

National Carers Strategy

December 2022

Table of Contents

Ministerial Foreword	3
Introduction	5
Age and gender	9
Demographic pressures	9
Intensive caring and deprivation	9
Impacts of caring.....	10
1. Living with COVID-19	11
2. Valuing, Recognising and Supporting Carers	18
3. Health and Social Care Support	28
4. Social and Financial Inclusion	41
5. Young Carers	53
6. Monitoring	60
7. Annex A – Action Plan	61

Ministerial Foreword



Unpaid carers make a vital contribution to ensuring that people throughout Scotland get the care they need.

The COVID-19 pandemic created significant difficulties and hardships for many carers. When support services closed or reduced capacity as part of the first lockdown in March 2020, carers stepped into the gap to support vulnerable friends and family members. For many people, this was never planned, but was utterly essential. The number of people providing care increased and many existing carers took on more intensive caring roles, while also losing the opportunity to take breaks from caring.

To add to this, Scotland is now facing the most severe economic upheaval in a generation with the current cost crisis, which is putting livelihoods, and lives, at risk. It is a humanitarian emergency, and as with the pandemic, carers are being affected disproportionately.

Many carers are standing up to draw attention to the challenges they are facing. We know from their eloquent and passionate testimonies that many of the effects of the pandemic are still being felt even while the burden of the cost crisis affects almost every aspect of life. The stories carers tell are varied and unique to their own situation, but they share many similarities. Too often they involve a struggle to get the right support, with carers themselves often having to navigate complex services that do not always seem to work together.

We know from listening to carers that they must take on these challenges while working, attending education and trying to lead their own lives. We know that sometimes their own aspirations are sidelined because they do not get the support they need. Most importantly, they must do all this while continuing to care for their loved ones. If there is one constant in all of the experiences carers share, it is their commitment to provide the best possible care, regardless of the obstacles they face. When carers talk about their lives, their focus is always on the person for whom they are caring.

Carers should not have to fight to ensure their loved ones get the support they need, they should not be required to put their own ambitions on hold and they should not have to campaign to demand basic services.

The pressures of the past two years have left many carers at breaking point. Many are now in acute need of support to alleviate their caring roles, enable them to have

breaks, support their own mental health and reduce isolation. More than ever, the contribution made by unpaid carers has to be recognised and steps taken to address the problems caused by the pandemic as well as the long-term, systemic issues that continue to affect unpaid carers.

It is with the lived experience of carers in mind that this strategy has been developed, and its implementation will be shaped by those who best understand the experience of being a carer.

For individual carers, the practicalities of our health and social care, education, housing, transport, social security and employment systems shape the intensity and experience of caring and their ability to balance caring with satisfying lives beyond caring.

Now is the time to set out a fresh vision for how we enable people to provide care for loved ones in a meaningful and sustainable way while still being able to work, attend education and have full lives away from caring. This strategy sets out a comprehensive range of actions to address five different aspects of unpaid carer support. It includes existing initiatives as well as new proposals, but the key is that we take a strategic approach to supporting carers, ensuring that their experience as carers is reflected in all of the services they use.

We want Scotland to be a place where all carers are recognised and valued for the contribution they make, where they are enabled to provide the right support for the people they care for while living full, rounded lives. No-one should need to put their aspirations and ambitions on hold because they are providing care to a loved one.

There are several key principles that must be central to our approach. We must make sure that providing care does not mean that someone needs to give up their job or reduce their hours, that it does not plunge them into financial hardship or social exclusion. All carers must be seen as equal partners in care, and involved in decisions relating to their caring role. We must ensure that the importance of unpaid care is recognised and that its value is acknowledged and respected, by the public sector, employers and by society. As part of this strategy, we will work with local carer centres and young carer services who play an integral role in helping unpaid carers access help and support, including raising awareness of carers' rights, helping people to recognise themselves as carers and to destigmatise the term.

Unpaid carers are now, and will remain, fundamental to building strong families and partnerships and resilient and cohesive communities. We have a shared responsibility to support carers, to raise the profile and value of care and to work in partnership with everyone who has a responsibility to carers to ensure that carers receive the support they rightly deserve.



Kevin Stewart MSP
Minister for Mental Wellbeing and Social Care

Introduction

Unpaid care is vital to how social care is provided in Scotland, and the value of the dedication and expertise of carers cannot be overstated. This strategy recognises the diverse experiences of carers and sets out a range of actions to ensure they are supported fully in a joined up and cohesive way. It brings together existing initiatives and new approaches, and proposes new and better ways to support carers. It seeks to reflect both the diversity of carers' experiences and their lives beyond caring to avoid pigeonholing people as carers and nothing else.

For many people, caring is a positive experience. Those with the least intensive caring roles can experience better than average mental health and wellbeing. For many carers, the time spent with the person they are caring for can be a positive and rewarding experience, if supported appropriately.

Every caring situation is unique. Carers' individual needs and the impact of caring depend on all sorts of factors such as their age, health and ethnicity, and their support networks of family and friends. For example, minority ethnic carers face the same challenges as all carers, but also face additional barriers, for instance cultural barriers, stereotypes and language which can increase the chances of poorer health, poverty and social exclusion. The level and type of care provided is also a major factor. There are very different physical and emotional pressures from supporting someone with addiction, a mental illness, a physical disability or learning disability, or a progressive condition or terminal illness.

People in more intensive and stressful caring roles can often experience negative impacts on their health and wellbeing. Without the right kind of support and recognition, unpaid carers can face difficult challenges. The approach set out in this strategy seeks to ensure that unpaid carers can provide the best possible care, supported by a system that recognises and values their contribution, allowing them to lead a full life in addition to their caring role.

Without proper support and the ability to lead a full life beyond caring, a carer's health and wellbeing suffers. This has an impact on the cared-for person often resulting in greater need for health and care support, particularly for older people, such as admission to a care home or hospital or delays to hospital discharge.¹ Where the caring role leads to a carer leaving employment, this will affect their financial situation, their employer and the wider economy.

People who provide care to loved ones must be supported to do so in the most effective way and in a way that allows them to lead a balanced and varied life. The Carers (Scotland) Act 2016 aims to ensure that carers have choice and control, and can access preventative support to keep caring situations manageable. It puts in place a system of carers' rights designed to listen to carers, improve consistency of

¹ The Scottish Government (2015). [Scotland's Carers report](#).

support and prevent problems – helping sustain caring relationships and protect carers’ health and wellbeing.

Despite this, we know that unpaid carers can have too many burdens placed on them. To address this, the strategy will drive long-term, sustainable systemic change to how carers are valued and supported. This will help to recognise and mitigate the potential wellbeing, economic and social risks of caring. This will need immediate action as well as change over an extended period.

It is also important to build a wider understanding and recognition of caring across society. Unpaid carers are a diverse range of people covering all parts of society, but they can often be marginalised. We must ensure that unpaid care is visible, understood and valued across society, not regarded as peripheral or something that affects only particular people.

The broader policy landscape

As part of the development of the National Care Service (NCS), we are proposing changes to how people access care and support in Scotland. People have told us that the current system of eligibility criteria often does not work for them. Eligibility criteria are focused on deficits, not outcomes, and do not necessarily put a person’s human rights at the centre of decisions. We have committed to overhaul the current mechanism of eligibility criteria and set out proposals for doing this in the NCS consultation.

This will mean changing the way care and support services are designed and delivered. We want the focus to be on the support people need, not on eligibility. Prevention will be prioritised, and we will make sure that people can move easily between different types of care and support as their needs change. We will continue to actively engage with stakeholders, including carers, to develop this work. Improving access to social care cannot wait for the NCS, and we are putting in place measures to strengthen the implementation of Self-Directed Support (SDS) and improve prevention and early intervention.

The issues that affect carers go beyond health and social care. This strategy sits within a wider reform agenda, with carers at its heart. In order to achieve lasting change both for carers and the people they care for, we will drive forward a range of policy developments, such as actions to tackle health inequalities and household income. Carers’ own rights and needs are impacted by the service, support or budgets available to the person they care for. This strategy will help to bring about sustainable improvements in this wider context.

We also welcome the European Care Strategy² published in September 2022 which reflects the ambition to improve support and recognition for unpaid carers that Scotland and the European Union both share.

² The European Commission (2022). A European Care Strategy for caregivers and care receivers - Employment, Social Affairs & Inclusion.

The impact of COVID-19

We have learned lessons from the COVID-19 pandemic and the strategy reflects that. We know that we need to be able to support carers better whilst also enabling them to live as fully as possible.

The Scottish Government's and COSLA's jointly chaired Pandemic Response in Adult Social Care Group provided a multi-stakeholder focal point for work to support the effective delivery of adult social care during the COVID-19 pandemic. The group had a strong focus on issues that unpaid carers are experiencing, with valuable contributions from carer representatives. While the group has been superseded by new approaches to addressing social care pressures, it is vital that we continue to recognise carers and support them as we move into a new phase of living with COVID-19.

Our approach

The strategy will cover activity during the current Scottish Parliament to spring 2026, but will be reviewed annually to monitor progress and ensure it is focussed on the most important issues.

The key themes of the strategy intend to put the individual carer at the centre and focus on five different aspects of unpaid carer support:

- Living with COVID-19
- Recognising, valuing and involving carers
- Health and social care support
- Social and financial inclusion
- Young carers

Developing this strategy

We have consulted with carers with lived and living experience to ensure that in developing this strategy we have had meaningful engagement with those who know what it is like to devote a significant proportion of their time to caring for a loved one or friend. We have also engaged with carer organisations and a range of delivery partners to make sure that those who have responsibilities to support carers have also shaped this strategy.

Scottish Government policy works in a variety of ways to help protect carers' health and wellbeing and to sustain caring relationships. It is based on a human rights approach to supporting carers, in line with other government policies and legislation.

Our policies contribute to a number of outcomes from our National Performance Framework³ and these principles underpin the strategy.

