

# Local Eligibility Criteria

for young carers and adult carers



# unpaid carers supports services



Working together to improve health and wellbeing  
in the community – *with* the community



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## 1. Introduction

- 1.1 The Carers (Scotland) Act 2016 (the Act) builds on existing legal rights for adult carers and young carers in Scotland as well as introducing new rights. It brings about a new legal duty for local authorities to set eligibility criteria for carers and young carers. A ‘duty’ is something that by law, must be done. This document outlines South Lanarkshire’s eligibility criteria.
- 1.2 The Act has been developed to support carers and young carers through a rights based, preventative approach. This includes, “the right to a new Adult Carer Support Plan (ACSP) or Young Carer Statement (YCS)”; they aim to support carers’ health and wellbeing through offering a more personalised approach. A key focus in the Act is the right to access information, advice and support as well as requiring local authorities – who have devolved that power to the Health and Social Care Partnerships (HSCPs) to set eligibility criteria to ensure that there is fair access to support for carers and young carers.
- 1.3 **The Act has changed the definition of a carers in Scotland to:**
- 1.3.1 An adult carer is an individual who provides or intends to provide care for another individual (the “cared-for person”). This person is at least 18 years old. Care may be provided to a friend, relative (including a child with additional support needs) or a partner. The person requiring care may (for example) be ill, frail, have poor mental health or substance misuse problems.
- 1.3.2 A young carer is a person under the age of 18 or has attained the age of 18 years while a pupil at a school, and has since attaining that age remained a pupil at that or another school.

There is no lower age limit attributed to the definition of a young carer. A young carer may provide care or intend to provide care to an adult or a child needing care, except where the child needs care because of his/her age only.

## 2. The Adult Carer Support Plan (ACSP) and Young Carer Statement (YCS)

- 2.1 The Act introduces a new process for identifying and responding to the needs of carers and young carers. This document will provide a framework for identifying personal outcomes and individual needs as well as recording which assessed needs are eligible for support. The HSCP, as stated, has new duties under the Act (actions it must take) as well as new powers under the Act (actions it can take). The HSCP can commission third sector agencies such as carers’ centres to complete the ACSP and YCS.
- 2.1.1 An ACSP is an opportunity to discuss with Social Work Resources or Lanarkshire Carers Centre what support or services the carer needs. An ACSP is an opportunity to discuss the types of support the carer provides. The ACSP begins with a conversation with the key worker where

the caring role, its impact and what is important in the carers' life is discussed. It helps carers plan to work towards their goals. A copy of the plan is given to the adult carer.

- 2.1.2 The YCS is an opportunity for the young carer to discuss with the Social Work Resources what support or services they need. It will help young carers think about what support they may need if they wish to continue caring and have a life similar to that of other young people. The child's plan contained within the YCS will set out any needs young carers have and how those will be met. A young carer can have a YCS even if they already have an integrated assessment child's plan. A copy of the statement is given to the young carer.
- 2.2 The Partnership is currently considering its model of support for adult carers and young carers (see proposed referral pathways Appendix 1 at the end of this document). One aspect being considered is when to 'review' the ACSP/YCS:
- what circumstances will trigger a review of the ACSP/YCS and whether;
  - this review will take place within a stated period of time and whether;
  - a review is determined by a change in the health of the carer or cared-for person
  - if a review is triggered by the cared-for person being admitted to hospital
  - how to measure the effectiveness of the support provided under the initial ACSP/YCS

### **3. Background**

- 3.1 Supporting carers is a key priority at a local and national level and this is reflected in current health and social care policy. South Lanarkshire Health and Social Care Partnership recognises the significant and vital contribution that adult carers and young carers make in supporting the people they care for. The Partnership also anticipates and recognises that in the future there will be changes in the resources available, patterns of demand and supports to carers and the people they care for. As a Partnership we want to ensure that all carers feel listened to and valued, that their health and wellbeing is supported and that carers are able to have a life alongside caring.
- 3.2 The Partnership approach to supporting adult carers within South Lanarkshire is underpinned by the nine National Health and Wellbeing Outcomes; one of which is to support people who provide unpaid care to look after their own health and wellbeing and to reduce any negative impact of the caring role. The commitment to supporting carers in South Lanarkshire is very firmly rooted across the Partnership with carers a key priority in the Strategic Commissioning Plan 2019-22 and the Local Outcome Improvement Plan 2017-27 and the Carers Strategy.

- 3.3 The Partnership approach to supporting young carers is clear, through working to 'Getting it Right for Every Child' (GIRFEC) and through supporting young carers to be children and young people first; they should be protected from carrying out caring tasks, which are inappropriate in terms of age and level of maturity. Young carers should have the support they need to enjoy positive childhoods. Young carers are supported in South Lanarkshire through a child-centred approach, keeping the child/young person at the centre in terms of practice but using a holistic approach to support.

Carers, accessing the right level of support at the right time in South Lanarkshire.

