



Scottish Borders Health and Social Care Partnership Eligibility Framework for Carers

Background to the Local Eligibility Criteria for unpaid carers in the Scottish Borders

The Carers (Scotland) Act 2016 places a duty on local authorities to set out eligibility criteria for carers. These are the criteria which determine whether Scottish Borders Health and Social Care Partnership has a duty under the Act to provide support to carers. The Partnership has involved third sector partners and carers in developing the criteria for the Scottish Borders.

This local framework is based on an eligibility framework designed and tested by the National Carer Organisations and reflects the requirements set out under the Carers (Scotland) Act as follows:

It supports a rights based approach

- The right of every carer to have an Adult Carer Support Plan which aims to support their health and well-being through an assessment of their personal needs
- The right to have an Adult Carer Support Plan which identifies the most appropriate balance of information, advice and support to meet these needs and achieve personal outcomes
- The right to have a minimum level of need met
- The right to have as many needs above the minimum met as current resource levels within the partnership allow

It is preventative

The Scottish Borders Eligibility Criteria framework aims to ensure that preventative support is embraced and embedded in policy and practice through the identification of thresholds for different levels of need, ensuring that even though carers may not be entitled to funded social care services under the criteria, universal and preventative support can still be offered and put in place.

It is outcome focussed

The Carers (Scotland) Act defines personal outcomes in relation to the caring role. This framework allows for outcomes to be defined at all levels of support for carers, so that the benefits of accessing both preventative and more intensive support are clear and measurable. The Carers Support Plan measures outcomes under the following five key headings:

- Health and well-being
- Managing the Caring role
- How you are valued and listened to by services
- Planning for the future
- Finances and benefits

The eligibility criteria assesses the level of need and level of support required by individual carers within these five areas by measuring the level of risk.

The eligibility process

Through the Carers (Scotland) Act, health and social care partnerships have a duty to support carers who meet the eligibility criteria threshold for funded support. This is in addition to the power they currently have to support all carers. Determining eligibility for support can be broken down into four steps, see below.

Step One

A carer who wishes to access support will need to have an Adult Carers Support Plan. This will involve an assessment to determine the carer's needs, and how they can best achieve their personal outcomes. Not all carers who undertake an Adult Carer Support Plan will have an eligible need, or a right to support. However, it is likely that they will still have needs, which can be addressed through universal, preventative services offered through the Borders Carers Centre or other organisations.

Step Two

Once the carer's outcomes have been identified through their support plan, it must be determined if any of their needs meet the eligibility criteria threshold. If carers **meet the eligibility threshold** set by the Scottish Borders, there is a **duty** to support them.

Step Three

If a carer meets the eligibility threshold, it must then be decided what **level of support** they are entitled to. The level of support will be determined by the eligible needs of the carer and available resources within the area.

Step Four

Once the level of support has been agreed, the carer will then decide how they would like to arrange their support and choose from the four self-directed support options available. These are:

- 1. A direct payment
- 2. The person can direct the available support
- 3. Services are arranged by the Partnership
- 4. A mix of the above

Stage3: Post-assessment support Local Authority *duty* to support eligible carers

LA and NHS will provide more specialist support. Carer chooses delivery mechanism (self-directed support), including the examples below

Stage 2: Assessment, Adult Carer Support Plan

Local Authority *power* to support carers.

1:1 assessment and outcomes-based conversation

LA and NHS will commission community supports including examples below and carers support services such as advice, information, emotional support, income maximisation, breaks from caring, respite, advocacy, counselling, peer support, training

Eligibility threshold

Stage 1: Pre-assessment - Universal support (1and 2)

Local Authority *power* to support carers

Information and advice, preventative and community support e.g. registering with a GP, social prescribing, signposting to Carers Centre and other agencies, supported self-care, signposting to social and lesiure opportunities. Promote and offer the Adult Carer Support Plan.