³ Scottish Government. (2022) [National Performance Framework. National Outcomes.](#)

Carers in Scotland

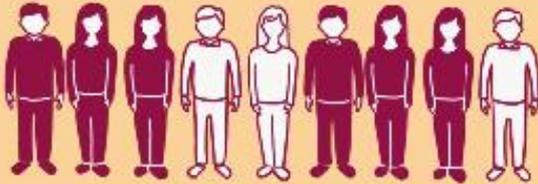
696,000

Scotland's estimated 696,000 carers make a huge contribution to the people they care for and our communities. There are more people caring full time for relatives or friends than staff working in either the NHS or in social care.

Age and gender

Of the 696,000 carers in Scotland

28,000 are under 18



Although people can become carers at any stage, they are most likely to be caring between the ages of

45 - 54.

In this age group over a quarter of women and around a sixth of men are carers.



There are over 133,000 carers aged 16+ caring for 35 hours a week or more. Around a quarter of carers (aged 65 and over) provide 35 hours of care a week or more compared with just over a tenth of carers under 24.



Overall, 59% of carers are women and 41% are men. Throughout the working years, women are more likely to be carers than men. With gender stereotypes surrounding caring still present in our society, there is a risk that women feel more pressured to undertake caring roles.

Demographic pressures

Scotland's population is ageing, with numbers of very old people predicted to continue growing and a proportionately smaller working age population. This is a success story in terms of improved health and well-being and longer life expectancy, but it has significant implications for the future of care in Scotland.



With demand for health and social care services predicted to grow by 25% by 2031, the role and contribution of carers will be even more critical in the future.

Intensive caring and deprivation

29% of carers in the most deprived areas care for 35 hours a week or more - more than double the level in the least deprived areas.



Caring therefore may stem from a lack of choice and may be exacerbated by existing inequalities of incomes and poor health in these areas.



Impacts of caring

Unpaid carers make a huge contribution to the people they care for and their communities.

Unpaid care in Scotland is already estimated to be worth **£13.1 billion** a year.

Diagram 1: Carers in Scotland

Carers in Scotland⁴

Scotland's carers make a huge contribution to the people they care for and our communities. There are more people caring full time for relatives or friends than staff working in either the NHS or in social care.⁵ The actual number of carers is not known but it was estimated that there were 700,000 to 800,000 unpaid carers in Scotland before the COVID-19 pandemic.

Age and gender

Of the 696,000 carers in Scotland, 28,000 are under 18.⁶ Although people can become carers at any stage, they are most likely to be caring between the ages of 45-54. In this age group, over a quarter of all women and around a sixth of all men are carers.

There are over 133,000 carers aged 16+ caring for 35 hours a week or more. Around a quarter of older carers (aged 65 and over) provide 35 hours of care a week or more compared with just under a tenth of carers under 24.

Overall, 59% of carers are women and 41% are men. Throughout their working years, women are more likely to be carers than men. With gender stereotypes surrounding caring still present in our society, there is a risk that women feel more pressurised to undertake caring roles. This pressure can negatively impact on a woman's career path and be a key driver of the gender pay gap.

Demographic pressures

Scotland's population is ageing, with numbers of very old people predicted to continue growing and a proportionately smaller working age population. This is a success story in terms of improved health and wellbeing and longer life expectancy, but it has significant implications for the future of care and support in Scotland. With demand for health and social care services predicted to grow by 25% by 2031⁷, the role and contribution of carers will be even more critical in the future.

Intensive caring and deprivation

29% of carers in the most deprived areas care for 35 hours a week or more – more than double the level in the least deprived areas. Caring may therefore stem from lack of choice and may be exacerbated by existing inequalities of low incomes and poor health in these areas.⁸

⁴ The Scottish Government (2015). [Scotland's Carers](#)

⁵ Information Service Division (2019). [NHS Scotland National Workforce Statistics](#).
Scottish Social Services Council (2017). [Report on Workforce Data](#).

⁶ The Scottish Government (2022) [Scotland's Carers Update Release](#)

⁷ Public Health Scotland (2021) [Population groups: older people](#).

⁸ Hirst, M. (2005) [Health Inequalities and Informal Care - End of Project Report](#).

Impacts of caring

Unpaid carers make a huge contribution to the people they care for and our communities. It is estimated that the economic value of the contribution made by carers in Scotland is £13.1 billion per year.⁹

“MT is 16 and lives with her mum and younger brother. Her mum has long term physical and mental health conditions and is in receipt of PIP. MECOPP’s housing rights worker was supporting the family with their housing situation and racial harassment from neighbours, and made a referral to the Young Carers’ development worker after identifying MT as a young carer. During an introductory visit, we discussed MT’s care responsibilities with her and her mum, and the help and support that she could access as a young carer. We completed an application for the Young Carer’s Grant, and once this was awarded we were able to help MT apply for Care Allowance. We also referred her for the enhanced young carers’ package with Young Scot, allowing her access to rewards, respite opportunities and details about mental health support.

As a result, MT felt more confident pursuing a part-time college course now that she was able to explain her responsibilities and how this might impact her studies. I supported MT to apply for a part-time course and she was awarded a bursary to cover the fees as the college recognised her as a young carer. MT used her Young Carers Grant to cover the cost of equipment and the college was supportive of her caring role. Her overall confidence and wellbeing has improved and she has met new people with a shared interest at her course. She has now completed her course and is looking for work experience that will fit around her caring for her mum. The family’s income has increased and MT’s role as a young carer is recognised and valued.”

⁹ National Care Service (Scotland) Bill (2022) Financial Memorandum (paragraph 72). [Financial Memorandum](#).

1. Living with COVID-19

Strategic outcomes

- Carers feel confident and supported to protect themselves from COVID-19.
- Carers and the people they care for feel supported and confident to re-engage with their communities.
- Carers are supported to recover from the negative impacts of COVID-19.

Why this is important

We know the COVID-19 pandemic had and continues to have a significant effect on unpaid carers. At the start of the COVID-19 pandemic, we created carer-specific information to help carers and carer organisations find the most up-to-date information relevant for them. We worked closely with carers and carer organisations to ensure that the information met carers needs and was also circulated through channels they were likely to use. We worked with NHS 24 to develop tailored [information on NHS inform](#) for people with ongoing symptoms following COVID-19, which includes signposting to guidance and support for unpaid carers. Unpaid carers were prioritised for vaccination in line with advice from the Joint Committee of Vaccination and Immunisation (JCVI).

The pandemic enforced lockdowns and associated restrictions which presented a series of unfolding challenges for carers. Each caring situation is unique so everyone faced different situations, but we know that carers faced particular issues in caring safely and sustaining caring roles.

Many carers were supporting people who were advised to shield because they were considered to be at highest risk of becoming severely ill if they caught COVID-19. Supporting people on the Highest Risk List involved asking this group and those around them to take many extra precautions to limit the chance of catching and transmitting COVID-19. For many carers, this increased the existing stress, fear and isolation of living under lockdown and ongoing restrictions.

The majority of pandemic-related precautions have been lifted, but we have heard from some carers that they have felt vulnerable, left behind and ignored as communities, workplaces and wider society open up again. We will continue to work with carers to address their concerns and ensure they are supported to keep safe while they re-engage in their wider communities.

We recognise that some carers will be providing support to friends and family members living with long-term effects following contracting COVID-19, known as long COVID. These effects vary in their presentation and nature from person to person, and can have a significant impact for those adults and children most severely affected.

The impacts of the COVID-19 pandemic disproportionately affected different equality groups. The majority of carers are women and were at greater risk of these

disproportionate effects. Some minority ethnic groups were particularly vulnerable to COVID-19 and often less connected to support services. The pandemic increased the risk of trauma for many people across Scotland, particularly for those already affected by inequality, trauma and adversity. Research shows that experience of trauma can impact on people's mental and physical health outcomes if left unsupported.

As we move into the new phase of living with COVID-19, some carers need support to rebuild confidence and feel safe to re-engage with wider communities and services. Communication with carers is a key element of that, but there are also practical measures to share the latest guidance and expertise.

We remain committed to recognising the immense contribution carers make, increasing public awareness of caring and involving carers to ensure that our policies are informed by their lived and living experience. The following chapters set out actions to support this commitment.

How we will achieve this

Keeping people safe

In February 2022, our COVID-19 Strategic Framework Update refreshed our strategic intent: to manage COVID-19 effectively, primarily through adaptations and health measures that strengthen our resilience and recovery, as we rebuild for a better future.

For individuals and families, including carers, this will include continued hygiene measures, improving ventilation and wearing face coverings when and where appropriate.

For organisations, becoming more resilient to COVID-19 may include adapting premises to make them safer and enabling hybrid working where that makes sense and supports businesses and carers.

Carers for people who were on the Highest Risk List.

We know a lot more about the virus and its impact on different groups now. Combined with our successful vaccination programme and the availability of effective medicines for eligible people, this means the majority of people who were on the Highest Risk (formerly Shielding) List and the wider population are now far less likely to become seriously ill from COVID-19.

We recognise how challenging and frightening the COVID-19 pandemic has been for many people who were on the Highest Risk List and their carers. We know that people may need to make a significant change in how they assess their own level of risk, moving from being in the highest risk group to having a level of risk similar to the rest of the population. This shift may take more time and be more difficult for some people than others.

There remains a group of people who may not get the same level of protection from the vaccination as the majority of the population. This is because they have a medical condition, or are undergoing treatment, which means their immune system is weakened. It is likely that many people in this group will be supported by unpaid carers. This group of people remain at a higher risk from COVID-19, and we have developed guidance for them which is on the Scottish Government website.¹⁰

The COVID-19 vaccination programme in Scotland is working well. The evidence now tells us that most of the people who were considered to be at highest risk from COVID-19 at the start of the pandemic are now at a much lower risk, and even people with a weakened immune system are getting protection from vaccination. It is important that everyone in this category gets all of the vaccines they are eligible for – including additional booster vaccinations - and follows any condition-specific advice from their clinician. They should also take the same steps to protect themselves from COVID-19 as they would from any other infectious disease.