## 4. Principles

- 4.1 The Health and Social Care Partnership supports the following principles in working with carers and young carers:
- all carers in South Lanarkshire are able to access a level of support – with information and advice as a minimum
  - carers in South Lanarkshire can access information, advice and support through a range of sources
  - adult carers are treated as equal partners in care
  - young carers are 'children and young people first' – the focus is to alleviate or reduce the caring role through a family based approach
  - the preventative approach is considered a vital component of supporting carers and young carers to manage in their caring role, should they wish to
  - where a crisis does occur carers will indirectly be supported through the HSCP promptly responding to and minimising risk that may have a negative impact on the cared-for person and/or the carer
  - it will never be assumed that carers are 'able and willing' to provide care
  - the focus of support for the carer will always take into account the impact of the carer in providing care
  - the Partnership will ensure that health staff in acute and primary care services routinely identify and 'signpost' carers to appropriate support and information
  - carers' assessed needs and outcomes will be recorded on the ACSP or YCS
  - the eligibility criteria in this document will be used as a framework only. Professional assessments will promote and maximise independence, whilst identifying and responding to issues of risk, protection and safety

- eligibility criteria are set against current legislation and policy to ensure fairness of provision in South Lanarkshire
- child protection and adult protection procedures are in place to ensure vulnerable people are free from risk of harm. The Carers (Scotland) Act brings new rights for carers, however overriding concerns must always be for the safety of adults and children at risk of harm

## 5. Local eligibility criteria

- 5.1 The Scottish Government has instructed local authorities to set their own eligibility criteria for carers, recognising that there needs to be fairness of provision, whilst offering support to carers and young carers on a preventative basis.
- 5.2 Preventative support is crucial, but for some carers more intensive support is needed and the new Carers Act aims to ensure carers across Scotland are supported with the right level of support for them at the right time. This underpins South Lanarkshire's approach to supporting carers and ultimately the framework of the eligibility criteria in this document.
- 5.3 **What are eligibility criteria?** Eligibility criteria can be used as part of the assessment process for people requiring social care in Scotland, but they must now be applied to supporting carers. The criteria relates to the two stages of the assessment process: for the HSCP to assess needs and then, taking into account the needs in that assessment, decide which needs will be met by providing services. In a nutshell, eligibility criteria are a framework of levels of access for support.
- 5.4 The ACSP and YCS will formally record the needs and identified outcomes of adult carers and young carers; these documents will be used to assess the needs of adult carers and young carers. Some of these needs will 'trigger' support; they will be 'eligible needs' and the eligibility criteria developed in this document will show how these needs fall into the 'eligible category'. The statutory guidance on The Carers (Scotland) Act describes, "a carer's eligible needs as those identified for support that cannot be met through support to the cared-for person or through accessing services that are available generally".
- 5.5 **Eligibility criteria – how do they work?** South Lanarkshire's eligibility criteria for carers are separated into four categories of needs: low, moderate, substantial and critical. This applies to both adult carers and young carers. Essentially, adult carers who are assessed as having substantial and critical needs as the result of having had an ACSP completed by the HSCP (Social Work Resources), may, in the main be eligible for funded support from the HSCP to meet those needs. Any funding allocated to a carer/young carer as a result of ACSP/YCS being completed will be offered through the four funding options of Self-directed Support (SDS). Information is available on SDS through South Lanarkshire Council and/or [Take Control](#).

5.6 Preventative support is vital in supporting adult carers and young carers in their caring role and as such the HSCP may still meet carers' non-eligible needs (those that may be considered low or moderate) in a range of ways. This could be through providing information, advice and support through locally commissioned community based services such as carers' centres and other agencies in South Lanarkshire. Indeed, the vast majority of carers access lower level/moderate support, which they report is often all that is needed to support them in their caring role.

5.7 The levels of eligibility are detailed below:

Caring has no impact	Category 1 Caring has low impact	Category 2 Caring has moderate impact	Category 3 Caring has substantial impact	Category 4 Caring has critical impact
Needs met	Low level needs	Moderate level needs	Substantial level needs	Critical level needs

5.8 At the **lower level**, the offer of universal support for carers and young carers applies (often this is in the form of information and advice).

5.8.1 At the **next level**, where the majority of adult carers say they receive the support they need, is through a range of services, which are commissioned by the HSCP (these may be deemed 'moderate' needs). Dedicated carers' centres provide a range of support along with 'condition specific' organisations (Alzheimer's Scotland is one example of a condition specific organisation).

5.8.2 At that more **intensive level** is the substantial and critical support, which may be funded by the HSCP through Self-Directed Support (this type of support could be a short break/respite paid for in part or in whole by the HSCP). Within this level, replacement care may be offered to the cared-for person, allowing the carer to have a break from their caring role.  
\*There is separate statutory guidance in relation to replacement care.

## 5.9 Supports in South Lanarkshire

5.9.1 The HSCP area offers a wide range of supports and services through a variety of statutory and third sector organisations. Carers will be able to access these dependant on their eligibility criteria category. Some of the supports and services are:

- Welfare Rights Service
- Counselling or Bereavement Services
- Leisure Activities and Services
- Short breaks – Creative Breaks and Respite
- Transport Services
- Young Carers Service

- Advocacy
- Home adaptations
- Drug and Alcohol Services
- Residential Care Services
- Community cafes and support groups
- Social Care Services
- GP Carers Register
- Training or learning – courses and social activities
- Adult and Child Protection Services
- Carer registration cards
- Emergency Social Work Services
- Emergency and future planning
- Information and Advice Services
- Handyman and laundry

## 6. Wellbeing indicators

6.1 Wellbeing indicators are set out below for both adult carers and young carers

### 6.1.1 **Adult carers**

Adult carers will be assessed on the indicators as set out in the local eligibility criteria. The quality of life indicators are:  
health and wellbeing, relationships, living environment, employment and training, finance, life balance and future planning.

