



ANGUS HEALTH AND SOCIAL CARE

INTEGRATION JOINT BOARD – 24 FEBRUARY 2021

UPDATE ON PROGRESS WITH IMPLEMENTATION OF THE CARERS (SCOTLAND) ACT 2016

GAIL SMITH, INTERIM CHIEF OFFICER

ABSTRACT

The implementation of the Carers (Scotland) Act 2016 has been progressing. A Strategy for Carers in Angus was published in December 2019 and this identified a range of improvement areas that require to be delivered to meet the intentions of the legislation. This report provides an update on progress and specifically considers the waiving of charges for carers.

1. RECOMMENDATIONS

It is recommended that the Integration Joint Board:

- (i) notes the content of the report and the progress made to date with the implementation of the Carers (Scotland) Act 2016;
- (ii) notes the content of the waiving of charges policy to be approved by Angus Council;
- (iii) agrees the funding and commissioning intentions set out in the finance section of this report;
- (iv) agrees the change in the point price for the calculation of Carers budgets; and
- (v) approves the direction attached as Appendix 4 of this Report.

2. BACKGROUND

Significant progress has been made with the implementation of the Carers (Scotland) Act 2016 (the Act). This has included:

Carers (Scotland) Act 2016 key requirements	Current position
Duty to set local eligibility criteria for carers	Implemented September 2018 and due for review 2021
Duty to prepare an adult carer support plan	Implemented September 2018 and due for review 2021
Duty to prepare a young carer statement	Implemented January 2019
Duty to provide support to carers	A range of services are available to eligible carers with self-directed support options available
Duty to involve carers in services which are provided for carers and	There is carer representation in decision-making forums

those they care for	and on-going engagement and consultation is undertaken
Duty to involve carers in the discharge planning process	New guidance leaflet on discharge issued October 2019
Duty to consider whether carers are willing and able to continue in their role	Consideration made in conjunction with carers during the assessment of the supported person and in the development of the carer support plan
Duty to consider whether support for carers should take the form of or include a short break	Options for meeting the needs of the carer are developed during the production of the carer support plan and reviewed.
Duty to take account of carer views when planning support for the person they care for	Undertaken during the needs assessment for the supported person and reviews and through on-going engagement
Duty to establish and maintain an advice and information service for carers	Via Angus Carers Centre
Duty to prepare and publish a short break services statement	Draft statement co-produced December 2019 (pending sign off of Waiving of Charges guidance)
Duty to prepare and review a local carer strategy	Angus Carer Strategy published and due for review 2022
Other Milestones	
Supporting carers in the workplace policy launched by Angus Council 2019	
New carer's emergency card launched in June 2020	
Carer content on the Partnership and Council sites updated in June 2020	
Draft waiving of charges policy to be considered by Angus Council 9 March 2021.	

3. CURRENT POSITION

Members should note that support to carers is provided through the terms of Self-Directed Support (SDS). The emphasis in SDS is on individual outcomes and personalisation, so when a common, equitable or shared approach to provision needs to be introduced, SDS does not lend itself readily to change. Working out a system to meet the need, taking an equitable approach, whilst respecting the principles of SDS can be complex and challenging.

Support for eligible carers has been subject to self-directed support since the implementation of the Social Care (Self-directed Support) (Scotland) Act 2013. Prior to the implementation of the Act, 198 carers had a calculated budget, with a weekly average budget of approximately £36 per week. Following the introduction of the Carers (Scotland) Act 2016 (the Act), and the implementation of new eligibility criteria for carers, both the number of carers being assessed, and the value of the support provided have increased. By 2019/20, there were 988 carers who had an assessment or adult support plan in place; 874 had either an adult care support plan or young carers statement in place. 520 carers who met eligibility thresholds had a calculated budget of, on average, approximately £76 per week. This increase in demand for support has resulted in spending on carers support growing from £379K to £2m, an increase of approximately £1.62m.

Based on prevalence data, we had expected the number of carers eligible for support to grow to around 600. In 2020/21, however we have also seen carers continue to provide care for longer as care home placements have been reduced. This places additional pressure on carer resources, and we expect this to increase expected eligible carer numbers by around 60 carers to 660.

It has been noted that during 2020/21, carers have spent less of their calculated budgets as day care services have been closed and some have been reluctant to have care support provided in their homes as the supported people have been shielding.