We now have antiviral and monoclonal antibody treatments available which can help prevent serious illness in those who are eligible due to a weakened immune system.

We will continue to prioritise unpaid carers when offering COVID-19 vaccination in line with JCVI advice.

Anyone who may still be at higher risk of serious illness from COVID-19 due to a health condition or ongoing medical treatment can still access extra support and treatments to help protect them from becoming seriously ill from COVID-19. Access is via either a clinical trial (being publically referred to as a national study called PANORAMIC) or a limited deployment of neutralising Monoclonal Antibodies (nMABs) and antivirals to an extremely vulnerable cohort of patients, managed centrally by health boards. More detail is available on [NHS Inform](#).

Involving carers

We will continue to involve carers and carer organisations in our work in living with COVID-19, including making sure they have the most current advice, and that the advice takes account of the particular needs of unpaid carers. We will listen and respond to issues as they arise and we will learn from our experience of how we could do it better.

Actions about keeping people safe

Ministers and officials will continue to engage with carers to ensure their voices are heard, including ongoing support for those whose risk may still be higher.

We will continue to ensure that carers receive accurate and up-to-date information about living with COVID-19.

¹⁰ The Scottish Government (2022). Coronavirus (COVID-19): advice for immunosuppressed people who may have been on the Highest Risk List.

We will continue to closely monitor all emerging evidence on COVID-19 treatments and their clinical effectiveness.

Unpaid carers will continue to be able access free PPE until March 2023. The provision of PPE beyond this is under review.

Support to rebuild confidence and reconnect with communities

Public buildings, workplaces and businesses

It is important that carers feel confident in entering our public buildings, returning to physical workplaces and engaging with public services.

We are taking measures to ensure our public buildings, workplaces and businesses are as safe as they can be. This includes taking forward the recommendations of our Ventilation Short Life Working Group. We are reviewing building regulations to explore how buildings can have infection resilience built into their design from the outset and providing information and guidance on adaptations that employers can make to support staff and customers to return and access services, including [Coronavirus \(COVID-19\): safer workplaces and public settings](#).

A new suite of ventilation guidance, developed in cooperation with Public Health Scotland, has been published which includes guidance for ventilation: in [the workplace](#), for [individual households](#) and advice on the use of [air cleaning technologies](#). This guidance has been shared with relevant sectors. We have developed a [signage scheme](#) that allows organisations to display by way of signage the protective measures, including ventilation, that they have in place within their buildings. The scheme will soon be relaunched as the 'Stay Well This Winter' Signage.

Engaging with health and social care services

Some carers have told us that they are nervous about engaging with or accepting support from health or social care staff for fear of catching COVID-19.

The Scottish Social Services Council (SSSC), in collaboration with national carer organisations and NHS Education Scotland (NES), has developed [COVID-19 guides for carer support staff](#) to specifically support staff working with unpaid carers. This is to provide staff with information and tools to support their own emotional wellbeing and encourage them to look after themselves while supporting others.

[Community Link Workers](#) (CLW) proved invaluable during the COVID-19 pandemic by helping to assist people, including those who were shielding or caring for others. The long-term social and economic and health and wellbeing impacts of COVID-19 mean that CLWs are key to recovery plans.

Distance Aware scheme

The Distance Aware scheme is designed to help those worried about mixing with others as we adapt to living with COVID-19. People can wear Distance Aware badges and lanyards to show others that they need more space.

We developed this scheme as a result of feedback from those on the Highest Risk List themselves (July 2021). The majority felt uncomfortable about restrictions being

lifted and all said this was because of the behaviour of others. Almost three-quarters said they would welcome an initiative such as this to provide extra reassurance and help them feel more confident and comfortable in public places.

This voluntary scheme is open to anyone who wants to signal to others that they would like additional care and space when out in public.

Emergency and future care planning

We appreciate that carers are concerned about the impact on their ability to care if they were to become ill from COVID-19 or long COVID. Carers already have rights to help with putting in place emergency and future care plans for how care would be managed in these situations.

Reconnecting with activities and friends

We have heard from many carers that they now feel very isolated. For some people this has been exacerbated by a combination of intensive caring, lack of available breaks and limiting social contact and activities to reduce the risk of infection. Evidence suggests this is further heightened for those carers who live in rural and island communities.

Our longer term commitments to tackle loneliness and social isolation are set out in [Chapter 4](#).

Actions about rebuilding confidence

We will continue to meet carers and carer organisations regularly to hear current concerns so we can provide up-to-date information. This includes funding and engaging with MECOPP (Minority Ethnic Carers of People Project) to ensure information meets the needs of carers with one or more protected characteristic.

We will encourage employers to be more supportive and flexible to support unpaid carers, through our Carer Positive scheme, which may include ensuring that sick pay and staffing practices support public health aims, adapting premises to make them safer for customers and staff, and enabling hybrid working where that makes sense.

We will take measures to ensure our public buildings and businesses are as safe as they can be.

We will encourage shops and other public spaces to display Distance Aware signage about personal distance.

We will work with partners to raise awareness and increase the uptake of emergency and future care plans.

Supporting carers to recover from the impacts of COVID-19 and improve wellbeing

Wider social care support services

The COVID-19 pandemic placed huge pressure on the health and social care system which has been unable to meet the level of demand for social care support. This in turn increased pressure on carers who stepped into the gap. Supporting the recovery of social care services is therefore a vital part of alleviating caring roles.

In December 2021, the Pandemic Response in Adult Social Care Group (PRASCG) developed the [Adult social care - winter preparedness plan](#). Carers' needs are explicitly addressed in the winter plan and statement. Carers on PRASCG had the opportunity to feed into the plan and helped secure the additional £4 million to support unpaid carers noted above.

Our ongoing commitments to improve wider social care are also set out in [Chapter 3](#).

Self-directed support (SDS) and flexibility

During the COVID-19 pandemic, existing flexibilities available in SDS implementation have been highlighted. This includes, the power to provide or arrange for the provision of support without the need for a full assessment where the local authority considers that the need is a matter of urgency; and the ability, with local authority agreement, to employ family members as Personal Assistants.¹¹

Mental health support

We have worked to support carers' mental health and wellbeing throughout the pandemic. This included the launch of the National Wellbeing Hub which aims to enhance personal resilience and self-care. This remains a valuable source of advice as we continue to recover from the pandemic. The Hub provides a range of digital wellbeing resources for all staff working in health and social care, with a [dedicated page for unpaid carers](#).

We provide support and services for children and young people who have been on the Highest Risk List, including a series of blogs on [Aye Feel - Mental Health & Emotional Wellbeing Information](#) to provide information on mental health and emotional wellbeing to support young people. Access to mental health counsellors is also now available through secondary schools across Scotland.

We will continue to work with carers to understand their concerns as the country gets used to living with COVID-19.

Coronavirus Carer's Allowance Supplement

Carers who receive Carer's Allowance tend to be those with the most intensive caring roles and who are likely to be on lower incomes. In Scotland, this group of carers already get more than those south of the border through the Carer's Allowance Supplement introduced in 2018. In recognition of the additional pressure on carers during the pandemic, we acted quickly to make a double payment of the Carer's Allowance Supplement in June 2020 and again in December 2021. This

¹¹ Scottish Government (2022). [Social Care \(Self-directed Support\) \(Scotland\) Act 2013: Statutory Guidance](#).

additional £40 million investment came entirely from the Scottish Government budget.

We have worked closely with the Department for Work and Pensions (who deliver Carer's Allowance in Scotland on behalf of Scottish Ministers) to protect carers' benefits by relaxing the breaks in care rules and allowing for remote caring to count towards the 35 hours a week of care required for Carer's Allowance. Working closely with stakeholders in Scotland, we helped to provide the Department of Work and Pensions with evidence of the ongoing need for these relaxations to ensure that both Governments took the necessary steps to continue the relaxations throughout the height of the pandemic. We will continue to reflect the specific needs of carers in our engagement with the Department of Work and Pensions.

The COVID-19 pandemic has identified a need for greater flexibility in how we support carers when society faces significant changing circumstances. We are considering the need to support carers to recover from the pandemic and future-proof our benefits system to provide greater flexibility to respond to changing circumstances as we develop our proposals for Scottish Carer's Assistance, which will replace Carer's Allowance in Scotland.

Actions about supporting recovery

We will work to improve carer recognition, health and social care support, and financial and social inclusion for carers, through the actions set out in the following chapters.

We provided £21 million funding in 2021-22 and have committed £15 million funding in 2022-23 for community-based initiatives to promote good health and wellbeing and tackle the mental health issues made worse by the COVID-19 pandemic and the cost of living crisis (the Communities Mental Health and Wellbeing Fund).

As we develop Scottish Carer's Assistance, we are considering the best way to support carers to recover from the COVID-19 pandemic and future proof our benefits system to ensure there is flexibility to respond to changing circumstances.

2. Valuing, Recognising and Supporting Carers

Strategic outcomes

- Carers are recognised and their contribution is understood and valued by society.
- Carers' voices are heard and their views and experiences are taken into account in decisions which affect them.

Why this is important

Our health and social care system could not survive without the commitment of unpaid carers. People have provided unpaid care for family and friends since before there was a health and social care system. But the way our public systems work and interact has a profound effect on the lives of those who provide unpaid care and whether caring is sustainable.

Many carers have told us that fighting their way through multiple systems is an exhausting feature of their lives, which contributes to stress. Carers can spend a lot of time trying to navigate through the system to find the right service for the person they care for or the right support for themselves. Carers have also told us that social attitudes, particularly to roles often perceived to be for women, contribute to keeping caring invisible and undervalued.

The pandemic made all of these issues worse, and for many unpaid carers, it is likely that the effects of the pandemic will continue for some time.

The Scottish Government and others responsible for developing policy and planning and delivering support or services must learn from carers' experiences and knowledge to ensure that systems are fit for purpose at a national and local level.

