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Agenda Item: 14

Integration Joint Board

Date of Meeting: 21 February 2024.

Subject: Orkney Unpaid Carers Strategy.

1. Purpose

1.1. To present the draft Orkney Unpaid Carers Strategy 2024 – 2026, for approval.

2. Recommendations

It is recommended:

2.1. That the Orkney Unpaid Carers Strategy, attached as Appendix 3 to this report, be approved for publication.

3. Background

3.1. The Carers (Scotland) Act 2016 (the Act) promises to 'promote, defend, and extend the rights' of adult and young carers across Scotland. The Act commenced on 1 April 2018.

3.2. The principle behind the Act is to enhance and extend the rights of carers, and young carers, to improve their individual outcomes, whilst adopting a more consistent approach across Scotland. The Act requires that it is considered when preparing health and social care services, as well as within the context of other social care and health legislation, such as self-directed support.

3.3. Scottish Government Guidance clarified that section 33 of the Carers (Scotland) Act 2016 requires that a local authority and the relevant Health Board produce and publish a Local Carer Strategy by the next date after 1 April 2018 when the corresponding integration authority is required to review its strategic plan, and review the Strategy regularly thereafter or at least every three years.

4. Review of progress against actions from the previous Carers Strategy

4.1. The previous iteration of the Orkney Unpaid Carers Strategy included an action plan, with each group of actions associated with one of four Statements. The Statements were a declaration of how unpaid carers in Orkney should perceive the support they receive, at the end of term of the Strategy.

4.2. The four Statements were as follows:

- **I am supported to identify as a carer and am able to access the information I need.**
- **I am supported as a carer to manage my caring role.**
- **I am respected, listened to, and involved in planning the services and support which both I and the person I care for receive.**
- **I am supported to have a life alongside caring if I choose to do so.**

4.3. The progress made against each of the stated actions should be considered within the wider impact of the COVID-19 pandemic, the subsequent lockdowns, and the demand upon both financial and staffing resources.

4.4. Statement 1: I am supported to identify as a carer and am able to access the information I need.

Action	Comments
Increase meaningful engagement with carers throughout Orkney.	A continuous campaign of publicity, through social media, the Orcadian and Radio Orkney, has delivered a much higher profile for Unpaid Carers in Orkney, as well as ensured more people are aware of the support available to carers.
Continuously improve the information provided to people in Orkney, relating to carers.	This publicity campaign culminated in the inaugural Orkney Unpaid Carers Conference, an event that was attended by well over 100 people, including more than 40 unpaid carers.
Create opportunities for more people in Orkney to identify as a carer.	In addition, colleagues at Crossroads Care Orkney (the third sector organisation commissioned by the Orkney Islands Council and NHS Orkney to deliver carer support services), as well as Age Scotland Orkney, have continued to speak to carers daily, ensuring they know how and where to get support. There has been a consistent increase in the number of people contacting Crossroads Care Orkney and identifying as a carer, for the first time. There were 36 new contacts in 2021; 54 new contacts in 2022, and 78 new contacts in 2023.

4.5. Statement 2: I am supported as a carer to manage my caring role.

Action	Comments
Ensure all identified carers have a comprehensive Adult Carer Support Plan or Young Carer Statement.	<p>All newly identified unpaid carers who approach Crossroads Care Orkney are offered an assessment of their needs; however, this is not a formal assessment for the purposes of preparing an Adult Carer Support Plan (ACSP) or Young Carer Statement (YCS).</p> <p>Staffing capacity in both adult and children's services has meant that a formal ACSP or YCS have not been offered to all carers. That is not to say their needs are not being addressed by Crossroads Care Orkney and/or statutory services. Officers are currently working to identify and implement a system to ensure all identified carers are offered an ACSP/YCS.</p>
Maximise the opportunities for relevant support that carers want.	<p>The Orkney Health and Social Care Partnership published their Short Breaks Statement in 2019.</p> <p>Opportunities for short breaks have become increasingly challenging, with increasing demand for respite/short breaks. As a consequence, planned short breaks are currently suspended, with access to short breaks only available on an emergency basis.</p> <p>Officers are currently working with third sector partners to identify more innovative use of short breaks and are investigating small scale test-of-change opportunities.</p>

4.6. Statement 3: I am listened to and involved in planning the services and support which the person I care for receives.

Action	Comments
Ensure carers are involved in planning the specific services and support the person they care for receives.	<p>Carers are now routinely consulted during and after the hospital discharge process, as well as during reviews for the cared-for person.</p> <p>A carer awareness training programme for frontline staff has been identified and will be implemented imminently.</p>
Ensure carers are listened to and consulted on the availability and design of services for them.	<p>One of the main goals of the inaugural Orkney Unpaid Carers Conference was to speak directly to carers about the availability and design of the services available to them.</p> <p>A survey was undertaken following the conference, with further surveys planned, whilst a second Conference is also at the planning stage.</p>

4.7. Statement 4: I am supported to have a life alongside caring if I choose to do so.

Action	Comments
Monitor implementation of the strategy and the affect it is having on reducing the impact of caring on the health and wellbeing of carers.	Significant progress has been made in identifying carers and making them aware of the support available to them. However, the increasing demand for respite / short breaks, and the consequent capacity to offer this service, especially in respect of planned short breaks, is limiting the opportunities to reduce the impact on the health and wellbeing of carers.

5. Preparation of the new Orkney Unpaid Carers Strategy

5.1. The Orkney Carers Strategy Group is a multi-agency body charged by the IJB with overseeing implementation of the Orkney Unpaid Carers Strategy. Members of the group were keen to involve carers in preparation of the new Strategy and, in particular, ensure the priorities of the new strategy directly address the lived experience of carers, their needs, and their aspirations.

5.2. The group felt the best way to achieve this would be to speak directly to carers, and that a conference would provide the best opportunity to do this, as well as raise the profile of unpaid carers, throughout Orkney.

5.3. The Unpaid Carers Conference, held in May 2023, was both well attended and well received, with around 140 delegates attending, from both local and national statutory and third sector organisations, including around 40 unpaid carers. The afternoon session included a round-table facilitated discussion session, where delegates split into 12 groups, each exploring the issues and challenges that are most important to unpaid carers in Orkney.

5.4. Following the conference, officers undertook a survey of unpaid carers, including those in attendance, as well as carers who were unable to attend the conference. The full results of the survey can be found at Appendix 1 to this report.

5.5. On 15 January 2024, the Strategic Planning Group asked that the draft Strategy was circulated to carers, for final comments. The responses are attached at Appendix 2 to this report.

5.6. The results of the discussions at the conference, along with the responses to the survey, were collated by officers and, from this valuable information, the priorities of the new Orkney Unpaid Carers Strategy were developed.

5.7. The most common response was that carers needed a break, in many cases, for just a few hours a week. Challenges around balancing their employment and caring roles came next, followed by concerns about money.

5.8. However, it was also clear that many carers, as well as statutory and third sector staff, were unaware of the full scope of support available to carers. Many said they know people who are clearly carers, but do not currently access any support services, whatsoever.

5.9. Consequently, whilst most of the actions specifically address how carers known to services will be helped, some, such as a second Orkney Unpaid Carers Conference, as well as training for frontline staff, address the need to educate and promote the role of carers. These actions will help people throughout Orkney understand what a carer is, along with the support available to them.

5.10. The new Strategy, attached as Appendix 3 to this report, features an Action Plan. The Plan articulates specifically what we will do, and how we will measure whether we have been successful, or not.

6. Challenges

6.1. Whilst nine Actions have been identified that will most likely deliver significant improvements to the lives of unpaid carers, here in Orkney, it must also be acknowledged that there are several challenges to be faced.

