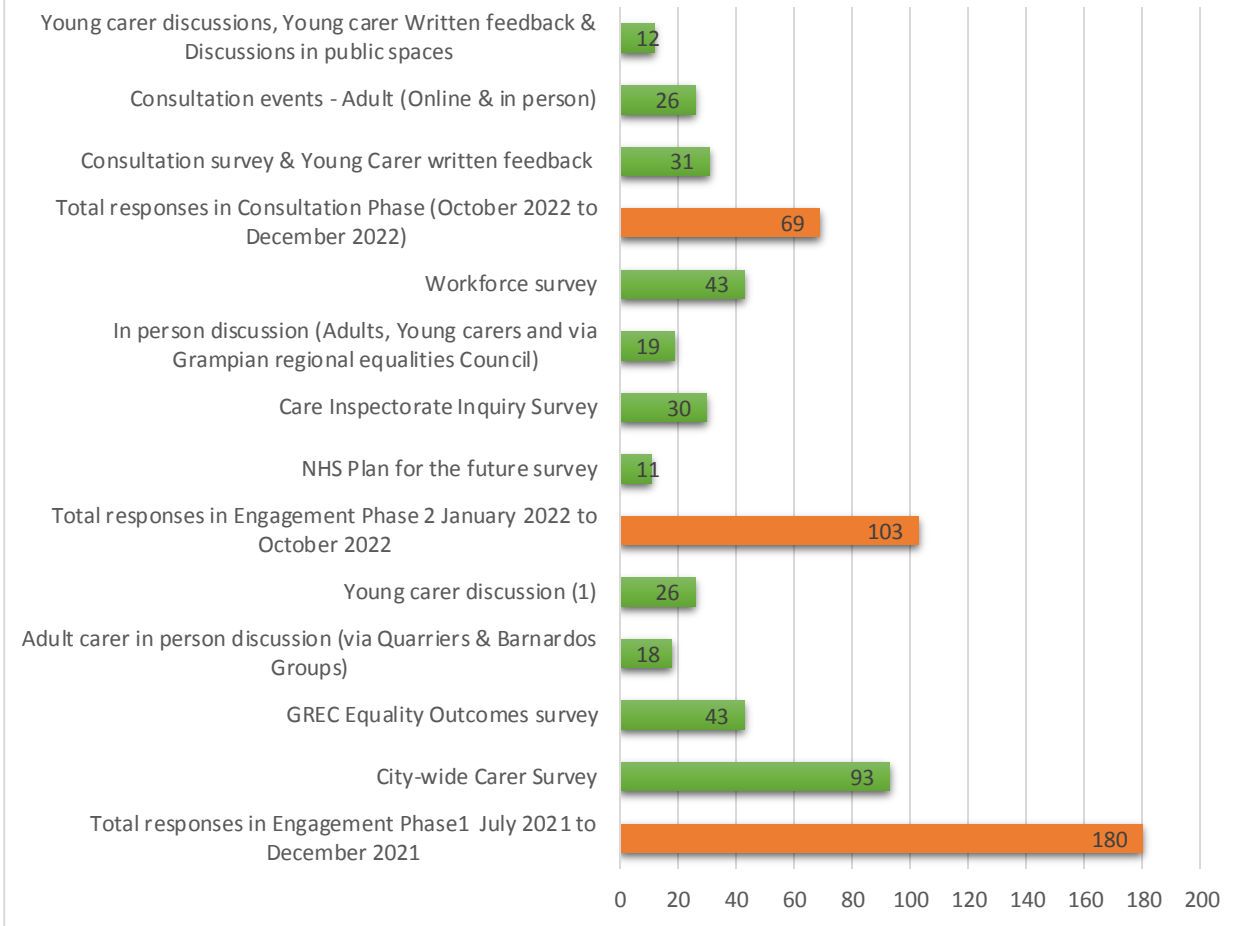


Number of participants in Carer Strategy Development

The number of people participating in all engagement and consultation feedback is detailed below. The Orange lines give total responses by phase with the methods of response and associated numbers outlined above. Where numbers were below 10 for a specific method of participation these have been grouped to ensure anonymity.



Numbers of people involved in Carer Strategy Development



How has the information gathered informed the Carer Strategy?

The views of those we engaged with are central to the Strategy and how it has been developed and refined. Within the document quotes are included which reference specific feedback as well as **lived experience case studies** and **spotlight on** sections which highlight areas of good practice or service development. The priorities and actions have been developed in response to this feedback. All relevant data will be held by the CSIG to inform future actions. This is not presented in its entirety due to a need for confidentiality but is themed below. This includes themes highlighted during both engagement and Consultation phases.