At an individual level, genuine communication is the key to enabling choice. Professionals need to understand and value carers' skills and insights to ensure that support for both them and the cared-for person is as good as it can be. Effective collaboration with carers includes empowering them with information about the types of support available and choices over how it is delivered. However, it is important to recognise that some carers may find it difficult to properly participate due to their own heavy caring commitments and may be excluded, especially from more intensive carer participation. Encouraging the provision of practical support to facilitate carer participation should also feature in the range of measures to support involvement.

There are already many effective processes in place to support carers, but we know that particular aspects of caring remain challenging. We will build on the existing structures that work while addressing things that need to be improved.

How we will achieve this

Recognising, valuing and raising awareness of carers and their rights

The Independent Review of Adult Social Care identified that greater recognition and support is needed for unpaid carers.

We want to foster a profound culture shift to make caring visible, valued and supported by a connected approach across communities and systems. We will use this strategy to drive a national approach to doing that.

The review of the National Outcomes also offers an opportunity to increase the visibility of caring.

We will ensure carer awareness and visibility are supported through our ongoing commitment to promote equalities and embed international human rights obligations in Scots law.

We work with the Carers Rights and Support Steering Group bringing together carers, carer organisations, COSLA, integration authorities and others to support and guide the implementation of the Carers Act. The group has agreed that the aims of the Act cannot be realised without greater public awareness of caring and carers' rights to support. The group's national implementation plan covers key priorities including workforce development; awareness and communications; and measuring progress and impact. National carer organisations already have a focus on awareness raising while statutory agencies and carer centres play a key role locally.

In designing Scottish Carer's Assistance, we will make sure that carers applying for it are told about other social security benefits and wider services that are available to them. We know from our engagement to date that there are some areas and points in carers' lives where links to other services could be particularly useful. For example, at the start of a caring role, when young carers are moving on from young carer services and support to adult services, or when a caring role comes to an end, especially if this is due to the loss of the cared for person. Links to information and advice on education, training and work would help carers who would like to, and are able to take part in these opportunities.

We remain committed to recognising the immense contribution carers make, increasing public awareness of caring and involving carers to ensure that our policies are informed by their lived experience.

We launched a national communications campaign in December 2020 to help more people recognise when they are in a caring role and access support. The evaluation indicated that the campaign was successful. We ran the same campaign again in March 2022.

Effective carer involvement also involves empowering carers with information about their rights. We have published a Carers' Charter¹², which summarises carers' rights under the Carers Act. Some kinship carers will also have rights as unpaid carers where the child they are looking after has a disability or long term health condition or where they are also supporting the birth parent alongside looking after their child. This strategy will help support and embed those rights.

¹² The Scottish Government (2018) [Carers Charter](#).

Identifying carers

There are a number of different ways of helping to identify carers such as through practitioners in the NHS and social care professions who are best placed to identify carers due to their contact with patients and their families.

The Scottish Government ran a public communications and awareness campaign in 2020 and again in March 2022, focused on helping more people recognise themselves as unpaid carers and making them aware of the support available.

People can self-identify as carers. However, that is not straightforward and may take some time. There is a widespread view that caring for or looking after a loved one is 'what you do'. For example, parents of disabled children will see themselves as parents first and foremost, not necessarily as carers. Once identified, many will rightly call themselves parent-carers. Similarly, many younger people supporting siblings and/or parents do not consider themselves to be young carers. Older people caring for their partner or other relative do not always view themselves as carers. We also recognise other family structures, including kinship carers or guardians.

It can also be difficult to determine when the caring journey starts, depending for example, on the condition of the person receiving care, who may be reasonably healthy initially. As people become older, frailer or sicker, become more disabled, experience addiction or have a mental health problem diagnosed, the role of carer becomes more apparent, especially to the unpaid carer. The role can also be impacted by the level and type of support available to the cared-for person, both formal and informal.

Even when people do see themselves as carers, this may not always be recognised more widely. Raising the profile of unpaid care will help people to understand what it involves and what it means for a person who is an unpaid carer.

"It's difficult to stand up for your kids and be that person. It's taken a long time for me to say I am a carer. I need other people to recognise my role as a carer and value it."

Many people who support family members with mental health problems or drug or alcohol issues do not identify themselves as carers and there is still a lack of understanding from others surrounding this caring role. In addition, the person with care needs may deny that they need or are getting support from a family member or partner. This makes it difficult for people to self-identify as carers and for others to see them as such.

There are those whose voices are furthest from being heard and who are often hidden carers. This can be particularly true for minority ethnic and LGBT carers.

By helping people to self-identify as an unpaid carer or raising awareness so that others can recognise that they are providing care, we can open up access to information and other forms of support. This is an important first step to ensuring an unpaid carer can access support, including any social security benefits to which they be entitled. As part of this, health and social care professionals, as well as

professionals in other sectors such as schools and further education, need to be aware of unpaid care to help people to access appropriate support.

Actions to raise awareness

We will make it easier for people to recognise themselves as carers and to access support and advice.

We will foster a culture shift towards greater recognition and valuing carers and a connected approach to carer support across government by: connected leadership in the delivery of this strategy, ensuring carers issues are represented in the review of the National Outcomes.

We will update the Carers' Charter to reflect carers' rights to information and advice; new rights for carers of people with terminal illness; and, subject to Scottish Parliament approval, the right to breaks from caring.

We will support local carer centres to build capacity and ensure all carers can access consistent and up-to-date information.

We will keep the need for further national communications campaigns under review.

Involving carers at national level

Carers Parliament

The annual Carers Parliament is funded by the Scottish Government and delivered on our behalf by Carers Scotland in partnership with a steering group of other relevant organisations, informed by carers to:

- Enable carers from every locality in Scotland to come together to consider, at a strategic level, the policy and legislation that affects their lives;
- Influence the way forward, reflecting on the impacts of recent developments and sharing good practice; and
- Ensure policymakers and politicians can hear directly from carers about their lives and the impact of policy and legislation on them.

Scottish Young Carers Festival

The Festival is an annual event for young carers from across Scotland. It offers fun activities and respite for attendees, as well as allowing them to speak directly to national policymakers and politicians about their experiences and what matters to them.

Carer voices in national policy making

The Scottish Government funds a number of national carer organisations to engage with carers, raise awareness, highlight carers' concerns and help provide a voice for adult and young carers and local carer services in national and local decision making. This includes the voices of carers from rural and island communities, different ethnic communities and minority groups.

We work with these organisations and with individual carers on a variety of carer-focused policy issues.

We include carer organisations and individual carers on national policy and advisory groups to learn from carers' experiences and knowledge and ensure that national systems are fit for purpose, including through the Carers Rights and Support Steering Group, Carer Centre Managers Network, Statutory Carer Leads, Young Carers Working Group and the Social Care Systems Pressures Group.

We have been listening to, and working with, carers and the organisations who support them to develop our proposals for Scottish Carer's Assistance. This includes the Social Security Scotland Experience Panels, our Carer Benefits Advisory Group and the Independent Disability and Carers Benefits Expert Advisory Group. We are grateful to everyone who is contributing to the development of these proposals.

It is essential that carers' voices continue to inform the development of policy. We will use this strategy to build on our current approach to ensure that carers can influence and shape policy that affects their lives. A key part of this will be to ensure that it not limited to issues that affect only carers, but that a strategic approach is taken to reflect the interaction of different policy areas on the lives of carers.

National Care Service

As part of the development work to design and establish the National Care Service (NCS), a Social Covenant Steering Group has been set up. This includes people with lived and living experience of social care to review our plans for co-design and engagement, helping us to ensure the new service is designed around the needs of people who access social care and supports the needs of unpaid carers and care workers. As the NCS moves forward we are committed to engaging with people with lived experience of social care to co-design the detail of the new system.

Other key points include the rights of carers to ensure their interests are heard under the NCS. Carers will be voting members on new care boards which will replace integration authorities.

The National Care Service (Scotland) Bill emphasises the importance of inclusive communication and independent advocacy to enable people accessing care and their carers to claim their rights, specifically through the NCS Charter and complaints and redress. Data and digital processes will be reformed which will see improved delivery of social care support.

Actions to involve carers in national policy and legislation

We will ensure that policy is informed by lived and living expertise, by working with carers and carer organisations to ensure carer voices are represented and heard in national policy making, including in shaping the National Care Service.

We will continue to support the Carers Parliament to engage carers in policy making and ensure their voices are heard by decision-makers. We will engage with carers to shape future Parliaments.

We will continue to support national work to engage, raise awareness and support carers' voices to be heard across all relevant issues.

We will involve carers through the Social Security Experience Panels and Social Security Scotland research, including the Client Survey and the Client Panels.

Involving carers in local strategic planning

Local health and social care planning under the current system

Under the current social care system, carer representatives must be included in both the governance structures of integration authorities and their strategic planning groups for health and social care strategies. This ensures carers have a voice and can influence decisions made at strategic level, including decisions about service planning and design. Carers are not voting members of Integrated Joint Boards (IJBs) but, as above, will be voting members on care boards when the NCS is established. This will help to ensure carers' views have the same weight as others.

To support carer representatives in their roles on integration authorities, we fund the Carers Collaborative which is supported through the Coalition of Carers in Scotland. This provides a forum for carer representatives to engage with their peers from other integration authorities, providing support via training and networking. It also highlights good practice and common concerns to integration authorities through its 'Equal, Expert and Valued' series of reports.

Alongside these general duties are specific duties to involve carers in strategic planning under the Carers Act. Health and social care partnerships, local authorities and health boards must also involve carers and carer representatives in planning services to support carers. This includes:

- local carer strategies, which cover carer services and plans to identify and support carers;
- local eligibility criteria for carer support in line with work underway on the National Care Service; and
- 'short breaks services statements', to help people understand what short breaks are available locally and nationally.

Local authorities must produce a local carer strategy. We have provided a checklist on what these must include.¹³ While they are primarily about Carers Act duties, we also encourage authorities to use them to take a more holistic view of how carers are supported across public services (for example education, housing and transport). As part of this Strategy, we will work with local carer leads to explore how we can support this and develop a consistent approach across the whole of Scotland.