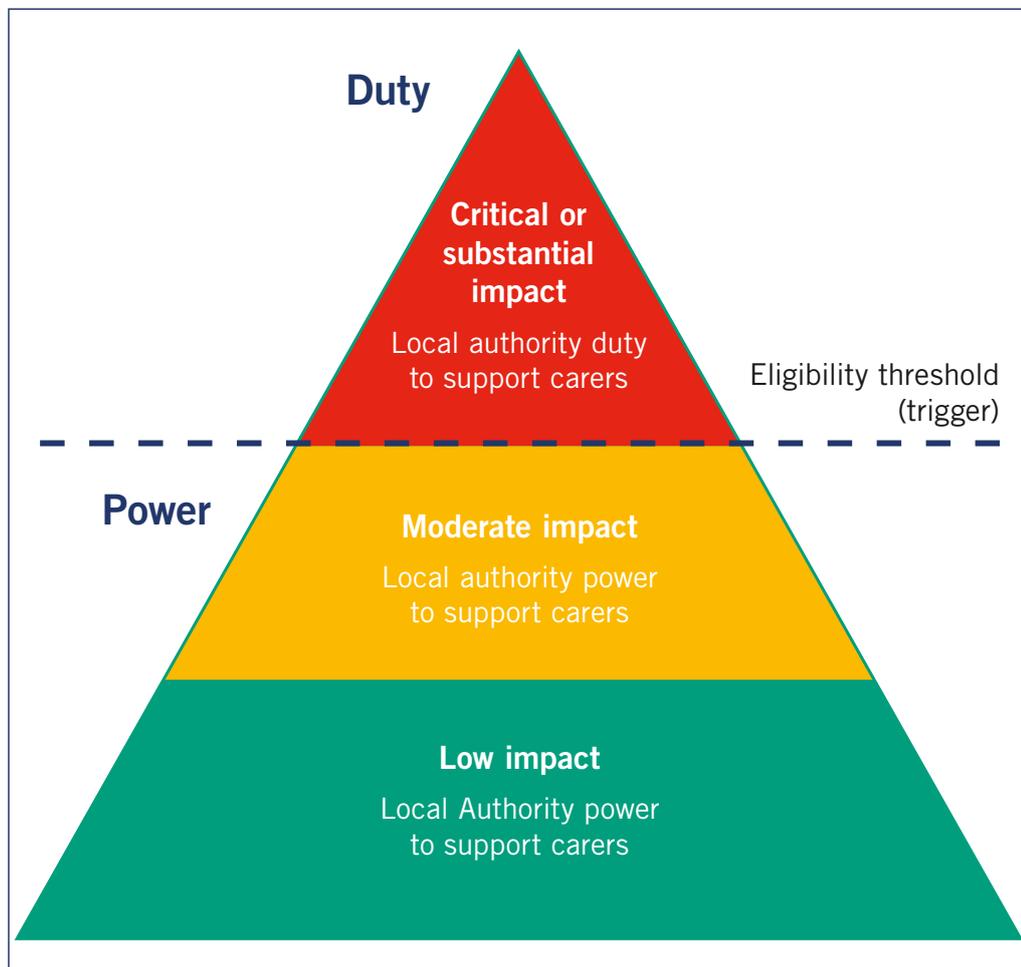
6.1.2 The right level and type of support if achieved would reduce the impact of caring and the associated risks which will allow the carer to continue in their caring role if they so wish.

### 6.1.3 **Young carers**

Young carers will be assessed on the indicators as set out in the local eligibility criteria. The wellbeing indicators for young carers are:  
safe, healthy, achieving, nurtured, active, responsible and included.

6.1.4 Young carers' personal outcomes should link with and support the achievements of the child's potential in relation to the eight wellbeing indicators of GIRFEC. The HSCP works to improve outcomes for young carers focussing on all the factors that contribute to their wellbeing.

- 6.2 Carers' assessed needs and personal outcomes will be recorded against the criteria in the four categories as part of the ACSP or the YCS.
- 6.3 Carers in South Lanarkshire have stated that support should be prioritised for them if their own health and wellbeing is detrimentally being affected through the caring role.
- 6.4 The sections in the appendices showing 'needs met' to the carer is self-explanatory. Carers may move across the thresholds at different stages of their caring 'journey'. It must be noted that the eligibility criteria is only a guide for staff in recording the level of support need a carer has; carers do not need to fulfil all sections in each category to be eligible for support and indeed, needs fluctuate. Any support offered is as a result of the carer's individual needs recorded through the professional assessment of need.
- 6.5 Diagram illustrating how eligibility criteria may be applied



- 6.6 Refer to Appendix 2 for the table of wellbeing indicators for adult carers and Appendix 2a for adult carers case studies. Refer to Appendix 3 for the table of wellbeing indicators for young carers and Appendix 3a for young carers case studies.
- 6.7 **Critical or substantial impact**  
Integrated authority provides for “eligible needs”, carer can choose SDS options.
- 6.7.1 Carers with critical and substantial needs may also get some of their needs met by a carers’ centre and other voluntary, charitable or third sector organisations.
- 6.8 **Moderate impact**  
Integrated authority commissions community supports and carer services which are provided on a preventative basis.
- 6.8.1 Services are developed according to local need. This may include services such as breaks from caring, peer support, advocacy and counselling.
- 6.9 **Low impact**  
Integrated authority supports information and advice services for carers and other universal, community supports.
- 6.9.1 This may include access to a local carers centre, peer support, training and signposting to social and leisure opportunities.
- 6.10 Resources are finite for both the HSCP and third sector organisations and in developing the model of support for carers in South Lanarkshire we need to ensure those most requiring support access a resource appropriate to their needs.
- 6.11 The principle of the Act is to provide preventative support to carers to support them in their caring role. This is where the term ‘replacement care’ may be considered in supporting carers through a short break in their caring role. Replacement care may be needed to allow the carer to have a break from providing care. Replacement care may be provided by a family member or a friend but it could also be provided and funded by the HSCP if the carer is eligible for support as detailed in the top tier of the triangle.