6.2. **Staff capacity – statutory services.** Frontline health and social care services have faced an extremely challenging recruitment environment for some time, with the outlook for the immediate future looking equally challenging.

6.2.1. Undertaking a formal assessment of unpaid carers, with a view to preparing an ACSP or a YCS, involves significant time and resources from social work teams. That is not to say carers do not receive any support – they do. However, undertaking a formal assessment has not always been a routine function.

6.2.2. Social Workers are aware of the obligation to offer an ACSP or YCS and will do so, in the future. However, it is likely there will be a significant waiting list, especially as more people become aware of the support available for carers.

6.3. **Staff capacity – third sector services.** Crossroads Care Orkney are commissioned to deliver carer support services. When they first encounter an unpaid carer, Crossroads Care Orkney undertake an assessment of their own, resulting in an appropriate plan of support for the carer. Often, this will mean a Crossroads Care Orkney-employed carer delivering support to the cared-for person, usually for a few hours or so, allowing the carer to take some time away from caring.

6.3.1. However, in common with statutory services, Crossroads Care Orkney face significant recruitment challenges, limiting their ability to recruit, resulting in a finite limit to the support they can deliver for carers.

6.4. **Potential solutions.** A possible solution is the anticipated recruitment of a Council-employed Carer Support Worker. This new role was approved by the IJB at a Special Meeting in May 2023 and, having finalised the job specification, officers will shortly commence recruitment for the post. A significant element of the new role will involve undertaking a formal assessment of carers, allowing the preparation of the ACSP or YCS.

6.5. It may also be appropriate to consider how the Crossroads Care Orkney assessment process might take the place of the formal statutory assessment. This is an option deployed by other health and social care partnerships across Scotland, but would inevitably involve recruitment of more staff at Crossroads Care Orkney, with an associated additional cost.

6.6. It should also be mentioned that officers will shortly recruit to another new Council-employed role: that of Carer Lead. This dedicated role will deliver much needed additional capacity to the strategic planning and oversight of carer support services in Orkney.

6.7. **Respite / Short Breaks services.** Short breaks opportunities in Orkney have typically involved the cared-for person staying at one of the residential care homes, either for a few days, or a week or so, enabling the carer to take holiday. Carers are also able to seek support from Crossroads Care Orkney, as mentioned at section 6.3 above.

6.7.1. Following a substantial increase in demand during and after the COVID-19 pandemic, planned short breaks in residential care are not currently available, with a residential short break only offered in emergency circumstances, and with a waiting list presently in operation.

6.8. **Potential solutions.** Whilst residential short breaks have been the normal recourse, both in Orkney and across the rest of the country, innovative approaches to short breaks are becoming increasingly common, often involving the deployment of a personal budget, through one of the Self-Directed Support (SDS) options.

6.8.1. With a huge scope of short breaks solutions seen in some parts of Scotland, this can involve anything from nominal payments to provide membership of a sports club for the carer, through to the appointment of a dedicated carer for the cared-for person, allowing an entire family, including the cared-for person and the appointed carer, to go on holiday.

6.8.2. Officers are currently working with third sector SDS specialists to investigate opportunities for small-scale pilot projects, where the use of personal budgets can deliver better outcomes for carers, whilst invariably delivering significant savings over traditional, residential, short breaks solutions.

7. Contribution to quality

Please indicate which of the Orkney Community Plan 2023 to 2030 values are supported in this report adding Yes or No to the relevant area(s):

Resilience: To support and promote our strong communities.	Yes.
Enterprise: To tackle crosscutting issues such as digital connectivity, transport, housing, and fuel poverty.	No.
Equality: To encourage services to provide equal opportunities for everyone.	Yes.

Fairness: To make sure socio-economic and social factors are balanced.	Yes.
Innovation: To overcome issues more effectively through partnership working.	Yes.
Leadership: To involve partners such as community councils, community groups, voluntary groups and individuals in the process.	Yes.
Sustainability: To make sure economic and environmental factors are balanced.	No.

8. Resource and financial implications

8.1. The proposed solutions to some of the challenges faced by the partnership, in delivering the new Strategy, may carry a cost implication. That said, some proposed solutions are anticipated to deliver savings. Any proposals will be fully costed.

8.2. It should also be noted that demand for assessment support planning and the provision of social care services is likely to increase significantly as more people are identified as carers.

9. Risk and equality implications

9.1. An Equality Impact Assessment and an Island Communities Impact Assessment have been prepared and are attached at Appendices 4 and 5, respectively.

10. Direction required

Please indicate if this report requires a direction to be passed to:

NHS Orkney.	No.
Orkney Islands Council.	No.

11. Escalation required

Please indicate if this report requires escalated to:

NHS Orkney.	No.
Orkney Islands Council.	No.

12. Authors and contact information

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13. Supporting documents

13.1. Appendix 1: Orkney Unpaid Carer Survey 2023.

13.2. Appendix 2: Draft Strategy Circulation Responses.

13.3. Appendix 3: Orkney Unpaid Carers Strategy.

13.4. Appendix 4: Equality Impact Assessment.

13.5. Appendix 5: Island Communities Impact Assessment.

Unpaid Carer Survey 2023

Introduction

Orkney Health and Social Care Partnership, supported by our partners from the Carers' Strategy Group, held the inaugural Orkney Unpaid Carers' Conference, in May of 2023.

The main session of the afternoon was given over to speaking to carers, where we learned exactly what they felt were the most important ways that services could improve their lives.

We also published a survey shortly after the conference. We wanted to get feedback on how the conference went, of course, but we also wanted to hear from carers who were unable to make the conference.

The findings from the both the afternoon conference session, along with the survey, are summarised in the Orkney Unpaid Carers' Strategy 2023 – 2026.

This report provides the detailed raw responses to the survey.

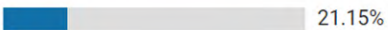

Format

The survey was made available online, via Smart Survey. In addition, our colleagues at Crossroads Care Orkney and Age Scotland helped their clients to complete the survey, either online or by completing a paper version.

Survey Questions and Responses

There were 55 completed responses to the survey.

Question 1: Did you attend the recent Carers Conference? (If not, lease skip to question 4.)

Answer Choices	Responses
Yes	 21.15% 11
No	 78.85% 41
Answered: 52 Skipped: 3	Response Total: 52

Question 2: What did you find useful from the day? (Please select all those you found useful.)

Answer Choices	Responses	Percentage	Count
Jim Love, the 'unpaid carer' representative on Orkney's Integration Joint Board (IJB), who spoke about the role of the IJB in health and social care in Orkney, as well as the challenges experienced by carers.		40.00%	4
Stephen Brown, Chief Officer for Orkney Health and Care, who spoke about the vital role of carers, and challenges of an ageing population.		30.00%	3
Arlene Montgomery from Crossroads, who spoke about the support they offer carers in Orkney and showed a film about young carers.		70.00%	7
Beth Friel from The Carers Trust, who spoke about work and research the Trust does to better inform policy and support.		60.00%	6
Dr. Eduard Vasile from Scottish Government Social Security Directorate, who spoke about planned reforms in government support for carers.		80.00%	8
Jaynie Mitchell from Coalition of Carers in Scotland, who talked about her own experience as a carer for her son, and how the innovative use of short breaks has helped her and her family to keep everything together.		100.00%	10
The facilitated discussions, in the afternoon, that covered the themes of short breaks / respite, mental health and wellbeing, and finance.		70.00%	7
The 15 local support groups who had stalls offering more information about their services.		40.00%	4
Answered: 10 Skipped: 45	Response Total:		10

Question 3: What could we do better for any future conference?

