

# LOCAL CARERS ELIGIBILITY CRITERIA

PERTH & KINROSS COUNCIL



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# 1. Introduction to the Eligibility Framework

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## Background

Unpaid carers<sup>1</sup> of all ages provide a vital contribution to society. It is important that carers have the opportunity to achieve a better life balance.

The Carers (Scotland) Act 2016 comes into force from 1 April 2018. It introduces new rights for unpaid carers of all ages. Adult carers have the right to have Adult Carer Support Plans. Unpaid carers are given the opportunity to define their own needs and personal outcomes and have a say on the support they need.

Before 1 April 2018	From 1 April 2018
Perth & Kinross Council has the power to provide support to all unpaid carers, but it does not have a legal duty to do so.	Perth & Kinross Council has the power to provide support to all unpaid carers <b>and</b> an additional legal duty to provide support to those unpaid carers whose caring responsibilities have a 'high' or 'very high' impact <sup>2</sup> on the carer.

This eligibility criteria framework sets out how a staff member and an unpaid carer will **agree** on the support given to that and whether the support is provided to the carer under a power to support or a duty to support by Perth & Kinross Council.

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<sup>1</sup> **Unpaid carers** are carers who do not provide care under a work contract or as voluntary 'work', regardless of whether they receive welfare benefits, pensions or income from another type of employment. If an individual looks after a family member, relative, friend or neighbour, they are likely to be an unpaid carer.

<sup>2</sup> The word '**impact**' is used in this framework to refer to the effect of caring on the carer *as well as* the carer's ability to sustain the caring role.

## 2. Definitions given under the Carers (Scotland) Act 2016

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### **Meaning of “carer”**

A “carer” means an individual who either currently provides care or intends to provide care for another individual. The cared-for person might be elderly, or might have an illness, disability, a mental health problem or a substance misuse problem.

### **Meaning of “adult carer”**

An adult carer is a carer who is at least 18 years old and not still at school.

Please see Appendix 1 (page 15) for the actual and full wording of these definitions under the Carers (Scotland) Act 2016.

### 3. Explaining the Assessment Process

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#### **Step One: Request an Adult Support Plan**

A carer who wishes to access support can be offered, or they request, an Adult Carer Support Plan.

#### **Step Two: Identify carers needs and personal outcomes**

The carer's needs and outcomes will be identified in the carer's Adult Carers Support Plan via conversations between a staff member and the carer.

#### **Step Three: Support is agreed between staff and carer**

Staff and the carer will agree on the type and level of support the carer needs to best achieve their personal outcomes.

#### **Step Four: Council provides support to carer**

If the caring situation has a high or very high impact on the carer, Perth & Kinross Council will have a duty to provide support to the carer. If the caring situation has low or moderate impact on the carer, Perth & Kinross Council will have power to provide support to the carer. Carers would, as a minimum, have access to universal services.

