

Subject:	Support for Unpaid Carers in North Ayrshire
Purpose:	To provide Integration Joint Board members with an update on developments to improve support to unpaid carers in North Ayrshire.
Recommendation:	That the Integration Joint Board: <ul style="list-style-type: none"> Note the contents of this report and approve the approach described to provide improved support for unpaid carers in North Ayrshire, and Approve the amended Carer's eligibility criteria threshold to support individuals with low and moderate need levels, instead of just substantial and critical levels of need.

Glossary of Terms	
IJB	Integration Joint Board
NAHSCP	North Ayrshire Health and Social Care Partnership
PSMT	Partnership Senior Management Team
ACSP	Adult Carer Support Plan
NHS A&A	NHS Ayrshire & Arran
SDS	Self-Directed Support

1.	EXECUTIVE SUMMARY
1.1	This report provides the IJB with an update on developments to improve supports to unpaid carers. Central to this process is the strengthening of our strategic partnership with our commissioned carer and information support provider, Unity.
1.2	The work has a clear focus on improving access to supports through development of community-based supports and an ambition to reduce the bureaucratic burden on front line practitioners.
1.3	The overall aim is to ensure carers can more readily self-identify and receive as quickly as possible early and effective help assisting them to have a life alongside caring.
2.	BACKGROUND
2.1	Duties under the Carer's (Scotland) Act 2016 came into force in April 2018. The Act sets out the duty to offer and prepare an Adult Carer Support Plan (ACSP) and carers rights to request a plan, among other priorities. As part of the implementation of the Carer's Act funding was released with an incremental increase over a 5 year period from 2018-19, to recognise the demand for support would increase over time. North Ayrshire IJB were allocated £0.574m in 2022-23 which is the final year of the implementation funding, bringing the total allocation to just over £2m for Carer's Act duties. This budget is not ring-fenced and forms part of the baseline IJB budget. In previous financial years there have been underspends in the funding allocated due to lower than anticipated demand for ACSPs. There is a risk that Carer's are not

	receiving the essential support they need through a lack of awareness and ease of access to services through the current ACSP process.
2.2	At the time of implementation, the HSCP took the decision for ACSP's to be completed by Social Workers only at that time as adult carer assessments were already part of the Social Work role and to fully embed the approach before introducing new routes to carer assessment and support. The North Ayrshire Chief Social Work Officer supported by the Carer's Team has led a review of the current pathway for adult carers to request or be offered an ACSP and provision of support. It is evident that the process in place from the outset was fit for purpose at the time, but there remain several barriers to access carer assessment, issues with the provision of support and a lack of an adequate resource release model.
2.3	Presently 1,475 carers are registered with Unity – North Ayrshire Carers Service. 204 are young carers (aged 5 – 18 years) and 1,271 are adult carers (aged 19+). For North Ayrshire CareFirst (our Social Work Information System) show 161 live carer relationships are identified through the creation of relationships or identification of Main Carer category when assessing the cared-for person (adults). CareFirst data also shows that for 2022 thus far, 195 ACSP's were offered, 33 carers accepted, 159 declined and 3 did not respond. In terms of the 33 acceptances only 14 completed their ACSP – only 7% of those offered followed through with the completion of an ACSP.
2.4	There is learning to be gained from the success of the Winter Wellbeing/ Short Break Funds Unity received early 2022 from Scottish Government. Within 12 weeks the carer service received 360 applications and supported 545 carers and 456 cared for individuals with carer breaks and essential grants for low-income families at a cost of £97k. Furthermore 103 new carers were identified. Three Towns Carer Group members shared 'we would not normally have applied for support but due to the simple completion of an online application and not having to contact Social Work we were encouraged to apply and were successful in receiving a break from caring'.
3.	NATIONAL CARER UPDATE
3.1	The North Ayrshire Carers Team represent the HSCP at the following forums as a route to seek/share best practice and bring back policy directives: - <ul style="list-style-type: none"> • Carers Leads Meeting (Chaired by Scottish Government Carer Policy Team, attended by HSCP or NHS Carer Leads) • Carers Implementation Steering Group (Chaired by Scottish Government Carer Policy Team, attended by multiple stakeholders such as COSLA, NES, HIS, Young Scot, Carers UK, MECOPP and HSCP Carer Reps)
3.2	In the implementation of local carer plans the HSCP takes direction and guidance for improving carer identification methods, information and support from several areas: - <ul style="list-style-type: none"> • Carers (Scotland) Act 2016 and its National Implementation Plan 2021 – 2023. The plan sets out actions and outcomes in key priority areas to ensure we continue to embed the duties under the Act. • Independent Review of Adult Social Care – Carer Recommendations, with the prominence of supporting carers clear in the consultation for the establishment of the National Care Service, including a shift towards early intervention • Continued COVID-19 recovery plans from Scottish Government.