Care management staff have been progressing reviews of carers who were assessed prior to the implementation of the new Adult Care Support Plan. It had initially been intended that

these reviews would be completed by March 2021. The support arrangements for those carers have not changed but due to the increase in new carer referrals and the impact of the pandemic, the reviews have not been completed. Adding additional support to care management through the Act's allocated resources will mean that these reviews will be completed by December 2021.

Third sector support for carers

Third sector organisations providing support for carers have seen increases in their grant awards. Angus Carers in particular has seen a 20% increase in its funding to ensure that they can support the development of Adult Carer Support Plans and Young Carers Plans for those carers who do not meet the eligibility criteria for higher level interventions.

Carers support is provided through a variety of other third sector support mechanisms, some of which have been in place since before the Act. These include:

Third Sector Support					
		2017-18	2018-19	2019-20	2020-21
Angus Carers Centre		462,000	520,000	560,000	559,000
Alzheimer's Scotland		57,000	58,000	59,000	60,000
Dundee Carers		53,000	54,000	55,000	56,000
Support in Mind		32,000	32,000	32,000	32,000
Dementia Support		-	-	-	50,000
		604,000	664,000	706,000	757,000

Waiving of Charges

Provision was made for the waiving of carers charges under regulations associated with the Social Care (Self-Directed Support) (Scotland) Act 2013. Since the implementation of that Act, carers, unlike supported people, have not been subject to a financial assessment following a carers assessment or development of a Carer Support Plan, This means that they do not make any financial contribution to any services or support put in place using their calculated budget. Contributions will however be made by the supported person to services such as day care and residential respite which will very often have been put in place to support the carer. Carers can use their calculated budget to fund the cost of a supported persons contribution towards day care costs where the day care benefits the carer. This ensures that day care services aimed at supporting a carer are also free of charge. Around 40% of day care for older people also benefits carers and most day services for people with learning and/or physical disabilities also benefit carers.

It should also have been possible for carers to use their calculated budget to fund the supported person's contribution to residential respite where the respite was for the benefit of the carer. Unfortunately, this has proven to be very challenging to deliver due to the variation in respite charges based on the supported person's financial and needs assessment. Of all the residential respite provided in Angus in 2019/20, approximately 25% was related to support for carers. This included 88 people receiving rolling respite (4 weeks per year) and a further 80 people receiving a week of respite in each quarter of the year. This respite continues to be charged against the supported person's income and we need to find a way to waive the charges as required by legislation.

It has not been possible in the current system to ensure that an equitable allocation of available resources is made available to carers based on their needs and outcomes whilst at the same time ensuring sufficient resource is available in a carers budget to offset any potential charges for residential respite. As all available carers' resources are included in the current budget calculations, a different approach is required.

The proposed approach separates residential respite arrangements from other community-based supports and continues to target that support at those carers most in need using the eligibility criteria previously approved by the IJB. It allows access to up to four weeks free respite for eligible carers whilst continuing to support an approach to funding for community-based services. This approach is set out in the draft policy on waiving of fees for carers attached as **Appendix 1**. The impact of up to four weeks free respite this would see a loss of income from charging of around £120k with an overall carer residential respite cost of approximately £500k. The aim is to ensure that carers support is targeted at those most in

need and ensure that resources are distributed fairly and equitably. There will be a consequential change to how carers' budgets for community-based services are calculated by a reduction in the point price allocated against the Adult Carer Support Plan. It is planned to make the changes to the arrangements as quickly as possible with individual arrangements for carers changing at review. The draft waiving of charges policy has been discussed with the Carers Strategic Group who are in support of the developments. It has also been shared with carers to seek their views, specifically those carers currently in receipt of a calculated budget who may be affected by the change in the point price at their review.

4. PROPOSALS

It is proposed that:

- i. Residential respite is agreed for those carers most in need as part of the assessment of the supported person and the development of the carer support plan. There will be eligibility criteria applied to the provision of residential respite and up to four weeks per year can be offered free of any charges to the supported person or carer where the respite is provided as part of the support for the carer.
- ii. Should a carer be eligible for residential respite but wish to choose a different SDS option then an amount equivalent to the national care home contract rate for residential care will be available for carers to take as a direct payment⁹ option 1) for up to an equivalent period. Currently this is £635.79 per week.
- iii. To ensure that residential respite can be provided free of charge for the benefit of carers within the available resources to support carers, the point price within the resource allocation system that develops the calculated budget will change to £3.05 with a maximum budget of £91.70 per week; this is broadly equivalent to the cost of 5 hours of care at home support or the funding required to meet the supported person's contribution for day care for 5 sessions.
- iv. The change to the arrangements for residential respite (where the carer is eligible) and the price point at the next review of the adult carer support plan.
- v. Additional resources to support care management to deal with increased care referrals and increased care reviews are made available.
- vi. The waiving of charges policy requires to be approved by Angus Council and that the change to the point price is agreed by Angus IJB.

