



Caring Together

Argyll and Bute Carers' Strategy and Implementation Plan 2018 - 2023

Argyll and Bute Carers Strategy 2018 – 2023

1. Section One: Setting the Scene	Page
1.1 Introduction	2
1.2 Executive Summary	3-4
1.3 Carers Act	5-6
1.4 Purpose of the Strategy	7
1.5 Implementation of the Strategy	7-8
1.6 Performance Monitoring	8
2. Section Two: Current Profile	
2.1 Who Is A Carer	9
2.2 Impact of Caring	9-10
2.3 Case Study: Young Carer	11
2.4 Carers in Argyll and Bute	12-13
2.5 What Matters to Carers	14-15
2.6 How We Currently Care for Carers	16
2.7 Case Studies from Carers Centres	17
3. Section Three: Improving lives of Carers	
3.1 Our Vision for Carers	18
3.2 Our Values Working with Carers	18-19
3.3 Equality, Diversity and Human Rights	19
3.4 Key Outcomes for Carers	20
4. Section Four: Our commitments to Carers	
4.1 Our commitments	21-24
5. Section Five: Financial Plan	
5.1 Overall Budget	25
5.2 Budget 2017-2018	25
5.3 Respite Budget	26
5.4 Funding allocation 2018-2019	26
5.5 Projected Funding - Carer's Act	27

6. Section Six: How we will achieve our outcomes	
6.1 Implementation Plan	28-39
7. Section Seven: Additional	
7.1 Appendices	40-47
7.2 References	49
7.3 Your Views	50-52

SECTION ONE: SETTING THE SCENE

1.1. Introduction

Our success lies in our relationships— with the family we are born into, the friends we make, the people we fall in love with, and the children we have. Sometimes we struggle, sometimes we adapt, and at other times we set a course for others to follow. We are all leaders and followers in our lives. We are constantly learning from and teaching one another. **“We learn, too, that the most important work is not done by those who seem the most important, but by those who care the most.”**

Caroline Kennedy

Argyll and Bute Health and Social Care Partnership, and their partners, including the Carers’ Partnership, believes that caring for others, at an individual, family and community level is the most important work that any of us can do. We strive to keep this philosophy of caring at the heart of all our work. Central to our individual ability to care for others is our ability to care for ourselves. We aim to work alongside carers, recognising them and supporting them in their roles while we all care for people in our communities.

Figure 1:

“Caring for my mother, who is 98 years old, has been the most difficult and the most rewarding experience in my life. It can feel relentless, unappreciated, and exhausting and then it can also be loving, rewarding and motivating- all in one day. I love my mother and I want to return the care and love that she gave so willingly in her years as a parent. However, I cannot do this alone and need to know that the supportive services are there to help me when I am struggling to cope”. **Carer**

Executive Summary

Our world is changing, and it has been since the inception of the National Health Service in 1948. Never before have so many people lived for so long. There have been huge successes in the health status of our population in Scotland and in overall life expectancy.

The maintenance of lives that are as healthy, independent and happy as possible relies hugely on the efforts of many in the statutory and voluntary sectors.

Even more than this, the support and care provided by Carers has never been more extensive and more essential. Without their input, the health and social care systems would be unable to function.

The Carers' Strategy for Argyll and Bute recognises this and has been developed as a result of discussion and feedback with a wide range of stakeholders, of whom our Carers have been the most important.

The consultation process has led to several iterations of our priority outcomes and commitments.

We have identified 27 commitments in order to achieve our desired outcomes.

These outcomes are:

- All Carers are identified at the earliest opportunity and offered support to assist them in their caring role
- Young Carers are supported with their Caring roles and enabled to be children and young people first
- Mental and physical health of Carers is promoted by ensuring that they can access or be signposted to appropriate advice, support and services to enable them to enjoy a life outside their caring role
- Carers have access to information and advice about their rights and entitlements to ensure they are free from disadvantage or discrimination in relation to their caring role
- People who provide care are supported to look after their own health and wellbeing which includes reducing any

negative impact of their caring role on their own health and wellbeing

The actions which we have identified in our implementation plan will, we believe, lead to the outcomes that Carers have identified as being most important for them.

In addition, to our local priorities and feedback, we have taken account of the requirements of the Carers' Scotland Act, and have included these within this strategy.

The Carers' Strategy is aligned with the Health and Care Strategic Plan for Argyll and Bute as well as with the Integrated Children's Services Plan for Argyll and Bute.

We aim to deliver each of the actions within the appointed timescale and to measure the impact in achieving our commitments and outcomes.

1.3 Carers' (Scotland) 2016 Act

On 1st April 2018 the Carers' (Scotland) Act 2016 came into effect. The Act extends and enhances the existing 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 Carers' Act 2016 brings a new range of duties and powers which include:

Adult Carer Support Plans & Young Carer Statements

These plans will replace Carers' assessments and consider a range of areas that impact on a Carer. Young Carer statements must also be produced.

Carers Charter

This sets out the rights of Carers under the Act

Eligibility Criteria

Eligibility criteria for access to services for Carers must be published.

Carer Involvement

Carers must be involved in both the development of Carers' services and in the hospital discharge processes for the people they care for.

Local Carers Strategies

Local Carers' strategies, such as this one, must be produced and reviewed within a set period.

Information and Advice

An information and advice service must be provided for relevant Carers, with information and advice about rights, advocacy, health and wellbeing (amongst others)

Short Breaks Statements

To prepare and publish a statement on short breaks, and flexible respite options, available in Scotland for Carers and cared for persons.

The Act places a duty on local authorities and health boards to prepare a local **Carers Strategy**, covering both Adult and Young Carers. This was delegated to the Argyll & Bute Integrated Joint Board, which has responsibility for the strategic planning and direction of the delivery of certain services by the Health and Social Carer Partnership. The Board has determined there will be seven areas of focus that will drive its work, and these are aligned with the National Health & Social Care Outcome for Carers in Scotland, which aims to:

Support unpaid Carers to reduce the impact of their caring role on their own health and wellbeing.

To enable this to happen the Integrated Joint Board has made the following commitment:

"We will deliver services that are integrated from the perspective of the person receiving them and represent best value with a strong focus on the wellbeing of unpaid Carers."

In addition, the Integrated Children's Services Plan for Argyll and Bute includes outcomes for young carers and specifies that:

"Young Carers needs are recognised and appropriately met."

Argyll and Bute's Carers' Strategy consequently encompasses all ages and relates equally to Young Carers as it does to Adult Carers. The strategy sets out how the Argyll and Bute Health and Social Care Partnership (A&B HSCP) and its partners intend to deliver the requirements of the Act particularly in relation to:

- identifying both Adult and Young Carers,
- understanding the care that they provide and their support needs, and
- providing comprehensive and easily accessible information and advice on the type of support available as well as how and where to get it.

1.4 Purpose of the Strategy

This strategy was co-produced with carers and service providers from across Argyll and Bute and its purpose is to set out clearly:

- the **key outcomes which we want to achieve**,
- **the central commitments** for ensuring that those who are caring for others are supported and sustained in looking after themselves as well as those for whom they are caring.
- the **actions** necessary to implement these commitments across Argyll and Bute
- the accountable persons/agencies and
- the timescales for completion.