Engaging with third and independent sectors, including the Coalition of Carers in Scotland, Scottish Care (Partners for Integration programme) and the ALLIANCE, we

¹³ The Scottish Government (2021). Carers (Scotland) Act 2016. Statutory Guidance, see checklist following paragraph 5.1.12.

will continue to focus on enhancing reporting mechanisms, measuring the impact of outcomes, and supporting carers in their role on integration authorities.

We will work with Integration Authorities, their Chief Officers, Boards and stakeholders to realise the full potential of integration and ensure that the people of Scotland get the right support, in the right place, at the right time, no matter their care needs.

The Independent Review of Adult Social Care identified the need for better representation of carers in local planning, commissioning and procurement. We will continue to work in partnership to deliver ongoing improvement within the current system ahead of the establishment of a National Care Service.

We want to ensure that everyone in our society has equal access to support and services and that the systems we put in place do not act as a barrier to achieving that. Local authorities must take account of the impact of having one or more protected characteristics when identifying carers' personal outcomes and needs for support and in providing carer information and advice services. The public sector equality duty means integration authorities, local authorities and health boards must consider how their policies or decisions affect people with protected characteristics. Ensuring that this extends to discrimination by association, where someone is treated less favourably because of their link or association with the protected characteristic of someone else (such as a carer's link to the disabled person they are looking after), would help carers (and duty bearers) to realise their rights.

We have already developed extensive guidance and resources, and investment to support local implementation. We worked in partnership with carers and carer organisations, including MECOPP, to ensure resources met the diverse needs of carers.

We will continue to work with local authorities to support the delivery of these duties, working strategically to ensure that the rights of carers are protected throughout Scotland.

Actions to support involvement in local planning and decision making

We will continue to support the Carers Collaborative and draw on reports and use this knowledge to inform future activity.

We will continue to prioritise the enhancement of carer involvement in local strategic decision making under the current system. Providing carers with support and access to national training events remains a primary focus of this work.

We will also continue to collaborate with third and independent sector bodies that enable carers in their role within integration authorities.

We will ensure that unpaid carers are involved in planning support and services under a future National Care Service through their involvement in co-design activity.

We will continue to work with partners and people with lived and living experience to make sure that our social care services work for everyone, including ensuring support for carers becomes more accessible and consistent.

Involving carers in individual decisions which affect them

There are already a range of duties on public bodies to ensure that carers are involved in decisions that affect them. We know that this does not always happen consistently across Scotland. We will work in partnership with public bodies to make sure that carers are always involved in decisions that affect them, and that they are involved at the right times. The development of the Getting It Right for Everyone (GIRFE) practice model will support our strategic approach, helping to embed greater joint working and the involvement of people in decisions that affect them.

Decisions about social care support for carers and the person being cared for
Health and social care partnerships must take the carer's views into account when assessing the needs of the person being cared for.

Decisions about hospital discharge of the cared-for person

NHS boards have duties under the Carers Act to involve carers in planning the return from hospital of the person they care for (or will be caring for). This helps to improve patient recovery and outcomes for the carer, as well as reducing the risk of re-admission.

We continue to support health boards to improve practice and learn from each other's experience of delivering this new duty, including by funding Healthcare Improvement Scotland (HIS) and NHS Education for Scotland (NES) to work in partnership to explore what involvement in hospital discharge means to unpaid carers and what good practice looks like.

We recognise the importance of timely discharge from hospital as soon as patients are medically fit, with delays being linked to poorer outcomes. We continue to invest in Care at Home capacity, community-based multi-disciplinary teams, and intermediate care models both as step-up or step-down options. We must ensure a strategic, joined-up approach, and a range of initiatives are being taken forward tackle delayed discharge and promote better outcomes for people.

Our Discharge without Delay Improvement Programme, backed by £3 million, is supporting all health boards and health and social care partnerships across Scotland to improve discharge planning procedures. The programme recommends that 'discharge planning should begin the moment someone is admitted to hospital. This process should begin with engaging with the patient, carer and family, indicating when the person is likely to be going home'. Carers have rights under the Carers Act to support, information and advice (see following chapter). We continue to support health and social care partnerships to make carers aware of these rights.

Decisions where the cared-for person has mental ill health

If a person is being treated under the Mental Health (Care and Treatment) (Scotland) Act 2003, it is important that the views of the carers are taken into account and we will work to ensure this happens. Anyone involved in the care and treatment of the

cared-for person must also provide carers with the information they need to provide effective care. However, a carer will not receive any information that the cared-for person does not want to be shared.

We know that it can sometimes be difficult for unpaid carers to engage and communicate with mental health practitioners. An independent review of mental health and incapacity legislation has proposed changes to the Supported Decision making regime which relies on unpaid carers to ascertain the will and preference of the adult. We will work in partnership with relevant public bodies to ensure that unpaid carers are consistently involved in these cases.

Adults with incapacity

Under the Adults with Incapacity (Scotland) 2000 Act carers can apply to be appointed as legal proxies if the person they are caring for is assessed as not having capacity to manage their own welfare and care support, or to make financial decisions

The Act sets out arrangements for appointing legal proxies which can include carers to make some or all decisions regarding welfare and/or finance and property matters on behalf of an incapacitated adult. Any intervention that takes place under the Act must take into account the principles of the Act.

One of the key principles of the Adults with Incapacity (Scotland) Act 2000 is that anyone considering intervening under the Act must consider the views of the primary carer and consider any information that a carer has about an adult's past or present wishes.

We will update the Code of Practice for continuing and welfare attorneys. This will reflect changes in the legislative environment, taking into account the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) as well as recent case law. The UNCRPD emphasises the use of supported decision making and one of the likely sources of this will be family and friends, which might include unpaid carers.

We will work with carers, carer organisations and relevant public bodies to ensure that these principles are reflected in practice.

Triangle of Care

The introduction of the Carers Act established rights for all carers to support, information and advice; and to be listened to in decisions about the care and support of the person they are caring for, including a responsibility on health boards in relation to carer involvement in discharge planning. The Triangle of Care¹⁴ helps mental health services support carers in exercising these rights by providing the information, advice and support that carers require to continue in their roles as expert partners in care.

¹⁴ Carers Trust (2019). Triangle of Care: A Guide to Best Practice in Mental Health Care in Scotland.

A new Child and Adolescent Mental Health Service (CAMHS) assessment tool has also been developed, heavily based on the main Triangle of Care self-assessment tool, enabling CAMHS teams to get a true picture of how they engage with carers and families, supporting them to create action plans to improve.

Actions to involve carers in individual decision making

We will continue to support improvement work to ensure health and social care professionals are aware of their duties to involve carers and have the skills and resources they need to work together as equal partners in care.

We will ensure that the Independent Review of Adult Social Care recommendations on effective carer involvement are delivered as a key element in a NCS.

We will continue to fund Healthcare Improvement Scotland (HIS) and NHS Education for Scotland (NES) to work in partnership and explore what 'involvement' in hospital discharge means to unpaid carers and what 'good practice' looks like.

We will improve the involvement of carers in decisions where the cared-for person has mental ill health.

We will respond to any recommendations of the Mental Health Law Review for improvements to the experience of unpaid carers, including young carers, within mental health.

We will update the Code of Practice for continuing and welfare attorneys to reflect changes in the legislative environment, taking into account UNCRPD as well as recent case law.

3. Health and Social Care Support

Strategic outcome

People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and wellbeing. (*National health and wellbeing outcome 6*)

Why this is important

There is a close relationship between social care support for carers and those they look after. Supporting carers in their own right improves outcomes for them and the person for whom they are caring. Sustaining caring relationships in this way has major benefits for our health and social care system. The Scottish Government will work in partnership with local government and other relevant public bodies to ensure that unpaid carers are fully supported to have a life alongside caring, in order to protect their health and wellbeing and better sustain their caring role.

There are already various ways in which we try to safeguard carers' health, including providing preventative support through the Carers Act. However, we know that many carers continue to experience a range of health problems, including poor mental health and difficulties accessing medical appointments because of their caring responsibilities. We also know that accessing social care support can be a challenge for unpaid carers, often for many of the same reasons.

The nature of some caring roles can lead to increased risks to the carer's health and wellbeing. There are a number of reasons that can give rise to this, including insufficient support for the unpaid carer, a lack of trauma-informed support from services, a lack of breaks and economic and social isolation. This can lead to poorer outcomes for the person who is being cared for.

A strategic approach is needed to tackle the causes of this kind of situation, to ensure that carers are not overwhelmed by their responsibilities and are empowered to look after their own health and wellbeing. This must be reflected consistently across the whole country to foster a balanced and sustainable lifestyle for unpaid carers.

How we will achieve this

Support under the Carers Act

The Carers Act¹⁵ is fundamental to carers' rights. It provides for each carer's right to a personalised plan to identify what is important to them. This should take account of their caring situation, their willingness and ability to care, and aspirations for work or study. Through the Act, carers have the right to support to meet their eligible needs. Local authorities must consider whether that support should include a break from

¹⁵ The Carers' charter sets out carers' rights under the Carers Act.

caring. Every area must have a local carer strategy and carer information and advice service.

Ensuring that the Carers Act rights are delivered consistently for every carer is crucial to achieving the kind of outcomes we want for carers. We will continue to work with local authorities and others who have responsibilities under the Act to make sure these rights can be accessed by those who need them.

We have invested in implementing the Carers Act via the local government settlement, with baselined increases every year since the Act came into force in April 2018, bringing the total additional investment to £88.4 million per year in 2022-23. We will continue to encourage local authorities to spend their full share on expanding carer support, and will work with them to support this.

Workforce

The role of the social care workforce is critical in securing the best outcomes for unpaid carers. Some of the key actions under the national plan for implementing the Carers Act are to ensure that the people who work in health and social care have the skills, knowledge and confidence to identify, support and involve carers in line with the Act. The challenges of recruiting and retaining social care staff have a significant impact on the delivery of care and support and inextricably on the level and intensity of the caring role for unpaid carers.