I felt that the support group stalls were tucked away and not very well sign posted. In fact, I wouldn't have known about them if someone hadn't said it to me! Perhaps they could be positioned so that folk can go to the conference through them next time, perhaps on route to registration. So at least people are aware of who's there and can go back later.

I also felt it was a bit rushed. The lady hosting was very good at time keeping, but I felt as though the speakers had more to say and missed slides to fit in. There was no time really to mingle with people other than lunch or to browse the stalls in the 15 minute break.

Somebody to speak about guardianship.

Extend the day. The after-lunch sessions could have been longer

Please have another conference. Please don't feel you have to get it right. What most people want is just to feel heard and less alone. The very act of having the conference in the first place makes a huge huge difference and benefit. Thank you for doing this. Please do it again

Have more time for discussion, I think we all could have chatted for the entire day

More help for students and middle aged carees

Provide more encouragement for attendees to visit the 'stall' area. With everyone having lunch in a seperate area woth seating, there was almost no-one visiting the charities.

Some of the language used could have been more focussed on ALL carers, rather than carers supporting specific groups.

Better arrange the charities area ahead of time. Turning up and finding there was no space and no tables despite having been booked in for the event within 5 mins of the initial advert was a bit frustrating.

Advertise it well in advance and in more places. Our friends who are also carer's and they knew nothing about the event. The support services that they use never mentioned anything about the event either. I found out about the event 2 days before, by accident after looking for something totally different on Eventbrite. The 15 local support groups seemed to be hidden away in the back room, why couldn't the people representing the groups come down to the front of the cinema and introduce to the audience. An opportunity for carer's, who are NOT connected to OIC, or Counsellors, to give their experiences of being a carer in Orkney.

Second question is irrelevant as I did not attend due to carers responsibilities.

To be able to attend, having someone come in to support the person we care for: or have it on a zoom platform.

Offer an evening time

Advertise it better and also bear in mind that the cost of getting a bus to and back from such a conference is a big chunk of carer's allowance when you balance food and electricity against it all. Would have loved to attend but couldn't afford it

Q2 does not apply. Was caring so could not attend.

A venue that is well lit , on the level and ideally wheelchair accessible. Speakers who realised some of the audience might struggle to hear them and spoke clearly and slowly with suitable volume
Make sure all stalls are manned at lunch and coffee breaks.c

More time, maybe a 2 day event.

Make it more widely known about for people who aren't registered carers

Question 4: What would make most difference to you as an unpaid carer?

<p>That carer respite care was fluid to fit the needs of each carer. It's a not a case of "one solution fits all". People will all have different ideas of what "respite" means for them. It's not always time away from their loved one.</p>
<p>Availability of Here to Help folk in rural areas - we live in Deerness and mum's been on the waiting list for months for someone to help with cleaning. She's 97 and has dementia and macular degeneration.</p>
<p>Better communication and the services that are out there.</p>
<p>Someone on the end of the phone 24/7</p>
<p>Support from the necessary social care and mental health departments. We all know that not getting diagnosed means the appropriate services don't kick in nor do the timelines that the OIC/NHS will be judged against. Service needs a complete overhaul, adequate is not good enough for patients nor their carers. Turning a blind eye doesn't help anyone!</p>
<p>Housing. We do not have an accessible home. We desperately need the basic infrastructure (a wet room and downstairs bedroom) to properly care for our disabled daughters.</p>
<p>Housing, we need better housing. I want to take care of my family but to do that I need housing that meets their needs.</p>
<p>Financial support as a student I don't receive anything and find it difficult to work around my caring responsibilities and degree course</p>
<p>I would like to be supported to support the person I care for and not separated from them. I would like proper housing that is accessable, I know that's especially difficult right now but accessable housing would make a big difference specifically for large families. I would also like more accessable facilities, such as activities, parks, and other general public areas. Parks specifically would be great if the children's play stuff was accessable accessable swings, ect would be great for all children and make all the difference for kids who require them.</p>
<p>Knowing what help is available and how to access it.</p>
<p>Having someone to talk to</p>
<p>Access to 1to 1 support when needed with someone who can help access practical support available, offer psychological, listen.</p>
<p>Recognition that caring is more than helping someone with washing, dassing, cleaning and cooking.</p>
<p>Recognition that many carers are still having to work as well as care.</p>
<p>Support for carers who lose their purpose when person they care for dies.</p>

Carers who work cannot attend conferences in work hours and struggle to find time for themselves between work and caring.

adequate support on the isles - this is becoming a serious issue

Having the opportunity to have a couple of hours to myself every week

If things started getting put into action. Again, yet another survey or questionnaire. It's about time procrastination was stopped and action was taken.

Well communicated information about available help from well integrated services that are all working towards the same goal. Preferably with suitable funding.

nothing

Help for respite, when I need to go on holiday with my partner or to go and see relatives or travel for work, it would be helpful to know that I could have options for help with my Mum while I was away.

Being given the money you found me entitled to so that I can go on holiday. I am entitled to 6 weeks a year, but the one time I put in for just £300 I was turned down.

Not scrimping from week to week and watching every penny. Life can be tough enough without having money to treat myself to a haircut or a coffee .

Someone to come in on a regular basis so we can have some relief caring duties.

Payment to help with not being able to work as easily or as much as needed to pay bills.

Knowing there is support when we need it and not having to wait or plead for it.

Getting some extra help so I can have some time to myself. I care 24/7 and don't get much in the way of respite

Agencies giving us the help we need rather than what they think we need. Practical help is far more important than say offering me a massage or a coffee morning. What would really help me is regular help with cleaning and food prep/making to give me time to rest, have some time to actually do something for me or even having some spare time to spend some quality time with my wife rather than it all being caring duties.

Help with housework and somebody to take my mother out or someone to play Rummicub with her

Help at bedtimes so that my husband and I can have an evening together without one of us going to get my father in law to bed..

A better improved LD service with LD social workers, we have gone from a fantastic service to very little support, adult social workers are not trained to deal with the complexities of people with LD, whose voices are not being heard in this community

Some help. Any help. I'm completely alone in what I do and I'm constantly struggling with money. My wife sleeps on a couch and I sleep on the floor as I can't afford to buy new furniture. By the time rent, electricity and food is paid for along with travel cost to go to town... I haven't got money for new clothes, furniture or even bed sheets.

Possible discounts in local shops, and if there was the chance of a bonus of money around Christmas time that would be nice

Help

A day off now and again

Contact , communication and help being provided sooner

Financial support to ensure my own bills are met on time without having to work ridiculous hours. The ability to take time for myself a couple of times a year. To be treated in the same way as someone who works 24/7 in the care industry by the government. To be able to have support in place so that if I am unwell I can take time to recover my own health. A home closer to my own for my disabled mother so I can care for her easily when my daughter needs me at home as well.

More chance to socialise. But as I live on an Isle I can't do evenings.

Having help looking after Mum while I work

Support and help with fuel to transport person.

To be listened to. Not to have to justify every little thing. If I say I want it, I need it.

Still early days as a carer, so still learning what is available. At the moment my priority is finding what help is available and respite care.

Support and a more streamlined system

Access to flexible support to go to one off events - concerts, cinema
Access to a wheelchair accessible vehicle we could book out

Time away each week ensuring my family member is safely cared for.

The support from crossroads is a huge help. Information on day centres and how to access them. And who is allowed to go would be good.

Supported things for them to go to

Recognition

Time away

I am time poor. as I am now responsible for everything. I would like help with heating bills - this is causing fuel poverty. It has a knock-on effect with food. What I can buy, how I cook the food and nutrition.