	<ul style="list-style-type: none"> Upcoming National Carer's Strategy - The Minister for Mental Wellbeing and Social Care has committed to the publication of a stand-alone Carers Strategy in late Spring 2022, with an immediate focus on COVID-19 recovery and a longer-term purpose of improving carer support in a meaningful and sustainable way. The strategy will focus on carers and their needs, setting out how policies across the Scottish Government can work together with other public bodies to support carers as we recover from the pandemic and beyond. National engagement opportunities and their output such as the current Care Inspectorate Carers Inquiry 2022.
4.	<u>Anticipated Outcomes</u>
	<u>Proposed Improvements for North Ayrshire Carers</u>
4.1	A new approach is being developed and implemented for Carer's assessment and support in North Ayrshire where we will focus on putting the carer at the centre and employing what they have told us. Often carers do not want to approach the HSCP or statutory Social Work services, they have never needed to and would prefer an easier and alternative solution to accessing carer support.
4.2	The HSCP have strength of carer voices and guidance from our longstanding Carer's Advisory Group and Carer's Champion, recent success with Carer's IJB representation, Care Improvement Network opportunities and engagement prospects with Unity and local carers. As such carers will sense check and steer the direction of carer improvements at every stage.
4.3	A Carer's Support Development Group was established in November 2021 supported by the Senior Management Team, support services (Finance, Commissioning and Performance/ Systems) and led by the Carers Team and myself as Chief Social Work Officer. Unity have also joined the membership to strengthen collaborative and partnership working.
4.4	The recommendations proposed by the Carer's Support Development Group to implement a better route for assessment, support, and resource allocation for adult carers in North Ayrshire. were presented to the Partnership Senior Management Team in March 2022. The PSMT supported the proposals, subject to IJB approval.
4.5	<p>The following transformational changes are planned with process and functionality to be confirmed over the coming months. A programme plan and timeline have been developed by the Carer's Team in line with the key pieces of work:</p> <ul style="list-style-type: none"> An updated ACSP as the model of carer assessment will be online for easier access and completion by carers. This has been developed with the support of Children's, Adult's, Older People's and Finance Services staff. It meets the legislative requirements of what must be in an ACSP and meets the requirements to enable collection of the current statutory reporting for the Carer Census. Moreover, it has been shared with our Carer Advisory Group members and all stakeholder feedback will be considered in the final model. Widen the net and offer carers an option of routes for accessing carer assessment and support. The HSCP will recruit two posts to be based within Unity premises. One will support the promotion and completion of ACSP and administer our statutory duties of assessment and determining levels of need/ support provision. The second role will administer/ arrange the provision of support or breaks from caring and promote a Short Breaks Bureau model of approach.

- The duty to offer and complete ACSP's will remain with all Social Work Teams as part of a two-tier approach to carer assessment and support. Internal processes and access to resource are being developed and tested.
- Re-directing and offering an alternative route to complete a carer's assessment and support to Unity, our commissioned provider, will mitigate some of the barriers identified in the current pathway. It will promote lower levels of support available, promote different solutions to carer breaks and utilise Unity North Ayrshire Carer Service more effectively.
- Unity will receive funding on an agreed payment schedule to resource the model. Positive contract amendment conversations have commenced in this regard.
- A communication plan is being developed alongside reusable marketing campaign information with North Ayrshire carer branding taking into consideration multiple platforms (social media/ website). It will also be crucial to develop a carer information and support training programme to improve staff across all sectors knowledge, confidence and skills in their role of signposting and supporting carers.
- The current North Ayrshire Carer's Eligibility Criteria, attached as Appendix 1, will be amended to extend the eligibility threshold to include those individuals with low and moderate need. This will extend the parameters of support include early and effective support as per the new Strategic Commissioning Plan ambitions meaning lower levels of support will be provided for carers with a view to supporting carers at an early stage and preventing the breakdown of carer supports. The IJB require to formally approve this change to the eligibility criteria. There will be resource implications of widening the eligibility criteria and this will require to be kept under review to ensure demand for services can be accommodated from within the existing budget allocation.
- A resource release model has been developed with support from HSCP Finance colleagues. The ACSP questions record the impact of the caring role and hold a weighting. The score feeds through to the support plan and outcomes to be met. This links to the thresholds within the eligibility framework determining the level of budget resource. PSMT agreed to the draft resource allocation model and allotted rates with discretion to the Lead for Carers to extend resource in certain circumstances subject to the total budget spend. A review of the model will return to PSMT after 6 months of operation.
- PSMT have requested that this approach is embedded and promoted across services together with the aims of Self-directed Support. The principles being that all supported people including carers have flexibility and choice over how they manage and direct their support and budgets to meet their personal outcomes. SDS guidance also enables and encourages HSCP's to maximise flexibility of spend, to ensure staff and more importantly people can develop their support arrangements to meet their personal outcomes in a way that works for them.
- The PSMT agreed to establish a Self-Directed Support Learning Review Board. The Board will include wide representation from across the HSCP, third sector and independent sector partners and will commence late June 2022. The Board remit will be to review SDS and its application in North Ayrshire, with a view to bringing forward a range of recommendations to strengthen SDS understanding, promotion and practice.