1.5 Implementation of the Strategy

This strategy represents a five-year plan to be delivered in full by 2023. Overall responsibility for the statutory obligations of the Act will sit with the Integrated Joint Board and on-going implementation of the Strategy will be overseen by the multi-agency Argyll & Bute Carers Partnership.

The IJB is a public body that, from the 1st of April 2016, has been responsible for the planning and delivery of all health and social care services in Argyll and Bute.

The IJB works in partnership with voluntary and private sector partners and communities to improve the quality and effectiveness of health and social care services, as well as supporting people in communities to keep well and live independent and fulfilling lives in their own right.

It is important to note that the IJB works closely and collaboratively with the Argyll and Bute Council and NHS Highland, as well as being a partner within the Argyll and Bute Community Planning Partnership.

The future of health and social care services emphasises the strong need to support and encourage people to help themselves to be as healthy and as independent as possible. This will then determine our ability to meet local needs. Our ambition is that individuals and communities obtain the help required regardless of how complex the nature.

The direction, governance and responsibility for delivering the strategic implementation plan will lie with the IJB who will work in partnership with the Argyll and Bute Carers Partnership.

1.6 Performance Monitoring

The Scottish Government Carers Branch are initiating a national dataset for Carers. Argyll and Bute HSCP have a responsibility to report data around implementation of the Carers Act. This data will be collected from centres, combined with HSCP data and returned to Scottish Government. This will allow for local monitoring and performance reporting direct to the IJB and also opportunity to evaluate our data against a national dataset.

In addition, we will monitor activity and trends with the expectation of an increase in carers assessments and support offered to carers, in line with the commitments of this strategy.

2. SECTION TWO: CURRENT PROFILE

2.1 Who Is A Carer?

A Carer is anyone who cares, unpaid, for a friend or family member who is affected by illness, disability, frailty, mental health or alcohol or drug use.

The circumstances of each Carer are unique. Carers can be any age, from children to older people, and Carers are part of every community and culture. Carers may be parents, spouses, grandparents, daughters, brothers, same sex partners, friends or neighbours.

Some Carers may be disabled or have care needs themselves. Sometimes two people with care needs are carers for each other. Some Carers can provide care and support for more than one person.

A Young Carer is a child or young person under the age of 18 who has a role in looking after someone in their family. They may have practical caring responsibilities or be emotionally affected by a family member's care needs. (Caring Together – the Carers Strategy for Scotland 2010-2015; Carers (Scotland) Act 2016)

Support for Kinship Carers is also important – a Kinship Carer is an extended family member or close friend who looks after a child, if they cannot remain with their birth parents.

The Carer does not need to be living with the cared for person to be a Carer.

It is important that Carers are not confused with paid workers, who are sometimes called carers too: paid carers are care workers.

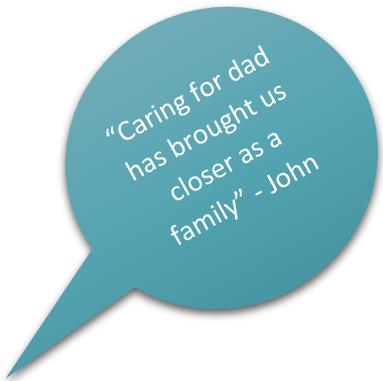
Equally, Carers are not volunteers. There may well be volunteers supporting the cared-for person and/or the Carer, but they are not Carers.

2.2 Impact of Caring

While caring for someone else can bring feelings of wellbeing, fulfilment and compassion, and in this way can enrich lives, for many people caring is a round the clock responsibility where there is little opportunity to 'get out' or 'switch off' from the caring role.

Caring can involve meeting a wide range of emotional and physical needs in the cared for person. These can include, but not exclusively:

- Supporting, encouraging, counselling
- Advising, informing, reinforcing, reminding
- Planning
- Washing, dressing, moving and handling
- Shopping, cleaning, cooking
- Assisting with eating and drinking and medication
- Observing and supervising
- Working in collaboration with a range of professionals



"Caring for dad has brought us closer as a family" - John

Changes triggered for people in caring roles can include, but not exhaustively:

- Chronic sleeplessness and tiredness
- Increased anxiety and worry
- Financial concerns
- Frustration, hopelessness and depression
- Grief and bereavement
- Physical health changes – weight gain, weight loss, increased substance dependence, lack of exercise



"I feel exhausted all the time" – Ann who looks after her mother

Taking on a caring role frequently triggers changes in family relationships, including that between the Carer and the cared for person. What was normal is redefined. Constantly having to make allowances is difficult, not everyone takes kindly to being cared for, while caring for their relative or friend has also enabled many people to become closer.

2.3 Case Study: Young Carer

Figure 3: Case Study, Young Carer

J aged 9 was referred to the Young Carers Service by Social Work due to his mum, K's prolonged alcohol abuse. When J was 3, his dad sadly died of cancer and his mum was unable to cope and used alcohol as a coping mechanism. This resulted in J and his sister being regularly removed from her care. Unfortunately, J would always insist on staying with his mum and would regularly run away from his Gran's house to be with his mum. J witnessed his mum under the influence of alcohol and being physically abused by various boyfriends. When K is under the influence of alcohol, J will be responsible for cooking meals, getting ready for school and ensuring his mum's physical and mental wellbeing is cared for. Police would regularly be in attendance and J would be removed back to the care of his Gran.

For the past year his Mum has been working with the Social Work Department to manage her alcohol addiction, however, J remains on the Child Protection register because of the emotional abuse he has suffered since the age of 3. The Young Carers Support Worker (YCSW) is part of J's Child Protection Core Group, and works alongside partner agencies to achieve a positive outcome for J.

During meetings, it became clear J did not have any male role models in his life and associated men with being violent and aggressive. Feedback from his school teacher showed he was displaying learned behaviours by being aggressive and bullying other boys in his class. This prompted the YCSW to try and find a suitable male mentor for J.

G has volunteered as a mentor with our young carer's service for over 2 years and has been working with a young carer whose father is terminally ill. G is a very experienced mentor and after talking through J's needs with him, he was happy to meet the family.

YCSW facilitated a meeting between G, K and J's social worker. K was happy for G to start taking J out once a week to get to know him and be a positive role model in J's life. At the first meeting between J and G, the YCSW attended and J talked through the things he enjoyed doing and what he would like to do on their weekly outings. J advised G that all his friends could swim and regularly go swimming, but he couldn't go as he had never learned to swim.

G went the local swimming pool and arranged weekly swimming lessons for J. G takes J every week to swimming lessons and takes him out for his dinner afterwards, to allow them to have 1:2:1 time. J has now attended swimming lessons for 6 months and completed his 2nd level. This is a huge achievement for J and he thrives on the one to one attention and praise he receives from G.

Children 1st carried out an assessment with J on his emotional needs prior to a Child Protection hearing and, in their assessment, it transpired that the person J feels safest with, is G and that he trusts him. He feels G is the one constant person in his life who turns up when he says he will and never lets him down.