Social care and social work staff

The Scottish Social Services Council (SSSC) regulates and produces training for the social care workforce. SSSC's 'Personal Outcomes Planning eBook'¹⁶ supports practitioners undertaking carers' personalised plans under the Carers Act. SSSC, in partnership with NHS Education for Scotland, created Equal Partners in Care¹⁷, an educational resource for the health and social care workforce to help them best understand their roles and responsibilities in identifying, including and supporting unpaid carers.

In partnership with COSLA we have developed a social care workforce programme and are working with our partners across Local Government, Trade Unions, and the third and independent sector to improve terms and conditions, recruitment and retention of social care staff as well as enhanced career progression through learning and development. Recognising the important role of carers is a key part of this.

Local carer centres and young carer services

Carer centres and young carer services have an integral part to play in making a lasting difference to unpaid carers and they have a central role contributing to outcomes and priorities for unpaid carers at local and national levels. We fund the Coalition of Carers in Scotland to help local carer support organisations build capacity to deliver under the Carers Act and strengthen collaboration with their local statutory partners. We have provided a series of grant funds to help local carer

¹⁶ Scottish Social Services Council (2022). [Self-directed Support: Personal Outcomes Planning eBook](#).

¹⁷ NHS Education for Scotland (2021). [Equal partners in care](#).

organisations update their resources, technology and systems and improve their capacity to support carers.

“Thank you for remembering carers and making them remember themselves even for a little while. It allowed me to give myself permission to do something for me. I am usually the last one on the list.”

Understanding caring and measuring progress

The Carers Census¹⁸ collects information from integration authorities and carer organisations on local Carers Act implementation. It aims to establish the number of carers receiving support; what that support looks like; and an overview of progress across the country. We are funding Healthcare Improvement Scotland (HIS) to work with local services to explore challenges associated with this and consider the future purpose of the census and opportunities for local and national data.

We also need to improve our understanding of carers and caring more broadly. We will do this by drawing on the 2022 population census and other national surveys to review and refresh Scotland’s Carers.¹⁹

Actions about the Carers Act

Where possible, we will increase funding to carer centres and young carer services.

We will continue to encourage authorities to spend their full share of carers Act funding on expanding carer support, ahead of establishing a National Care Service making Ministers responsible for social care spending decisions.

We will support improvements in the data collected under the Carers Census so that only the most necessary information is collected and used to improve support for unpaid carers.

We will review and update Scotland’s Carers.

Breaks from caring

We know that access to personalised, flexible short breaks can make a real difference for carers. It is vital that carers are able to take breaks from their caring responsibilities, especially for the mental health benefits they provide and the opportunity for people to recharge their batteries. This can help to sustain caring relationships and enable carers to have more of a life of their own. Breaks need to be accessible throughout the caring role and be a positive experience for both the carer and cared-for person. Making sure all carers are able to take regular breaks from caring is key to building a resilient and sustainable caring relationship.

¹⁸ The Scottish Government (2022). [Carers Census, Scotland, 2021-22](#)

¹⁹ The Scottish Government (2015). [Scotland’s Carers](#).

Breaks are currently provided for through various routes, but we know that not everyone is able to access them. We must change this. We will ensure that every carer who needs that support has a right to breaks from caring and is able to make use of these rights on a consistent basis in a way that suits them and the person for whom they care.

Breaks under the Carers Act

Local authorities and integration authorities have a specific duty under the Carers Act to consider whether support to a carer should include a break from caring. Even when authorities decide to fund this support, many people struggle to find suitable breaks. This was exacerbated by the closure and then restricted capacity of services during the COVID-19 pandemic.

To provide better access and improve the availability of different short break opportunities, we have commenced a range of improvement work:

1. *'Promoting Variety in Short Breaks'* programme, to expand short breaks by supporting health and social care partnerships to use strategic commissioning to strengthen the variety and availability of statutory short break services. This includes funding local test of change projects and learning exchange workshops, supporting the sharing of good practice and ideas.
2. Expansion of Creative Breaks²⁰ funding, in line with Better Breaks²¹, to support and expand alternative third sector short break provision.
3. Funding local carer organisations to build their short breaks capacity to improve short breaks options for carers, such as short break brokerage services, staff training and participating in Respite²².
4. Providing guidance and other support to encourage the full reopening of local day care and respite services.
5. Funding Health Improvement Scotland to conduct a landscape review of the short breaks sector to improve our understanding of the issues facing the sector, the availability of different types of breaks and barriers to improvement.

We will continue to work with Local Government to ensure safe provision of day and respite services following the pandemic. We will also support local authorities to transform or redesign services to better suit people's needs.

Right to breaks from caring

We are committed to establishing a right to breaks from caring and have brought forward draft legislation in the National Care Service (Scotland) Bill. This proposes a new duty for authorities to consider whether a carer is already achieving sufficient breaks (e.g. with a limited caring role; by having family or friends step in; or due to the cared-for person's existing care package). If not, they would be entitled to receive support to meet their need for breaks.

²⁰ Shared Care Scotland (2021). *Creative Breaks*.

²¹ Shared Care Scotland (2021). *Better Breaks*.

²² Shared Care Scotland (2021). *Respite*.

As the NCS Bill documentation makes clear, this right to breaks legislation can be implemented ahead of establishing the National Care Service, and it is our intention to do this before the NCS comes into being.

Innovative approaches to short breaks

Alongside statutory support, we want to improve the availability of easy-access short breaks. We increased the third sector Short Breaks Fund from £3 million to £8 million in 2022-23, including £3.5 million for local carer centres. The fund is split into four programmes administered by Shared Care Scotland and Family Fund to provide preventative breaks for carers alongside (and not in place of) statutory support under the Carers Act.

- *Better Breaks* and *Creative Breaks* programmes provide 12-month grants to third sector organisations to develop and deliver short breaks projects;
- *Time to Live* provides micro grants, to help carers fund short breaks; and
- *Take a Break Scotland* provides direct grants to carers of disabled children and young people to support personalised short breaks.

Alongside the Short Breaks Fund, Respite encourages local businesses to donate a range of gifts and experiences to unpaid carers in the area.

Time to Live Case Study

James has been a carer for his wife for many years. While he wouldn't have it any other way, he has recently become aware that he is more isolated than perhaps he should be as a result of his caring role and his creative break was the epiphany.

He spent his money on woodworking tools with the intention of getting some time to himself. "It's important for both people in a relationship to get some time away from each other." However, his wife mentioned needing a set of shelves so James decided he would like to try and make them instead of buying a ready-made set. He sourced the wood from a local supplier and while chatting with the woodman it was here he realised how much he missed company.

James found himself able to forget all about caring as he sanded and honed his shelves, taking time to admire the grain in the wood and feel its texture. Before not too long the shelves began to take shape.

They are now securely fixed to a wall and every time James walks past them he feels really proud as he thinks 'I made those'. It has done his confidence no end of good. He is continuing to use the tools for other projects and that is bringing him into regular contact with the woodman, now a good friend. "Every time I collect some new wood I get the chance for a good old chinwag". In addition, James has taken

the courageous step and joined the local carer café where he gets the chance to socialise with other carers once a month.

His creative break has not only improved his wellbeing and resilience to continue caring, it has also opened up a world of new people to him.

Actions about breaks from caring

We will introduce a statutory right to breaks from caring under the Carers Act and fully fund its implementation.

We will work with stakeholders to improve the availability and range of short breaks, supported by evidence to support our approach.

We will continue to work with local service commissioners, Shared Care Scotland and others to promote greater availability and choice of short break support in different areas.

We will build on our recent investment to increase funding for short break support to increase availability of easy-access preventative breaks support.

We will continue to promote the importance and regular review of Short Break Service Statements, to ensure carers understand their right to a break and the breaks available in their area.

Ensuring self-directed support access and flexibility

Self-directed support - overview

Self-directed support (SDS) remains crucial to unpaid carers. It can be vitally important in enabling unpaid carers to balance care and other parts of their lives. SDS applies across all ages and user groups, including children and young carers. It is at the heart of Scotland's approach to social care support.

People have told us that they welcome the choice and control SDS gives them over their own support, and that it works well when it is implemented effectively at local levels. To support this, the SDS Framework of Standards (2021) helps to ensure the principles of the SDS Act are embedded in a way that supports people and carers to best meet their own personal outcomes. For example, the Framework encourages the practice that 'authorities and partnerships have clear and equitable systems and processes in place to involve people in the development of their budget' (Standard 12: Access to Budgets and Flexibility of Spend).

The statutory guidance for the Carers Act makes it clear that carers must be involved in assessment for SDS options and decision-making for the supported person where appropriate. This may involve a carer assisting the person they care for in decision making.

Recent evidence, including the Independent Review of Adult Social Care, has identified a number of challenges to SDS implementation. These challenges include

the potential for SDS options to not be offered or explained to the supported person, as well as the reduced availability of options or services – in some cases, according to the [My Choice My Support report](#) (2020) up to 50% of people are not being offered the choice of all the SDS options.

These present significant and systemic challenges for many parts of the social care system and for people in receipt of SDS, which have been made worse by the impact of the pandemic and the cost of living crisis. For carers, a good experience of SDS can help to create a manageable and appropriate balance between caring responsibilities and other parts of their life. Shortcomings in the delivery of SDS have negative implications for both those in receipt of SDS and their carers.

Actions about self-directed support (SDS)

In addition to updating the SDS Statutory Guidance, we will continue to work with and through delivery partners, including Local Authorities, to support and improve delivery of SDS consistently throughout Scotland and to support national conversations promoting improvement, early intervention, capacity-building, innovation and good practice.

In the medium-term, we will embed SDS principles and a human rights-based approach into the development of the National Care Service.

We will continue to focus on creatively and flexibly supporting carers through SDS.

Carers' healthcare

Health checks and flexible healthcare appointments

Caring can have a significant impact on the health of unpaid carers, and this can be compounded by difficulties in getting healthcare appointments that fit around their caring responsibilities. There is scope to improve carers' access to routine healthcare and to make sure that the specific circumstances of carers is taken into account when offering healthcare appointments.

