Carers (Scotland) Bill

Social Work Scotland

Social Work Scotland welcomes the opportunity to provide written evidence to the Health and Sport Committee on the Carers Scotland Bill - introduced to Parliament on 9th March 2015.

Social Work Scotland (formerly the Association of Directors of Social Work- ADSW) is the leadership organisation for the social work profession in Scotland.

Background: the Scottish Government intends that Scotland’s estimated 745,000 adult carers and 44,000 young carers should be better/ more consistently supported, allowing them to continue to care, if they so wish, in good health and to have a life alongside caring. In relation to young carers, the intention is also that they should have a childhood similar to their non-carer peers.

Response questions:

(responses include information on issues that require further consideration)

1. **Do you support the Bill?**

   1.1 Social Work Scotland has significant concern over the potential costs of implementing the legislation as its stands and the impact upon other service provision within a context of declining local authority resources.

   1.2 There is a duty under Part 2 of the Bill concerning the preparation of Young Carers Statements (YCS) for all person’s identified as carers and for those who request a statement. This part also gives power to Ministers to make regulations about the identification of young person’s personal outcomes (currently as outcomes which would support continuation of caring role); includes a prescribed form and content for assessment, support plans and reviews. Social Work Scotland is concerned that the Ministerial power to re-define personal outcomes could effectively result in a duty for councils to consider any outcome (including those not related to the caring role at all) in carers assessments and support plans. This will raise expectations/ potentially cause tensions with eligibility criteria (insofar as carers may expect access to services and support to pursue their own life aims, where those types of needs may not meet eligibility criteria).

   1.3 It is not consistent with’ Getting it Right for Every Child’ to introduce support plans (instead of assessments) and statements that are separate from and sit alongside the integrated processes which have we been developing as part of GIRFEC. The proposals
in the Bill run counter to long term policy goals to integrate planning processes for young people.

1.4 It requires local authorities to extend carers assessments (now ACSPs) to situations where the cared-for person is not known to social work services and is not eligible for community care services. This seems too prescriptive and may prevent councils’ from developing processes for carers in line with local arrangements for Self Directed Support. Furthermore, we are of the view that, whilst we support the emphasis on reviews, the timescales for review should be a matter for guidance rather than legislation.

1.5 There are a number of unresolved issues around costs relating to implementation- including extension of the duty to provide a carer’s assessment; additional assessment time (the ‘Adult Carer Support Plans’ (ACSP)); supporting both existing and new carers.

1.6 Social Work Scotland supports measures that will increase the uptake of carer’s assessments in principle but we have a continuing concern relating to the change of title from ‘assessment’ (which gives consideration as to whether there is eligible need) to ‘plan’ (which assumes eligible need).

1.7 The Bill moves away from the ‘regular and substantial’ test and extends duties on assessment to cover all carers. Whilst we understand the preventative intention here, we do not feel that this is realistic and will divert resources away from situations where a high level of need has been established.

1.8 We also have concerns about the stated duty to provide an Adult Carer Support Plan for all carers irrespective of the level of care they provide. This will raise expectations amongst carers, including those who may go through assessment but may not be deemed eligible for support. It is questionable whether best value for money can be achieved through investment in many additional assessments that are unlikely will result in support and which will divert resources from funding actual service provision. Social Work Scotland is informed that many carers report that if their needs are adequately considered in the cared-for person’s assessment, then they do not feel it necessary to seek a stand-alone assessment. It is not clear that the factors underpinning the low-up take up of carer’s assessments has been properly researched. If engaging with carers, assessing, planning and providing support is dealt with as a bureaucratic, stand-alone exercise then the activity will fail to recognise changing needs.

1.9 This also appears to run counter to other strands of policy, which are moving towards engagement and an outcomes
focus, encouraging independence and community capacity building.

1.10 There are issues on how best to assess/support family carers who are also paid to provide support under Self Directed Support legislation (Option 1.) There requires to be a full and frank discussion about how this will be addressed within accompanying guidance.

1.11 The above issues have resource implications and we are concerned that additional funding will not be available to meet the new duties to support carers and to ensure resources are available to meet the anticipated expansion in assessment and support plan duties. Any costs for waiving charges must be legally competent and should be met in full by the Scottish Government (these concerns will be reflected in the response to the Financial Memorandum).

1.12 Where discussions with carers do not lead to an assessment then it seems reasonable that this decision is recorded. The anticipated Carer’s Rights Charter will further progress this area.

1.13 A duty on short breaks requires that councils consider whether short breaks would be an appropriate form of support and publish information on what provision is available locally (subject to eligibility). This provision has been amended and Social Work Scotland supports this change.