5. FINANCIAL IMPLICATIONS

The Scottish Government has made £70m additional resources available to support the delivery of the Act in Scotland. The share of the funding allocated to Angus is:

Year	2018-19	2019-20	2020-21	2021-22 tbc
Annual Funding	200,000	697,000	972,000	1,648,000

The provisional spending plan for this recurring resource is detailed below and includes budget to:

- enhance our commitment to support the third sector,
- address care management issues,
- fund the waiving of charges
- help offset the increased costs of demand for carer support since the Act was introduced.

Spend Commitments -	2018-19	2019-20	2020-21	2021-22
Support Carers Centre		120,000	135,000	160,000
Management support				15,000
Planning Officer Support	17,700	39,000	40,000	25,000
Third Sector Support -				
- Support for carers of people with mental health issues		16,000	16,000	16,000
- Support for carers of people with dementia			50,000	110,000
- Independent Support for Carers using Option 1				10,000
GP support for for Caers	7,800	7,800		
Contribution to technology post			15,000	15,000
Care management				100,000
Waiving of Charges				120,000
Notional Increase in SDS packages	100,000	300,000	550,000	1,620,000
Total Spend	125,500	482,800	806,000	2,191,000
Shortfall between commitments and funding				543,000

There have also been a number of temporary commitments using these monies which have now either been made permanent or stopped as per the table above. The shortfall in resources can be met through the reduction in demand for residential care as carers continue to support people for longer at home. In addition, some growth can be met from provisions made for overall demographic growth. Alternatively, some of the planned commitments may require to be revisited in partnership with Carers Strategic Group.

6. OTHER IMPLICATIONS

EqIA required Y (See Appendix 3)

7. DIRECTIONS

The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in Section 26 to 28 of the Public Bodies (Joint Working) (Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Angus Council and NHS Tayside.

Direction Required to Angus Council, NHS Tayside or Both	Direction to:	
	No Direction Required	
see Appendix 4	Angus Council	X
	NHS Tayside	
	Angus Council and NHS Tayside	

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List of Appendices:

- Appendix 1 Angus Council Draft Contribution Policy Guidance Note – Unpaid Carers
- Appendix 2 Supported Person and Care Contributions.
- Appendix 3 Equality Impact Assessment
- Appendix 4 Direction



**ANGUS COUNCIL
DRAFT CONTRIBUTION POLICY GUIDANCE NOTE – UNPAID CARERS**

WAIVING OF CHARGES FOR CARERS

Legislation requires that any charges for support which is agreed to meet the assessed, eligible needs and outcomes of unpaid carers in Scotland are waived. Angus Health and Social Care Partnership (AHSCP) ensures that carers never make a financial contribution to services which support them in their caring role, by never doing a financial assessment for a carer (unless they use services in their own right and support does not relate to their caring role). The Contribution Policy means that supported people may be asked to make a contribution towards their support package, based on a financial assessment. The purpose of this guidance is to support consistent decision-making on whether a supported person who has an unpaid carer should - or should not - contribute to their support and care costs.

There is a complex relationship between the waiving of charges and self-directed support (SDS). Eligible carers may also have an SDS budget linked to their support plan. Support plans are often developed jointly for a supported person and their carer(s) and one of the purposes of the carer's budget is to waive contributions where support, which is chargeable to the supported person, also benefits the carer.

The *purpose* of the support, and who is *benefitting* from that support, are the determining factors in whether the person being cared for will contribute to the cost of the support, or charges should be waived. This decision-making process is outlined in the flowchart in Appendix 2.

Legal Duties/ Powers

- The [Carers \(Waiving of Charges for Support\) \(Scotland\) Amendment Regulations 2018](#) came into effect on 1 April 2018 as a result of the introduction of the [Carers \(Scotland\) Act 2016](#) (the Carers Act) on the same day. Regulation 2 of the amendment regulations required that Angus HSCP waive charges for services provided to carers under section 24 of the Carers Act.
- Section 24 of the Carers Act applies where Angus HSCP agrees that a carer has identified personal needs and outcomes which cannot be met by services or assistance provided to the “cared-for person”; or by services that are already generally provided.
- Chapter 3 of the [statutory guidance](#) for the Carers Act assists local authorities in determining whether support should be viewed as for the carer (non-chargeable) or the person they care for (chargeable). The guidance has informed this document.

