



Aberdeen City Adult Carer Support Planning and Eligibility Criteria for Carers

April 2018

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1. Introduction

On 1st April 2018 the Carers (Scotland) Act 2016 came into effect. The Act extends and enhances the rights of carers in Scotland. This is to help improve their health and wellbeing so that they can continue to care, if they so wish, and support their ability to have a life alongside caring.

The role of unpaid carers is highly valued. One of the priorities of Aberdeen City Health and Social Care Partnership's (ACH&SCP) Strategic Plan is to: -

“Value and support those who are unpaid carers to become equal partners in the planning and delivery of services, to look after their own health and to have a quality of life outside the caring role if so desired.”

The ACH&SCP is committed to delivering on the nine National Health and Wellbeing Outcomes. Outcome six is: -

“People who provide unpaid care are supported to reduce the potential impact of their caring role on their own health and wellbeing.”

ACH&SCP's commitment is that the significant role of unpaid carers will be recognised, that their views will be included, that their health and wellbeing will be nurtured and the impact of their caring role on their everyday lives reduced.

The principles of equality, diversity and human rights are the underpinning rights for all carers. We aim to treat all carers fairly and consistently.

2. Duties under the Carers (Scotland) Act 2016

The Act encompasses a rights based approach – the right of every carer to have an Adult Carer Support Plan, which aims to support their health and wellbeing by identifying their need for support and their personal outcomes, and the right to access an appropriate balance of information, advice and support to meet these. The legislation requires a focus on assessing the needs of the carer separately from the needs of the cared-for individual. In terms of adult carers it is the responsibility of the partnership in the area where the cared-for person resides to complete the Adult Carers Support Plan.

Under the Carers (Scotland) Act 2016, Health and Social Care Partnerships are required to publish Eligibility Criteria for carers, detailing the specific set of circumstances and thresholds which must be met before carers can access support that is funded by the Health and Social Care Partnership. Our commitment is that all adult carers are entitled to receive support. That support will not always take the form of a funded service. In some cases the support offered may be signposting to existing support, activities or services already available in the community or from other statutory or partner organisations. Aberdeen City Health and Social Care Partnership already has a Local Eligibility Framework for Adult Social Care. This Eligibility Criteria for carers is in addition to and separate from that. It is a more appropriate set of indicators in relation to carers specifically in respect of the impact and sustainability of their caring role and their ability and willingness to continue in their caring role.

The Act also provides for a discretionary power to provide funded support even if the Eligibility Criteria is not met. This could be invoked when it is deemed that providing a funded service would be a means to prevent the impact and/or risk of the caring role becoming substantial or critical at some point in the future.

This Eligibility Criteria will be reviewed every 3 years in line with Aberdeen City Health and Social Care's Local Carers Strategy.

3. Definitions

Carer – the Act defines a carer as “an individual who provides or intends to provide care for another individual (the “cared-for person”). An “Adult Carer” is someone who is 18 years old or over and does not meet the definition of a Young Carer i.e. someone who is over 18 but still at school.

Eligible Needs - are those identified needs (i.e. needs to support the unpaid carer in their ability and willingness to continue with their caring role) that cannot be met through support to the cared-for person or through accessing services that are available generally and which meet the threshold for support set by the local Eligibility Criteria.

Adult Carer Support Plan – a plan prepared by a responsible Local Authority setting out an adult carers identified personal outcomes and identified needs (if any) and the support (if any) to be provided by the responsible Local Authority to meet those needs.

Personal Outcomes – the personal outcomes which are identified as relevant to the carer.

Personal Needs – the needs for support (if any) which are identified in order to meet the carer’s identified personal outcomes.

4. Eligibility Indicators and Thresholds

Eligibility Indicators

There are 7 indicators in Aberdeen City Health and Social Care Partnership's Eligibility Criteria: -

1. Health and Wellbeing
2. Relationships
3. Living Environment
4. Employment and Training
5. Finance
6. Life Balance
7. Future Planning (including planning for emergencies)

Health & Wellbeing –The impact could be on the carer's mental or physical health or well-being and could range from them feeling a bit worried about things to depression; from a general feeling of tiredness to serious joint and/or muscle damage from perhaps having to assist with lifting and moving the cared-for person.