## 7. Meeting carers needs through the provision of support

7.1 Examples of types of support shows the ways in which a carer's identified needs can be met.

Type of support	Illustrative examples
Services or assistance to the cared-for person (except 'replacement care')	<ul style="list-style-type: none"> <li>• care at home</li> <li>• technology enabled care</li> <li>• equipment and adaptations</li> <li>• mental health services</li> <li>• medicine management</li> <li>• support to access activities for children affected by disability</li> </ul>
General services – information and advice	<p>Information and/or advice on:</p> <ul style="list-style-type: none"> <li>• carers' rights</li> <li>• education and training (e.g. on support at school, advice on Further and Higher Education)</li> <li>• income maximisation</li> <li>• carer advocacy</li> <li>• health and wellbeing</li> <li>• bereavement support</li> <li>• emergency care planning and future care planning</li> </ul>
Other general services – available universally in the community or in particular neighbourhoods.	<ul style="list-style-type: none"> <li>• leisure centres</li> <li>• libraries /art galleries</li> <li>• community transport</li> <li>• lunch clubs</li> <li>• youth clubs</li> <li>• education services</li> <li>• gardening or walking clubs</li> <li>• local support groups</li> </ul>

Type of support	Illustrative examples
<p>A carer's identified needs – both eligible or non-eligible needs – might be met in whole or in part by any combination of services or assistance for the cared-for person or general services above. Where they are not, the following applies:</p>	
<p>LA duty at section 24(4)(a) to provide support to meet a carer's eligible needs. This can be any type of carer support that is not, or cannot be, provided through services for the cared-for person or services that are available generally.</p>	<ul style="list-style-type: none"> <li>• course on emotional wellbeing</li> <li>• counselling</li> <li>• training on moving and handling</li> <li>• short break (noting LA duty at section 25 to consider whether support to a carer should include a break from caring)</li> <li>• replacement care (care for a cared-for person to allow their carer to take a break)</li> <li>• support to access leisure pursuits</li> </ul>
<p>LA power at section 24(4)(b) to provide support to meet a carer's non-eligible needs. Again, this can be any type of carer support not covered by services for the cared-for person or general services above.</p>	
<p>Under both the duty and power to support carers (at section 24(4) (a) and (b)) the responsible HSCP must give the carer the opportunity to choose one of the options for SDS (unless the HSCP considers that the carer is ineligible to receive direct payments).</p>	

## 8. Identification/request for support

- 8.1 The process begins when either a carer is identified from involvement with the cared for person or when a carer self identifies seeking help from Social Work Resources or a third sector organisation or for a young person or child a community worker (Teacher, Social Worker, youth etc.) or the child themselves makes a referral. Appendix 1
- 8.2 A carer can be supported to complete either an ACSP or an YCS. This will mean having an effective conversation between the carer and a practitioner (Social Worker/Carer Support Worker) focused on the health and general wellbeing of the carer. Following this stage a carer may not have eligible needs (critical or substantial) but may require some advice and guidance or access to community based preventative services (low or moderate needs).
- 8.3 When an ACSP or YCS is complete, it will have identified carer's outcomes. At this stage the good conversation continues around how these outcomes can be achieved and also how we will use the framework for eligibility criteria to identify a level of support if required.

## 9. Application of the eligibility criteria

- 9.1 Where a carers risk are in the substantial or critical category the legal duty of the HSCP to provide funded support is triggered.
- 9.2 If the risks are either no, low or moderate the eligibility criteria to trigger supports as a power becomes a consideration and that discretionary power should be used.
- 9.3 Each carer who requests and/or agrees to have either an ACSP or YCS will be assessed on their own merit taking into account the risks and impacts as discussed in their assessment conversation.

### 9.4 Examples of applying the eligibility criteria

#### 9.4.1 Young carer

A young carer lives with their Grandma who is becoming frail through a progressive illness and is requiring more care. The young carer is now undertaking more household tasks, which impacts on their overall health and wellbeing, schooling and leisure time. The young carer is also cooking meals, which poses a significant risk due to the young carer's age and level of maturity. The YCS identifies the young carer's needs and those, which are eligible to be met. One such need is support with meal preparation/cooking. Applying the eligibility criteria, this need is identified under 'living environment' for the young carer, categorised as a substantial risk. The young carer is therefore eligible for support from the HSCP to minimise this risk.

#### 9.4.2 Adult carer

An adult carer contacts their local carers' centre for some support having not previously accessed any services. He cares for his wife who has recently developed Dementia. He is supported by his daughter but feels he would benefit from some of the services the local carers' centre can offer (such as Dementia Skills Training and carers' support groups). He also feels in need of a break from caring. The carers' centre identifies his needs and those which are eligible to be met; these are moderate needs and the carer feels able to continue in his caring role with the support of the carers' centre. The carer would not be eligible for a break funded by the HSCP as his needs are moderate. His needs are not substantial/critical at this point but he may be eligible for a break through the carers' centre.

## 10. Support arrangements

- 10.1 If the carer has identified outcomes that meet the eligibility criteria threshold they will be informed of the options they have going forward. The level of support available will be explained and the carer will be informed of any available resources.
- 10.2 With the level of support agreed (critical or substantial) it is at this stage the carer will then decide what SDS option would work best for them and how they would prefer to arrange any support.