I would like practical help around the house with odd jobs. However, there is a cost concern and time concern, time to find the right person to do the job and how soon it can be completed.

Services need to be more proactive: Tasks not passed onto third parties, but back to the client to be resolved with the third party themselves.

No ownership of tasks.

More efficient admin needed.

Knowing who can help...where to start.

It's difficult accepting you need help.

More support is needed: previously it has been on / off. 2 phonecalls a week, then nothing for 6 months, etc.. (Social Work)

There is a lack of information - or a lack of accessible information. People are always helpful...but sometimes I don't know what I need, rather I'd like to browse and let it spark my curiosity. Not everyone can do "online", or want to learn, Age Scotland have been super at getting me what I need. It's no so easy popping down the street when you're not on good legs (no accessible parking). Using places like The Balfour or the library or chemists to hold some basics would be good...and reach more people.

Things could be more simple. I feel I phone person, to be told I need to go to another...sometimes I end up where I started.

A streamlined approach would make things better, where people can find out what they need in one place. Or someone to ring and find out and call me back.

Better respite services for all ages. I know it is tough to leave a loved one, but we all need a break (them too). I feel that sometimes it is very rushed...which means that we're not prepared and my person is stressed. Not the desired outcome.

We could do with more varied choices for dementia respite. I understand that care centres have all all training to meet the needs...but my person doesn't do well in busy environments and our experiences so far have been fraught.

Co-ordinated help for homes with multiple folk needing care and very different needs. It would be great to have more age-appropriate activities for those with young-onset dementia.

Have an overnight carer in for a couple of nights, perhaps once a month?

It would be better if you could move the Wednesday meeting to 2.00 - 3.30.

Question 5: Is there anything else that you'd like to tell us?

The speakers were excellent and the lunch was great!

I do wonder if making the conference a bi-annual occurrence, or over 2 days would keep people connected and supported without being rushed.

It seems to be assumed that because we live next door to mum we can provide for all her needs. But this simply isn't possible. For various reasons she won't go to any of the activities available, but she'd benefit from meeting other people and I just don't know how to achieve that.

Caring for someone is stressful enough without having to chase after services. The lack of communication between services is unacceptable, dreadful to be honest. Again, unpaid Carer's are at the bottom of senior management - no understanding of the important job they do. Paying lip service to a Carer's strategy. Paid Carer's generally great- but underpaid. Shameful that they are paid less than supermarket staff - with all the responsibilities they have. Career paths need to be developed to encourage young people into the care service.

Thank you for doing this!

Thank you for holding the conference, it was better than I expected. Separate note why was Jim Love appointed as the only carer rep? He represents a very small portion of acting experience which is still valuable but I have never met a carer who had his experiences. Maybe should he consult other carers so he can better represent them and learn about other experiences?

I felt the conference was a bit biased to dementia and the elderly

Recognition for being an unpaid carer: Could unpaid carers access Picky membership a same reduced cost as those on benefits for example, could their be a drop in for unpaid carers to chat and have a cuppa with other carers/support person?

Yes. We took time out of our day and our caring responsibilities to attend the conference, so please start taking action.

Stop employing staff on short term contracts, you will end up with a more motivated, skilled and knowledgeable workforce.

As an unpaid carer, I do not always need to care for my Mum but when I need to it is overwhelming, having to juggle home life work life and try to do the best for my mum, who still wants to be as independent as possible, is incredibly difficult. More casual ad hoc support would be brilliant.

I had intended to be there, but illness prevented me. If I had been there, I would not just have walked out when the pillock from the Council said we had a choice of whether to be an unpaid carer or not, I would have told him that he obviously knew nothing of real life caring. When he said he had chosen to care for him mother at home, I strongly suspect that what he meant was that he deigned to stay while his wife did the actual caring. Anyone who had actually done any unpaid caring would never have mase such a patronising, crass statement. I also thought the fact that the conference was held in a place without disabled access was depressingly thoughtless. It is about time the Council and their employees got real about caring and disability.

Dwp contacting you before suspending ESA income related over a mixup . Through no fault of our own . Why not speak to a person who clearly is on the breadline anyway before cutting off any money

We are leaving work (or reducing our hours) as we are unable to both care and work. So, having a weekly payment to replace lost salary would be good! And that is more than the current Carers Payment as it is derisory.

Thanks for all you do

Love the idea of short breaks but it needs to be accessible to all carers not just a specific demographic. Also I want to go on holiday with my Wife, it's not a break from her I need but a break from caring/every day tasks. Also all services seem to concentrate on our young carers or those that care for children and the elderly. Carers like me who care for my Adult Wife seem to be excluded and forgotten, we feel like we are being missed/don't exist. As an example during covid everyone forgot about us and I doubt this would of happened if my wife had been a child or an elderly person. It always feels like when carers are mentioned it's about looking after children, the elderly or young carers and this makes me feel really excluded and forgotten.

Some kind of information leaflet or hub, detailing the services available and who to contact.

Not really. I'm just permanently tired and broke but I doubt I'm alone in that as an unpaid carer.

The government unpaid carers allowance is under the value of what we actually do. It would be lovely if local authority recognised this and helped in other ways like discounts and bonuses.

Glad you are trying to address the issue. Poor pay is likely the key issue of why we have so few carers.

All carers are excellent despite obvious rotoring difficulties.

I don't know anyway to register that I am an unpaid carer (for my wife)

Life is hard as an unpaid carer. Especially as I care for two people, one in my own household and another in a different household.

Are there any notes or handouts available from the conference?

System needs to be made easier to navigate and all departments need to be using the same system

Free support from crossroads has been a life saver

Unpaid carers in Orkney do a fantastic job and get very little credit. It's only when it's all over u realise what u been through but u would never change ur decision to do it.

I think there are an awful lot of us who haven't the time to get registered as a carer and would benefit from easier pathways to recognition out with the working day

There is a superb - UNDERSTAFFED - MacMillan service at the hospital. I would like to see them supported more.
People say the right things but there is no direct action.

There is so little support for care provision in the outer isles. Have to pay "private"; but often not "carers" just friends.
I can't come to the Mainland easily with a person I care for because it's a long day for them.
We struggle on because we love our lifestyle / farm.

I attended the Picky conference. It was very good...but felt a bit rushed. We were here, there, back again. I never got around the tables before we were back in again for speakers. Perhaps it could be longer (all day), and people could come-and-go as they please? Lunch was great :-).

Some services are better than others (care). It wasn't made clear to us that we had a choice!

We were thankful for the Carers Conference! We only stayed for the morning, but thoroughly enjoyed the shared experiences! Knowing you're not alone. Great speakers and interesting talks!

I don't really have much to do with services, but would appreciate having input from services and being made aware of what help and support is available.

Less talking shops and more action, and practical help for carers and patients.

Shaun Hourston-Wells

Acting Strategic Planning Lead / Carer Strategy Group – Chair

Orkney Health and Social Care Partnership / Carer Strategy Group

Draft Strategy Circulation Responses

Introduction

Prior to submission of the Draft Orkney Unpaid Carers Strategy 2023 – 2026 to the Integration Joint Board, the partnership's Strategic Planning Group asked that the draft was circulated to carers, for any final comments.

The draft was sent to all those who attended the Unpaid Carers' Conference, as well as the clients of Crossroads Care Orkney.

This document includes those responses in full.