Relationships – Caring for a loved one can often be upsetting particularly if the person is physically deteriorating or their personality is changing. This can affect the carer's emotions and in some cases their experience can be similar to grief or feeling bereaved. Relationships with family and friends can become strained.

Living Environment – In some cases a carer may have to adapt their home to accommodate the needs of the cared-for person. This fundamentally changes their own living experience. Other carers do not live with the person that they care for but their living environment can still be impacted upon.

Employment & Training - Caring can affect the carer's ability to work and access training opportunities. The carer's choice as to what type of employment or training they undertake, where they work and how many hours they do or where or what course they study. Carer's may be forced to delay starting work or training at all, have to give up work or a course, take early retirement, or reduce their working hours as a result of their caring role. They may not be able to focus on career development, or apply for promoted posts and may be restricted to particular jobs in certain areas that allow them to continue to provide care.

Finance – The caring role can affect the carer's ability to work which in turn can affect their finances. The act of caring can incur additional expenses with the cost of transport and/or parking whilst attending medical appointments. Having to buy specialist equipment or products, replacing clothing, turning up the heating or doing more laundry all bring added expense. If the cared-for person was the main earner and their condition has meant that they have had to give up work this affects the overall household income.

Life Balance – Dedicating time to caring can mean that the carer often cannot find time to socialise or even just have some “me time” to do things that they want to do for themselves. Often they put the needs of the cared-for person first and don’t have the time or the energy to fully consider their own needs leading to these being neglected.

Future Planning (including emergency planning) – In some situations it can be difficult for the carer to make any plans whether they are short, medium or long term. This can be in any area of their life from their career, their education and development, or even their social life. Even a simple invitation to a night out at the weekend may be impossible to accept. For some, future planning may include ensuring care will continue for the cared-for person should the time come when the carer is no longer around to do it themselves.

Appendix A provides more detail in relation to the impact and risk of each Eligibility Indicator.

In determining a carer’s eligibility for funded services, it is important to recognise that the eligibility indicators listed above will not always exist in isolation from one another. It is appropriate and desirable that indicators should be explored in relation to one another, as there may be a ‘multiplier’ effect when two or more indicators overlap or interact. For example, it would be appropriate to discuss the impact of insufficient household income in relation to the effect financial hardship can have on the emotional health and wellbeing of a carer. Similarly, some indicators may be overarching, such as the ability to have a life alongside caring, which may be affected by the cumulative impact of the caring role in several areas of a carer’s life.

Eligibility Thresholds

The eligibility thresholds are a qualitative assessment of the severity of the **impact** of the caring role and the **risk** of that caring role becoming unsustainable as a result of that impact. Impact and risk are assessed using each of the eligibility indicators that are appropriate to the individual carer.

There are 5 thresholds of impact and risk: -

1. No impact – no risk
2. low impact – low risk
3. moderate impact – moderate risk
4. substantial impact – substantial risk
5. critical impact – critical risk

See Appendix B – Determining the impact of the caring role and associated risk.

Eligibility

Carers will only be eligible for formal funded support to be provided if an impact or risk on the carer from any of the eligibility indicators is deemed to be substantial or critical. Using the discretionary power available under the Act, Aberdeen City Health and Social Care Partnership, in certain circumstances, will consider an approach to interventions where the impact/risk is not critical or substantial but where intervention would be a means to prevent these impacts and risks becoming substantial or critical at some point in the future. See Appendix C – Illustrative Threshold for Carer Support.

Adult Carer Support Plans and Eligibility Criteria

There is a mutual dependency between Adult Carer Support Plans and Eligibility Criteria. The plan needs to be completed in order that the carer's needs and outcomes are identified and that the impact on their lives and the risks to them being able to continue their caring role assessed. Once the level of impact and risk are known they can be assessed against the Eligibility Criteria and a decision made on eligibility to access funded support.

5. Process to determine duty to provide support to an Adult Carer.

1. Identification/Request – pre planning stage.

The process begins either when a carer is identified from professional involvement with the cared for person or when a carer comes forward seeking help. This identification could be made by a variety of people working in health and social care services, whether directly employed by the NHS or the Health and Social Care Partnership, part of a commissioned service or working independently in the private or third sector. Whether a carer is identified or they come forward themselves, the first step is for a **conversation** to take place.