- 10.3. Carers will be fully involved in each of the stages above and will be informed throughout the application of eligibility.
- 10.4 Carers must have as much involvement as they wish in relation to the provision of support or services, a co-produced assessment is required.
- 10.5 If the carer has triggered “eligible needs” at critical or substantial they must be given the opportunity to choose from the four SDS options provided for in the Social Care (Self-Directed Support) (Scotland) Act 2013, unless they are deemed to be ineligible under the terms of the legislation.
- 10.6 Carers whose needs are identified as low or moderate should be signposted to appropriate carer or condition specific organisations (see contact details) or for more information go to South Lanarkshire Carers and Caring.
- 10.7 Examples of how carers may use these options to meet their eligible needs can be seen in the case studies at Appendices 2a and 3a.

## **11. Further information**

- 11.1 The carer is entitled to have a copy of their support plan. The carers’ conversation with their wishes should be recorded on the plan with confirmation that the carer has a copy of the plan.
- 11.2 Carers should be directed to any or all the third sector organisations by their professional workers to maximise their knowledge and opportunity to access appropriate supports and services.
- 11.3 Demands on carers can change both unexpectedly and quickly, eligible needs may change to reflect the carers change in circumstances.

## **12. Procedure to review decision of “eligible needs” outcome**

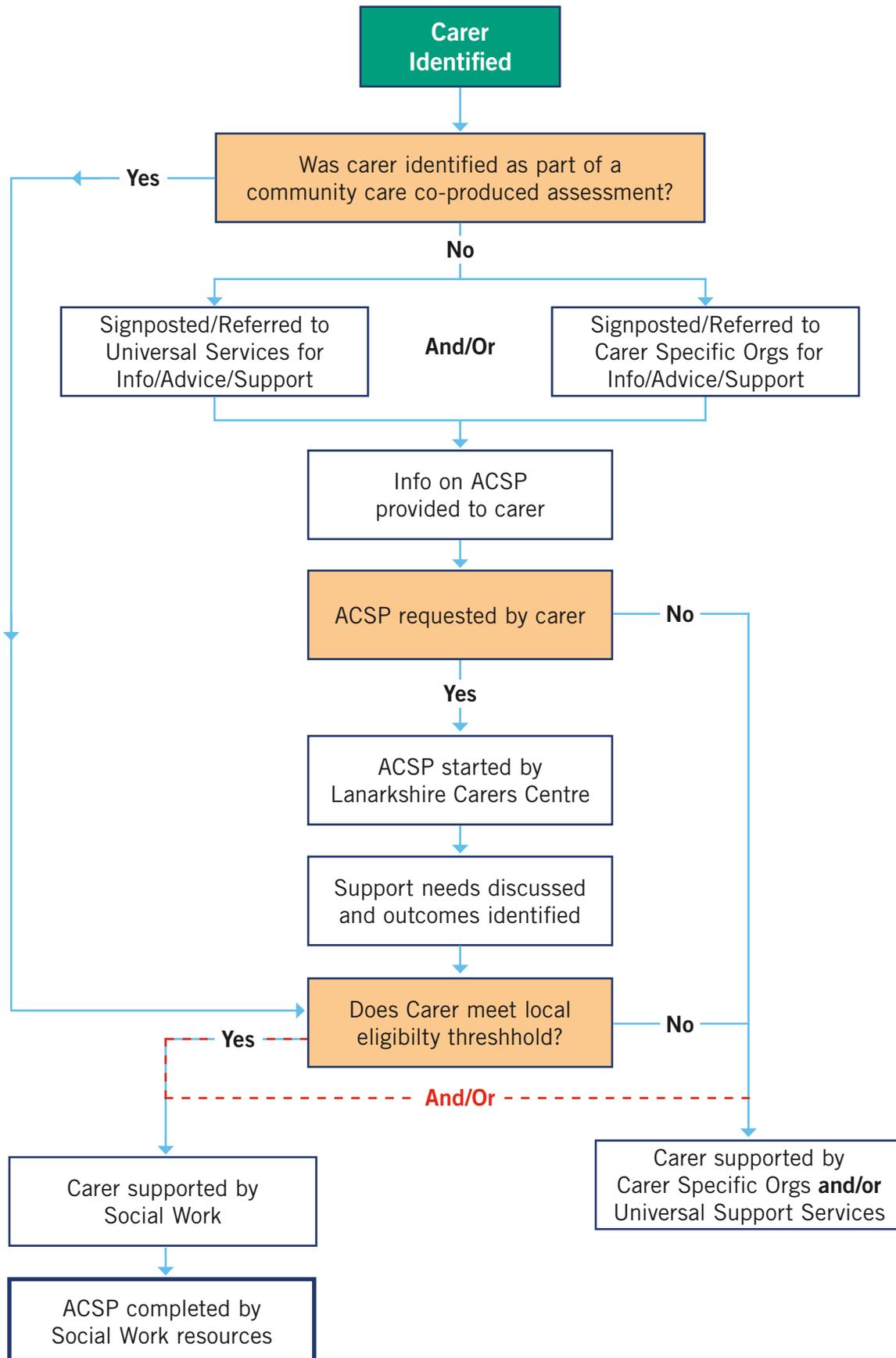
- 12.1 Should a carer be dissatisfied with any decision on whether their needs meet the eligibility criteria, they should follow the process: [Comments, compliments and complaints procedure](#).

## **13. Reviewing this process**

- 13.1 The local eligibility criteria will be critically assessed and a review will take place one year after the date of publication.