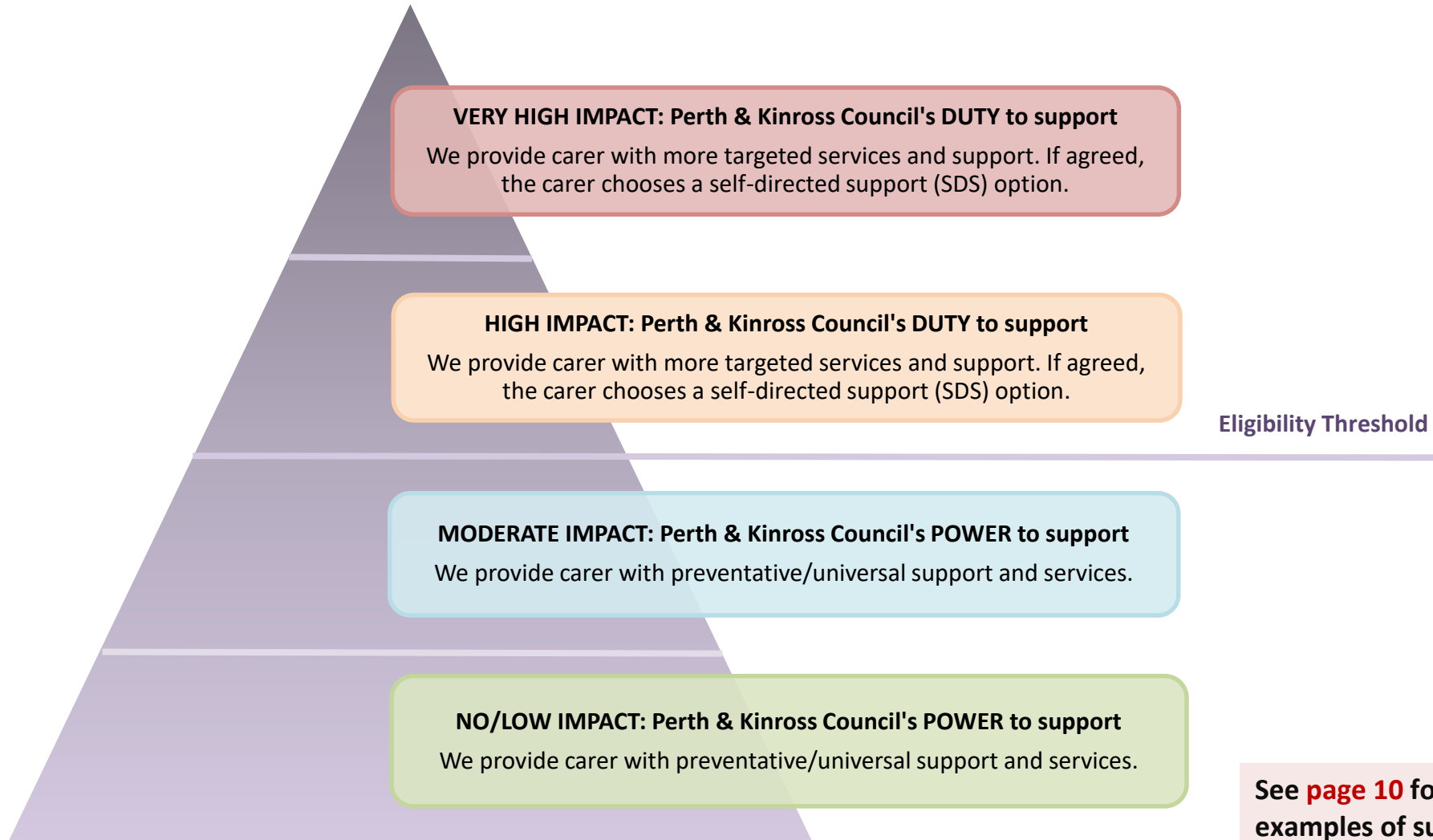
If 'Self-Directed Support' (SDS) is agreed to meet the support needs of the carer, the carer would choose from the four SDS options allowing them the choice to control, if they wish, how the money is spent on their support (please see footnote of page 10 for more information).

#### **Step Five: Setting a future review date of the assessment**

A review date for the Adult Carer Support Plan will be agreed between staff and the carer at this point.

## 4. Eligibility Thresholds: Overview of the Assessment

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See **page 10** for examples of support and services.

## 5. Eligibility Criteria Framework

	<b>POWER TO SUPPORT:</b> The carer can receive support through preventative or universal support and services		<b>DUTY TO SUPPORT:</b> The carer can receive self-directed support in addition to preventative/universal support	
	<b>NO/LOW IMPACT</b>	<b>MODERATE IMPACT</b>	<b>HIGH IMPACT</b>	<b>VERY HIGH IMPACT</b>
<b>PHYSICAL OR MENTAL HEALTH &amp; EMOTIONAL WELLBEING</b>	Caring has no/little effect on carer's health or wellbeing.	Caring is beginning to have a negative effect on carer's health and wellbeing. Carer's health could be at risk of some deterioration.	Caring has a negative effect on carer's health and wellbeing. Carer's health is at risk of significant deterioration.	Caring has a very negative effect on carer's health and wellbeing. Carer may be at risk of breakdown.
<b>RELATIONSHIP WITH CARED-FOR PERSON AND OTHERS</b>	Carer has a good relationship with the cared-for person. <b>And/Or</b> Carer mostly feels acknowledged and valued by health and social care professionals.	Carer's relationship with the cared-for person is beginning to have problems. <b>And/Or</b> Carer sometimes does not feel acknowledged and valued by health and social care professionals.	Carer finds some aspects of caring role difficult to sustain, and this has a negative impact on carer's relationship with the cared-for person. <b>And/Or</b> Carer does not feel acknowledged and valued by health and social care professionals.	Carer finds most or all aspects of caring role difficult to sustain. Carer's relationship with the cared-for person is at risk of breaking down or has already broken down. <b>And/Or</b> Carer feels isolated and excluded by health and social care professionals.
<b>EMPLOYMENT, EDUCATION, AND/OR TRAINING</b>	Carer is able to manage caring alongside work/studies. <b>Or</b> Carer does not want to be in paid work or education at the moment.	Carer is beginning to have difficulties managing caring with work/studies/training. <b>Or</b> Carer intends to be in paid work or education later.	Carer experiences difficulty in managing caring with work/studies, which is likely to be difficult to sustain. <b>Or</b> Carer wants to find paid work or education soon.	Carer is unable to manage caring alongside work/studies and faces an imminent risk of giving up work/studies, or has already given them up. <b>Or</b> Carer wants to be in paid work or in education now.