Support planning, eligibility and self-directed support

Angus HSCP provides support in various forms to unpaid carers, either directly, by arranging or paying for services provided through other organisations, or in the form of direct payments.

In order to establish the nature of support a carer is eligible for, they must have their needs assessed and personal outcomes identified by completing an Adult Carer Support Plan (ACSP) or Young Carer Statement (YCS). This must be agreed with their allocated worker and the [Local Eligibility Criteria](#) applied.

Support planning aims to reduce any negative impact of the caring role and enable the carer to provide or continue to provide care if they wish to. The carer and the practitioner consider how any identified needs and outcomes might be met either wholly or partially, starting with informal supports, services that are generally available, and changes to the assistance provided to the person who they care for. If the remaining needs meet the eligibility thresholds in any of the suite of indicators, the local authority has a duty to provide support. In addition, there is a duty when support planning to consider whether support to a carer should include a break from caring. This may involve arranging "replacement care" for the cared-for person.

If the carer is eligible for support, the plan may identify a carer's budget which can be used:

- to meet the contributions of the supported person where the support also benefits the carer
- to fund replacement care for a supported person enabling the carer to have a break from caring
- to purchase additional services and support through one of the four self-directed support options.

The purpose of the budget is to provide meaningful choice to the carer in deciding how best to meet their own needs and outcomes.

The statutory guidance allows for carers with an earlier form of assessment to undertake an ACSP or YCS either at their request or when their assessment is reviewed. In either case this must take place by **31 March 2021**.

Replacement Care

Replacement care is a shorthand term to describe care provided to the supported person, which replaces care normally given by the carer, and which is provided specifically to give the carer a temporary break from caring. It doesn't have to exactly replicate the support or care they provide and could be provided by family, friends or existing community supports. It may mean the person they care for attending a specialist care or support establishment during the day or overnight. Where care does not materially benefit the carer or is provided when a carer is not able or willing to provide care then this is provided for the benefit of the supported person and will be subject to the contributions policy.

Care provided for a supported person would be support to the carer under section 24 of the Carers Act (and therefore subject to the requirement to waive charges) where it is provided to enable the carer to have a break and all the following apply:

- a) *care is being provided to the supported person*
- b) *it is replacing care previously given by the carer*

- c) *its primary purpose is to give the carer a break from caring and this is agreed in the ACSP/ YCS as a necessary form of support to meet their identified needs*
- d) *it is replacing care which the carer is able and willing to provide i.e. not where the carer is not well enough to continue providing the same level of support or has other commitments; and*
- e) *for young carers, it is not replacing care which would be inappropriate for them to provide*

Respite Care

Respite is a form of replacement care defined as “a short period of rest or relief” and may also be referred to as a “short break”. Its purpose is to help to sustain the caring relationship and support the health and wellbeing of the carer, the supported person, and other family members who are affected.

It can be provided in a person's own home or in another setting and can be in the form of one-off or regular stays. As with other replacement care, respite is only considered to be enabling the carer to have a break if it is replacing care that the carer is otherwise able to provide. In this case the carers budget can be used to waive any contribution of the supported person.

Following an assessment of the supported person and the development of the adult carer support plan, **residential respite**, free of charge to the supported person and the carer can be arranged by Care Managers. Residential respite will be available for up to 4 weeks per year for carers who meet the eligibility criteria. For eligible carers who wish to make their own replacement care arrangements an amount equivalent to the national care home contract rate for residential care will be added to the carers budget (as at January 2021 this is £635.79).

Support which is of Joint Benefit

A practitioner may assess care or support to be of equal benefit to the supported person and their carer e.g. where they take a holiday or a short break from home/ usual routines together. In this case it may be necessary to implement a partial contribution, where costs associated with the carer are waived but those for the supported person are chargeable.