During this conversation the carer's rights under the Carer's (Scotland) Act 2016 will be explained and the carer will be encouraged to tell their story, describe their caring role, the support they already have in place, the impact the caring role is having on their life currently and whether they can foresee this improving or deteriorating in the future. This allows an overall general assessment to be made in relation to the level of impact or risk from the caring role on the individual and therefore the appropriate route for the next stage of the process should the individual wish to engage.

Of course, it is always possible that even if someone is identified as a carer, they do not wish to see themselves as such or to share any of the detail in relation to their caring role and any impact this is having. This could be for a variety of reasons from not seeing the caring role as being separate to the role as a relative or friend, to not wishing to have any involvement with "formal" services. Should the carer not wish to engage this will be recorded and no further action taken although, if deemed necessary, the situation could be highlighted to be kept under review. If the carer does wish to engage the next step is to refer them on for an Adult Carer's Support Plan to be completed. If the overall, general impression is that the carer's needs are low to moderate, the referral should be made to the commissioned Carers Support service. If the needs are substantial or critical the referral should be made to Adult Social Care.

2. Adult Carer Support Planning

The next stage of the process is the completion of an Adult Carer Support Plan. This contains the following information: -

- Carer Details
- Cared For Person Details
- Summary of Caring Situation
 - The nature and extent of the caring role
 - The carer's current willingness and ability to provide care
 - Any relevant information in relation to foreseeable changes to the caring role
 - Specific circumstances which may indicate fluctuating needs
 - Specific detail on future and emergency planning

- Impact and Risks
 - The impact of the caring role on the carer (using each of the eligibility indicators as a prompt to consider that impact)
 - The risks associated with the carer continuing in their caring role carer (using each of the eligibility indicators as a prompt to consider that risk)
- Eligibility
 - Whether Eligibility Criteria is met or not
 - Confirmation that carer has been advised of the eligibility decision
 - Whether the discretionary power to provide support is invoked or not (and if so who made that decision, when, and what the rationale for it was)
- Identified Outcomes and Needs
 - A carer's identified personal outcomes
 - A carer's identified personal needs (if any)
 - Specific requirements in relation to the requirement for a break from caring for the carer.
- Support Provided
 - Record of whether support is to be provided to the cared-for person
 - Record of whether carer is signposted to existing services or community/family support.
 - Reference to any existing support under a previous plan and the impact this had on outcomes
 - Details of funded support (if any) to be provided to meet the identified personal outcomes and needs.
 - Confirmation of 4 options under SDS offered or reasons why not
- Review Arrangements i.e. the circumstances in which the plan should be reviewed and the arrangements and timescale for that
- Whether a copy of the plan was requested by and provided to the carer

Approach to Adult Carer Support Planning

A **proportionate** approach will be taken to Adult Carer Support Planning. Whilst the ACSP template will be comprehensive and available for use in multiple situations, consideration will be given to each individual carer's wishes and preferences.

Equality will be considered in the planning process. Protected characteristics will be taken into account and appropriate support will be made available to assist the carer through the planning process where required.

The **timing** of the planning process will also be considered recognising that an individual who has just begun a caring role will not necessarily be in a position to engage fully with the planning process. This will be the case particularly if the caring role has come about suddenly as a result of a traumatic incident involving a loved one, or is something the carer themselves does not yet fully understand or appreciate.

Support Available or Provided?

During the planning stage consideration will be given as to whether the identified personal outcomes and needs could be met through services or assistance provided to the cared-for person (other than replacement care to provide a break from caring) or services and support that are already available and accessible in the area (i.e. by information and advice and/or various types of community/family networks and support). If so, this should be recorded on the plan and the cared-for person's care manager advised and/or the carer signposted to the relevant services or community support. The situation should be monitored so the timescale set for review should also be noted on the plan. When considering funded support, there needs to be a cross referencing between the Adult Carer Support Plan and the cared-for person's care plan. The two need to be considered in conjunction with each other to give care managers and other relevant decision makers the full picture in relation to the caring situation.