4.6 Further development work is ongoing with NADARS, CAMHS and the other HSCP services. Carers linked to some service user and patient groups take longer to recognise or accept their caring role, therefore it is crucial we can support this hard to reach co-hort of unpaid carers. There is a new Project Delivery Officer in the process of recruitment for the carer's team to dedicate time on a rotational basis with specific services to embed carer awareness and improve the message of carer identification and seeking support.

5.	<u>Measuring Impact</u>
5.1	Project plans and timescales have been agreed by PSMT. This work will be progressed through the Carer Support Development Group and Carer Advisory Group. Developments will be composite to the overarching changes to be progressed through the Self-directed Support Learning Review Board.
5.2	Staged reporting will go through the appropriate governance groups. PSMT have requested update reports on a 3 monthly basis and the IJB will be informed of progress.
5.3	Engagement and collaborative work with carers and staff will help gauge the impact of developments as well as where improvements still need to be made to provide better more consistent carer awareness and support. Increased carer registrations, increased breaks from caring requests and sustained carer engagement and/ or increased participation from carers will demonstrate positive and effective working relationships with carers and confirmation that developments are successful.
6.	IMPLICATIONS

Financial:	Carer developments need to be actioned to ensure Carers' Act Implementation Funding is utilised to support Unpaid Carers in North Ayrshire.
Human Resources:	There will be CPD for staff on new procedures, processes and practice to help deliver the key messages of carer identification, information and better support for all carers across all services. There is also the recruitment of a project role in the carer team to increase resource to allow the full extent of plans to be achieved
Legal:	North Ayrshire IJB and the Local Authority must meet their duties under the Carers (Waiving of Charges for Support) 2014 Regulations, Carers (Scotland) Act 2016 and Terminal Illness Regulations (July 2021). This legislation should be held in the same regard as any other pertaining to professional assessment of need and support provision.
Equality:	North Ayrshire HSCP will not discriminate against any carer because of their caring role/ responsibilities or because of the individual(s) they care for. Each carer should be offered information and support based on their own individual/ unique circumstances. In addition, the change to eligibility criteria proposed will support a more holistic I access approach to support.
Children and Young People	The agreed improvements will impact adult carers in the first instance. We will take the learning from this to develop and implement better more consistent support for young carers (aged 5 – 18 years) which is equally a priority and requires resource and time to review the current pathway for young carer support. In the meantime, young carers should continue to be identified and offered the chance to complete a young carer statement through NAC schools and our Social Work Teams.
Environmental & Sustainability:	N/A
Key Priorities:	Ensuring unpaid carers in North Ayrshire are identified and offered early and effective support to continue in their caring role; appropriately directing resources towards carer support services

	and provision of support and strengthen strategic partnerships with our commissioned carer information and support provider, Unity and local carers.
Risk Implications:	There is a risk that future demand and approach for services is unknown and we may not achieve the impact in supporting Unpaid Carers or alternatively will face a significant increase in demand which will require to be managed from within available resources. The demand and progress will be closely monitored.
Community Benefits:	Community benefits will be considered in all activities under the developments for carers and contract with Unity.

Direction Required to Council, Health Board or Both	Direction to :-	
	1. No Direction Required	
	2. North Ayrshire Council	x
	3. NHS Ayrshire & Arran	
	4. North Ayrshire Council and NHS Ayrshire & Arran	

7.	CONCLUSION
7.1	The IJB are asked to consider the proposed improvements to access supports for Unpaid Carer's in North Ayrshire, including the proposal to extend the eligibility criteria for support. The implementation plan will be closely monitored to ensure we are delivering the desired outcomes.

For more information please contact Scott Hunter, Chief Social Work Officer on 01294 324551] or [scotthunter@north-ayrshire.gov.uk]

Carers FIRST

North Ayrshire Carer's Eligibility Criteria

Implementation Date: 1st April 2018



Carers Act: Statement of Intent

The Carers (Scotland) Act 2016 (fully implemented 1st April 2018) is intended to better support Scotland's adult and young carers on a more consistent basis so that they can continue to care, if they so wish, in good health, allowing them to have a life alongside caring. (*See appendix one for meaning of carer*)

Specifically for young carers, they should have a childhood similar to their non-carer peers and should be enabled to be children first and foremost, relieved of any inappropriate caring roles, allowing them to have a quality of life.