Thank you for sending me the draft Carers Strategy. This is an absolutely excellent document. It covers the core points of the legislation in a very readable way and acknowledges the main points brought up at the conference. I much appreciate the opportunity to comment on the document and would like to make the following points:

1. It is very important for carers to be aware that they have rights and what these are. I didn't know I had any until I read the last strategy, I was certainly never told at any point. I'd suggest the Carers Charter be attached to the strategy. I would also put forward the suggestion that a basic short leaflet be developed, letting carers know that they have rights and listing these; this to be given to all carers as soon as they identify/are identified as carers. After all, these rights are enshrined in law and carers need to be made aware of them, particularly when dealing with professional teams who have yet to receive training.
2. I very much welcome your new approach to communicating with carers. The conference was an excellent example, and it is reassuring to see you are including traditional as well as social media for future communication.
3. The strategy makes clear the significant value of the work done by informal carers. Surely it is worthwhile to give carers the breaks needed to allow this to continue. It would be a false economy to do otherwise, not to mention the human cost. Of course, you are already well aware of this, and the fault lies not with yourselves but with the inadequate funding provided by the Scottish Government to care for an increasingly ageing population.

Respite was a subject of much discussion during the course of the conference, both in our groups and during various discussions with other carers, with a specific focus on day centres and residential respite. I am unclear what your action to test more innovative ways of providing respite will mean. For example, does it involve any provision by OHAC or will it all be provided by the Third Sector? While you're considering the provision of respite in various ways I wanted to highlight some of the issues raised at the conference.

While it is helpful for people to have a break for a couple of hours to catch up with friends or have time for themselves that alone is not enough for many carers.

Some carers told me at the conference that they or relatives simply could not go on without day care. It is also hugely important for the person receiving care; it is not a social club but provides a range of services, often picking up issues around health or wellbeing at an early stage allowing preventative measures to be taken.

Other carers are in desperate need of a break through residential respite. For us as a family, residential respite is the only way we would be able to have a complete break with any peace of mind. Residential respite for many carers would make an enormous difference to their lives but unfortunately it is virtually a pipe dream now and, for some, lack of this provision is likely to have had an extremely detrimental impact on their mental wellbeing and/or physical health. It is difficult to keep going relentlessly seven days a week, on standby 24 hours a day, having no holidays and with no break in sight. As well as being physically exhausting caring takes an enormous emotional toll on carers. Employers would not be allowed to treat employees in such a way, in fact it would be illegal, yet carers are expected to endure it. No one can fully understand the toll caring takes until they have done it themselves. I certainly didn't.

4. I particularly appreciate the action to train frontline workers making them 'carer-aware'. While I thought the previous strategy was excellent my main concern was that not all professionals may have been adhering to it. I raised this at the conference and find this action very reassuring.

I'd like to conclude by saying again how pleased I am to have the opportunity to comment on the excellent draft strategy and look forward to seeing progress.

First of all, I would like to commend you and your colleagues for a very robust process, which has resulted in the development of a comprehensive and well written draft strategy document.

That said, I do have some points that I believe have the potential to further improve the current draft – these are set out below.

1. **The Rights of Unpaid Carers:** I understand why a hyperlink to the The Carers' (Scotland) Act 2016 has been included. I do feel, however, that The Carers' Charter, which is a more accessible and user friendly document, should be included at annex. I also feel that quotes from the charter, highlighted as 'sound bites' in blue and in the margins, should be included, for example:

[Local authorities and health boards must involve carers in planning the carer services they provide.](#)

[Local authorities must involve carers in assessing their needs for support and providing that support.](#)

[Local authorities must take carers' views into account in assessing the needs of the person being cared for.](#)

Local authorities must consider the views of carers and carer representatives when preparing and reviewing short breaks services statements. Each health board must ensure that, before a cared-for person is discharged from hospital, it involves you in the discharge of the cared-for person.

2. **Domiciliary Respite – Day Respite – Residential Respite:** Unpaid carers rely heavily on all three of these forms of respite - and yet, only domiciliary respite as provided by Crossroads is mentioned? I would suggest that it would be extremely helpful for the strategy to explain the reasons why severe restrictions have now been placed on residential respite for older people. I would also suggest that the importance of day respite at the council's day centres be explained, along with a statement providing reassurance that these day services, which are absolutely essential for some unpaid carers, will not go the same way as residential respite for older people.
3. **Staff Training:** The staff training section is a very welcome development, although I would suggest that its purpose should be better explained by, for example, including one or two examples of the ways that health and social care staff will become more 'unpaid carer aware'. For example, when conducting a social care assessment of the needs of a vulnerable person, it should never be assumed that the next of kin, or any other relative or friend, is ready, willing and able to take on the role of unpaid carer.

Once again, a well-researched and well-written strategy.

Shaun Hourston-Wells

Acting Strategic Planning Lead / Carer Strategy Group – Chair

Orkney Health and Social Care Partnership / Carer Strategy Group

Orkney Unpaid Carers Strategy 2024 - 2026



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Background

Some Figures

There are an estimated 800,000 unpaid carers in Scotland.

Scottish Governments tell us there are around 800,000 unpaid carers in Scotland, representing nearly 15% of the total population of the country. This includes an estimated 30,000 young carers who are still in full-time education.

Estimates vary substantially around the value of unpaid care. Scottish Government suggest £12.8 billion, whilst Oxfam Scotland analysis, in 2020, estimated this figure to be nearer £36 billion.

Whichever is more accurate, these are staggering figures, especially if we consider that the Institute for Fiscal Studies calculated Scotland's social care budget, in

2022 / 23, at £4.3 billion. This means, of course, that unpaid carers account for between three and eight times the total national spend on social care.

So, what does all this mean for Orkney? Well, with a population of just over 22,000, this means there are around 3,500 unpaid carers in Orkney, which will include more than 100 young carers. Even if we assume the lower estimate for the value of unpaid care in Scotland, this means unpaid care in Orkney is worth around £56 million.

Unpaid care is worth between 3 and 8 times the total spending on social care in Scotland!

It is difficult to comprehend these enormous sums of money. Perhaps it is easier just to say that, without the care delivered every hour of every day, up-and-down the land, social care services would collapse.

The Carers Act (Scotland) 2016

The Carers (Scotland) Act was introduced by Scottish Government to give adult and young carers new rights, whilst bringing together the rights carers had previously, under one piece of legislation. (You can read the full Act [here](#).) For example, under previous legislation, carers could only ask for support if they provided "regular and substantial" care for a person. The new legislation means anyone who provides care for another person is now considered to be an unpaid carer.

Carers also now have the right to a formal support plan, if they would like one, as well as a say in the hospital discharge process of their cared-for person, alongside a say in how services are delivered for their cared-for person.

There are also proposals to extend these rights, giving carers the right to a break from caring.

Why an Unpaid Carers Strategy?

There are two reasons for publishing a dedicated Unpaid Carers Strategy.

Firstly, the Carers Act requires local authorities and health boards to jointly prepare and publish a local Unpaid Carers Strategy. This must show how they will support people in their caring role, as well as what they will do to identify carers who are not currently receiving support services.

The second and, perhaps, most important reason is that supporting our unpaid carers is one of the Strategic Priorities of Orkney's Integration Joint Board (IJB), the local organisation with responsibility for planning, resourcing, and overseeing integrated health and social care services.

Last year, the IJB published their new Strategic Plan. The plan specifically acknowledged the vital role of unpaid carers, saying "Unpaid Carers are at the heart of everything we do. The fact is, without Unpaid Carers, the social care system in Scotland would fall apart." (You can read the full Strategic Plan [here](#).)

Unpaid Carers are at the heart of everything we do.

This Unpaid Carers Strategy will lay out how we will deliver the support our carers need, as well as how we will know we are making a difference to unpaid carers.