Daniel Keogh, Children and Families Social Worker said: "***J thrives on the 1:2:1 attention he receives from G. The support that Young Carers has provided for J will last him a life time and help him become more trusting of adults.***"

J said: "***Tuesday can't come quick enough. It's the best day of the week. I like to stand at the window watching for G to arrive. He always gets out his car waving like a madman! He always makes me laugh. G takes me to my swimming lessons every week and I can't wait to show my friends that I'm not a baby and can swim now.***"

2.4 Carers in Argyll and Bute

There are several measures to estimate the number of Carers in Argyll and Bute. Based on information from the Scottish Health Survey 2015, the tables below show the estimated numbers of carers in the Local Authority area.

Table 1: Number of people estimated to provide unpaid care, by area and number of hours care provided

HSCP localities	Population aged 16+	Number (16+) estimated to be providing unpaid care			
		Any hours	under 35 hours	35+ hours	Variable hours
Bute	5570	947	724	167	56
Cowal	12712	2161	1653	381	127
Helensburgh and Lomond	22085	3754	2871	663	221
Islay, Jura and Colonsay	2982	507	388	89	30
Kintyre	6618	1125	860	199	66
Mid Argyll	7974	1356	1037	239	80
Mull, Iona, Coll and Tiree	3249	552	422	97	32
Oban and Lorn	13380	2275	1739	401	134
Argyll and Bute	74570	12677	9694	2237	746

Source: Derived using data published by National Records of Scotland (2011 Mid-year population estimates, Crown copyright) and Scottish Health Survey (Scottish Government, Crown copyright).

Table 2: Estimated percentage of unpaid carers, by age and gender

Age Band	Female	Male
16-24	12%	8%
25-34	11%	9%
35-44	21%	12%
45-54	27%	19%
55-64	32%	23%
65+	18%	18%

Source: Scottish Health Survey. Crown Copyright. The Scottish Government.

<http://www.gov.scot/Publications/2015/03/1081>

Table 3: Number of People aged 0-15 estimated to provide unpaid care

HSCP localities	Number of people (age 0-15)	Provision of unpaid care				
		None	Any hours	<20 hours	20-34 hours	35+ hours
Bute	794	762	32	24	3	4
Cowal	2062	2036	26	20	3	3
Helensburgh and Lomond	4125	3960	165	127	17	21
Islay, Jura and Colonsay	489	469	20	15	2	3
Kintyre	1173	1126	47	36	5	6
Mid Argyll	1415	1358	57	44	6	7
Mull, Iona, Coll and Tiree	625	600	25	19	3	3
Oban and Lorn	2609	2505	104	80	10	14
Grand Total	13292	12760	532	409	53	69

Source: Derived using data published by National Records of Scotland (2015 Mid-year population estimates, Crown copyright) and Scottish Health Survey (Scottish Government, Crown copyright).

Table 4: Number of people self-reported to be providing 35+hours unpaid care per week, by age and general health

Age band	Very good or good health	Fair health	Bad or very bad health	Total
0 -24	77	7	5	89
25-49	625	125	45	795
50-64	573	223	103	899
65 +	485	340	112	937
Total	1760	695	265	2720

Source: Census 2011, people living in households. Crown copyright, National Records of Scotland.

Table 5: Number of people self-reported to be providing 35+hours unpaid care per week, and to be in bad or very bad health by age

HSCP Locality	Age Band				Total
	0 to 24	25 to 49	50 to 64	65 +	
Bute	0	6	13	9	28
Cowal	2	15	20	41	78
Helensburgh and Lomond	3	10	29	27	69
Islay, Jura and Colonsay	0	1	3	0	4
Kintyre	0	3	13	12	28
Mid Argyll	0	3	7	6	16
Mull, Iona, Coll and Tiree	0	2	3	5	10
Oban and Lorn	0	5	15	12	32
Grand Total	5	45	103	112	265

Source: Census 2011, people living in households. Crown copyright, National Records of Scotland.

2.5 What Matters to Carers

We work closely with Carers and seek their views and feedback on their lives as Carers, what matters to them and what they feel needs to change to improve their lives in Argyll and Bute. We have summarised below the words and the main themes and issues which matter to Carers in Argyll and Bute.

Figure 4– Most commonly expressed words by Carers (from Carers’ Conference Feedback 2017)



Figure 5: What Matters to Carers (Carers' Conference Feedback 2017)

Carers Support and Services	Carers Involvement
<ul style="list-style-type: none"> - Identify Carers and let them know they are Carers - Early Carers assessments and Emergency Plans - Continuity of care from care agencies - Consistency of care provision across Argyll and Bute - Use the triangle of care - Emotional support - Respite care and short breaks - Financial advice - Signposting and information - Befriending support 	<ul style="list-style-type: none"> - Increase chances to participate in planning and decision making - Keep emergency plans at home with Carer - Local meetings for Carers to express and record views - Use technology to better involve Carers who are more isolated
Hospital Discharge	Remote and Rural
<ul style="list-style-type: none"> - Listen to the Carer at time of admission and discharge and throughout hospital stay - Make sure Carers are identified in person's hospital record - Enable Carers to be as involved in the care as they wish to be during the person's stay in hospital - Plan for discharge to make sure everything is in place - Provide the right information on the person's care and treatment, including medication, after discharge 	<ul style="list-style-type: none"> - Identify information sources and hubs for Carers - Identify new transport solutions to enable better connections for Carers in remote areas - Find better ways of providing personal care support in more remote areas - Provide outreach support for Carers in remote areas

2.6 How We Currently Care for Carers

Argyll and Bute is composed of four administrative areas, known as localities, which are:

- Helensburgh and Lomond
- Bute and Cowal
- Mid Argyll, Kintyre and Islay
- Oban, Lorn and Isles



"If it hadn't been for the Carers Centre, I don't know how I would have coped".

Each of these localities has its own Carers Centre, all of which are registered charities and are operated with their own managers and boards within their local communities. Because the centres have emerged and developed in response to local circumstances and need, their profiles are somewhat different. More information on each of the Centres is included in Appendix Two.

We have recently commissioned young carer services from Mid Argyll Youth Development Service.

The Centre managers work closely together to share and learn and to affect the development of consistent approaches across Argyll and Bute. At present the Centres provide some or all of the following services:



"the support and friendship are priceless."