Carers Act: Provisions

The Act introduces the right to a new Adult Carer Support Plan (ACSP) or Young Carer Statement (YCS) (*See appendices two and three for examples*) encouraging meaningful conversations with people to understand their personal needs and outcomes. It will improve the access to support at all levels without any requirement for carers to provide care on a substantial or regular basis. Unity (North Ayrshire Carers Centre) are well placed to help the delivery of lower levels of support including accessible information, advice and guidance across the localities.

Engaging effectively with carers as equal partners will help empower them, providing carers and professionals with more useful information about the support that may be available in our communities. This is also reflected in the duty applied to health boards to involve carers in hospital discharge processes, ensuring support is relevant, appropriately timed and delivered in a cohesive way.

Effective delivery of support to carers will improve the physical and emotional health and wellbeing of carers in turn benefitting those being cared for and can help to sustain good caring relationships.

The North Ayrshire Carers Strategy, for carers written by carers, will be reviewed and a new plan for how we identify and support carers in their localities will be set. This will include a short break service statement again, for carers developed by carers.

An Eligibility Criteria Framework is required to be set locally to help the North Ayrshire Health & Social Care Partnership (NAHSCP) to determine levels of support based on assessed/identified need and impact/risk of the caring role.

Eligibility Criteria Framework: Why and what it achieves

Eligibility criteria ensures we have a fair and consistent system for determining how the NAHSCP targets finite public resources. It is the local authority's duty to set and apply the criteria alongside the ACSP or YCS to exchange information about caring. It means that carers with different needs will be treated equally in accessing the right level of information, advice, support and services.

The Framework covers two aspects:

- I. Levels and types of need for support
- II. The thresholds that must be met to be eligible for support

Eligibility Criteria Framework: Process

The process can be broken down into four phases:

Phase One – A carer who wishes to access support can request an ACSP/YCS from the NAHSCP. It is also the duty of NAHSCP staff to offer an ACSP/YCS on identification of someone carrying out a caring role. This leads to a joint conversation to consider their caring situation and needs, their health and general wellbeing and how they can best achieve their own outcomes. The ACSP/YCS is completed to identify and record fully each carer's individual needs, outcomes and support. Not all carers assessed will have eligible needs. However, all carers have access to information, advice, guidance, and universal preventative services.

Phase Two – The support plan or statement will identify what matters to the carer as well as the impact of caring on their life. As the conversation continues the carer and professional will consider how to achieve the things that matter to the carer.

Phase Three – The eligibility criteria framework is applied here to identify the level of support from the impact or risk of them caring. If there are outcomes that meet the eligibility threshold, it is our duty to offer and explain the four options of Self-directed Support to consider how the carer may have their support delivered along with all options of available resources.

Phase Four – When the level of support has been agreed, and the carer fully informed of all options and resources, the carer will decide how they wish their support to be arranged from the four options of Self-directed Support. The carer will be involved in each stage of the process and in all decision making. A review date will be set and recorded at this point.

Adult Carer Support Plan: Purpose & Preparation

The ACSP will identify and record each adult carer's individual needs, personal outcomes and support to be considered to meet those needs. The plan helps to find out what impact caring responsibilities are having on an adult's life. Adult carers can request a plan to be carried out. The Local Authority must offer and prepare the ACSP on identification of an adult carer, if accepted. Consideration should be given to who is best placed to support the adult carer to prepare their plan. The carer can start to complete their ACSP on their own or with the help of a person or organisation of their choice. However, it is the duty of the Local Authority to accurately capture the carers identified needs and come to a view on the carer's eligibility for support.

In all cases, the local authority must inform the carer of their eligibility and why it has reached that decision. When a carer is identified as having eligible needs for support, the local authority must discuss what these eligible needs are and outline how these might be met via the four options of Self-directed Support. The responsible authority is North Ayrshire Council with the exception of (section 28) the duty for each Health Board to involve the carer before the cared-for person is discharged. This duty applies in situations where:

- The identified carer is an adult carer or a young carer
- An individual is identified who intends to provide care to a patient post discharge
- An individual is providing or intends to provide care but does not self-identify as a carer
- Professionals consider it likely that the patient will require care from a carer following discharge
- A formal discharge process takes place

Young Carer Statement: Purpose & Preparation

The YCS will identify and record each young carer's individual needs, personal outcomes and support to be considered to meet those needs. The statement helps to ensure young carers do not take on inappropriate caring tasks or caring that is inconsistent with their age and maturity. The statement further ensures there is effective planning in place to support young carers in transition to adulthood.