Who are Carers?

As we have seen, anyone who provides care for another person is an unpaid carer. This could be a family member, a friend, or a neighbour. They might have an illness, a disability, a physical or mental health problem, or an addiction.

Anyone who provides care for another person is an unpaid carer.

And unpaid carers can be any age, too. For example, many young people look after parents and other family members.

You do not have to be related to, or live with, the person, to be a carer, and you do not need to be registered as a carer.

How Many Unpaid Carers are there in Orkney?

The short answer to this question is we don't know. The truth is that most people who are caring for someone don't know they are entitled to support; or, more simply, most carers don't know they are carers.

We think there are around 3500 unpaid carers in Orkney.

This is a situation not unique to Orkney, as we have seen.

Our carer support services know of around 400 unpaid adult and young carers; but we suspect there are nearer 3,500 people in Orkney who are providing unpaid care to a friend or family member. This means that only 1-in-10 carers are receiving any of the support services to which they are entitled. Whilst there are many people who chose not to receive any services, there are clearly a very large number of carers, here in Orkney, who do not know they are carers.

Raising the Profile of Unpaid Carers

We have worked hard in recent years to reach these “unknown carers” by promoting the work that carers do locally, helping people to realise that they are a carer, or that a member of their family, a friend, or a neighbour, is a carer.

For example, we've had features in The Orcadian, on Radio Orkney, and, especially, on social media, publicising what unpaid carers do, as well as the help available to them. Here are some of the headlines from the last year, along with links to each story.

Around 400 people are supported by services in Orkney.

[Carer wellbeing campaign relaunches in face of rising numbers of carers in Scotland](#)

[Caring for someone? Support is there for you too.](#)

[Caring doesn't stop at Christmas - Sarah's story](#)

[Could you - or someone you know - be an unpaid carer?](#)

These, along with several other stories, have been posted on social media.

We have also posted videos on social media, some with carers telling people about their circumstances, whilst others tell people how they can get in contact and what services are available to them.

In this example, the Manager of Crossroads Care, Orkney, Arlene Montgomery, talks about the support they can offer carers: <https://youtu.be/2ruA58nWJJc>.

Scottish Government, too, have recognised the need to reach more carers. A publicity campaign on the TV, on social media, and in newspapers and magazines helped people to think about unpaid carers.

Our efforts to promote carers have seen significant success, with a lot more people coming forward to seek support, 50% more than when we began our publicity campaign, about 2 years ago. And this work will continue, as we do everything possible to raise the profile of carers in Orkney.

What Support is Currently Available to Unpaid Carers?

Crossroads Care Orkney

Crossroads Care Orkney are commissioned by Orkney Islands Council and NHS Orkney to provide carer support services. (This means the Council and NHS Orkney pay Crossroads to deliver support services in Orkney.) This includes:



- **Information and Advice** about support services such as daycare, homecare, a befriending service, respite breaks, aids and adaptations, power of attorney, and transport. They are also able to signpost where to get expert advice on benefits for both the carer and the cared-for person,
- **Emotional Support** is available from the team. Caring can, at times, be a very isolated and stressful job, and often it is just enough to know there is someone there for a chat - someone who will understand what it is to be a carer. Crossroads also hold a monthly Carers Support Group where there is a small information talk, a chance to bring up any issues for discussion, and then time for a cup of tea and a chance to socialise with other Carers.
- **Advocacy Support** can be given, accompanying carers to meetings regarding their cared-for person, if required.
- **Training** is available, helping carers to learn the skills needed to be a carer, such as moving and handling and first aid.
- **Benefits advice** is offered, as carers or the cared-for person may be entitled to certain allowances.



One of the posters used in the Scottish Government campaign.

- **Respite Care** delivers practical help to Carers in the form of a short respite break, where trained attendants can look after a cared-for person, allowing time for carers to get out and meet friends, go shopping, or see a film.

Age Scotland Orkney



Age Scotland Orkney not only provide support for older people, but also offer help and advice for their carers, too.

One such example is their information, advice, signposting, and ongoing support service for those living with dementia, their family, and carers, which includes dedicated Carer Support Sessions.

Carer Assessments

Anyone providing regular unpaid care for someone can ask for a Carers Assessment. This isn't a test of the carer's abilities, but the chance for carers to say how caring affects them, both physically and emotionally. The assessment will find out what support the carer needs and if they're happy to carry on caring. A plan

will then be produced, called an Adult Carer Support Plan (or Young Carer Statement, for young carers), setting out what support a carer may need to carry on as a carer.

The assessment will find out what support the carer needs.

An excellent explanation of both the Carer Assessment and the Adult Carer Support Plan is available from Carers Scotland, a national carer support organisation. You can read about carer assessments [here](#), and Adult Carer Support Plans [here](#).



Carers Scotland is a national organisation providing a huge amount of help and advice to carers.

Young Carers



A young carer is any young person (under the age of 18) who regularly provides care for another person. This will usually be a brother or sister, a parent or grandparent, who has a long-term illness, a disability, or who may have an alcohol or substance problem. Sometimes, they can be caring for more than one person.

The pressures of caring often mean young carers will miss out on school, as well as time with their friends. Many young carers don't know they can ask for help, or are frightened of what will happen if they do ask for help.

But just like adult carers, there is help at hand. Orkney Young Carers can provide confidential support and advice for young carers and their families. Just like adult carers, they can help with arranging an assessment to see what help might be needed (if the young person would like one), and help to put in place a plan, called a Young Carer Statement, to help them with their caring. (You can read more about the help that Orkney Young Carers can provide [here](#).)

All the services available to adult carers are available to young carers, too. But we know that, often, young people need extra help. To make sure they get the support they need, we will be writing a strategy especially for young carers, and plan to publish this during 2024.

All services available to adult carers are available to young carers.

Unpaid Carer Consultation

How Best to Consult Unpaid Carers?

We think it is vital that carers are involved in the preparation of our Unpaid Carers Strategy. In the past, we have written a first draft of the Strategy and then asked carers if they think we have the right priorities for them.

We wanted to find out exactly what matters to carers.

But this time, we wanted to do something different: we wanted to spend time with our carers and find out exactly what matters to them. We wanted to know what they consider are the most important things we should be doing to support them to be carers.

We could have asked carers to complete a survey, but we really wanted the chance to sit down with as many carers as possible and speak to them. We also wanted to do something that would celebrate what carers do; something that would acknowledge how important they are.

In the end, we decided we would hold Scotland's first Unpaid Carer Conference.

The Unpaid Carer Conference

Our first Unpaid Carers Conference was held in Kirkwall, in May of 2023. We welcomed more than 150 delegates, including speakers from across Scotland, as well as key local folk, and, most importantly, unpaid carers from across Orkney.

Around 150 people attended the first Unpaid Carer Conference.

We heard how unpaid carers are the essential strand that hold social care services together, as well as some of the great ideas that are improving the support for carers.

The main session of the afternoon was given over to speaking to carers, where we learned exactly what they felt were the most important ways that services could improve their lives.



Post-Conference Survey

We published a survey shortly after the conference. We wanted to get feedback on how the conference went, of course, but we also wanted to hear from carers who were unable to make the conference.

Feedback on the conference was extremely positive. There were some who felt access to the displays was limited, or that the day could have been longer or, indeed, shorter, and we have made extensive notes of what to do, and not to do, next time. But everyone who responded had something positive to say, with many extremely pleased to have had the opportunity to attend an event specifically for carers. We are looking at themes for a future conference and will definitely hold another by 2025, at the latest.

What Did Our Unpaid Carers Tell Us?