Adult Carers

The main themes identified by Adult Carers were;

Challenges	Positives
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Knowing who to turn to – many were not aware of services on offer to carers	Support from other professionals (including GPs)
Access to advice and information	Experiences of those who have accessed the adult carer support service
Accessing the right services (including social work, health and Mental Health support)	Increased Carer awareness amongst professionals
Lack of awareness of dementia and other conditions	Opportunities for social activity and exercise.
Coping with the caring role (including the emotional impact of caring)	Support from extended family
The Impact of COVID-19	
Accessing day support and Day Care	
Being recognised as an equal partner in planning support	
Financial Pressures, including the specific challenges faced by Carers in employment or who are seeking employment.	
Hospital Discharges	
Social Isolation & lack of social activities	
Poor Mental Health (including worries about the future)	
Access to breaks (including respite)	
Tiredness and a lack of time for ones self	
Taking a break is dependent on meeting the needs of the Cared for person. If they are not met. The break isn't possible.	
Communication challenges	

Young Carers

The main themes identified by Young Carers were;

Challenges	Positives
Access to advice and information	Experiences of those who have accessed the adult carer support service
Accessing the right services (including social work, health and Child and Adolescent Mental Health (CAMHs) support)	Increased Young carer awareness amongst professionals
Lack of Confidence of Young Carers to identify themselves to an adult as someone coping with the caring role (impact on mental health, feeling alone, being bullied)	Support from some education staff
Multiple challenges due to being different (including LGBTQ+ young people)	Think young Carers Toolkit – ‘co-produced’ with young carers. Supports partners with identifying and supporting young people identified as a Young carer.



The Impact of COVID-19	Life as a Young carer video - created in partnership with SHMU to support with awareness and empathy needed to understand and support young carers
Accessing day support and Day Care	Access to local Young Carers fund
Social Isolation & lack of social activities	
The impact of COVID-19 restrictions	

Workforce

We asked our workforce how confident they felt about signposting Carers to unpaid Carer support services in Aberdeen with 1 (not confident) and 5 (very confident). The average response was 3.19 indicating that the majority have a moderate level of confidence. This will support our feedback from Carers themselves who indicated staff do not always have the knowledge needed and is included within Priority 1 of our Action Plan.

Our Workforce were also asked to comment on whether they agreed with the four priorities included in the draft Strategy with 1 (strongly disagree) and 5 (strongly agree). The average response was above 4 for all four priorities.

Our workforce echoed many of the themes expressed by Carers themselves especially with regard to ensuring access to information so they are equipped to support Carers and ensuring access to Short Breaks / Respite is available.

Consultation specific themes

A series of specific questions were posed to Carers on their views on the Strategy content. These are included in the table below along with our response and any amendments made to the final Strategy as a result.

The relevant themes in relation to content and style are reflected below;

Theme	Response
48% agreed that the strategy content is easy to understand (28% neither agree nor disagree, 24% disagree).	Summary and easy-read versions developed.
The document is too long for many Carers and staff to read.	Having a range of versions should meet the needs of a range of readers.
44% agreed that the strategy document is well presented (40% neither agree nor disagree, 18% disagree).	



Additional comments on type size, style etc.	Resolved for final version.
48% agreed that the lived experience Case studies are relevant to the content of the strategy (40% neither agree nor disagree, 12% disagree) Case studies do not reflect the experience of people caring for older parents when they themselves are aging.	Summary version does not include the lived experience case studies. Additional reference to Carers with this experience to be added.

The relevant themes in relation to the Priorities and Actions within the Strategy and Action Plan were;

60% agreed that the 4 priorities were clear (24% Neither agreed nor disagreed, 16% disagreed)	Specific comments on aspects of each priority incorporated into themes section above.
Priority 1 – Identifying as a Carer and the first steps to support 64% agreed that this should be a priority (24% neither agree nor disagree, 12% disagree)	This reflects that this priority has the right focus.
Priority 2 – Accessing Advice and support 64% agreed that this should be a priority (16% neither agree nor disagree, 20% disagree)	This reflects that this priority has the right focus.
Priority 3 – Support Planning, future decision making and wider Carer Involvement 56% agreed that this should be a priority (28% neither agree nor disagree, 16% disagree) “A separate grouping is required for the needs of Carers who are in employment.” Grouping all Carers into 4 priorities is perceived as ‘one size fits all’	This reflects that this priority has the right focus. Further reference to Carers in employment or seeking employment included within Action Plan. The four priorities reflect the overall priority areas for Carers in Aberdeen City. More specific actions related to the needs of Carers in specific circumstances is further refined in the Action Plan. The Action Plan will be a live document and additional actions can be added when evidence of need has been identified.
Priority 4 – Community Support and Services for Carers 60% agreed that this should be a priority (24% neither agree nor disagree, 16% disagree)	This reflects that this priority has the right focus.