The responsible authority is NHS Ayrshire & Arran for pre-school age, and the NAHSCP via the Named Person Service for school age up to the age of 18 years, or having reached 18 and still in school. Young carers can request a statement to be carried out and we must offer the YCS on identification of a young carer. The YCS should link to the Child's Plan if there is one in place. Consideration has been given to who is best placed to support the young carer to prepare their statement. The NAHSCP and Education & Early Years have agreed it will be Head Teacher/Pastoral staff until the young carer meets the eligibility thresholds of substantial or critical for one or more of their outcomes. The YCS will then be

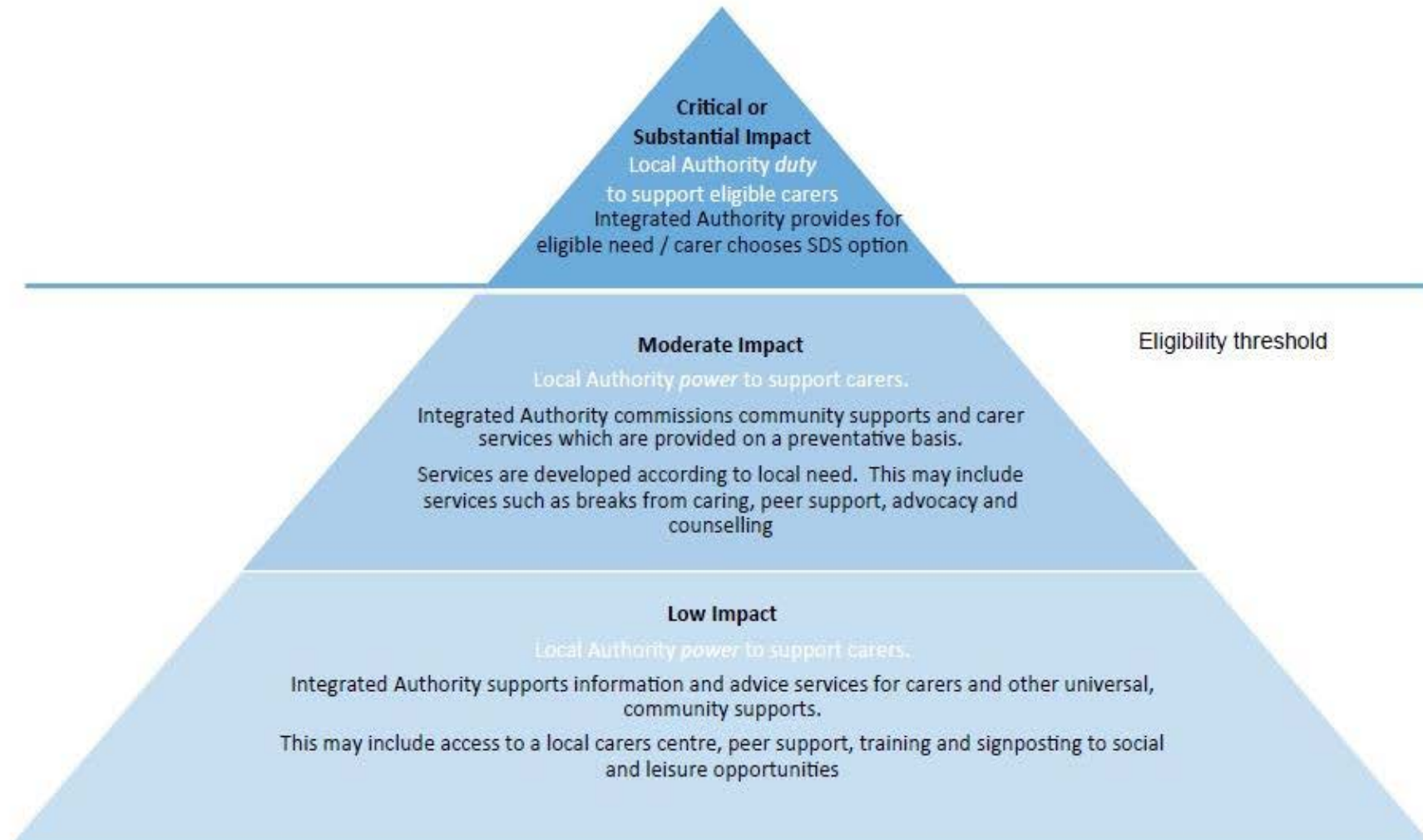
referred to the Named Person Service for tracking and passed to the appropriate Children & Families Social Work Team for action. The outcomes cover the SHANARRI indicators of wellbeing: Safe/Health/Achieving/Nurtured/Active/Respected/Responsible/Included.