Whether hearing directly from carers at the conference, or reading their responses to our survey, the messages were consistent, and can be summarised, as follows:

1. Unsurprisingly, almost all carers said they are looking for a break. They clearly cared, very much, for the person they care for, but many needed a little time to themselves. Some just wanted an hour or two to pop into town or meet a friend for a coffee.
2. The next most common response was that many of our carers have money concerns. In fact, some carers told us they didn't even know they could claim Carers Allowance.
3. Next up was support with their mental health and was often linked to the opportunity for a break – simply looking forward to a break was enough to keep folk going.
4. Another common theme was that a lot of carers feel “time poor”: they don't have the time, or the energy, to do the small jobs at home, like Hoovering the carpets, mowing the lawn, or even doing the washing-up.
5. Carers also told us they find it very hard to juggle their work commitments with their caring commitments. Many said they would like to see employers take a more compassionate and understanding attitude to carers, perhaps along the lines of the many employers who offer flexible working, especially for staff with children.



But perhaps the most important lesson learned on the day was that it seemed everyone attending - from carers and their family and friends, through to support professionals – everyone seemed to know someone who cared for a spouse, a parent, or a friend, but had never sought help and support.

Most carers don't realise they are carers!

In short, it was clear that our greatest priority needs to be publicising the role of carers, the support available, and how to get that support.

Our Priorities

What We Will Do to Make Life Better for Our Unpaid Carers.

The Unpaid Carers Conference and our conversations with carers, as well as the survey which followed the conference, means we are confident we understand the most important things to our carers in Orkney, especially around what we can do to make their caring lives easier.

This new strategy is, effectively, our promise to do those things that will directly address the most pressing concerns and issues of our carers.

There are also some things we have decided to do that will help us to keep our promises. For example, we have decided to create two new jobs: a Carer Lead and a Carer Support Worker. Both of these brand-new roles will mean that there are two staff who will spend all of their time working for the benefit of carers.

Furthermore, we are now working on a project to develop more innovative ideas for how we can provide respite for carers, and hope to launch a pilot project soon.

The strategy is our promise to address the most pressing concerns of carers.

We're developing plans to ensure carers have faster access to income maximisation services, including the Orkney Money Matters initiative, which is addressing financial insecurity by increasing access to cash-based advice and support.

We're also close to publishing an Orkney Islands Council Unpaid Carer-Friendly Policy, which will ensure carers who work for the Council (Orkney's largest employer) can balance their work and their caring responsibilities. This will be the first step in developing a carer-friendly

accreditation scheme for employers across Orkney.

But what can we do to help all those carers who don't know what support is available for them? In other words, how do we help carers to realise they are carers?

We will feature regular pieces in both traditional and social media, such as The Orcadian, Radio Orkney, Facebook, and Twitter / X, raising the profile of carers.

And, perhaps most importantly, we're about to begin a training programme that we're calling "Think Carer!" The programme will train all frontline workers, in health services, social care services, education, and advice services, about how to advise carers of the help and support available to them.

Action Plan

This is our Action Plan. In the left-hand column, we have said what we will do, and, in the right-hand column, we have said how we will measure whether we have been successful or not.

Delivery Milestones	Measures
<ul style="list-style-type: none"> • Hold a 2nd Orkney Unpaid Carer Conference. • We will reach more people delivering care to family or friends, who have not sought carer services, and measure that number. • Offer an assessment to all unpaid carers seeking support, and measure that number. • Appoint a dedicated Unpaid Carer Lead, as well as an Unpaid Carer Support Worker. • Prepare and publish a dedicated Young Carer Strategy 	<ul style="list-style-type: none"> • Hold the conference before the Autumn of 2025. • Increase the number of unpaid carers contacting Crossroads Care Orkney, for support, from 78, in 2022, to 150, by 2025. • Increase the number of carers offered an assessment from 33 in 2022, to 60 by the end of 2024. • Both posts to be filled by summer 2024. • Young Carer Strategy to be published by the end of 2024.

Delivery Milestones	Measures
<ul style="list-style-type: none"> • Develop referral processes to ensure Unpaid Carers have access to the Orkney Money Matters initiative. • Deliver an Unpaid Carer-Friendly policy for staff employed by Orkney Islands Council (OIC). • Develop a pilot programme to test more innovative ways of improving respite for our carers • Begin training frontline workers throughout statutory and third sector organisations, making them “carer-aware”. 	<ul style="list-style-type: none"> • Make sure every carer who would like to can access the Orkney Money matters initiative. • Prepare and publish an OIC Unpaid Carer-Friendly policy by the end of 2024. • Implement a respite pilot programme before the end of 2024. • Undertake training of at least 100 frontline workers by the end of 2024.



Equality Impact Assessment

The purpose of an Equality Impact Assessment (EqIA) is to improve the work of the Integration Joint Board (Orkney Health and Social Care Partnership) by making sure it promotes equality and does not discriminate. This assessment records the likely impact of any changes to a function, policy, or plan by anticipating the consequences, and making sure that any negative impacts are eliminated, or minimised, and positive impacts are maximised.

1. Identification of Function, Policy or Plan	
Name of function / policy / plan to be assessed.	Orkney Unpaid Carers Strategy 2024 – 2026.
Service / service area responsible.	Orkney Health and Social Care partnership, Unpaid Carers' Support.
Name of person carrying out the assessment and contact details.	Shaun Hourston-Wells, Acting Strategic Planning Lead. Tel 01856873535 extension 2414, email: shaun.hourston-wells@orkney.gov.uk .
Date of assessment.	29 January 2024.
Is the function / policy / plan new or existing? (Please indicate also if the service is to be deleted, reduced, or changed significantly).	Existing. The new Strategy includes details on how carer support services will be expanded.

2. Initial Screening	
What are the intended outcomes of the function / policy / plan?	To improve support services for unpaid carers
State who is, or may be affected by this function / policy / plan, and how.	Yes. The support of Unpaid Carers is one of the IJB's six Strategic Priorities.
Is the function / policy / plan strategically important?	Unpaid Carers, as well as those who provide and deliver support services to carers, from both the statutory and third sectors.

How have stakeholders been involved in the development of this function / policy / plan?	Unpaid Carers were directly consulted at the inaugural Orkney Unpaid Carer's Conference, with further consultation in a post-conference survey.
Is there any existing data and / or research relating to equalities issues in this policy area? Please summarise. E.g. consultations, national surveys, performance data, complaints, service user feedback, academic / consultants' reports, benchmarking (see equalities resources on OIC information portal).	Information from both national and local sources indicates unpaid carers experience significant physical and mental health challenges, as well as financial challenges.
Is there any existing evidence relating to socio-economic disadvantage and inequalities of outcome in this policy area? Please summarise. E.g. For people living in poverty or for people of low income. See The Fairer Scotland Duty Interim Guidance for Public Bodies for further information.	Please see the response above.
Could the function / policy have a differential impact on any of the following equality strands?	(Please provide any evidence – positive impacts / benefits, negative impacts, and reasons).
1. Race: this includes ethnic or national groups, colour and nationality.	There is no identified impact on this group of people.
2. Sex: a man or a woman.	There is no identified impact on this group of people.
3. Sexual Orientation: whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes.	There is no identified impact on this group of people.
4. Gender Reassignment: the process of transitioning from one gender to another.	There is no identified impact on this group of people.
5. Pregnancy and maternity.	There is no identified impact on this group of people.