If the carers identified personal outcomes and needs are met only in part, or not at all, by services or assistance provided to the cared-for person or services that are already available and accessible in the area, then, **if the eligibility criteria is met**, consideration must be given to providing funded support and this must be detailed in the plan. When considering any type of support provision, the individual carer's own resources and strengths will be taken into account in an asset based approach.

Other Considerations

The carer is entitled to have a **copy** of their Adult Carer Support Plan and again their wishes should be recorded on the plan with confirmation of whether and when a copy of the plan was provided.

If the carer lives **out with Aberdeen City**, we will liaise with the relevant authority to ensure current information about local support is available.

3. Application of Eligibility Criteria

If any of the impacts or risks are in the substantial or critical category this engages the legal duty of Aberdeen City Health and Social Care Partnership to provide funded support. If the impacts and risks are all either none, low or moderate, the eligibility criteria is not met however there still needs to be a consideration as to whether the discretionary power to provide support should be used. This decision can only be made by the Resource Allocation Panel which considers all new and reviewed care packages where there is a financial impact on the budget (increase or decrease). Each individual situation will be considered on its own merit however one example where the discretionary power might be used is where someone is caring for a terminally ill person where the current situation is not having a major impact or posing immediate risks but where it can be foreseen that the demands on the carer will increase dramatically in a short space of time and that providing support early will help the carer prepare for and manage that future impact.

4. Support Arrangements

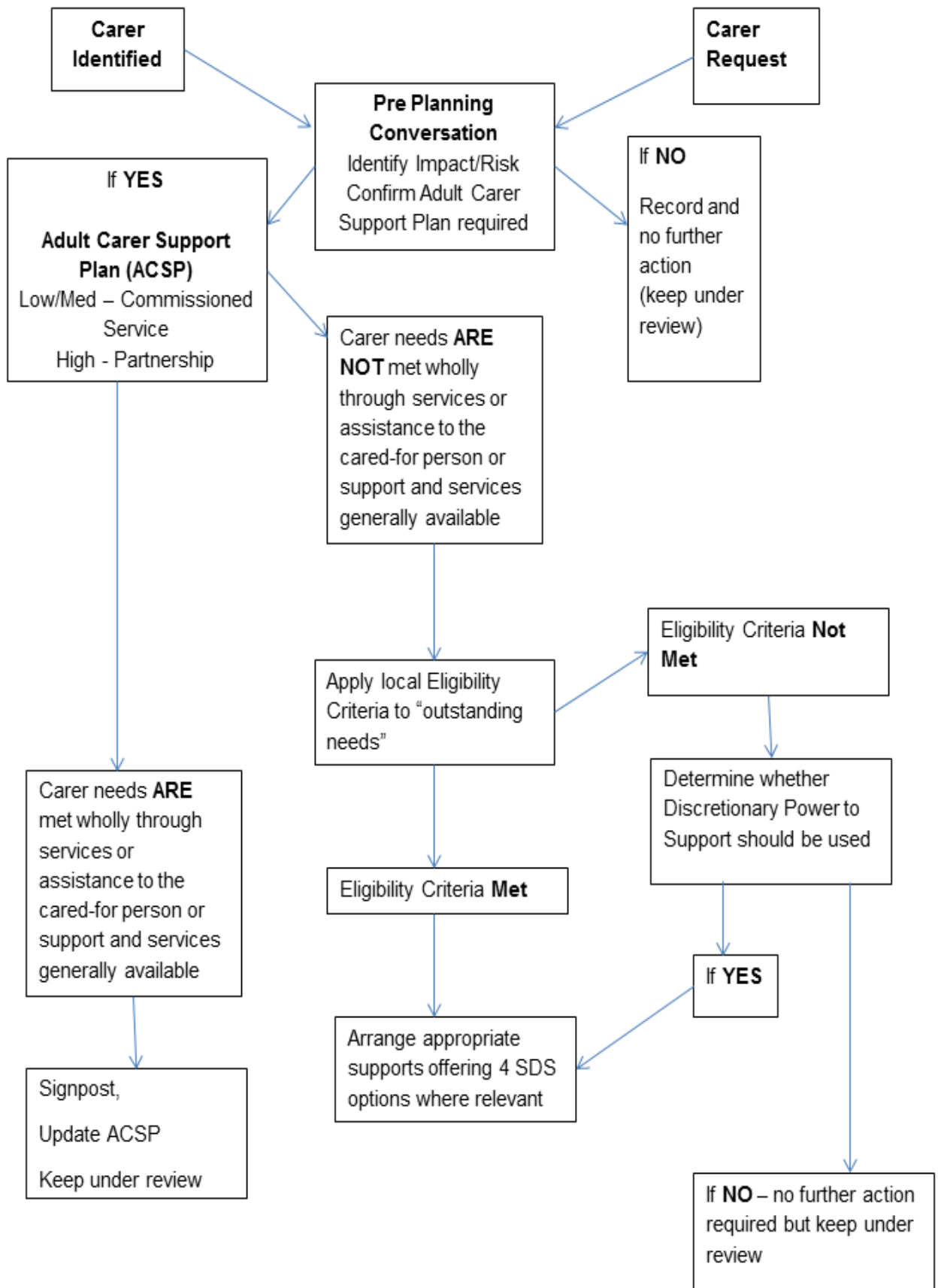
Once the decision is made to provide support the necessary arrangements should be made to put this in place. The carer must have as much involvement as they wish in relation to the provision of support or services, a collaborative approach is required. Reasonable steps must be taken to ensure that the right to dignity of the carer is respected. The carer must be given the opportunity to choose one of the 4 options provided for in the Self Directed Support (SDS) legislation unless they are deemed to be ineligible under the terms of the that legislation.