Examples – all scenarios assume that the carer meets the threshold of the Local Eligibility Criteria

Scenario	Is the care provided under section 24?	Does the Contribution Policy apply?
<i>The carer is ill, in hospital, or</i>	<i>No - the carer is not</i>	<i>Yes – the Contribution Policy applies to</i>

recovering at home and alternative care is required for the person they care for	taking a break they are unavailable	the supported person
The carer wants to work and will stop/ reduce the care they provide to do so	No - employment is not defined as a break from caring	Yes – the Contribution Policy applies to the supported person
The carer is no longer willing or able to provide the same level or type of care even with support (e.g. for health reasons or due to a change in personal circumstances)	No - the carer is not taking a break they are no longer available as a means of support.	Yes – the Contribution Policy applies to the supported person
The supported person has a carer and attends day services/a Resource Centre to meet their own assessed needs.	No – the primary purpose of support is to meet the supported person's needs	Yes – the Contribution Policy applies to the supported person
The supported person attends day services once a week. The assessment process identified it as of joint benefit to him and his unpaid carer as it meets both their outcomes.	Partly – the support is of joint benefit.	In part – the supported person is assessed for a contribution to 50% of the cost of day services and the carer's budget is used to pay the other 50%. The carer may use the rest of their budget to cover the supported person's contribution, or to meet their identified outcomes, by attending a fortnightly massage session.
To meet the carer's need for a short break, identified in the ACSP or YCS, support or care is provided to the supported person for four hours a fortnight.	Yes	No – this is carer support so the Contribution Policy does not apply to the supported person. The carers budget is used to cover the cost of replacement care provided.
The supported person cannot leave home without support. They and their carer are both struggling emotionally due to their confinement/ isolation. They are both assessed as requiring 3 hrs support occasionally to give them both a break from their routine.	Partly – the support is of joint benefit.	In part – the waiving of charges rules would only apply to the carer support. The supported person is assessed for a contribution to 50% of the cost of the service. The carers budget is used to cover the carer's 50% contribution. If it's sufficient, the carer can also use their budget to offset the supported person's contribution, or meet their own outcomes, in which case the supported person will be charged for the required support.

Additional [waiving of charges examples](#) have been produced by the Carers Policy Unit of the Scottish Government.

Other Supports and Services

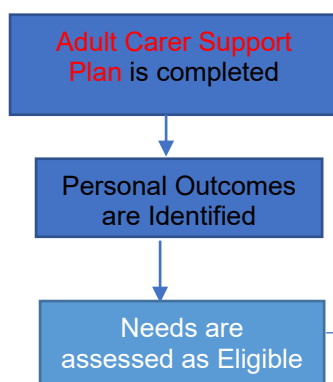
For clarification, the following services are not included in the Contribution Policy and are subject to a flat rate charge even if there are additional benefits for carers, as charges are made to cover the costs of equipment, food etc. rather than services:

- Community Alarm
- Telecare
- Community Meals

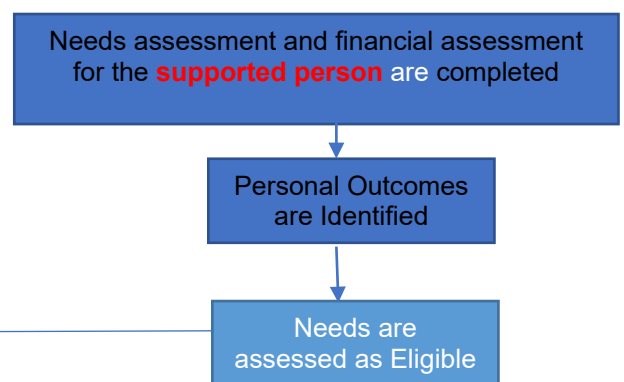
Domestic cleaning is not usually provided through the AHSCP and is not included in the Contribution Policy.

More information about support for carers can be found on the [Angus Health & Social Care Partnership's website.](#)

Supported person and care contributions.