- Information and advice
- Emotional support and a listening ear
- Advice on your rights and entitlements
- Informal advocacy
- Carers Training
- Support Groups
- Hospital Liaison
- Holistic therapies
- Counselling sessions
- Short Breaks for Carers
- Carers Support Plans
- Young Carer Statements
- Befriending service
- Signposting to other support groups and organisations
- Social activities



They have reminded me to look after myself and how important it is to keep me well'

2.7 Case Studies – Carers Centres

Figure 6: Case Studies

“C (35) came to the centre looking for some advice on moving and handling. He explained that his wife has chronic epilepsy; he has had to give up work at present to look after her. He stated that having somewhere to come to talk about his difficulties and stresses has made him not so angry. He comes along to the weekly drop in (which is all women) and he stated that he gets so much out of it. He has attended every lunch and has brought his wife with him on several occasions. We supported him to get a break to Arran for 5 days, it was 5 years since they had a holiday, and unfortunately it had to be cancelled due to H being in hospital following an episode of seizures. But they got there eventually and had the best time. He is fantastic support to others around him a real asset to the groups.” **Centre Manager**

“M came to the centre just to talk to someone. She came back on a number of arranged appointments to discuss her situation with caring for her mother 95 and her daughter who has learning disabilities. She was offered some therapies to help her relax, some counselling to assist her to cope with her caring responsibilities, we organised a short respite break that was hindered by the people she cared for as they did not want to do without her. She stated that everyone commented on how well she looked when she came back from her short break. She loved it and is planning to have another break next year.” **Centre Manager**

“The help I have received from the Carers centre has been invaluable. My husband and I had recently moved to the area and my Mum had moved with us. It soon became clear that my Mum was not as well as I thought and caring for her was a full-time job. I had become very stressed my husband had called into the carers centre for some advice he then dragged me in one day we were in town. I can honestly say that I think the support I have had from the centre has saved my marriage as we had both reached breaking point. It was good for both of us to be able to speak to someone and voice our concerns. I was given advice about Power of Attorney which I knew nothing about I started to attend the Dementia carers support group where I have enjoyed peer support from other people in the same situation as myself and I have made some very good friends. I cannot praise the centre enough.” **Carer**

3. SECTION THREE: IMPROVING LIVES OF CARERS IN ARGYLL AND BUTE

3.1 Our Vision for Carers in Argyll and Bute

Our vision is that all Carers (both young and adult) in Argyll and Bute:

- Feel supported, valued, informed, respected and engaged in their role as a Carer
- Are able to have a life alongside caring



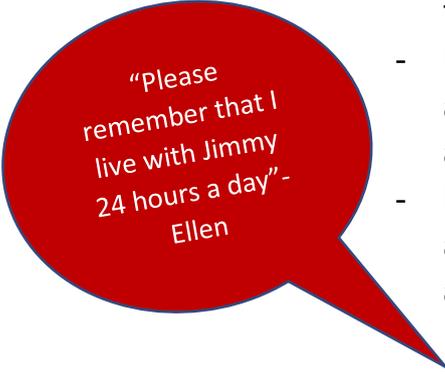
"I know so much about Daniel, I want professionals to work with me" -

3.2 Our Values Working with Carers

Our values reflect the values of Argyll and Bute Health and Social Care Partnership. These include compassion, integrity, respect, continuous learning, leadership and excellence (CIRCLE).

We will work with Carers in ways that are:

- **Person centred** - People with a caring role should be aware of any support/services available so that they can make informed decisions about them. They can choose what, if any services they wish to be involved in or even if they wish to make it known that they are a carer. Each person with a caring role is unique and this should be recognised and respected regardless of their circumstances.
- **Caring and Enabling**- Carers are assisted and supported to minimise the negative impact of their caring role while maximising their confidence to cope with their caring role and thrive within that and other areas of their daily life.
- **Integrity**-based- People with a caring role should be asked for feedback about how they perceive and experience services. This information should be considered and, where appropriate, acted on and used to rectify mistakes and improve service provision and design. Any outcomes of such feedback should, in turn, be fed back to those appropriate people



“Please remember that I live with Jimmy 24 hours a day” - Ellen

- **Compassionate** – People with a caring role are treated with positive regard and empathy at all times
- **Respectful** – People with a caring role are respected at all times; their knowledge and skills are recognised and valued.
- **Engaging and inclusive** - People with a caring role are valued and included as equal partners in planning and developing carer support services. this is a means of taking over elements of control where there is a shift in balance of decision making and authority from professionals to the people who use services.

3.3 Equality, Diversity and Human Rights

The principles of equality, diversity and human rights are the underpinning rights for all carers. Carers reflect the diversity of Scotland's population. We will work to ensure that Carers are aware of their rights under this legislation and that no carer is disadvantaged due to age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity, race; religion or belief; or sex or sexual orientation, in line with the Equality Act 2010.



“I would just like more time to hang out with my mates” - Duncan

All children and young people have an established set of rights and principles based on the United Nations Convention on the Rights of the Child. These say that nobody should treat a child or young person unfairly and that when adults make a decision about a child or young person it is what's best for the child or young person that should be the most important thing to consider. The child or young person must have their say too.

3.4 Key Outcomes for Carers

In order to address the requirements of the Carers (Scotland) Act 2016, and to address the issues which Carers have told us matter to them, we have identified the following five outcomes which this strategy will achieve over the next five years.

- All Carers are identified at the earliest opportunity and offered support to assist them in their caring role
- Young Carers are supported with their Caring roles and enabled to be children and young people first
- Mental and physical health of Carers is promoted by ensuring that they can access or be signposted to appropriate advice, support and services to enable them to enjoy a life outside their caring role
- Carers have access to information and advice about their rights and entitlements to ensure they are free from disadvantage or discrimination in relation to their caring role
- People who provide care are supported to look after their own health and wellbeing which includes reducing any negative impact of their caring role on their own health and wellbeing

4. SECTION FOUR: OUR COMMITMENTS TO CARERS

4.1. Our commitments

We make 27 **commitments** to enable us to deliver on the 5 key **outcomes** detailed at section 3.4 above. These commitments will inform the **actions** that need to be taken forward to deliver this strategy.



Outcome 1

All Carers are identified at the earliest opportunity and offered support to assist them in their caring role

Our commitments are:

- We will develop a model which supports early identification of Carers and prevention of crisis situations.
- We will work with partner agencies and groups to raise awareness of Carers and to increase accessibility and connectedness for Carers within their communities
- There will be multi-agency guidance for our workforce on identifying, supporting, listening to and involving Carers in planning of services and supports as equal partners in care. This will include guidance on how we communicate and work together.

Outcome 2

Young Carers are supported with their Caring roles and enabled to be children and young people first

Our commitments are:

- We will identify and agree services for Young Carers and implement recommendations across Argyll and Bute.
- We will develop a model with educational and training establishments that will enable early identification of Young Carers.

Outcome 3

Mental and physical health of Carers is promoted by ensuring that they can access or be signposted to appropriate advice, support and services to ensure they are supported to enjoy a life outside their caring role

Our commitments are:

- There will be an information booklet/checklist that enables individuals to identify that they are Carers.
- Each identified Carer in Argyll and Bute will have the opportunity to participate in completing his/her individual Carer's Support Plan or Young Carer's Statement. This will be personalised to the individual needs of the Carer, and where appropriate, the needs of the person being cared for.
- Each Carers Support plan will be co-ordinated by a named person through the Carers' Centres and information shared, as agreed with the Carer, with appropriate others (meeting the requirements of the current data protection legislation).
- Eligibility criteria will determine access to services for Carers wherever they are based in Argyll and Bute, even where the cared for person lives outwith the local authority area.
- Carers' voices will be represented at all levels of planning and decision making in Argyll and Bute
- There will be a Carers' participation and engagement statement which sets out how Carers will be promoted and encouraged to be meaningfully involved in the strategic planning and shaping of services to support them and the person they care for.