Carers often experience complex socio-economic and other inequalities and challenges with accessing care. There is a renewed emphasis on the potential primary care has to address health inequalities and the wider determinants of health.

There are already a range of services in place that can support unpaid carers to better manage their health. Some have a carer-specific focus, while others are more general. We will commit to raising awareness of these services among unpaid carers and to ensuring that our health services consider the needs of carers. Taking a strategic approach to this will support a joined-up approach that supports all aspects of carers' lives, rather than through the narrow prism of their caring role.

The following section describes healthcare challenges that often affect unpaid carers and some of the services that are in place. These can be a model for how we ensure the needs of unpaid carers are considered in designing service provision.

When the cared-for person is in hospital

Hospital visiting arrangements are very important for carers when the person they care for is in hospital. We have worked with NHS Boards to implement person-centred visiting across Scotland.

Person-centred visiting shifts most of the control over visiting to the patient, carers and their immediate family, much like the arrangements commonplace in children's hospital settings. It is a partnership approach between patient, carers and clinical staff to ensure people stay connected, on their terms, to the people that matter most to them.

Organisations which have developed this kind of carer-friendly culture have demonstrated a positive impact which can include reductions in falls and complaints, as well as improved patient and carer experience. There is growing evidence of the benefits of allowing people better access to carers while they are in hospital, for patients as well as staff.

The COVID-19 pandemic resulted in various restrictions to hospital visiting; however our guidance has been clear that family members who have caring roles should not be treated as "visitors", but should be able to continue to provide support as much as possible.

We will continue to work with NHS Boards to develop and implement person-centred visiting.

Community link workers and welfare advisers

Sometimes caring can arise from a lack of choices, and the challenges faced by carers can both cause and be exacerbated by inequalities of low incomes and poor health. A community link worker's (CLW) knowledge of local services should include local carer organisations and support so that they can support carers to appropriate services. In March 2022, there were over 300 CLWs working in general practice across Scotland supporting people with a wide range of issues, including debt, social isolation, benefits and housing.

We will continue to encourage the use of CLWs and ensure that they understand how best to support carers.

Actions about carers' healthcare

We will consider how to provide flexible health appointments for carers, including how we provide replacement care for appointments.

We will continue to engage with NHS Boards to help drive implementation and support them to test and spread improvements to person-centred visiting.

We will reinforce to NHS Boards their statutory duty to involve carers in decision making about when the person they care for leaves hospital, and work in partnership to help them deliver this consistently.

We will support effective and carer-aware multi-disciplinary teams in every locality, both in and out of hours, involved in the strategic planning and delivery of services, including through the development of GIRFE.

Carers and mental health

The demands of caring can have a negative effect on carers' mental health, particularly where the carer is unable to find an appropriate balance between the care they provide and other parts of their life. Evidence suggests that there is a higher risk of suicide among carers, both male and female and across different ages, than those who do not have caring responsibilities. This stark reality has been worsened by the pandemic, and we need to ensure that we take a strategic approach to improving the conditions that can give rise to this.

We will commit to tackling the issues that give rise to poor mental health in carers, both directly and through improving carers' situation through the totality of the actions set out in this strategy.

There are already a number of resources in place to support people's mental health, including the National Wellbeing Hub. GPs are crucial to recognising and supporting both the physical and mental health needs of unpaid carers, and can provide information, support and signposting.

We will continue to ensure such resources reflect the needs of carers, including placing them alongside the social care workforce in considering the potential impact of caring on a person's mental wellbeing. We will work in partnership with primary care and support services to ensure that the needs of unpaid carers are understood and recognised, and that appropriate action is taken when needed.

Actions about mental health and carers

We will consider what further resources and signposting of support may be needed to support carers' mental wellbeing within the National Wellbeing Hub.

We will work with relevant stakeholder groups to ensure that carers are aware of the range of mental health and wellbeing resources and advice available to them, and to consider whether carer-specific advice is needed.

We will share learning and examples of practice that emerge through our work on the Communities Mental Health and Wellbeing Fund projects in relation to supporting the mental health and wellbeing of carers.

We will improve training and support for health and social care professionals to help identify and support unpaid carers at risk of suicide and those who care for people at risk of suicide by promoting learning resources and awareness-raising on suicide prevention.

By spring 2023, we will publish a long-term delivery plan for the National Trauma Training Programme setting out how we will continue to support, embed and sustain trauma-informed workforces, services and care. This will include a priority focus on trauma training and support for adoptive parents, kinship, foster and supported carers to support delivery of The Promise.

Palliative and end of life care

We want to ensure that carers are valued and supported to care for family members or people who are dealing with a progressive illness or are dying, in partnership with professionals and other carers. This is one of the toughest challenges a carer can face. We are committed to developing a new strategy for palliative and end of life care that reflects what matters to people – patients and their families and carers – experiencing serious illness, declining health, dying and bereavement.

We will ensure that the voice of carers is heard through our Strategy Steering Group for Palliative Care, and through engagement with those with experience of caring for someone with declining health or who has died, so that the strategy can address how we can best support those carers emotionally, physically, socially and financially.

Dementia and other neurological conditions

National Dementia Strategy

Scotland's most recent National Dementia Strategy 2017-2020²³ set out national action to support better services and supports for people living with dementia and their carers. Key areas included more and earlier diagnosis, increasing access to support after diagnosis, improving integrated home care and taking a national approach to dementia palliative and end of life care. Like the two predecessor strategies, it took a specific focus on better supporting and enabling family carers of people living with dementia.

In response to the COVID-19 pandemic, the Scottish Government published the Dementia and COVID-19 National Action Plan in December 2020.²⁴ The plan outlines how the Scottish Government will work with the Convention of Scottish Local Authorities (COSLA) and a range of stakeholders to strengthen community resilience and support people living with dementia and their families to continue to get the right care, treatment and support at the right time as we learn to live with COVID-19.

In particular, human rights-based Standards of Care for Dementia²⁵ provide human rights-based standards that people living with dementia and their carers can expect across all care settings. Carers are entitled under the standards to be involved in all

²³ The Scottish Government (2017). National Dementia Strategy 2017-2020.

²⁴ The Scottish Government (2020). Coronavirus (COVID-19) - dementia and COVID-19: action plan.

²⁵ The Scottish Government (2011). Standards of Care for Dementia in Scotland.

aspects of care planning to be well-informed about dementia and to access appropriate peer support. We fund two national dementia workforce programmes to support local implementation of the dementia standards.

We will continue to build on this approach to ensure a cohesive and joined-up approach to recognising and supporting carers' needs when they are caring for someone with dementia.

“I’ve been caring for my husband who has a diagnosis of dementia for 3 years, no-one told me there was support for me – not the doctor or the nurse who comes in. I could have done with help from the Carers Centre sooner. It’s good to have it now but I’ve hit crisis and it’s hard to pick myself up.”

Supporting the Scottish Strategy for Autism

Scotland’s National Autism Strategy’s outcomes and priorities for 2018-2021²⁶ sets out priorities for action to improve outcomes for autistic people and their carers living in Scotland.

Supporting the Learning Disability Strategy

In 2019, we published, with COSLA, a new joint framework to support the delivery of our ‘Keys to Life’ learning disability strategy. The framework emphasises the joint commitment of national and local government to people with a learning disability and their carers.

Neurological care and support: framework for action 2020-2025

This Framework for 2020-2025 sets out a vision for driving improvement in the care, treatment and support available to people living with neurological conditions – and their carers - in Scotland. An aim is to ensure people with neurological conditions and their carers are partners in their care and support.

We will continue to work in partnership with local authorities, the third sector and other relevant organisations, as well as with carers themselves, to ensure that existing actions in these areas are delivered in a way that best supports carers.

Actions about dementia and other neurological conditions

We will engage widely throughout 2022/23 and co-produce with people living with dementia, carers, statutory, third sector and independent sector partners to develop our new National Dementia Strategy, building on our internationally recognised action in areas such as rights-based care and post-diagnostic support.

We will use the framework priorities to increase support for people with autism and their carers.

²⁶ The Scottish Government (2018). [Scottish Strategy for Autism: outcomes and priorities 2018- 2021](#).

We will work closely with people with learning disabilities as role models, their carers and leaders to raise awareness and challenge perceptions in Scotland.

We will work with the NHS boards, integration authorities, neurological and carer organisations to help ensure carers of people living with neurological conditions are aware of their rights under the Carers Act; and that local carer services know how to access the most relevant information and training for carers of people living with neurological conditions.

Supporting the wellbeing of families

It is critical that disabled children are provided with the right support to achieve their full potential, and that their families are supported at an early stage to enable them to cope with the stresses and demands of their caring role, and to look after their own health and wellbeing. There are a number of inter-related policies and strategies which underpin support and planning for children and young people, including disabled children and young people, these are:

Getting it Right for Every Child is the national approach in Scotland to supporting the wellbeing, and to improving outcomes, of our children and young people. Refreshed GIRFEC materials were published in September 2022 ([GIRFEC resources](#)).

In March 2022, we published the [Scottish Government's Implementation Plan](#), setting out how we will work across Government to Keep the Promise we have made to Scotland's children and young people and their families and carers. Our commitment to Keep the Promise involves ensuring there is a co-ordinated approach to services which wrap around families, providing the right support to the right people at the right time and in a way that is respectful and empowering for families.

The Programme for Government 2021 announced new Whole Family Wellbeing Funding (WFWF), investing at least £500 million to help us to #KeepThePromise. The Promise highlights clearly the importance of un-stigmatised access to effective family support with early intervention and prevention at its core.

Actions about supporting the wellbeing of families

We have committed £32 million of funding in 2022/23 directly to Children's Service Planning Partnerships (CSPPs) to build local service capacity for transformation and to support the scaling of existing transformational practice of whole family support services in local areas.