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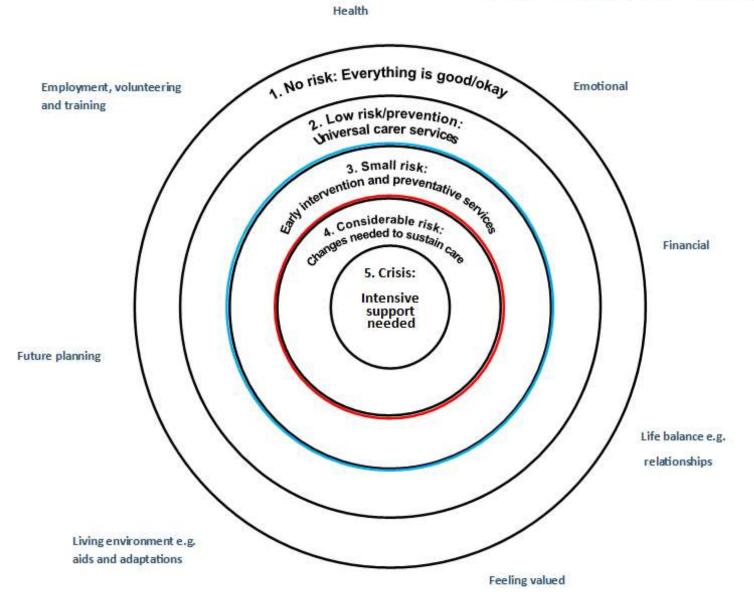




Table of indicators:

	Stage 1: Universal support		Stage 2: Assessment & Carer Support Plan	Stage 3: Post-assessment, duty to support	
	1 Caring has no impact / no risk	2 Caring has low impact / risk prevention	3 Caring has clear impact / small, moderate risk. Response needed.	4 Caring has considerable impact / high risk	5 Evidence of critical impact / crisis
Health and well-being	Carer in good health Carer has good emotional wellbeing. Good relationship with cared-for person	Carer's health beginning to be affected Caring role beginning to have an impact on emotional wellbeing Risk of detrimental impact on relationship with cared	Carer's health at risk without intervention. Some impact on carer's emotional wellbeing Some detrimental impact on relationship with cared-for person	Carer has health need that requires attention Significant impact on carer's emotional wellbeing Relationship with cared-for person is significantly affected	Carer's health is breaking/has broken down Carer's emotional wellbeing is breaking/has broken down Relationship with cared-for person is breaking/has broken down
Managing the Caring Role	Carer has regular opportunities to achieve the balance they want in their life. They have a broad choice of breaks and activities which promote physical, mental, emotional wellbeing Carer has no difficulty in managing caring and /or education Carer does not want to be in paid work or employment	Carer has regular opportunities to achieve the balance they want in their life. They have a broad choice of breaks and activities which promote physical, mental, emotional wellbeing Carer has no difficulty in managing caring and /or education Carer does not want to be in paid work or employment	Due to their caring role, the carer has limited opportunities to achieve the balance they want in their life. They have access to a few breaks and activities which promote physical, mental, emotional wellbeing Carer has difficulty managing caring and employment and there is a risk to sustaining employment and/or education in the medium term Carer is not in paid work or education but would like to be in medium term	Due to their caring role, the carer has few and irregular opportunities to achieve the balance they want in their life. They have little access to breaks and activities which promote physical, mental, emotional wellbeing Carer has significant difficulty managing caring and employment and there is a risk to sustaining employment and/or education in the short term Carer is not in paid work or education but would like to be soon	Due to their caring role, the carer has no opportunities to achieve the balance they want in their life. They have no access to breaks and activities which promote physical, mental, emotional wellbeing Carer has significant difficulty managing caring and employment and/or education and there is an imminent risk of giving up work or education. Carer is not in paid work or education but would like to be now