Outcome 4

Carers have access to information and advice about their rights and entitlements to ensure they are free from disadvantage or discrimination in relation to their caring role

Our commitments are:

- We will develop and implement a communication strategy which includes the continuation of an Annual Carers Conference to increase awareness, understanding and identification of carers.

- We will have clauses within commissioned services contracts that they have a responsibility to identify and signpost Carers to appropriate supports.
- There will be a learning and development plan to support implementation of the Carers (Scotland) Act 2016 and to build confidence and skills of our workforce in supporting Carers.
- There will be a robust plan to deliver outreach work for Carers in remote and rural areas – including the use of technology where helpful.
- There will be an agreed statement, pathway, guidance and a workforce strategy for identifying and involving Young and Adult Carers in admission to hospital and discharge planning process in line with section 28 of the Carers (Scotland) Act 2016.
- We will work with partners in NHS Greater Glasgow and Clyde and NHS Highland hospitals to ensure Carer involvement.
- We will make sure that there is access to all information on services and supports for Carers and that Carers can be signposted to support services through a variety of methods.
- We will identify and deliver rolling programmes of education and training to support Carers in their roles.
- We will support Carers in providing palliative and end of life care

Outcome 5

People who provide care are supported to look after their own health and wellbeing including reducing any negative impact of their caring role on their own health and wellbeing

Our commitments are:

- We will work with educational, cultural and leisure organisations to improve access for Carers to programmes and establishments across Argyll and Bute and beyond.
- We will provide counselling and group support services for Carers.
- We will increase access to befriending and respite services for Carers.
- We will develop a Short Breaks Statement for Carers in Argyll and Bute.
- We will review and expand the range of short break/respite options available to meet the different needs of Carers.

- We will increase information about, and access to, bereavement support for Carers
- We will develop standards and raise awareness among employers and academic institutions as to how they can support Carers.

SECTION FIVE: FINANCE PLAN

5.1 Overall Budget available

The total budget available, through the Health and Social Care Partnership in Argyll and Bute, to support Carers is roughly £1.5 million for 2018-2019. This includes the annual allocations to the Carers' Centres, funding for the Carers' Act and the respite funding through Commissioned Services.

In addition to this funding from the statutory sector, each of the Carers Centres raises additional income through funding bids and fundraising activities.

The implementation plan which accompanies this strategy will be costed and prioritised to ensure that the financial allocation is appropriately deployed to achieve the agreed outcomes.

5.2 Budget

The table below shows how the funding available was allocated across the Carers Centres in 2017-2018.

Table 6: Carers Centres Allocation 2017-2018

Description	Total
Helensburgh & Lomond Carers	£147,300
Crossroads (Cowal & Bute) caring for carers	£97,300
Dochas Carers Centre	£105,952
Crossroads North Argyll	£45,800
North Argyll Carers Centre	£84,500
Carers Networking Board - Admin costs	£4,400
Carers Networking Board - Conference costs	£5,808
Crossroads Caring Scotland - Dalriada & The Isles	£0
Kintyre reallocation - to go to cost centre S3005001238 when new Lorn Campbell Court day service comes into operation	£32,625
Unallocated Funding - Can be used for implementation of the act	£8,723
	£532,408
Further budget put in as part of Q&F plan - allocation to Carer's Act Prep	£37,000
	£569,408

5.3 Respite Budget for Argyll and Bute

At present, the budget for respite care is allocated on a needs led basis – all clients are assessed under the Eligibility of Need Framework. This will be reviewed to ensure that future allocations meet the requirements of the short breaks policy for Carers in Argyll and Bute.

5.4 Funding Allocation for 2018 -2019

Table 7 shows the gross expenditure available for 2018-2019. This includes the total allocations to the Carers Centres, funding for respite (Commissioned Services) and Carers Act funding.

TABLE 7: Gross Budget Breakdown 2018-2019

Head of Service	Classification	Sum of Annual Budget (Copy)
Adult Care	Carers Centres	536,820
	Commissioned Services	347,898
	Carers Act/Commissioned Services	375,846
Adult Care Total		1,260,564
Children and Families	Ardlui	107,089
	Commissioned Services	21,447
	Kintyre Network Centre	115,535
Children and Families Total		244,071
Grand Total		1,504,635

5.5 Projected Funding - Carers' Act

The table below shows the projected funding available to support implementation of the requirements of the Carers (Scotland) Act 2016.

Table 8: Projected Funding For Carers Act Implementation 2018-2022

Argyll and Bute Estimated Funding

Funding Component	2018/19		2019/20		2020/21		2021/22	
	Scotland Amount (£m)	Argyll and Bute Share* (£m)	Scotland Amount (£m)	Argyll and Bute Share* (£m)	Scotland Amount (£m)	Argyll and Bute Share* (£m)	Scotland Amount (£m)	Argyll and Bute Share* (£m)
Adult Carer Support Plan	2.350	0.042	3.420	0.062	6.640	0.120	7.710	0.139
Young Carer Statement	0.270	0.005	0.500	0.009	0.740	0.013	0.970	0.017
Information and Advice Service	3.040	0.055	3.040	0.055	3.040	0.055	3.040	0.055
Duty to Support Adult Carers	9.935	0.179	17.079	0.308	24.808	0.447	51.218	0.923
Duty to Support Young Carers	1.465	0.026	2.930	0.053	4.395	0.079	6.493	0.117
Additional Short Breaks Component	2.360	0.043	2.360	0.043	2.360	0.043	2.360	0.043
Local Carer Strategies	0.000	0.000	0.000	0.000	0.160	0.003	0.000	0.000
Total	19.420	0.350	29.329	0.530	42.143	0.760	71.791	1.294
YOY Increase £m				0.180		0.230		0.534
YOY Increase %				51.43%		43.40%		70.26%

*Based on 1.802% of Scotland Figure
Source = Bill Financial Memorandum
Allocation remains flat from 2021/22

SECTION SIX: How We Will Achieve Our Outcomes And Deliver Our Commitments

6.1 Implementation Plan

No.	Commitment	Actions	Accountability	Date for Completion	Evidence
Outcome 1: All Carers are identified at the earliest opportunity and offered support to assist them in their caring role					
1.	We will develop a model which supports early identification of Carers and prevention of crisis situations.	1.1 Develop and implement guidance for all staff and services to ensure that Carers are identified as early as possible	Carers Act Social Work Group	April 2019	Guidance produced
		1.2 Develop and implement processes to ensure that Carers Support Plans, Young Carers Statements and Emergency Plans are completed, and information shared across all services as agreed	Carers Act Social Work Group Carer centres	April 2019	Guidance produced
2.	We will work with partner agencies and groups to raise awareness of Carers and to increase accessibility and connectedness for Carers within their communities	2.1 12.1 Develop and implement a communication strategy.	Carers Partnership	December 2019	Strategy produced.
		2.2 Work with partner agencies and community groups to enact improvements for Carers in their services	Carers Partnership	December 2019	Diary of activities held by Carers Partnership
3.	There will be multi-agency guidance for our workforce on identifying, supporting, listening to and involving Carers in planning of	3.1 In collaboration with Carers and with staff, develop appropriate guidance which meets the requirements of commitment 9.	HSCP Carer Lead Lead for Social Work Carers Act Social Work Group-local reps	April 2019	Guidance produced

No.	Commitment	Actions	Accountability	Date for Completion	Evidence
	services and supports as an equal partner in care. This will include guidance on how we communicate and work together.	3.2 Implement guidance across all relevant services	HSCP Carers Lead Heads of Service Lead for Social Work Carers Act Social Work Group-local reps Locality management teams	April 2019	Guidance produced and implemented
		3.3 Audit impact of guidance in practice one-year post-implementation	HSCP Carers Lead Heads of Service	December 2020	Carers census Contract monitoring. Annual survey. Sharing of carer assessments with SW teams.