6. Age: people of different ages.	Many unpaid carers are older people, so the provision of support services will assist older people. Young Carers (those under 18 and in full-time education) have dedicated support, through the third sector, of a dedicated young carer worker.
7. Religion or beliefs or none (atheists).	There is no identified impact on this group of people.
8. Caring responsibilities.	This Strategy will have a very positive impact upon those with caring responsibilities.
9. Care experienced.	There is no identified impact on this group of people.
10. Marriage and Civil Partnerships.	There is no identified impact on this group of people.
11. Disability: people with disabilities (whether registered or not).	There is no identified impact on this group of people.
12. Socio-economic disadvantage.	Elements of this Strategy are intended to have a positive impact on unpaid carers who are experiencing financial difficulties.

3. Impact Assessment

Does the analysis above identify any differential impacts which need to be addressed?	No. On the contrary, any differential impacts are positive for certain protected characteristic groups.
How could you minimise or remove any potential negative impacts?	Not applicable.
Do you have enough information to make a judgement? If no, what information do you require?	Yes.

4. Conclusions and Planned Action

Is further work required?	No further work is required specifically to alleviate negative impacts upon any protected characteristic group.
What action is to be taken?	Not applicable.
Who will undertake it?	Not applicable.

When will it be done?	Not applicable.
How will it be monitored? (e.g. through service plans).	Not applicable.

Signature: 

Date: 29.01.24.

Name: Shaun Hourston-Wells.

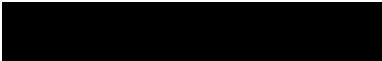



Island Communities Impact Assessment

The purpose of an Island Communities Impact Assessment (ICIA) is to improve the work of the Integration Joint Board by making sure it considers whether the impact of any policy, strategy or service on an island community is likely to be significantly differently from its effect on other communities (including other island communities).

PRELIMINARY CONSIDERATIONS	Responses
Please provide a brief description or summary of the policy, strategy, or service under review for the purposes of this assessment.	Orkney Unpaid Carer Strategy 2023 – 2026.
STEP 1 - Develop a clear understanding of your objectives	Responses
What are the objectives of the policy, strategy, or service?	To provide a comprehensive support service for unpaid carers in Orkney.
Do you need to consult?	Stakeholders were comprehensively consulted during the preparation of the Strategy.
How are islands identified for the purpose of the policy, strategy, or service?	Ferry linked islands.
What are the intended impacts/outcomes and how do these potentially differ in the islands?	The provision of some support services, especially respite / short breaks services, is more limited in the islands.
Is the policy, strategy, or service new?	No. This strategy replaces the previous iteration of the Unpaid Carer Strategy.
STEP 2 - Gather your data and identify your stakeholders	Responses
What data is available about the current situation in the islands?	As mentioned in Step 1, above, the provision of some services is more limited in the islands.
Do you need to consult?	Isles' residents were invited to the 2023 Unpaid Carers' Conference, including the opportunity to participate virtually.
How does any existing data differ between islands?	As mentioned in Step 1, above, the provision of some services is more limited in the islands.
Are there any existing design features or mitigations in place?	Virtual access to some services is increasing. Furthermore, one of the tasks assigned to the new Carer Support Worker will be to identify carers in the isles.
STEP 3 - Consultation	Responses
Who do you need to consult with?	The consultation process was undertaken through the Unpaid Carers' Conference, along with the subsequent survey. Isles' residents have not been specifically consulted.
How will you carry out your consultation and in what timescales?	Not applicable.

What questions will you ask when considering how to address island realities?	Not applicable.
What information has already been gathered through consultations and what concerns have been raised previously by island communities?	There are concerns around access to short breaks services in the islands, these a result of challenges around recruitment of respite carers. However, whilst respite beds are not generally available in the isles, there is a respite bed at Kalisgarth Care Centre, in Westray. Isles' residents also have equal access to Mainland-based respite beds, although it is acknowledged they will have to travel to the Mainland.
Is your consultation robust and meaningful and sufficient to comply with the Section 7 duty?	Yes.
STEP 4 – Assessment	Responses
Does your assessment identify any unique impacts on island communities?	Yes. As identified above, there are some inevitable limitations to service provision in the isles.
Does your assessment identify any potential barriers or wider impacts?	Please see the answers above.
How will you address these?	Please see the answers above.
<p>You must now determine whether, in your opinion your policy, strategy, or service is likely to have an effect on an island community that is significantly different from its effect on other communities (including other island communities).</p> <p>If your answer is NO to the above question, a full ICIA will NOT be required, and <u>you can proceed to Step SIX</u>. If the answer is YES, an ICIA must be prepared, and <u>you should proceed to Step FIVE</u>. To form your opinion, the following questions should be considered:</p> <ul style="list-style-type: none"> • Does the evidence show different circumstances or different expectations or needs, or different experiences or outcomes (such as different levels of satisfaction, or different rates of participation)? • Are these different effects likely? • Are these effects significantly different? • Could the effect amount to a disadvantage for an island community when compared to other islands in Orkney (especially the Mainland)? 	
STEP 5 – Preparing your ICIA	Responses
In Step Five, you should describe the likely significantly different effect of the policy, strategy, or service:	Access to on-island respite care is more limited on the isles, with the exception of Westray.
Assess the extent to which you consider that the policy, strategy, or service can be developed or delivered in such a manner as to improve or mitigate, for island communities, the outcomes resulting from it.	The Strategy acknowledges that there are significant challenges to the provision of short breaks / respite, across Orkney, and is seeking to develop alternatives to traditional residential bed-based short breaks / respite. These alternatives will consider access to these alternatives, in the isles.

Consider alternative delivery mechanisms and whether further consultation is required.	See above.
Describe how these alternative delivery mechanisms will improve or mitigate outcomes for island communities.	Alternative short breaks' solutions will quite possibly use community resources, especially as Community Led Support is increasingly adopted across all of the health and social care partnership's services. Many of these community resources have been identified through the work of the Isles Wellbeing Project, a third sector-led initiative that is directly support by the IJB.
Identify resources required to improve or mitigate outcomes for island communities.	Please see above.
STEP 6 - Making adjustments to your work	Responses
Should delivery mechanisms/mitigations vary in different communities?	The method of service provision, whether in the isles or in the Mainland, will be largely similar.
Do you need to consult with island communities in respect of mechanisms or mitigations?	Not at this stage. If different opportunities for service delivery in the isles are identified, it may be appropriate, at that point, to consult isles-based unpaid carers.
Have island circumstances been factored into the evaluation process?	Yes.
Have any island-specific indicators/targets been identified that require monitoring?	None that are specific to the isles, although all the actions in the action plan include measurable targets.
How will outcomes be measured on the islands?	It is anticipated that Mainland-based unpaid carer support services will work with the Isles Wellbeing Project to measure outcomes for carers, in the isles.
How has the policy, strategy, or service affected island communities?	Whilst some limitations to service provision are recognised, some of the actions identified in this ICIA will mitigate this. Furthermore, the implementation of this new strategy will improve support services for all unpaid carers, in both the Mainland and the isles.
How will lessons learned in this ICIA inform future policy making and service delivery?	This ICIA has identified the Isles Wellbeing Project as a potential isles-based support mechanism for unpaid carers in the isles.
STEP 7 - Publishing your ICIA	Responses
Have you presented your ICIA in Easy-Read Format?	No.
Does your ICIA need to be prepared in Gaelic, or any other language?	No.
Where will you publish your ICIA, and will relevant stakeholders be able to easily access it?	This ICIA will be published alongside the Strategy.
ICIA completed by:	Shaun Hourston-Wells.
Position:	Acting Strategic Planning Lead.
Signature:	

Date complete:	29 January 2024
Who will sign-off your final ICIA and why?	Stephen Brown, Chief Officer
Signature:	
Date approved:	30.01.24.