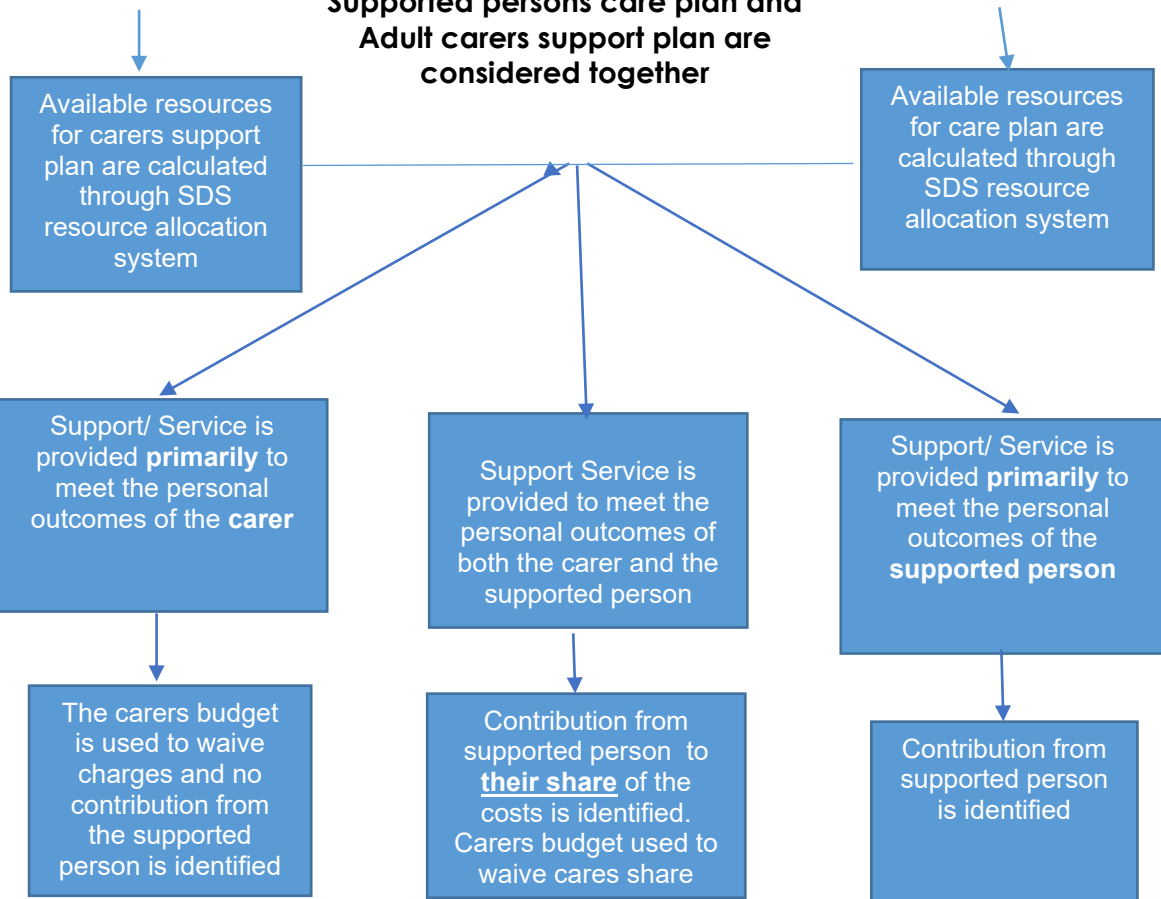


Appendix 2 Report IJB 89/21



Horizontal line connecting the 'Needs are assessed as Eligible' boxes from both flowcharts.

**Supported persons care plan and
Adult carers support plan are
considered together**





EQUALITY IMPACT ASSESSMENT BACKGROUND

Date of Assessment: (25/01/2021)	IJB Report Number:
Title of document being assessed:	Waiving Charges for Carers Policy
<ul style="list-style-type: none"> This is a new policy, procedure, strategy or practice being assessed. (If Yes please check box) X<input type="checkbox"/> <p>This is a new budget savings proposal (If Yes please check box) <input type="checkbox"/></p>	<ul style="list-style-type: none"> This is an existing policy, procedure, strategy or practice being assessed? (If Yes please check box) <input type="checkbox"/> <p>This is an existing budget savings proposal being reviewed? (If Yes please check box) <input type="checkbox"/></p>
<ul style="list-style-type: none"> Please give details of the Lead Officer and the group responsible for considering the Equality Impact Assessment (EQIA) 	<p>Vivienne Davidson Principal Officer Carers Strategy Group</p>
<ul style="list-style-type: none"> Please give a brief description of the policy, procedure, strategy or practice being assessed, including its aims and objectives, actions and processes. 	<p>To ensure that where eligible carers benefit from support there are no consequential charges for that support</p>
<ul style="list-style-type: none"> What are the intended outcomes of this policy, procedure, strategy or practice and who are the intended beneficiaries? 	<p>To ensure that carers who are most in need are able to access appropriate support free of any charging. That resources available for carers are distributed in a fair and equitable manner that is transparent.</p>
<ul style="list-style-type: none"> Has any local consultation, improvement or research with protected characteristic communities informed the policy, procedure, strategy or practice being EQIA assessed here? <p>If Yes, please give details.</p>	<p>Improvement work continues with carers who were involved in the development of the Carers Strategy which was subject to an earlier EQIA. Engagement continues with the Carers Strategic Group and with carers through Carers Centre newsletter. Additional engagement on this policy specifically has been targeted at those carers already in receipt of a calculated budget following the development of an adult carer support plan.</p>

EQUALITY IMPACT ASSESSMENT (EQIA) - RELEVANCE SCREENING

1. Has the proposal already been assessed via an EQIA process for its impact on ALL of the protected characteristics of: age; disability; gender; gender re-assignment; pregnancy/maternity; marriage and civil partnership; race; religion and belief; and sexual orientation?