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	<b>POWER TO SUPPORT:</b> The carer can receive support through preventative or universal support and services		<b>DUTY TO SUPPORT:</b> The carer can receive self-directed support in addition to preventative/universal support	
	<b>NO/LOW IMPACT</b>	<b>MODERATE IMPACT</b>	<b>HIGH IMPACT</b>	<b>VERY HIGH IMPACT</b>
<b>FINANCES</b>	Caring has no/little negative effect on the carer’s personal or household finances.	Caring sometimes has a negative effect on the carer’s finances. There is a risk that the carer might start to experience difficulties in meeting basic costs of living.	Caring has a negative effect on carer’s finances. The carer is unable to meet some main basic costs of living.	Caring causes carer to have financial hardship. The carer is unable to meet basic costs of living and the risk of financial crisis is imminent.
<b>LIVING/CARING ENVIRONMENT</b>	Carer’s living environment or the place the carer provides care is usually suitable and poses no/little risk to the health and safety of the carer and/or cared-for person.	Carer’s living environment or the place the carer provides care is not always suitable and could pose a risk to the health and safety of the carer and/or cared-for person.	Carer’s living environment or the place the carer provides care is mostly unsuitable, and poses a risk to the health and safety of the carer and/or cared-for person.	Carer’s living environment or the place the carer provides care is very unsuitable, and poses a serious risk to the health and safety of the carer and/or cared-for person.
<b>LIFE BALANCE AND FUTURE PLANNING</b>	Carer is mostly satisfied with their life balance. Carer has plenty of opportunities to take breaks from caring and to take part in things they want. Carer feels supported and is able to plan their time and their future.	Carer sometimes feels they do not have life balance. Carer has some opportunities to take breaks from caring and to take part in things they want. Carer sometimes feels they lack support or people to turn to. Carer is sometimes able to plan their time but may be concerned about future plans.	Carer mostly feels they do not have life balance. Carer has few and irregular opportunities to take breaks from caring and to take part in things they want. Carer often feels unsupported, and that there is a lack of people they could turn to. Carer is often unable to plan their time or to make plans for their future.	Carer does not feel they have life balance. Carer has no opportunities to take breaks from caring and to take part in things they want. Carer feels isolated, and do not have people to turn to in their locality. Carer is unable to plan their time or to make plans for their future.

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## 6. Summary of Framework for Adult Carers

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<b>Very High Impact</b>	<p>Indicates that the carer feels the caring role has a very high impact on the carer. This means that the carer is finding it extremely difficult to sustain their caring role without immediate support. The carer does not have a healthy life balance at all.</p> <p>There is likely to be need for very urgent or immediate support to be given to the carer.</p>
<b>High Impact</b>	<p>Indicates that the carer feels the caring role has a high impact on the carer. This means that the carer would have difficulties in sustaining their caring role without support. The carer mostly does not have a healthy life balance.</p> <p>There is likely to be need for relatively urgent support to be given to the carer.</p>
<b>Moderate Impact</b>	<p>Indicates that the carer feels the caring role has a moderate impact on the carer. This means that the carer is starting to find it to sustain some parts of their caring role and would need support to prevent it from getting worse. The carer mostly does not have a healthy life balance.</p> <p>There is likely to be need for support to be given to the carer to prevent things from getting worse.</p>
<b>No/Low Impact</b>	<p>Indicates that the carer feels the caring role has little or no impact on the carer. This means there is little or no impact on the carer's ability to sustain their caring role.</p> <p>The carer may like some information and advice, or access to some universal or preventative support or services to prevent things from getting worse.</p>