## Appendix 1

### South Lanarkshire's proposed referral pathway for adult carers



## Appendix 2

### Adult carer eligibility indicators table

Caring has no impact	Caring has low impact	Caring has moderate impact	Caring has substantial impact	Caring has critical impact
Eligibility <b>power</b> to offer support			Eligibility <b>duty</b> to offer support	
<b>Adult carers – health and wellbeing</b>				
Carer in good health	Carer's health beginning to be affected	Carer's health at risk without intervention	Carer has health need that requires attention	Carer's health is breaking/has broken down
Carer has good emotional wellbeing	Caring role beginning to have an impact on emotional wellbeing	Some impact on carer's emotional wellbeing	Significant impact on carer's emotional wellbeing	Carer's emotional wellbeing is breaking/has broken down
<b>Adult carers – relationships</b>				
Carer has a good relationship with the person they care for and is able to maintain relationships with other key people in their life	Carer has some concerns about their relationship with the person they care for and/or their ability to maintain relationships with other key people in their life	Carer has identified issues with their relationship with the person they care for that need to be addressed and/or they find it difficult to maintain relationships with other key people in their life	The carer's relationship with the person they care for is in danger of breaking down and/or they no longer are able to maintain relationships with other key people in their life	The carer's relationship with the person they care for has broken down and their caring role is no longer sustainable and/or they have lost touch with other key people in their life
<b>Adult carers – living environment</b>				
Carer's living environment is suitable posing no risk to the physical health and safety of the carer and cared-for-person	Carer's living environment is mostly suitable but could pose a risk to the health and safety of the carer and cared-for-person in the longer term	Carer's living environment is unsuitable but poses no immediate risk	Carer's living environment is unsuitable and poses an immediate risk to the health and safety of the carer and/or cared-for-person	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
<b>Adult carers – employment and training</b>				
Carer has no difficulty in managing caring and employment and/or education	Carer has some difficulty managing caring and employment and there is a risk to sustaining employment and/or education in the long term	Carer has difficulty managing caring and employment and there is a risk to sustaining employment and/or education in the medium term	Carer has significant difficulty managing caring and employment and there is a risk to sustaining employment and/or education in the short term	Carer has significant difficulty managing caring and employment and/or education and there is an imminent risk of giving up work or education
Carer does not want to be in paid work or education	Carer is not want to be in paid work or education but would like to be in the long term	Carer is not in paid work or education but would like to be in the medium term	Carer is not in paid work or education but would like to be soon	Carer is not in paid work or education but would like to be now

Caring has no impact	Caring has low impact	Caring has moderate impact	Caring has substantial impact	Caring has critical impact
Eligibility <b>power</b> to offer support			Eligibility <b>duty</b> to offer support	
<b>Adult carers – finance</b>				
Caring is not causing financial hardship, for example carer can afford housing costs and utilities	Caring is causing a risk of financial hardship, for example some difficulty meeting housing costs and utilities	Caring is causing some detrimental impact on finances, for example difficulty meeting either housing costs <b>or</b> utilities	Caring is having a significant impact on finances, for example difficulty meeting housing costs <b>and</b> utilities	Caring is causing severe financial hardship, for example carer cannot afford household essentials and utilities, not meeting housing payments
<b>Adult carers – life balance</b>				
Carer has regular opportunities to achieve the balance they want in their life	Carer has some opportunities to achieve the balance they want in their life	Due to their caring role, the carer has limited opportunities to achieve the balance they want in their life	Due to their caring role, the carer has few and irregular opportunities to achieve the balance they want in their life	Due to their caring role, the carer has no 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	They have access to a choice of breaks and activities which promote physical, mental, emotional wellbeing	They have little access to breaks and activities which promote physical, mental, emotional wellbeing	They have no access to breaks and activities which promote physical, mental, emotional wellbeing	They have no access to breaks and activities which promote physical, mental, emotional wellbeing
<b>Adult carers – future planning</b>				
Carer is confident about planning for the future and has no concerns about managing caring	Carer is largely confident about planning for the future but has minor concerns about managing caring	Carer is not confident about planning for the future and has some concerns about managing caring	Carer is anxious about planning for the future and has significant concerns about managing caring	Carer is very anxious about planning for the future and has severe concerns about managing caring

## Appendix 2a

Caring has no impact	Category 1 Caring has low impact	Category 2 Caring has moderate impact	Category 3 Caring has substantial impact	Category 4 Caring has critical impact
Needs met	Low level needs	Moderate level needs	Substantial level needs	Critical level needs

### Case studies – adult carers

**Needs met** – A carer supports her husband who has a diagnosis of Chronic Obstructive Pulmonary Disease (COPD). This is a recent diagnosis. The carer's husband's breathing is affected through exertion and in walking, particularly if ascending the stairs. The carer has supported her husband in applying for the benefits he is entitled to and as a couple they have had their income maximised through the Money Matters Advice Service. She continues to work and her health and wellbeing are not affected. She provides minimal support to her husband with daily living tasks and so feels her needs are met.

**Low level needs** – A carer supports her son who has a history of substance misuse; he also experiences anxiety and depression. He lives on his own and has some support from the Substance Misuse Team. The carer provides a high level of emotional support but telephones a local carers' organisation to ask about support for carers whose families are affected by substance misuse. The carer is informed about Addaction (a 'condition specific' organisation that supports people affected by substance misuse and their families). The carer makes contact with Addaction and begins to feel better supported through the specialist skills and knowledge of the Support Workers.

**Moderate level needs** – A carer has a young daughter with Cerebral Palsy. The carer is profoundly deaf. She works part-time and so her income is limited. She wishes to attend a training course on postural care offered through her local carers' centre but she will require a British Sign Language (BSL) Interpreter to meet her own needs. She contacts the carers' centre and they arrange to fund and arrange this support so that she can access the course. Follow-up support is offered through an ACSP to identify any other needs she may have.