YES

Unless there have been significant changes, no further action is required. Please add your name, position and date below at 2.
Please note that it is a legal requirement that any EQIA is made publicly available.

NO

Please answer the 1a and 1b questions below.

1 a. Does the proposal have a potential to impact in ANY way on the public and/or service users holding any of the protected characteristics of age; disability; gender; gender re-assignment; pregnancy/maternity; marriage and civil partnership; race; religion and belief; and sexual orientation? This applies to service users of not only NHS Tayside and Angus Council, but also the 3rd sector.

Yes - Proceed to the Full Equality Impact Assessment (EQIA).

No - please state why not (specify which evidence was considered and what it says)?

Yes, Carers are protected by association due to their role in caring for people who have protected characteristics e.g. due to age and or disability. Our data also tells us that most carers are women and are older.

1 b. Does the proposal have a potential to impact in ANY way on employees holding any of the protected characteristics of age; disability; gender; gender re-assignment; pregnancy/maternity; marriage and civil partnership; race; religion and belief; and sexual orientation? This applies to employees of not only NHS Tayside and Angus Council, but also the 3rd sector.

Yes - Proceed to the Full Equality Impact Assessment (EQIA).

No - please state why not (specify which evidence was considered and what it says)?

Where carers are employees and are protected by association

2. Name: Vivienne Davidson

Position: Principal Officer

Date: 25.01.2021



FULL EQUALITY IMPACT ASSESSMENT (EQIA)

Step 1.

Is there any reason to believe the proposal could affect people differently due to their protected characteristic? Using evidence (e.g. statistics, literature, consultation results, etc.), justify whether yes or no. If yes, specify whether impact is likely to be positive or negative and what actions will be taken to mitigate against the undesired impact of a negative discrimination. **When considering impact, please consider impact on: health related behaviour; social environment; physical environment; and access to & quality of services of NHST, Angus Council or 3rd sector social justice.**

1a. The public and/or service users holding the Protected Characteristics:

	POSITIVE IMPACT	NEGATIVE IMPACT	Intended mitigating actions against the b) Negative Discrimination
	a)Positive Action	b)Negative discrimination	
AGE	x		
GENDER	x		
DISABILITY	x		
ETHNICITY/ RACE			
SEXUAL ORIENTATION			
RELIGION/ BELIEF			
GENDER REASSINGMENT			
PREGNANCY/ MATERNITY			
OTHER: CARERS OF OLDER AND/OR DISABLED PEOPLE (Although carers are not considered as a PC in itself, they are protected by the Equality Act 2010 from “discrimination by association” with the PCs of age and disability)	x		

1b. The employees holding the Protected Characteristics:

	POSITIVE IMPACT	NEGATIVE IMPACT	Intended mitigating actions against the b) Negative Discrimination
	a)Positive Action	b)Negative discrimination	
AGE	x		
GENDER	x		
DISABILITY	x		
ETHNICITY/ RACE			
SEXUAL ORIENTATION			
RELIGION/ BELIEF			
GENDER REASSINGMENT			
MARRIAGE/CIVIL PARTNERSHIP			
PREGNANCY/ MATERNITY			
OTHER: CARERS OF OLDER AND/OR DISABLED PEOPLE (Although carers are not considered as a PC in itself, they are protected by the Equality Act 2010 from “discrimination by association” with the PCs of age and disability)	x		

1c. Does the proposal promote good relations between any of the Protected Characteristics?

YES

NO

NOT SURE

Specify further (e.g. between which of the PCs, and in what way, or why not or not sure)

Yes this promotes good relations between carers and those they care for who have protected characteristics

1d. What steps will you take to collect the Equality Monitoring information needed to monitor impact of this proposal on PCs, and when will you do this?

We gather information on carers who are supported by us through the development of the adult carer support plan. This includes the core data set allowing for equality monitoring.

Publish The Equality Impact Assessment.