2. What do you feel would be the benefits of the provisions set out in the Bill?

1.1 As stated in previous returns, Social Work Scotland acknowledges the crucial role that unpaid carers have in supporting family members, friends and neighbours. We support measures that improve identification of carers requiring support, better provision of support and plans to ensure carers are fully involved in decisions affecting their lives and those they care for. As stated above, additional support must be properly funded.

1.2 Social Work Scotland is supportive of measures that strengthen transition planning for young people. The Bill requires that a YCS remains in place once a young carer reaches 18 years of age until an ACSP is in place. It is unclear how any increase in demand for services stemming from this measure will be resourced. It is also unclear what expectation there is upon LAs to continue to implement a YCS after aged 18 years if no further support is deemed necessary.

3. How do you feel the Bill could be amended or strengthened?
3.1 Part 2 places a duty on the responsible authority (where the carer resides) for meeting costs for carer support which could potentially be a different authority from the one assessing and providing for the supported person’s needs – i.e. when the cared for and caring individuals reside in different areas. The responsible local authority is also responsible for arranging the ACSP or YCS and for meeting costs of the support provided.

Currently, when carer and cared for person reside in different areas, a local agreement between councils is reached. This provision restricts local authorities’ ability to agree flexible arrangements. Social Work Scotland would be concerned if one council could make independent decisions about another’s expenditure as this seems to contradict the principles of local democratic accountability.

4. **Is there anything that you would add to the Bill?**

4.1 A carer is defined as someone who provides or intends to provide care for another individual without qualification that the carer provides ‘a substantial amount of care on a regular basis. The ‘regular and substantial’ test for carers no longer applies.

We are of the view that the definition of carer should continue to be limited to those who provide, or intend to provide, ‘a substantial amount of care on a regular basis’ and a wider definition is necessary. Some third sector organisations may be able to provide support/preventative services for other carers with effective signposting.

4.2 Notwithstanding the establishment of joint bodies through the new legislation for the integration of health and social care, Social Work Scotland is of the view that there should be a specific reference in the Bill to the role of health professionals in identifying and signposting carers (otherwise this requirement on HBs will end following the withdrawal of Carer Information Strategies).

5. **Is there anything that you would remove from the Bill?**

5.1 Part 3 places a duty on local authorities to set local eligibility criteria to establish whether it is required to provide support to carers as defined in the ACSP or YCS. This is to be done in consultation with representatives of carers. Ministers are empowered to set national eligibility criteria (via subsequent regulation) if the local eligibility criteria appear not to be working.
We are aware that carers groups are lobbying for national eligibility criteria to be set from the start. We are of the view that the proposal for a Ministerial power to make regulations setting out national eligibility criteria should be dropped from the Bill as it erodes local democratic accountability for the best use of resources.

5.2 The Bill includes a duty on LAs to develop and publish a Young Carer Statement (YCS). We have similar concerns to those around Adult Carer Support Plans. In addition, there is a proposal that a YCS will remain in place after someone turns 18 years until the point that an ACSP is put in place. This could effectively extend eligibility for children / young person’s services in a way that will be difficult to predict and will place pressure on budgets. Holistic transition planning is most appropriate—undertaken as part of the wider Child’s Plan.

5.3 Part 4 gives a duty to local authorities and health boards to involve carers in service planning, excluding services set out in a children’s service plan under the 2014 Act or relating to functions included in an integration scheme (already being consulted on). Our view is that this is unnecessary as it is a duplication of the expectations within the Public Bodies Act regulations (which specifically names carers amongst groups that must be consulted with/ part of planning activities) and the Self-Directed Support Act (and supporting regulations) which also already contains duties on community involvement which would include carers. The local authority is also already required to take into account the views of the carer as far as is reasonable and practical in determining the needs of the cared for person in assessment process (via new sections of 1968 and 1995 Acts).

5.4 Local carer issues require to be considered flexibly and in an integrated fashion across wider strategic planning activities rather than through silo activities. As with all professional activities, planning is not a static process. Rather, it needs to evolve according to best and most current evidenced practice. Social Work Scotland believes it is not in the interest of best practice to include such a level of detail on carer strategies in primary legislation.

5.5 The duties regarding establishing and maintaining information and advice services for carers duplicates the duties within the Self Directed Support Act. Local determination is essential in order that best use is made of existing resources. Social Work Scotland suggests that there should be more emphasis on supporting and resourcing existing local carer support services and organisations—with new services only being ‘established’ when necessary. We are of the view that legislation is not required in this area.

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