	Stage 1: Universal support		Stage 2: Assessment & Carer Support Plan	Stage 3: Post-assessment, duty to support	
	1 Caring has no impact / no risk	2 Caring has low impact / risk prevention	3 Caring has clear impact / small, moderate risk. Response needed.	4 Caring has considerable impact / high risk	5 Evidence of critical impact / crisis
How are you valued and listened to by services	Carer feels that they are listened to by services. Their experience and knowledge of the cared for person is always valued by health, social care and other practitioners and so they feel included and empowered	Carer feels that they are sometimes listened to by services. Their experience and knowledge of the cared for person is sometimes valued and so they generally feel included and empowered	Carer increasingly feels that they are not listened to by services. They increasingly feel that heir experience and knowledge of the cared for person is not valued by health, social care and other practitioners and so they sometimes feel excluded and disempowered	Carer often feels that they are not listened to by services. They often feel that their experience and knowledge of the cared for person is not valued by health, social care and other practitioners and so they often feel excluded and disempowered	Carers feel that they are not listened to by services. They feel that their experience and knowledge of the cared for person is never valued by health, social care and other practitioners and so they always feel excluded and disempowered
Planning for the future	Carer is confident about the future and has no concerns Carer's living environment is suitable, posing no risk to the physical health and safety of the carers and cared for person	Carers is largely confident about the future but has minor concerns Carer's living environment is mostly suitable but could pose a risk to the Health and safety of the carers and cared for person in the longer term	Carers is not confident about the future and has some concerns Carer's living environment is unsuitable but poses no immediate risk	Carer is anxious about the future and has significant concerns Carer's living environment is unsuitable and poses an immediate risk to the health and safety of the carer and/ or cared for person.	Carer is very anxious about the future and has severe concerns Carer's living environment is unsuitable and there are immediate and critical risks to the health and safety of the carer/and or cared for person
Finances and benefits	Caring is not causing financial hardship e.g carer can afford housing, living costs and utilities	Caring is causing a risk of financial hardship e.g. Some difficulty meeting housing, living costs and utilities	Caring is causing some detrimental impact on finances e.g. difficulty meeting some housing, living costs and utilities	Caring is having a significant impact on finances e.g. difficulty meeting, housing, living costs AND utilities	Caring is causing severe financial hardship e.g. carer cannot affords household essential and utilities and cannot meet housing costs

Good practice Guidance – Examples

Carer 1 – Bill

Bill is 70 and cares for his mother Phyllis. Phyllis is 92 and is frail and elderly but lives independently. She manages fairly well and Bill visits daily to help her with housework, shopping and getting out and about. She receives some help from social work to enable her to cook her meals and she has a Bordercare alarm for emergencies. Bill asks for an Adult Carer Support Plan. Overall, he is managing his caring role well and his health and well-being are generally good. However, he identifies that he has some concerns about the future (if anything was to happen to him) and he is a bit lonely as he doesn't have anyone to talk to about his caring role

Using the criteria

All of Bill's needs fall into universal or preventative support, which can be provided by the Borders Carers Centre. For example, he could join a Carers Support Group and could apply for an Emergency Card to help with his concerns about what would happen if anything happens to him. He could also be given information about local groups or activities that he might be interested in.

Carer 2 – Frances

Frances is 20 and cares for her mum who has cancer. She provides continuous care, although they have some help from the palliative care team and the Margaret Kerr unit. Frances has had to give up her college course to care and has no income. She is exhausted and depressed and has no idea how she will continue to cope. She is referred to the hospital liaison worker who carries out an adult carer support plan, which identifies that:

- Caring is causing significant impact on her mental health
- She is exhausted and wants to be able to have a break from caring and spend time with her friends
- She wants to return to education but does not know how she will be able to manage education and caring
- She is really worried about finances. Although her mum gets ESA, she does not receive any other benefits

Using the criteria

- Frances's health is at significant risk of breaking down
- She has few opportunities to have a break
- She has no opportunities for education
- Her finances are precarious

Frances meets the high threshold for a break from caring, so the Partnership has a duty to support, which could include the provision of a regular break. She could be referred to the specialist Young Adult Carers Support service to help her plan her return to education and also to Welfare Benefits for a full benefits check.