Outcome 2:

Young Carers are supported with their caring roles and enabled to be children and young people first

4.	We will identify and agree services for Young Carers	4.1 Identify and agree services for Young Carers through commissioning process	Children's Locality Manager with portfolio for Young Carers/HSCP Carers Lead/Procurement & Commissioning team	December 2020	Contracts in place for 2019 to 2022.
5.	We will develop a model with educational and training establishments that will enable early identification of Young Carers	5.1 Combine with action 18.1 to ensure that all educational and training establishments have systems in place to enable early identification of Young Carers	HSCP Carer lead/Education colleagues/Young Carer Service providers/Children's Service.	December 2020	Regular item at Children's Strategic meeting

Outcome 3:

Mental and physical health of Carers is promoted by ensuring that they can access or be signposted to appropriate advice, support and services to ensure they are supported to enjoy a life outside their caring role

6.	There will be an information leaflet	6.1 Develop a leaflet with simple checklist that informs	Carers Partnership/Car	June 2019	Leaflet to all A&B homes
-----------	--------------------------------------	--	------------------------	------------------	--------------------------

No.	Commitment	Actions	Accountability	Date for Completion	Evidence
	that enables individuals to identify that they are Carers	and enables Carers to identify that they are carers	ers Lead		2019
		6.2 Implement leaflet with distribution and implementation plan to ensure that it is available in all key locations, both in hard copy and electronically	Carers Partnership/Carers Lead	June 2019	Leaflet created and distributed
7.	Each identified Carer in Argyll and Bute will have the opportunity to participate in completing his/her individual Adult Carer's Support Plan (ACSP) or Young Carer's Statement (YCS). This will be personalised to the individual needs of the Carer, and where appropriate, the needs of the person being cared for.	7.1 Develop and implement guidance for staff and Carers in the completion of ACSP/YCS	HSCP Carers Lead/Carers Act Social Work group	April 2019	Guidance produced
		7.2 Review, as part of an annual evaluation, the ACSPs/YCSs to ensure that they meet the standards agreed	Local managers/HSCP Carer Lead/Centre managers	March 2020	Contract monitoring/feedback from local teams
		7.3 Elicit feedback from Carers as part of the annual audit to ensure they have the opportunity to participate in completing their plans and to influence the completion of the plans	HSCP Carers Lead/Procurement & Commissioning team	March 2020	Annual audit/survey completed
8.	Each Adult Carers Support plan and Young Carers Statement will be co-ordinated by named person through the Carers' Centres and information shared, as agreed with the Carer, with appropriate others (meeting Data Protection requirements)	8.1 Develop and implement guidance for staff and Carers in the co-ordination and sharing of information/actions included within the ACSP/YCS IT solution sourced and implemented	Carers Act Social Work group/Carer Lead and as part of contracts	April 2019	Guidance produced. Contract monitoring
9.	Eligibility criteria will be evaluated to ensure access to services for Carers wherever they are based in Argyll and Bute	9.1 Evaluate, in collaboration with Carers, effectiveness of eligibility criteria one-year post-implementation	HSCP Carers Lead/Council Finance team.	June 2019	IJB reports Census evaluation
10.	Carers voices will be represented at all levels of	10.1 In collaboration with Carers, develop plan to ensure that feedback and	Deputy Director of Associate Director of	September 2019	Input to Strategic Planning Group/Carer rep

No.	Commitment	Actions	Accountability	Date for Completion	Evidence
	planning and decision making in Argyll and Bute	input from Carers are included in all appropriate planning and decision making and within the Carers' participation and engagement statement	Public Health/ Carers Partnership/Carer Lead		role in IJB reviewed. Carer rep at Partnership meetings Engagement framework
11.	There will be a Carers' participation and engagement statement which sets out how Carers will be promoted and encouraged to be meaningfully involved in the strategic planning and shaping of services to support them and the person they care for.	11.1 In collaboration with Carers, develop the participation and engagement statement which meets the requirements as set out in the Carers (Scotland) Act 2016.	Associate Director of Public Health	September 2019	Statement produced and agreed
Outcome 4					
Carers have access to information and advice about their rights and entitlements to ensure they are free from disadvantage or discrimination in relation to their caring role					
12.	We will develop and implement a communication strategy which includes continuation of Carers Conference to increase awareness, understanding and identification of Carers.	12.1 Develop and implement a communication strategy which includes continuation of Carers Conference to increase awareness, understanding and identification of Carers.	Carers Partnership	March 2019	Strategy produced. Conference occurs.
13.	We will have clauses within commissioned services contracts that they have a responsibility to identify and signpost Carers to appropriate supports.	13.1 In collaboration with the Commissioning Team and service providers, develop and agree wording for inclusion in contracts	HSCP Carer Lead	March 2019	Contract updated
		13.2 Review the impact of the clauses as part of the service review process	HSCP Carer Lead	March 2020	Census data
14.	There will be a	14.1 Create a learning and	Carers	September	Plan developed

No.	Commitment	Actions	Accountability	Date for Completion	Evidence
	learning and development plan to support implementation of the Carers (Scotland) Act 2016 and to build confidence and skills of our workforce in supporting Carers.	development plan to meet the requirements identified through both the Carers (Scotland) Act 2016 and the Caring Together strategy for Argyll and Bute -EPiC tool used	Partnership HSCP L&D Plans Carers Act Social Work group	2020	
15.	There will be a robust plan to deliver outreach work for Carers in remote and rural areas.	15.1 Carry out gap analysis of outreach services in more remote and rural areas	Carers Partnership	December 2020	Within contracts
		15.2 Develop and implement plan to address the identified gaps	Carers Partnership	December 2021	Within contracts
16.	There will be an agreed statement, pathway, guidance and a workforce strategy for identifying and involving all Carers in admission to hospital and discharge planning process in line with section 28 of the Carers (Scotland) Act 2016.	16.1 Develop and implement, in collaboration with Carers and staff, the necessary guidance, pathways and plans to ensure that Carers are identified and engaged throughout the hospital admission and discharge periods	Carers Centres within contracts	September 2020	Added to Carer contract 2019-22 following hospital discharge pilots
		16.2 Audit the impact of the guidance one-year post implementation	HSCP Carer Lead	September 2021	Census data
17.	We will work with partners in NHS Greater Glasgow and Clyde and NHS Highland hospitals to ensure Carer involvement	17.1 Identify key partners and colleagues in NHS GGC and Highland and agree and implement necessary actions to ensure cross boundary involvement of Carers in hospital discharge.	Head of Planning/ Carers Partnership Carers Centres within contracts	December 2019	KPI's from Hospital Discharge Pilot. Activity embedded into future contracts.
		17.2 Seek feedback from Carers who have experienced services in NHS GGC and Highland and ensure appropriate communication channels to report back to GGC and Highland	Head of Planning/ Carers Partnership Carers Centres within contracts	December 2019	Carers Survey
18.	We will make sure that there is access to all information on services and supports for Carers and that Carers	18.1 Review of current information provision for Carers and ensure that modern information and service directories are developed and made	Carers Centres within contracts	December 2019	Within contracts from 2019.