Eligibility Risk Indicators

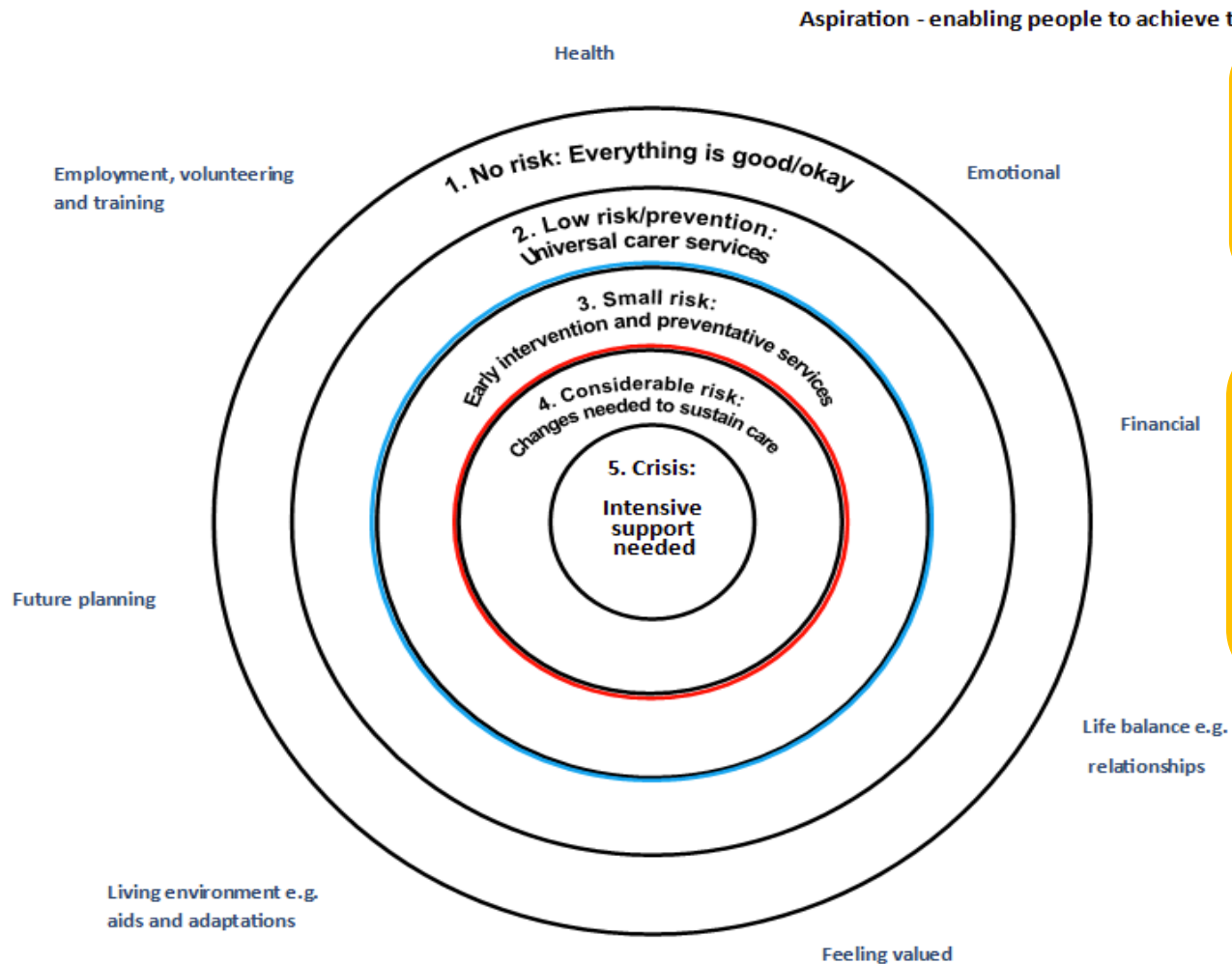
Eligibility for services is decided in terms of risk to an individual. There are five categories:

No Impact	Indicates no quality of life issues as a result of their caring role. There is no risk to the carer's health & wellbeing and they are able to experience a good life balance. There is no current need for information, guidance or support.
Low Impact	Indicates there may be some quality of life issues but they are low in risk to the carer's health and wellbeing and opportunities for independence. Some need for universal and/or preventative information, guidance or support.
Moderate Impact	Indicates there is some quality of life issues and they are causing enough risk to impact on the carer's health, wellbeing and potential for independent living. Some provision of health & social care services may be appropriate.
Substantial Impact	Indicates there is major risk to a carer's health, wellbeing and capacity for independent living. Urgent provision of health & social care services is likely.
Critical Impact	Indicates there is a significant risk to a carer's health, wellbeing and capacity for independent living. Immediate provision of health and social care services is likely.

Eligibility Thresholds: This shows where eligibility sits in relation to carer support in practice and how NAHSCP can support carers. This includes examples of services, which are not intended to be exhaustive or prescriptive (individual and local circumstances will determine services).



Eligibility Criteria Framework: This shows how criteria for reaching thresholds could be used to assess levels of need against the Carer outcomes



Key:

The blue circle shows the threshold between Levels 2 and 3 support.
The red circle shows the threshold between Levels 3 and 4 support – where the Duty to Support is triggered.