There is a duty under section 24(4)(a) of the Carers (Scotland) Act 2016 to provide or arrange Replacement Care based on the carer's needs whether or not the cared-for person has eligible social care needs in their own right.

In determining the support to be provided for both eligible and non-eligible the carer's own strengths and capabilities along with their wider support network, community, cultural and spiritual networks will be taken into account.

Carers will not be charged for any proportion of funded support provided to meet substantial and critical identified personal outcomes and needs.

Should a carer wish to appeal any decision in relation to the decision whether their needs meet the Eligibility Criteria or not they should make use of Aberdeen City Health and Social Care Partnership Complaints process.



6. Data Protection

General Data Protection Regulation (GDPR) will come into force on the 25th May 2018 and the plan is for the Data Protection Bill to have completed its parliamentary passage and be ready to take effect at the same time. Together they will replace the Data Protection Act 1998. Data Protection law sets out the principles and legal framework for protecting personal data, as well as giving rights to individuals. All processing of personal data has to be lawful, fair and transparent by law. Individuals have legal rights about the way we handle and use personal data, which include the right to ask for a copy of it, and to ask us to stop doing something with your data. We will advise individuals what we are doing with their data and how we are managing it, which is an important part of meeting our legal obligation.

In response to the Carers (Scotland) Act 2016, for those carers who wish it, we will collect information about the caring role in order to understand the impact this may have, develop an Adult Carer Support Plan, identify personal outcomes and determine eligibility. This information will be recorded in the Adult Carer Support Plan which will be held on our CareFirst system. This information will be retained for as long as a support service is required or the adult carer requests that it is removed. The information will be reviewed in line with our normal processes and updated as required. Adult Carers are entitled to a copy of their Adult Carer Support Plan and the information may be shared with relevant agencies for the purpose of understanding the support required and developing a personalised support service. Information will only be shared with the carers consent.