No.	Commitment	Actions	Accountability	Date for Completion	Evidence
	can be signposted to support services through a variety of methods	available through range of media which all Carers can access. 18.2 Ensure robust information provided for hospitals.			
19.	We will identify and deliver rolling programmes of education and training to support Carers in their roles	19.1 Evaluate current training programmes and availability for Carers across Argyll and Bute	Carers Centres within contracts	January 2020	Training Plan established by all centres.
		19.2 Implement plan to address deficits identified to ensure that all Carers have access to core training to enable them to carry out their role	Carers Centres within contracts	July 2020	Training Plan established by all centres.
20.	We will support Carers in providing palliative and end of life care	20.1 Work with partners to develop and implement a palliative end of life care pathway which includes support and training for Carers – including how to access clinical advice and support at all times, including emergencies	Carers Centres within contracts	July 2020	Census data

Outcome 5

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

21.	We will work with educational, cultural and leisure organisations to improve access for Carers to programmes and establishments across Argyll and Bute and beyond	21.1 Identify key partner organisations and groups across Argyll and Bute	Carers Partnership	January 2019	Communication Strategy
		21.2 Work with identified partners and Carers to develop plans to improve access for all Carers	Carers Partnership- individual to be identified	October 2019	Communication Strategy
22.	We will provide counselling and group support services for Carers	22.1 Carry out gap analysis to identify areas of good practice and areas where there are no/inadequate services currently available	Carers Centres within contracts	June 2019	Census data
		22.2 Develop plan to address deficits identified, using models of good practice to	Carers Centres within contracts	December 2019	Census data

No.	Commitment	Actions	Accountability	Date for Completion	Evidence
		inform future provision			
23.	We will increase access to befriending and respite services for Carers	23.1 Carry out gap analysis to identify areas of good practice and areas where there are no/inadequate services currently available	HSCP Carer Lead Carers Centres within contracts	June 2019	Census data
		23.2 Develop plan to address deficits identified, using models of good practice to inform future provision	HSCP Carer Lead	December 2019	Census data
24.	We will develop a short breaks statement for Carers in Argyll and Bute	24.1 Develop, in collaboration with Carers Partnership, a short break statement which meets the requirements of the Carers (Scotland) Act 2016 and the outcomes of this strategy	HSCP Carer Lead	December 2018	SBS produced as part of Strategy
25.	We will increase information about, and access to, bereavement support for carers	25.1 Review gaps in current bereavement support services provided by all partners in Argyll and Bute	Carers Partnership	March 2020	Report produced For partnership group
		25.2 Identify how current gaps can be addressed and work in partnership with other key organisations and groups to address	Carers Partnership	March 2020	Report produced For partnership group
		25.3 Make information on bereavement support services accessible to Carers	Carers Partnership	March 2020	Within contract
26.	We will review and expand the range of short break/respite options available to meet the different needs of Carers	26.1 Review current provision and uptake of both respite and short break options available to Carers in Argyll and Bute	Carers Partnership	March 2019	Within future contracts
		26.2 Implement plan to expand the range of options available to address the gaps identified in existing provision	Carers Partnership HSCP Carer Lead	March 2021	Within future contracts
27.	We will develop standards and raise awareness among employers and academic institutions as to how they can support Carers.	27.1 Communication and engagement strategy to include a focus on employers and local academic institutions within 2021.	Carers Partnership	March 2021	Communication Strategy

7. SECTION SEVEN: ADDITIONAL INFORMATION

7.1 Appendices

Appendix 1

Carer Services in Argyll and Bute providing services on behalf of the HSCP.

1. Oban, Lorn and Isles

- North Argyll Carers Centre (NACC) provides a person-centred support service for unpaid family carers across Oban, Lorn and Isles area, making a positive difference to the lives of carers, supporting carers from the age of 8 upwards.
- NACC offers a wide range of support services including: information and advice, daily drop in, listening ear, complementary therapies, signposting and referral to other agencies, counselling service and informal advocacy. There are a range of support groups including Dementia Carers, Parkinson's Carers, Mental Health Carers and Parent Carers.
- An active social programme including leisure groups, e.g. writing and gardening groups gives carers the opportunity to take time out from their caring role. Also available is a training and activities programme supporting both role specific training and learning from moving and handling to power of attorney information sessions. This is run side by side with wellbeing activities enabling carers to think about their own health and wellbeing including stress management, mindfulness and more.
- There is a young carers service working with carers from the age of 8-18, including young carers support groups, one to one support, school drop-in time and respite activities throughout school holidays. There is also a young adult carers support group meeting once monthly and ongoing support available for young adult carers
- There is funding support for respite breaks and administer Cherish Transport Fund supporting transport needs for carers and those they support.
- A team of Carer Support Workers, including island-based Carer Support Workers and a Carer Support Worker for rural mainland, ensures carers are supported across the area of Oban, Lorn and Isles.
- The Support Workers work closely with Lorn and Isles Hospital to support a Carer Friendly Hospital with a permanent information area in the main foyer of Lorn and Islands Hospital reception, awareness raising sessions for staff and a Support Worker in the Hospital one afternoon a week
- A key element of the work is partnership, with colleagues in health and social care across the communities of Oban, Lorn and Isles.

- The Centre is affiliated to the Carers Trust, a National Carer Organisation and works also with MECOPP (Minority Ethnic Carers of People Project). The Support Workers work closely with Lorn Oban Healthy Options, working holistically on preventative work in our communities, including joint delivery of a self-management programme for carers and those living with long term conditions, and also works collaboratively towards the Healthy Villages concept. It is part of the Lorn Medical Practice Frailty Project multi-disciplinary team and the Steering Group for Oban Health Town. It works closely with a wide range of organisations to create strong links for carers. Local organisations, it works with include Oban Youth Cafe, CarrGom, Curam (Tiree), RVS, Green Shoots Gardening Project, ACHA Health and Wellbeing Network. It also works closely with the three fellow Carers Centres across Argyll and Bute, and Crossroads North Argyll, sharing resources and good practice.