How it works:

All carers should be offered a carer support plan and free access to general, universal services. Being assessed as 'at risk' in one of the areas of a carer's life triggers entitlement for additional services, which should be based on the four Self-directed Support options. All of these outcomes are discussed during the completion of an ACSP/YCS.

Table of Indicators – Adult Carer Support Plan

	<i>Universal support moving to commissioned services & support (local authority 'power to support')</i>			<i>More targeted commissioned services & support (local authority 'duty to support')</i>	
	Caring has no impact/no risk	Caring has low impact/risk prevention	Caring has clear impact/small, moderate risk. Response needed	Caring has considerable impact/high risk	Evidence of critical impact/crisis
Health	Carer in good health	Carer's health beginning to be affected	Carer's health at risk without intervention	Carer's health requires attention	Carer's health is breaking/broken down
Emotional	Carer has good emotional wellbeing ----- Good relationship with cared-for-person	Caring role beginning to have an impact on emotional wellbeing ----- Risk of detrimental impact on relationship with cared-for person	Some impact on carer's emotional wellbeing is evident ----- Some detrimental impact on relationship with cared-for person	Significant impact on carer's emotional wellbeing ----- Relationship with cared-for person is significantly affected	Carer's emotional wellbeing is breaking/broken down ----- Relationship with cared-for person is breaking/broken down
Finance	Caring is not causing financial hardship - carer can afford housing cost/utilities/food/clothing	Caring is causing a risk of financial hardship - some difficulty meeting housing cost/utilities/food/ clothing	Caring is causing some detrimental impact on finances - difficulty meeting housing cost/utilities/food/ clothing	Caring is having a significant impact on finances e.g. difficulty meeting housing cost/utilities/food/ clothing	Caring is causing severe financial hardship e.g. carer cannot afford housing cost/utilities/food/ clothing
Life balance	Carer has regular opportunities to achieve the life balance they want They have a broad choice of breaks/activities promoting physical, mental and emotional wellbeing	Carer has some opportunities to achieve the life balance they want They have access to a choice of breaks/activities promoting physical, mental and emotional wellbeing	Carer has limited opportunities to achieve the life balance they want due to caring They have access to few breaks/activities promoting physical, mental and emotional wellbeing	Carer has few, irregular opportunities to achieve the life balance they want due to caring They have little access to breaks/activities promoting physical, mental and emotional wellbeing	Carer has no opportunity to achieve the life balance they want due to caring They have no access to breaks/activities promoting physical, mental and emotional wellbeing

Feeling valued	Carer feels their knowledge and expertise is always valued by health, social care and other professionals. Consequently they feel included and empowered	Carer feels their knowledge and expertise is sometimes valued and consequently they generally feel included and empowered	Carer increasingly feels their knowledge and expertise is not valued by health, social care and other professionals. Consequently they sometimes feel excluded and disempowered	Carer often feels their knowledge and expertise is not valued by health, social care and other professionals. Consequently they often feel excluded and disempowered	Carer feels their knowledge and expertise is never valued by health, social care and other professionals. Consequently they always feel excluded and disempowered
Future planning	Carer is confident about the future and has no concerns	Carer is largely confident about the future but has minor concerns	Carer is not confident about the future and has some concerns	Carer is anxious about the future and has significant concerns	Carer is very anxious about the future and has severe concerns
Employment	Carer has no difficulty managing caring and employment/education Carer does not want to be in paid work or education	Carer has some difficulty managing caring and employment/education. There is a risk to sustaining this in the long term. Carer is not in paid work or education - long term	Carer has difficulty managing caring and employment/education. There is a risk to sustaining this in the short term Carer is not in paid work or education but would like to be - medium term	Carer has significant difficulty managing caring and employment/education. There is a risk to sustaining this in the short term. Carer is not in paid work or education but would like to be soon	Carer has significant difficulty managing caring and employment/education. There is an imminent risk of giving up work or education. Carer is not in paid work or education but would like to be now
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 cared-for person	Carer's living environment is unsuitable. There are immediate and critical risks to the health and safety of the carer and cared for person

Table of Indicators – Young Carers Statement (Based on NCO Thresholds and SHANARRI Indicators)