## 7. Eligibility Thresholds: Types of Services and Support

<b>Universal Services</b> (examples of services generally available to all in the Perth & Kinross area)	<b>Power to Support</b> (examples of services in addition to examples given under universal services)	<b>Duty to Support</b> (examples of services in addition to the examples given under universal services/power to support)
<ul style="list-style-type: none"> <li>Information and advice services (e.g. carers' rights, education and training, income maximisation, carer advocacy, emergency care planning and future care planning)</li> </ul>	<ul style="list-style-type: none"> <li>Access to a support worker (moral support and for information/advice)</li> </ul>	<ul style="list-style-type: none"> <li>Self-directed support (SDS)<sup>3</sup> cost package for personalised support for the carer depending on the carer's needs</li> </ul>
<ul style="list-style-type: none"> <li>Day care services</li> </ul>	<ul style="list-style-type: none"> <li>Course on emotional wellbeing</li> </ul>	<ul style="list-style-type: none"> <li>Home adaptations and/or equipment</li> </ul>
<ul style="list-style-type: none"> <li>Leisure centres</li> </ul>	<ul style="list-style-type: none"> <li>Carer advocacy</li> </ul>	<ul style="list-style-type: none"> <li>Replacement care/residential care</li> </ul>
<ul style="list-style-type: none"> <li>Walking/running clubs</li> </ul>	<ul style="list-style-type: none"> <li>Short breaks</li> </ul>	<ul style="list-style-type: none"> <li>More regular short breaks/respice</li> </ul>
<ul style="list-style-type: none"> <li>Libraries</li> </ul>	<ul style="list-style-type: none"> <li>Support to access leisure pursuits</li> </ul>	
<ul style="list-style-type: none"> <li>Community cafes</li> </ul>	<ul style="list-style-type: none"> <li>Carer cafes</li> </ul>	
<ul style="list-style-type: none"> <li>Victim support services</li> </ul>	<ul style="list-style-type: none"> <li>Complementary social therapies</li> </ul>	
<ul style="list-style-type: none"> <li>Befriending services</li> </ul>	<ul style="list-style-type: none"> <li>Training on moving and handling</li> </ul>	
<ul style="list-style-type: none"> <li>Volunteering</li> </ul>	<ul style="list-style-type: none"> <li>Transport to activities</li> </ul>	
<ul style="list-style-type: none"> <li>Counselling services</li> </ul>	<ul style="list-style-type: none"> <li>Adult carers activities/groups</li> </ul>	
<ul style="list-style-type: none"> <li>Bereavement support services</li> </ul>	<ul style="list-style-type: none"> <li>Social Care Services</li> </ul>	
<ul style="list-style-type: none"> <li>Health and wellbeing services</li> </ul>		
<ul style="list-style-type: none"> <li>Mental health services</li> </ul>		
<ul style="list-style-type: none"> <li>Drug and Alcohol services</li> </ul>		

<sup>3</sup> The carer chooses from **the four SDS options** allowing them to control how their support is delivered.

**Option 1:** Carer can choose to have a Direct Payment and receive money to pay for the support they need.

**Option 2:** Carer can choose to 'direct' how the available support is arranged and delivered.

**Option 3:** Carer can choose that the local authority arranges their support and arranges it on their behalf.

**Option 4:** Carer can choose a mixture of options 1-3 to arrange the support they receive.

## 8. Our Aims and Clarification of Terms

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Perth & Kinross Council, NHS Tayside, the Health & Social Care Partnership and a range of voluntary organisations will work together with carers of all ages. The framework aims to create a fair and transparent system for determining eligibility. It is designed so that the Perth & Kinross Council's level of support is proportionate and consistent with the carer's level of support needs. Carers with different needs will be treated equally in accessing support and services.

Staff will **agree** with the carer on:

1. the carer's **needs** and **personal outcomes**, and
2. the **type and level of support** that needs to be given by Perth & Kinross Council to meet those needs and outcomes.

This framework uses a **preventative approach**. This means that assessments should identify whether there is a foreseeable and likely risk of deterioration in the carer's health or their caring situation. If identified, the steps that will be taken to prevent further deterioration should be noted.

In the case where the carer has **fluctuating needs**, the carer's needs should be considered over an appropriate<sup>4</sup> period of time to ensure that all their needs have been accounted for when eligibility is being determined. The review date agreed between staff and the carer will be used to assess whether the carer's needs and outcomes are being appropriately met or whether changes need to be made.

It is important that the carer is given a say into what support they feel is appropriate for their needs. A carer may have high support needs in one area (for example, health and wellbeing) and a low support need in another (for example, living environment). Perth & Kinross Council will have a duty to support those needs of the carer that fall into the high or very high impact categories. Perth & Kinross Council will also have the power to support any additional needs of the carer that falls into the low or moderate impact categories.

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<sup>4</sup> What is deemed appropriate depends on the individual and how their needs fluctuate.

## Appendix 1: Definitions under the Carers (Scotland) Act 2016

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### 1. Meaning of “carer”

(1) In this Act “carer” means an individual who provides or intends to provide care for another individual (the “cared-for person”).

(2) But subsection (1) does not apply—

a) in the case of a cared-for person under 18 years old, to the extent that the care is or would be provided by virtue of the person's age, or

b) in any case, to the extent that the care is or would be provided—

i) under or by virtue of a contract, or

ii) as voluntary work.

(3) The Scottish Ministers may by regulations—

a) provide that “contract” in subsection (2)(b)(i) does or, as the case may be, does not include agreements of a kind specified in the regulations,

b) permit a relevant authority to disregard subsection (2)(b) where the authority considers that the relationship between the carer and the cared-for person is such that it would be appropriate to do so.

(4) In this Part “relevant authority” means a responsible local authority or a responsible authority (see section 41(1)).

### 2. Meaning of “adult carer”

In this Act “adult carer” means a carer who is at least 18 years old but is not a young carer.