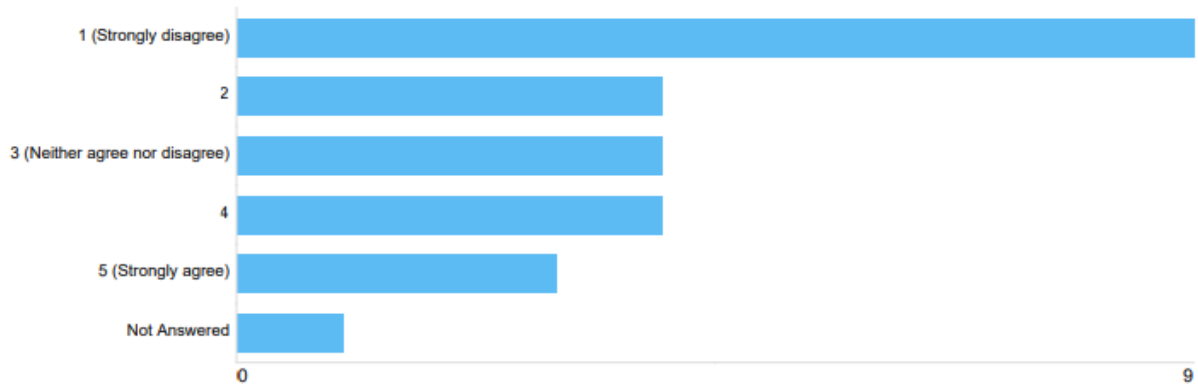
More refinement of specific Actions needed in Priority 4	Further refinement of specific priority 4 actions included within final version.
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Carer Experience Questions

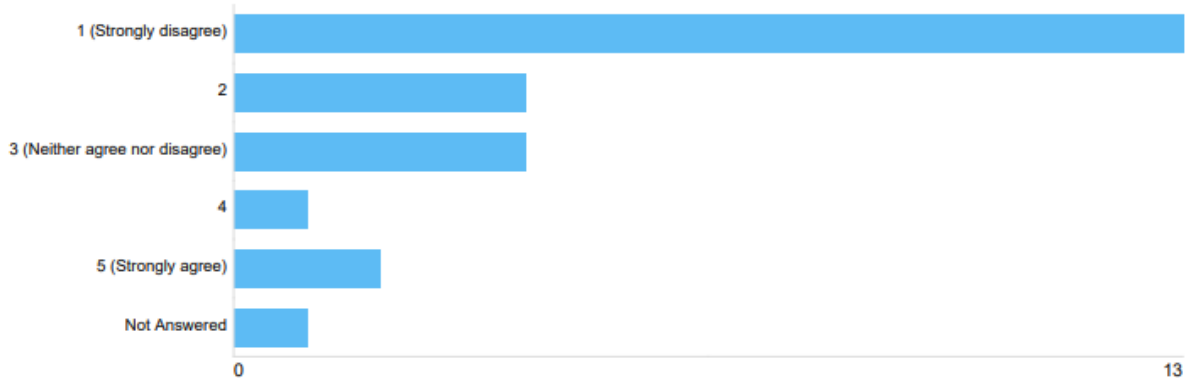
Carers were asked a series of ‘Carer Experience Questions’ within the Consultation survey to gain an overview of the Carer experience in Aberdeen. This included a series of seven statements where they were asked how much they agree (5- Strongly agree to 1 – strongly disagree). These will be repeated each year of the Strategy to provide an overview of whether improvement is being made. These statements were designed to be comparative with nationally gathered data collected via the Health and Care experience survey (HACE).

The response to these statements (outlined below) reflects that there is a lot of work to do to improve the experience of Carers in Aberdeen. With over 50% of respondents disagreeing with six out of seven of the statements. Whilst this is disappointing from the perspective of Aberdeen City Health and Social Care Partnership it also provides further evidence of why we need to focus on the identified priorities within the strategy and make improvements.