	Universal support moving to commissioned services and support (local authority, power to support)			More targeted, commissioned services & support services & support (Local Authority 'Duty to support')	
	No Impact	Low Impact	Moderate impact	Substantial Impact	Critical Impact
Safe/Living Environment	Young Carer free from abuse, neglect or harm at home, at school and in their community.	Young carers situation at home, at school and in their community is currently stable and manageable.	Young carers situation at home, school or in their community is not ideal and potential risk to young carer and cared for person is evident.	Young carers situation at home, school or in their community is not ideal and there are safety risks which cannot be remedied in the short term.	Young carers situation at home, school or in their community is unsuitable and there are safety risks for the young carer and the cared for person.
Health	Young carer is in good physical and mental health with no identified medical needs.	Young carer is able to manage some aspects of their caring/family/social roles and responsibilities. There is a possibility of the young carer's health being affected.	Young carer is able to manage some aspects of their caring/family/social roles and responsibilities. It is evident the young carers health is being affected.	Young carer is having difficulty in managing aspects of the caring/family/social roles and responsibilities. Young carer's mental and physical health is affected as a result.	Young carer has significant physical/mental difficulties due to the impact of their role as a carer which may cause life threatening or long term harm.
Achieving/education	Young carer continues to access education/training and as no difficulty in managing caring role alongside.	Young carer has some difficulty managing caring alongside education/training. There is a small risk to sustaining education/training in the long term.	Young carer has difficulty managing caring alongside education/training. There is a risk to sustaining education/training in the medium term.	The young carer is missing out on education/training and there is a risk of this ending in the near future due to their caring role.	The young carer is at significant risk or has had to give up education/training due to their caring role.
Nurtured/relationships	Young carer displays positive emotional wellbeing. They have a nurturing place to live and a positive relationship with the cared for person.	Young carer role beginning to have an impact on emotional wellbeing and may require additional help when needed. Risk of detrimental impact on relationship with cared for person.	Some impact on the young carers emotional wellbeing and on their relationship with the cared for person resulting in a strained relationship. Additional help needed where possible, in a suitable care setting.	Major impact on a daily basis to the young carer's emotional wellbeing and therefore impacts on the cared-for person. Young carer is unable to sustain many aspects of their caring role.	Relationship between the young carer and the cared-for person is broken. The young carer is unable to continue caring or has difficulty sustaining vital or most aspects of their caring role.

	Young carer feels acknowledged by professionals and does not require additional help.				Input is needed immediately for the young carer. The young carer never feels acknowledged and therefore feels excluded.
Active/life balance	Young carer has opportunities to take part in activities such as play, recreation and sport at home, in school and in their community.	Young carer has some opportunity to take part in activities such as play, recreation and sport at home, in school and in their community.	Young carer has limited opportunity to take part in activities such as play, recreation and sport at home, in school and in their community.	Young carer has few and irregular opportunities to take part in activities such as play, recreation and sport at home, in school and in their community. May have a negative effect on healthy growth/development.	Young carer has no opportunity to take part in activities such as play, recreation and sport at home in school and in their community. This has a negative effect on their healthy growth/development.
Respect/ Responsible	Young carer has regular opportunities to be heard and involved in decisions. They have an active and responsible role to be involved in decisions that affect them.	Young carer has some opportunities to be heard and involved in decisions and has an active and responsible role to be involved in decisions that affect them.	Young carer has limited opportunity to be heard and involved in decisions that affect them due to their caring role.	Young carer has few and irregular opportunities to be heard and involved in decisions that affect them due to their caring role.	Young carer has no opportunities to be heard and involved in decisions that affect them due to their caring role.
Included/ Finance	Young carer feels accepted in the community where they live and learn. Young carer has time to take part in community activities. Free from financial stress.	Young carer feels some acceptance in the community where they live and learn but is unsure how to take part in community activities. There is a small risk of financial stress.	Young carer has limited acceptance in the community where they live and learn, due to their caring role. There is a risk of financial pressure.	Young carer feels isolated and not confident in the community where they live and learn. Need for financial support.	Young carer does not feel accepted in the community where they live and learn. Young carer's financial position is severe and there is financial hardship.

Eligibility Criteria Review

This policy and associated procedures will be reviewed within three years subject to any further changes in legislation.

Documents and Policies Related to Eligibility Criteria

Carers (Scotland) Act 2016

Getting it right for every child - GIRFEC

Fair Access to Community Care Services

Self-Directed Support Policy

Local Carers Strategy

Appendix One

Meaning of Carer

- 1) In this Act 'carer' means an individual who provides or intends to provide care for another individual (the 'cared-for person')
- 2) But 1) does not apply –
 - a) In the case of a cared-for person under 18 years old, to the extent that the care is or would be provided because of the person's age,
or
 - b) In any case to the extent that care is or would be provided, under or by virtue of a contract or as voluntary work.
- 3) The Scottish Ministers may by regulations –
 - a) Provide that 'contract' in 2) b) does or, as the case may be, does not include agreements of a kind specified in the regulations,
 - b) Permit a relevant authority to disregard 2) where the authority considers the relationship between the carer and cared-for person is such that it would be appropriate to do so.
- 4) In this part relevant authority means a responsible local authority or responsible authority (See section 41 (1) of the Act).

Meaning of Young Carer

- 1) In this Act 'young carer' means a carer who –
 - a) Is under 18 years old, or
 - b) Has attained the age of 18 years while a pupil at a school, and has since attaining that age remained a pupil at that or another school.

Meaning of Adult Carer

- 1) In this Act 'adult carer' means a carer who is at least 18 years old but is not a young carer.