Appendix A: Table of Carers Eligibility Indicators

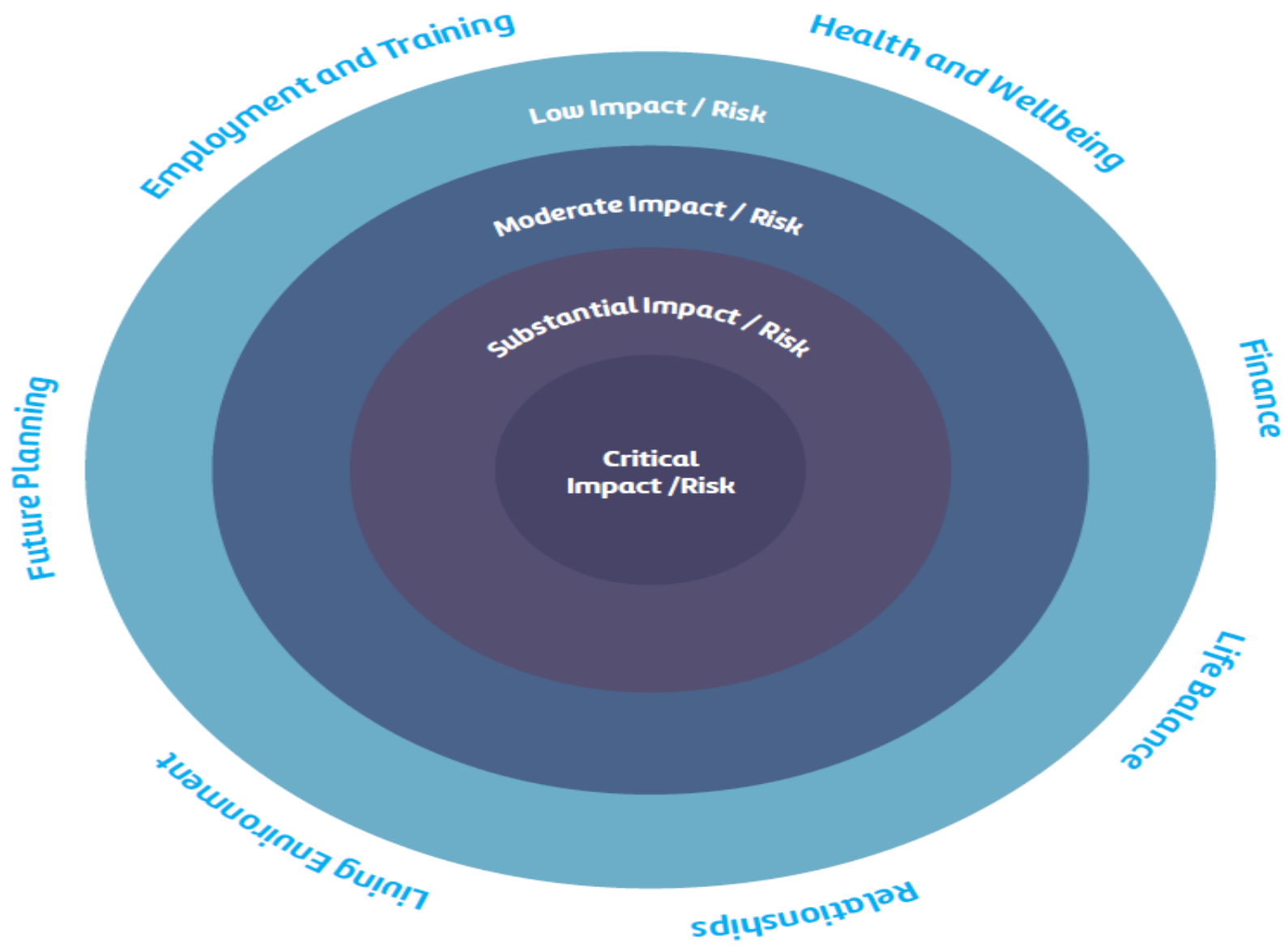
	Caring has no impact NO RISK	Caring has low impact LOW RISK	Caring has moderate impact MODERATE RISK	Caring has substantial impact SUBSTANTIAL RISK	Caring has critical impact CRITICAL RISK
Health & Wellbeing	Carer in good health. Carer has good emotional wellbeing.	Carer's health beginning to be affected. Caring role beginning to have an impact on emotional wellbeing.	Carer's health at risk without intervention. Some impact on carer's emotional wellbeing.	Carer has health need that requires attention. Significant impact on carer's emotional wellbeing.	Carer's health is breaking/has broken down. Carer's emotional wellbeing is breaking/has broken down.
Relationships	Carer has a good relationship with the person they care for and is able to maintain relationships with other key people in their life.	Carer has some concerns about their relationship with the person they care for and/or their ability to maintain relationships with other key people in their life.	Carer has identified issues with their relationship with the person they care for that need to be addressed and/or they find it difficult to maintain relationships with other key people in their life.	The carer's relationship with the person they care for is in danger of breaking down and/or they no longer are able to maintain relationships with other key people in their life.	The carer's relationship with the person they care for has broken down and their caring role is no longer sustainable and/or they have lost touch with other key people in their life.
Living Environment	Carer's living environment is suitable posing no risk to the physical health and safety of the carer and cared for person.	Carer's living environment is mostly suitable but could pose a risk to the health and safety of the carer and cared for person in the longer term.	Carer's living environment is unsuitable but poses no immediate risk.	Carer's living environment is unsuitable and poses an immediate risk to the health and safety of the carer and/or cared for person.	Carer's living environment is unsuitable and there are immediate and critical risks to the health and safety of the carer and/or cared for person.