Carer statements - I am supported to identify as a Carer and am able to access information about the support I may need

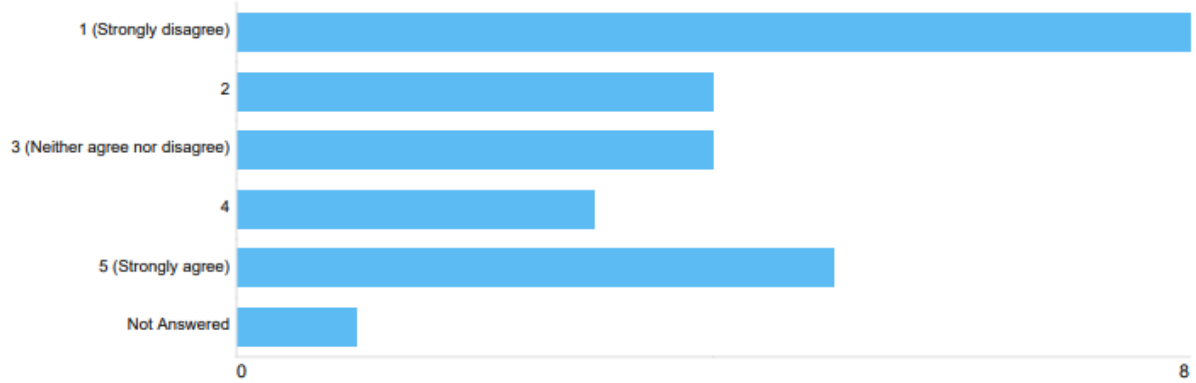


Carer statements - I have a good balance between caring and other things in my life

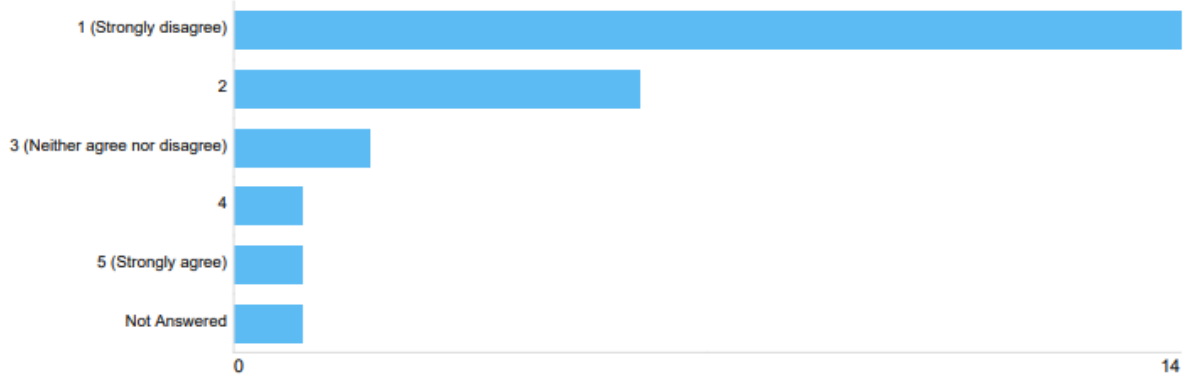




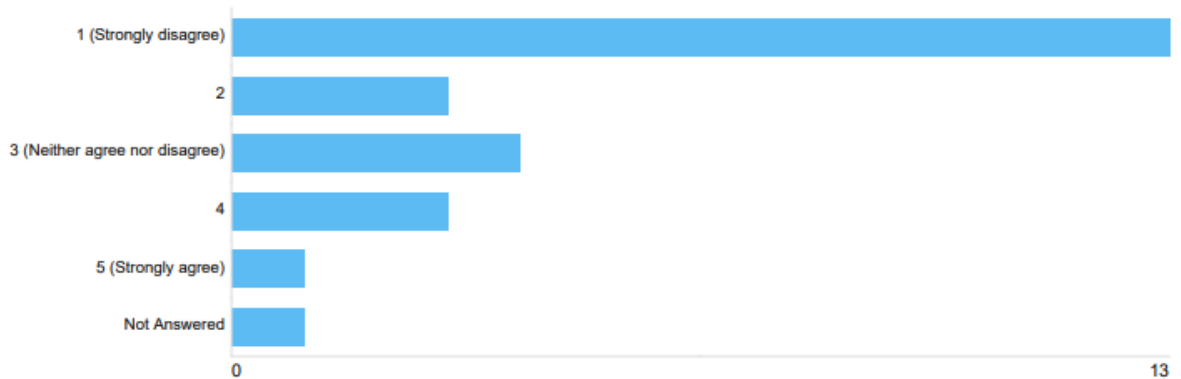
Carer statements - I have a say in the services provided for the person(s) I look after