2. Mid Argyll, Kintyre and Islay

Dochas Carers Centre

- The Dochas Carers Centre covers Mid Argyll, Kintyre and the Isles (Gigha, Islay and Jura). It covers over 1000 square miles of Argyll and Bute (42%) and has a population of 20,533.
- The Centre has also helped hundreds of unpaid carers and those they care for by easing the stress and sense of isolation often felt by carers living in the rural and remote areas.
- It has support groups that both carers and their loved ones attend, and where many friendships are formed. It has been a revelation to see how much carers help other carers.
- It has a huge range of services and activities, all brought about by suggestions made by the carers themselves and the training sessions led by health or social service professionals for carers are hugely appreciated - with one lady's life being saved by a recommendation of the visiting Nurse to see her doctor the next morning - and he would check up that she did so!
- The Centre's strap line is '**Bringing people together who care**' and Dochas means Hope.
- **Services offered:**
 - Information and support to Carers including emotional support
 - Adult Carer support plans
 - Training on Self Advocacy skills – Dochas employee
 - Counselling service – 8 trained counsellors

- Carers training and information sessions
- Peer support groups - condition specific (including an informal drop in morning)
- Monthly lunch groups in Lochgilphead, Tarbert, Campbeltown and Islay.
- Playlist for Life service
- Time for Me – respite service
- Circle of Friends – Befriending Service (25 volunteers)
- Creative breaks and small grant funding
- Emergency planning
- Social outing and events throughout the year

Mid Argyll Youth Development Service

Mid Argyll Youth Development Service has recently been commissioned to offer young carers services in the Mid Argyll, Kintyre and Islay area. It is a voluntary organisation working with young people between the ages of 0 and 25 years old. We work with young people to provide a wide range of recreational, educational, social and learning opportunities. We have a diverse range of Projects and Programs that incorporate working with young parents and their children, young carers and their families, young people not in employment education or training young offenders and your everyday average young people.

3. Bute and Cowal

- Crossroads Cowal and Bute Carers Centre provides a needs led service which puts the carers at the heart of all support offered and ensures that their voices are listened to.
- The aim is to:
 - Enhance the quality of life for carers and their families
 - Empower carers to maximise their rights and entitlements
 - Raise public awareness of carers and their needs
 - Raise awareness of the value of carers and their contribution to society
 - Become a recognised centre of Excellence for carer support_
- Support Services Available
 - Carers wellbeing service:

- Social events and days out
 - Health and wellbeing events
 - Training/information sessions
 - Access to wellbeing and health promotion strategies such as mindfulness, stress management, telephone support
 - Support and information service
 - Home visits
 - Directive 1-1 support
 - Information packs
 - Emotional support and listening
 - Carer Support Plans
 - Signposting/referral to other services
 - Emergency planning
 - Knowing your rights as a carer
 - Informal advocacy
- Outreach service reaches out to carers in all areas throughout Cowal and Bute. The outreach Co-ordinator and support worker aims to take out all services to these areas to ensure that carers living in more rural settings are not disadvantaged or disconnected. The outreach service focuses closely on improving the health & wellbeing of Carers through a variety of strategies which can be delivered directly in the carers home or in a group setting. Staying connected is vital for carers in outlying areas and the Outreach service makes regular telephone contact support calls and home visits to ensure carers are not alone in the caring journey.
- Young Carers Service
Supports children and young people 5 to 24 years with a caring responsibility for another. As a child centred service it aims to include children and young people (young carers) in all aspects of the service that meets their individual needs. The service provides school lunchtime drop in sessions and After School clubs alongside weekend and non-term time holiday activity provision. It offers residential trips and activities dependent on funding. Those aged 16 years plus are invited to join the weekly walking group. In addition, it provides one to one sessions, advocacy, having a voice, a Young Carers Education Card for those in S1 & above, skills & training, information & support, signposting & referral, a listening ear.

It works closely with young carers, families and partners throughout Bute and Cowal and has provided informal & formal presentations into Schools, Social Work, Health and many of its third sector partners & colleagues.

- **Respite Service**

The Respite Service (care attendant at home) allows carers some time out to relax or do things that need to be done out with their caring responsibilities. This can allow the carer some time to recharge their batteries and return to their caring role feeling more able to cope. It is also proven to be a vital part of ensuring the Carers wellbeing is not adversely affected as a direct result of the challenges that they face.

4. Helensburgh and Lomond

- The Charity operates within Helensburgh and Lomond, which is one of four administrative districts formed in Argyll & Bute when local government in Scotland was restructured in 1996. It covers a relatively large geographic expanse extending to over 366 sq. kilometres, of which more than half is rural hinterland and stretches from the top of Loch Lomond just beyond the small village of Inverarnan in the north, to Cardross in the south, and from the 'Rest and be thankful' in the west across to Luss in the east. It has a resident population of 26,170 people.
- The Charity believes unpaid carers should be able to participate in normal activities and live their lives in ways that maximise feelings of choice and control and encompass their social, physical and emotional needs, no matter their age, circumstances or where they reside. Their caring commitments and responsibilities can present barriers or challenges to this and it benefits society as a whole, if they receive the support needed to ensure they have a safe, acceptable and stimulating experience of life. Whilst it is not solely the responsibility of the Charity to provide that support and deliver the interventions required, its Mission is:

- ***"To make a positive difference to the lives of unpaid carers."***

- **Aims**

- identify carers living in Helensburgh and Lomond to ensure they are supported and empowered to manage their caring role;
- ensure that young carers are thriving and protected from inappropriate caring roles;
- promote the health and wellbeing of carers, to ensure they are mentally and physically well and treated with dignity;

- ensure carers are free from disadvantage or discrimination related to their caring role;
- promote the right of carers to enjoy a life outside their caring responsibilities, and
- ensure carers are recognised and valued as expert care partners.

- **What the Charity does**

- Caring for someone can feel like a huge responsibility and it is easy to be drawn into feelings of anxiety when faced with the maze of services and benefits available. You may be wondering how to access the help needed by you and the person you look after. The charity helps Carers by offering:

- **Information and advice**
- **Emotional support and a listening ear**
- **Advice on your rights and entitlements**
- **Informal advocacy**
- **Carers Training**
- **Support Groups**
- **Holistic therapies**
- **Counselling sessions**
- **Short Breaks for Carers**
- **Carers Support Plans**
- **Befriending service**
- **Signposting to other support groups and organisations**
- **Social activities**
- **Homework Study Group (young Carers)**
- **Mentoring Service (young Carers)**
- **Peer Support Groups**
- **Summer Programme (young Carers)**

All of the above services are also accessible in outreach areas throughout Helensburgh & Lomond.

7.2 REFERENCES

1. Carers (Scotland) Act 2016
- 2 Report on provision of Unpaid Care Argyll and Bute, November 2016: Argyll and Bute Health and Social Care Partnership Public Health Information
3. Children and Young Peoples Services Plan 2017-2020, Argyll and Bute

With thanks to the Argyll and Bute Carers Partnership particularly Crossroads and Carer Centres detailed below, HSCP staff and Pat Tyrell for their work in creating the Carers Strategy.



DOCHAS
CENTRE