	Caring has no impact NO RISK	Caring has low impact LOW RISK	Caring has moderate impact MODERATE RISK	Caring has substantial impact SUBSTANTIAL RISK	Caring has critical impact CRITICAL RISK
Employment & Training	<p>Carer has no difficulty in managing caring and employment and/or education.</p> <p>Carer does not want to be in paid work or education.</p>	<p>Carer has some difficulty managing caring and employment and there is a risk to sustaining employment and/or education in the long term.</p> <p>Carer is not in paid work or education but would like to be in the long term.</p>	<p>Carer has difficulty managing caring and employment and there is a risk to sustaining employment and/or education in the medium term.</p> <p>Carer is not in paid work or education but would like to be in the medium term.</p>	<p>Carer has significantly difficulty managing caring and employment and there is a risk to sustaining employment and/or education in the short term.</p> <p>Carer is not in paid work or education but would like to be soon.</p>	<p>Carer has significant difficulty managing caring and employment and/or education and there is an imminent risk of giving up work or education.</p> <p>Carer is not in paid work or education but would like to be now.</p>
Finance	<p>Caring is not causing financial hardship e.g. carer can afford housing cost and utilities.</p>	<p>Caring is causing a risk of financial hardship e.g. some difficulty meeting housing costs and utilities.</p>	<p>Caring is causing some detrimental impact on finances e.g. difficulty meeting either housing costs OR utilities.</p>	<p>Caring is having a significant impact on finances e.g. difficulty meeting housing costs AND utilities.</p>	<p>Caring is causing severe financial hardship e.g. carer cannot afford household essential sand utilities, not meeting housing payments.</p>

	Caring has no impact NO RISK	Caring has low impact LOW RISK	Caring has moderate impact MODERATE RISK	Caring has substantial impact SUBSTANTIAL RISK	Caring has critical impact CRITICAL RISK
Life balance	<p>Carer has regular opportunities to achieve the balance they want in their life.</p> <p>They have a broad choice of breaks and activities which promote physical, mental, emotional wellbeing.</p>	<p>Carer has some opportunities to achieve the balance they want in their life.</p> <p>They have access to a choice of breaks and activities which promote physical, mental, emotional wellbeing.</p>	<p>Due to their caring role, the carer has limited opportunities to achieve the balance they want in their life.</p> <p>They have access to a few breaks and activities which promote physical, mental, emotional wellbeing.</p>	<p>Due to their caring role, the carer has few and irregular opportunities to achieve the balance they want in their life.</p> <p>They have little access to breaks and activities which promote physical, mental, emotional wellbeing.</p>	<p>Due to their caring role, the carer has no opportunities to achieve the balance they want in their life.</p> <p>They have no access to breaks and activities which promote physical, mental, emotional wellbeing.</p>
Future Planning	<p>Carer is confident about planning for the future and has no concerns about managing caring.</p>	<p>Carer is largely confident about planning for the future but has minor concerns about managing caring.</p>	<p>Carer is not confident about planning for the future and has some concerns about managing caring.</p>	<p>Carer is anxious about planning for the future and has significant concerns about managing caring.</p>	<p>Carer is very anxious about planning for the future and has severe concerns about managing caring.</p>

Appendix B: Determining the impact of the caring role and associated risk

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Appendix C: Illustrative threshold for carer support