**Substantial level needs** – A carer supports her son who has a profound and multiple learning disability. Her son reaches adulthood and the carer feels that she needs to provide more support in the week now as her son is no longer accessing school. The carer's husband works away during the week. She can only provide more support by reducing her hours at work; she already works part-time. She does approach her employer who offers her a more flexible working arrangement and at the same time she has her own income maximised by the Money Matters Advice Service in light of the reduced hours. The carer feels tired and exhausted at times and feels she is juggling too much. The carer approaches the Social Work Department to have her own needs assessed as a carer. An ACSP is completed and the carer is awarded her own budget to spend in such a way that this will benefit her (towards achieving good 'outcomes'). The carer feels that a regular break in caring will be of benefit and she decides with her own budget to opt for a Direct Payment to pay an agency of her choice to provide additional paid support in the house. This will be on a regular basis once a month to allow her time away from her caring responsibilities.

**Critical level needs** – A carer approaches the Social Work Department to have her needs assessed as she supports her father who has Parkinson's Disease. He has gradually become frailer and a substantial care package has been put in place to support him to remain independent within his own home. His daughter (the carer) is at her father's house each day assisting with personal care and most aspects of daily living when the paid carers are away. This has a huge impact on her own life; her health and wellbeing. She has been trained to use the hoist and provides a significant level of practical care. She is offered a budget to spend against her assessed, eligible needs and she feels a break will help to 'sustain' her in her caring role. She decides to use her budget to have a break from providing care. To allow her to get away, her sister agrees to come and stay with her father, thus allowing the carer to take a paid break awarded by the HSCP and offered through the SDS funding options.

## Appendix 3

### Young carer eligibility indicators table

Caring has no impact	Caring has low impact	Caring has moderate impact	Caring has substantial impact	Caring has critical impact
Eligibility <b>power</b> to offer support			Eligibility <b>duty</b> to offer support	
<b>Young carers – healthy</b>				
There are no identified medical needs  Young carer is in good physical health Young carer has good emotional wellbeing	Young carer is able to manage some aspects of caring roles  There is a possibility of the young carer's health being affected	Young carer is able to manage some aspects of caring/ family roles and responsibilities  The young carer's role is beginning to have an impact on their physical or emotional wellbeing	Young carer is having difficulty managing aspects of their caring/ family/domestic and social roles  Young carer has physical and mental health needs that requires attention	The young carer has significant physical and mental health needs that require attention due to the impact of caring which may cause serious harm to them
<b>Young carers – safe</b>				
Young carer is free from abuse, neglect or harm in their community, at home and at school	Young carer's situation in their community, at home and at school is currently stable and manageable although there may be some minor concerns	Young carer's situation is not ideal and there is potential of risk to either the young carer or the cared-for-person	Young carer's situation at home or in the community is not ideal and there are safety risks which cannot be remedied in the short term	Young carer's situation at home is unsuitable and there are significant safety risk for either the young carer or the cared-for-person
<b>Young carers – nurtured</b>				
Young carer has positive emotional wellbeing. Their environment is nurturing with positive relationships with professionals and the cared-for-person  The young carer is part of an extended family who offer respite and support  The young carer does not require additional help	Young carer beginning to feel the impact of caring on their emotional wellbeing  The young carer has some extended family who offer respite and support from time to time  Young carer may occasionally require additional help	The young carer's wellbeing and/or relationship with the cared-for-person is becoming strained and impacts on the young carer and or the cared-for-person  The young carer has few extended family who offer respite and support from time to time  Young carer needs where possible additional help in a suitable care setting	The young carer's wellbeing is being majorly impacted on a daily basis, this additionally impacts on the cared-for-person  The young carer has some extended family who are not able to offer respite and support  Young carer is unable to sustain many aspects of their caring role	The relationship between the young carer and their cared-for-person has completely broken down  The young carer has no extended family who are able to offer respite or support  Intervention or input is required for the young carer's wellbeing. There are no positives in the relationship with the cared-for-person

Caring has no impact	Caring has low impact	Caring has moderate impact	Caring has substantial impact	Caring has critical impact
Eligibility <b>power</b> to offer support			Eligibility <b>duty</b> to offer support	
<b>Young carers – responsible</b>				
Young carer is regularly heard and involved in decision making	The young carer has some opportunities to be heard	The caring roles means the young carer has limited opportunities to be heard	The young carer has few and irregular opportunities to be heard due to their caring role	The young carer has no opportunities to be heard or involved in decisions that have an impact on them
Young carer takes an active and responsible role to be involved in those decisions that impact on them	Young carer is sometimes able to take an active and responsible role to be involved in those decisions that impact on them	The young carer has limited opportunities to be involved in the decisions that impact on them	The young carer has few and irregular opportunities to be involved due to their caring role	
<b>Young carers – included</b>				
The young carer is free from financial worries	The young carer is at small risk of financial stress	Caring is causing the young carer to feel limited acceptance in their community	The young carer feels isolated and does not feel confident in their community	The young carer does not feel accepted in the community they live in
Young carer is part of their community and able to join in community activities	Young carer unsure how to access community activities although feels accepted in community	Risk of financial pressure on the young carer	The young carer needs financial support	The young carer is in financial hardship and their financial position is severe
<b>Young carers – active</b>				
The young carer has regular opportunities to take part in sport, recreation or activities at home and in their community	The young carer has some opportunities to take part in sport, recreation or activities at home and in their community	The young carer has limited opportunities to take part in sport, recreation or activities at home and in their community	The young carer has few or irregular opportunities to take part in sport, recreation or activities at home and in their community	Due to their caring role, the young carer has no opportunities to take part in sport, recreation or activities at home and in their community
			This may have negative effects on their healthy growth and development	This has a negative effect on their healthy growth and development
<b>Young carers – achieving</b>				
Young carer is able to access education and/or training	There is a small risk to sustain education and/or training in the long term	There is a risk to sustaining education and/or training in the medium term	Young carer is missing education or training	The young carer is at significant risk of their education or training ending
Young carer has no difficulty managing caring and their education	Young carer has some difficulty managing caring and their education	Young carer has difficulty managing caring and their education	Young carer is at risk of their education and/or training ending in the near future	The young carer has had to give up their education or training