Carer statements - Caring has NOT had a negative impact on my health and wellbeing

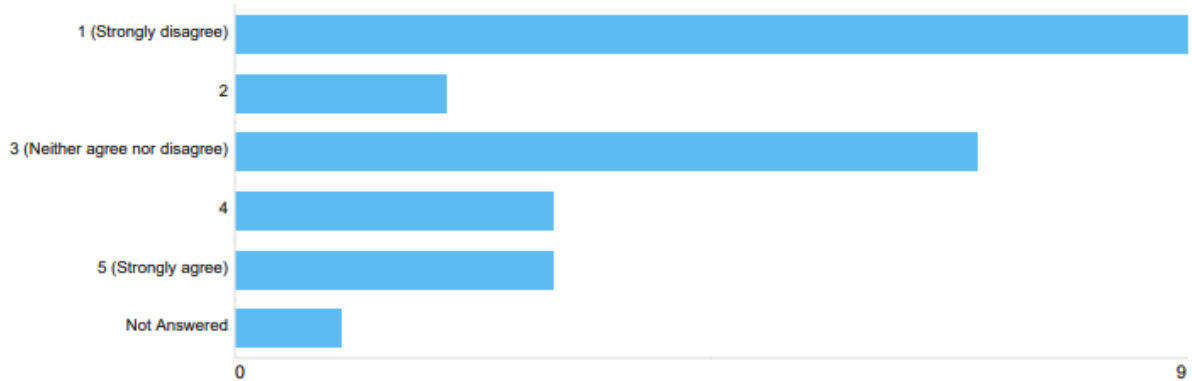


Carer statements - I feel supported to continue caring (I am supported as a Carer to manage my caring role)

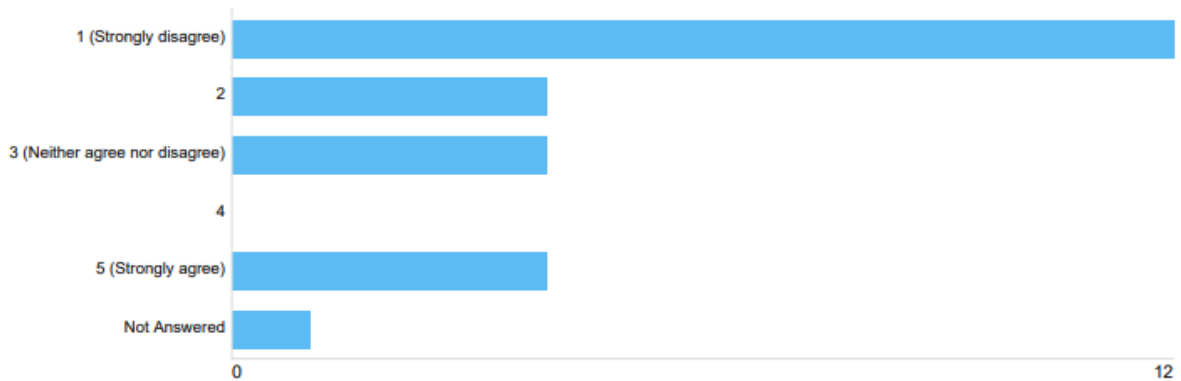




Carer statements - I am respected, listened to and involved in the planning and development of the services and support which I and the person(s) I care for receive



Carer statements - Local services are well coordinated for the person(s) I care for



Demographics and Equality Themes

A Health Inequalities Impact Assessment has been compiled for the Strategy which includes an overview of all Equalities information which has informed the Strategy. This is also reflected in the 'Who are Carers' Section. This section reflects that we do not know enough about the Carer experiences of people in 'less heard' communities, for example, minority ethnic communities and LGBTQ+ community. Additional engagement took place via Grampian Regional Equalities Council (GREC) and direct information on the Consultation was shared with a range of groups from across Aberdeen's communities.

Demographic information was collected during the consultation phase. This reflected that responses to the Consultation Survey were received from across the City with the highest response in North Aberdeen. 60% of respondents were aged 41-65 years. 80% of respondents were female. 92% identified as heterosexual / straight. 93% of respondents were Christian. 96% identified as White (Scottish or British).

32% of respondents reflected that they have a Disability including Learning Disability, Learning Difficulties, Developmental Disorder, Physical Disability, Mental health Condition and Long-term illness.



Carers were asked some specific questions about their caring role. 72% of respondents cared for 50 or more hours per week. 48% of Carers cared for a child or grandchild, with 28% caring for a Parent or Grandparent and 28% caring for a Spouse or Partner.