Where will the Equality Impact Assessment (EQIA) be published?

Along with IJB report on the Angus Council website with links provided on the Angus HSCP website.

CONTACT INFORMATION

Name of Department or Partnership:	Improvement and Development Team, Angus HSCP
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Type of Document	
Human Resource Policy	<input type="checkbox"/>
General Policy	<input type="checkbox"/>
Strategy/Service	<input type="checkbox"/>
Change Papers/Local Procedure	<input type="checkbox"/>
Guidelines and Protocols	x <input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>

Manager Responsible	Author Responsible
Name: Vivienne Davidson	Name: Vivienne Davidson
Designation: Principal Officer	Designation: Principal Officer
Base: Angus House	Base: Angus House
Telephone:	Telephone:
Email: DavidsonVA@angus.gov.uk	Email: DavidsonVA@angus.gov.uk

Signature of author of the policy:	Date: (25/01/21)
Signature of Director/Head of Service:	Date: (dd/mm/yyyy)
Name of Director/Head of Service: George Bowie	
Date of Next Policy Review: Spring 2022	

For additional information and advice please contact:
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AGENDA ITEM No
REPORT NO IJB /
DIRECTION No /

INTEGRATION JOINT BOARD

DIRECTION

ISSUED UNDER S26-28 OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

The **ANGUS COUNCIL** is hereby directed to deliver for the Angus Integration Joint Board, the services noted below in pursuance of the functions noted below and within the associated budget noted below.

Services will be provided in line with the Angus Integration Joint Board's Strategic Plan and existing operational arrangements pending future directions from the Angus Integration Joint Board.

RELATED REPORT No: (IJB REPORT No)

APPROVAL FROM IJB RECEIVED ON: 24 February 2021

DESCRIPTION OF SERVICES / FUNCTIONS:

To deliver residential respite for carers most in need as part of the assessment of the supported person and the development of the carer support plan. There will be eligibility criteria applied to the provision of residential respite and up to four weeks per year can be offered free of any charges to the supported person or carer.

Should a carer be eligible for residential respite but wish to choose a different option then an amount equivalent to the national care home contract rate for residential care will be available for carers to take as a direct payment for up to an equivalent period. Currently this is £635.79 per week.

To ensure that residential respite can be provided free of charge for the benefit of carers within the available resources to support carers, the point price within the resource allocation system that develops the calculated budget will change to £3.05 with a maximum budget of £91.70 per week, this is broadly equivalent to the cost of 5 hours of care at home support or the funding required to meet the supported persons contribution for day care for 5 sessions.

The change in the price point is to be implemented at the review of the adult carer support plan when access to free residential respite can also be established for eligible carers.

To recruit additional resources to support care management to undertake additional assessment and review activity.

To appoint a permanent planning officer (0.6FTE) to support delivery of the Carers Strategy and Improvement plan within the resources available.

To provide procurement support for the development of grant arrangements in respect of new support to be developed in conjunction with the third sector for carers supporting people with dementia.

REFERENCE TO THE INTGRATION SCHEME: *Annex 2 Part 1*

Specifically:

Social Care (Self-directed Support) (Scotland) Act 2013 section 7

Carers (Scotland) Act 2016 sections 24 and 25

LINK TO STRATEGIC PRIORITIES:

This action is related to the priority 'Improving health, wellbeing and independence' set out in the Angus HSCP Strategic Plan 2019-22. The work is to be developed under the heading "Delivering for Carers". The Angus Carers Strategy and Improvement Plan sets out detail in relation to the delivery of the Act.

TIMESCALES FOR DELIVERY

Start date: 10 March 2021

End date: 31 March 2022

Resources Allocated:

Spend Commitments -	2018-19	2019-20	2020-21	2021-22
Support Carers Centre		120,000	135,000	160,000
Management support				15,000
Planning Officer Support	17,700	39,000	40,000	25,000
Third Sector Support -				
- Support for carers of people with mental health issues		16,000	16,000	16,000
- Support for carers of people with dementia			50,000	110,000
- Independent Support for Carers using Option 1				10,000
GP support for for Caers	7,800	7,800		
Contribution to technology post			15,000	15,000
Care management				100,000
Waiving of Charges				120,000
Notional Increase in SDS packages	100,000	300,000	550,000	1,620,000
Total Spend	125,500	482,800	806,000	2,191,000
Shortfall between commitments and funding				543,000

Details of funding source:

Funding associated with the Carers (Scotland) Act 2016 and existing budgets.