## Appendix 3a

Caring has no impact	Category 1 Caring has low impact	Category 2 Caring has moderate impact	Category 3 Caring has substantial impact	Category 4 Caring has critical impact
Needs met	Low level needs	Moderate level needs	Substantial level needs	Critical level needs

### Case studies – young carers

**Needs met** – A young carer who is 12 years old (female) has a Mum who has Multiple Sclerosis and uses a wheelchair. The house is suitably adapted. The young carer’s Dad supports his wife with certain aspects of her personal care (such as washing and dressing) but on occasions the young carer will also provide some support in the home, particularly when her Dad is not there such as helping with household tasks and with some elements of personal care. The support provided is minimal as the young carer’s Mum is very independent and is well supported by her husband. The young carer provides care on a regular basis but this impacts very little on her overall wellbeing.

**Low level needs** – A young carer, aged 15 lives with his parents and his younger sister, aged 10 who has Down’s Syndrome. The young carer provides care to his sister on a regular basis by supervising her, assisting with some elements of personal care (for example: eating and drinking) and with mobility issues. Though the young carer has a good relationship with his sister, he sometimes feels ‘neglected’ in the family home because of the attention his sister needs; he is sometimes asked to supervise her when he would like to be out with friends and in this sense ‘caring’ impacts on him socially and emotionally though the caring ‘tasks’ are manageable. At school, he listens to a talk on ‘Young Carers’ provided by the South Lanarkshire Young Carers Service and decides to let his Guidance Teacher know he is a young carer so that he might access any activities to support him in his role. He feels better supported through the school.

**Moderate level needs** – A young carer is 17 and lives with his Mum and his sister. His Mum’s mental health fluctuates and she experiences low moods/depression. His sister, aged 13 has Spina Bifida and requires a significant level of support with elements of personal care, which he supports his Mum with. The young carer worries about the impact of providing care on his Mum and money is an issue as his Mum is unable to work. He feels under pressure in juggling school work with caring tasks as well as “being there” for his Mum. School attendance and grades have suffered as a result and inviting friends round to the house can cause added anxiety to the young carer. Through his sister’s Social Worker, the young carer is told about the Young Carers Service at South Lanarkshire Council. A referral is made to the service and he is supported through a YCS, which results in accessing Universal Connections, a holiday grant through Lanarkshire Carers’ Centre and a referral to Adult Services for his Mum (with her permission).

**Substantial level needs** – A young carer, aged 14 lives with his Mum and Dad. His Dad has a history of alcohol abuse, which often results in verbal aggression towards the young carer and his Mum. The young carer provides ‘care’ to his Mum as she has mental health problems (anxiety, depression and agoraphobia). The young carer’s ‘caring tasks’ impact on many areas of his wellbeing. A referral is made to Social Work Resources via his Guidance Teacher after a period of arriving late at school and sustained absences. The young carer is offered a YCS, immediately resulting in having an allocated worker from the Young Carers Service to address some of the young carer’s presenting needs as well as access to Universal Connections.

**Critical level needs** – A young carer, aged 14 provides care to her Mum who has terminal cancer. The young carer and her Mum are referred to The Haven’s Children and Family Service for support as a result of having had a Young Carer Statement completed. The young carer is struggling emotionally and begins to self-harm on a regular basis. This results in a referral to the Child and Adolescent Mental Health Service (CAMHS). The emotional and practical impact of providing care to her Mum is putting the young carer under a huge amount of pressure. A referral is made to Social Work for a home care package to alleviate the caring role and the young carer is supported through CAMHS and The Haven. She also accesses Universal Connections to give her some ‘time out’.

## Contact details

### **South Lanarkshire Council Social Work Resources**

(Local Offices in Hamilton,  
East Kilbride, Lanark and Cambuslang):  
Phone: 0303 123 1008

### **South Lanarkshire Young Carers Service**

Phone: 0303 123 1008

### **Lanarkshire Carers Centre**

Unit 1a Princes Gate  
60 Castle Street  
Hamilton  
ML3 6BU  
Phone: 01698 428090  
Email: [info@lanarkshirecarerscentre.org.uk](mailto:info@lanarkshirecarerscentre.org.uk)

### **South Lanarkshire Carers Network**

65 Bothwell Road  
Hamilton  
ML3 0DW  
Phone: 01698 285163  
Email: [info@slcn.co.uk](mailto:info@slcn.co.uk)

### **Take Control South Lanarkshire**

(Independent organisation to support  
self-directed support)  
42 Campbell Street  
Hamilton  
ML3 6AS  
Phone: 01698 892372  
Email: [infosl@takectrl.org.uk](mailto:infosl@takectrl.org.uk)

### **Voluntary Action South Lanarkshire (VASLAN)**

155 Montrose Crescent  
Hamilton  
ML3 6LQ  
Phone: 01698 300390  
Email: [office@vaslan.org.uk](mailto:office@vaslan.org.uk)

If you need this information in another language or format,  
please contact us to discuss how we can best meet your needs.

Phone: 0303 123 1015

Email: [equalities@southlanarkshire.gov.uk](mailto:equalities@southlanarkshire.gov.uk)

[www.southlanarkshire.gov.uk](http://www.southlanarkshire.gov.uk)

# unpaid carers

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