We are working in collaboration with CSPPs to provide a range of support to accelerate and share learning to drive whole system change in family support at local and national level.

We have committed a further £2.974 million of funding in 2022/23 to provide support to families on a low income who are raising disabled or seriously ill children and young people through the Family Fund who deliver support, advice and direct grants to families in Scotland.

As part of the Tackling Child Poverty Delivery Plan commitment, we will engage extensively with parents, carers and children to draft a strategic framework for Out of School Care by the end of this Parliamentary term.

As we design a system of wraparound childcare, we will integrate food and childcare provision wherever possible recognising the benefit to children and families of coordinating food, childcare and activities before school and during the holidays.

4. Social and Financial Inclusion

Strategic outcomes

- That the social and economic contribution, impacts and scale of caring are recognised, understood and reflected in local and national policy making across all areas.
- Carers are able to access the financial support and assistance to which they are entitled.
- Carers are able to take up or maintain employment and education alongside caring if they wish to do so.
- Carers can participate in and are valued by their community and wider society.

Why this is important

For many people who provide unpaid care it is fulfilling and meaningful. However, without proper support, the demands of some caring situations can have a negative effect on a carer's life. People can find themselves worse off financially if, for example, they are unable to work full-time because of their caring responsibilities. Some carers can also struggle to have a life beyond caring. These issues do not affect carers evenly. Women carers are more likely than men to be unable to work, with knock-on effects on their income and social isolation, while carers in remote and rural areas can face challenges related to their location.

The social security benefits available to carers recognise that caring roles can impact on people's finances. Carer's Allowance, and its forthcoming replacement in Scotland, Scottish Carer's Assistance, while not a payment for care, provides some financial support and recognition for people who have limited their employment or study because of caring responsibilities. Unlike most other income replacement benefits, there are no work requirements, and it is not means tested, but there is a limit to the amount that those who receive it can earn. For those on low incomes, the benefit can be a passport to help with other outgoings, such as housing costs.

The interaction between caring responsibilities, a person's income and their ability to maintain connections and interests in addition to being a carer is complex. Social isolation can be a particular risk for carers given the extra responsibilities they have and the financial burden that often comes with caring. If someone has to reduce the hours they work or give up work altogether, it can have a severe financial impact, and can also increase their social isolation. More is needed to ensure that carers can lead full and balanced lives and are not forced into poverty or social isolation because of their caring responsibilities. We must address the underlying reasons why so many carers find themselves in financial hardship.

Helping to ensure that carers can balance their caring responsibilities with the ability to work, attend education and have a meaningful quality of life beyond caring is crucial. The impact of the pandemic has been particularly severe for many unpaid carers, and that is being compounded by the cost crisis. This is affecting everyone, but some people face particular challenges. From engaging with carers in remote

and island communities, for example, we know they face increased barriers because of higher living costs and the greater distances to travel for caring or support.

Enabling people to provide care for their loved ones while leading rich and varied lives beyond their care responsibilities is fundamental to Scotland's wellbeing economy. It is at the heart of our Carers Strategy.

How we will achieve this

Scottish Carer's Assistance

Social security is a key component of the support available to unpaid carers. The Scotland Act 2016 gives the Scottish Government powers relating to social security and responsibility over certain benefits, including carer benefits. We are using these powers to create a Scottish social security system based on dignity, fairness and respect. We will use all available powers to ensure the benefits to which carers are entitled provide meaningful support.

We are working with carers and stakeholders to develop a replacement benefit for Carer's Allowance, currently known as Scottish Carer's Assistance, that works better for the people of Scotland. To protect the safe and secure transfer of benefits for people already getting Carer's Allowance, and avoid creating a 'two tier system' which would disadvantage some carers, we do not plan to make changes to eligibility criteria until case transfer is complete.

In our Scottish Carer's Assistance consultation²⁷, we proposed five priority actions once the process of moving carers' cases from the Department of Work and Pensions to Social Security Scotland is complete. These are:

- removing education restrictions so full-time students can get Scottish Carer's Assistance,
- allowing carers to add together hours spent caring for more than one person to meet the caring hours requirement for Scottish Carer's Assistance,
- increasing the time carers will receive Scottish Carer's Assistance from eight to twelve weeks after the death of a cared-for person,
- making payments for longer when a cared-for person goes into hospital or residential care, and
- increasing the amount carers can earn and still get support.

We know that some carers are in paid work, or want to work, but that current rules can make this difficult. We have heard from carers that the earnings limit is too low, and restricts opportunities. We will seek to increase the earnings threshold for carers who wish to take up paid work. We will also consider how Scottish Carer's Assistance could give more stability for carers who would lose their entitlement to Carer's Allowance if they earn £1 over the earnings threshold under current arrangements. This situation means that carers must restrict their working hours to keep their benefits, or end up worse off despite working more hours. We will make the rules for carers who wish to work as straightforward and fair as possible, and we

²⁷ The Scottish Government (2022). [Scottish Carer's Assistance: Consultation](#).

will consider what this could mean for other benefits to ensure carers are not worse off by taking on paid employment.

Our consultation also sought views on whether we should explore a payment to recognise the impacts of a long-term caring role.

Carer's Additional Person Payment

We recognise that caring for more than one person can have additional impacts on carers in terms of their health, wellbeing, and employability, and that no extra support is currently available through Carer's Allowance. Carer's Additional Person Payment is a new payment to be delivered as part of Scottish Carer's Assistance to provide extra support for carers who are eligible for Scottish Carer's Assistance and caring for more than one disabled person.

Attendance Allowance

Attendance Allowance is a benefit for people over State Pension age delivered by the Department for Work and Pensions. It is awarded to help with extra costs if a person is disabled severely enough that they need someone to help look after them.

We intend to replace Attendance Allowance with Pension Age Disability Payment. This follows our replacement of Disability Living Allowance for children with Child Disability Payment, and Personal Independence Payment with Adult Disability Payment.

We want people to receive the benefits to which they are entitled. In designing disability assistance, we are making the whole process as simple and easy as possible to encourage people to apply for payments to which they are entitled. Once fully operational, clients will be able to apply online, by phone, by post or face-to-face.

Advocacy and advice

It is vital that people know what benefits they are entitled to, and that they are able to easily and consistently access them. We are committed to supporting people to receive what they are entitled to and are working with a range of partners who have experience in benefit take-up to learn every lesson we can on what works best. The Scottish Government's second Benefit Take-up Strategy²⁸ sets out our approach to removing barriers to accessing entitlements.

The Social Security Advocacy Service – delivered independently by VoiceAbility - also supports disabled carers and those they care for to have their say and understand choices and processes which affect them. We will continue to work closely with stakeholders to ensure that carers are able to easily access benefits and advice about benefits.

²⁸ Social Security Scotland (2021). Social Security (Scotland) Act 2018: benefit take-up strategy - October 2021

Actions about social security

We will draw on responses to the Scottish Carer's Assistance consultation to shape future improvements to social security support for carers.

We will support people to receive what they are entitled to and work with a range of partners who have experience in benefit take-up, taking a lessons learned approach on what works best.

We will run advertising campaigns to reach hard-to-reach groups and raise awareness of our benefits. We will promote our payments and remove stigma to deliver a new system that treats people with dignity, fairness and respect.

In line with our second Benefit Take-up strategy we will develop a holistic approach to signposting and referral, ensuring clients of Social Security Scotland are helped to access wider support.

Poverty and cost of living

The cost crisis is disproportionately affecting unpaid carers, exacerbating existing financial pressures already felt by them, not least the long-term impacts of the pandemic. We know that caring comes with additional costs that can significantly impact a carer's financial situation. In conjunction with the reduced earning opportunities described above, providing unpaid care can be financially precarious.

This section sets out a cross-government approach to carers' financial inclusion, including mitigations being taken to alleviate pressure on carers due to the cost crisis. While these measures are not necessarily aimed at carers, many of them will be able to support unpaid carers. We will commit to ensuring that carers are aware of the support that is available to them, and to ensuring that carer-specific challenges are reflected in the support that is available.

Advice and support

To help unpaid carers access support to which they might be eligible, the Scottish Government has launched a 'cost of living' website. Through the [Cost of Living Support Scotland](#) website, people will be able to find out what support may be available depending on their own personal circumstances.

The Scottish Government is investing around £12.5 million to provide free income maximisation and welfare and debt advice services across the country.

Energy costs

Carers typically spend a larger proportion of their income on energy to keep the person they care for warm and manage their condition, while they may also need to purchase medical equipment regularly. Due to this, many unpaid carers are likely to be particularly badly affected by rising energy costs. The Scottish Government is putting in place a range of resources and we will make sure that carers can access these easily.

In 2022, we are doubling the Fuel Insecurity Fund (FIF) to £20 million, to assist those most affected by rising global energy prices. This will provide front line support

through third sector organisations to people who are at imminent risk of self-rationing or self-disconnecting their energy supply.

In addition, we have committed £1.8 billion to accelerate the deployment of heat and energy efficiency measures and to support those least able to pay. We have allocated £336 million to heat, energy efficiency and fuel poverty measures in 2022-23, including £119 million targeted at fuel poor households, many of whom will be unpaid carers.

Scottish Welfare Fund

The Scottish Welfare Fund is open to anyone who needs support and is on a low income, including unpaid carers. Applications to the Fund are assessed on the basis of need, and consideration is given to each applicants' individual circumstances. Applicants to the Fund do not necessarily need to be claiming a low income benefit in order to be eligible for support, which means that unpaid carers and those not in receipt of any carer specific benefit may be able to receive help.

The Scottish Welfare Fund budget has been protected and maintained for 2022-23 and we are also undertaking a full, independent review this year which will examine all aspects of the Fund including accessibility, funding and administration. The findings from the review will help to inform any future policy changes.

Local authority administration of the Fund is supported by Statutory Guidance which is publicly available and was developed by Scottish Ministers in conjunction with Local Authorities. The Guidance highlights carers as a group of people who may be particularly vulnerable and local authorities are encouraged to take into account each individual applicants' circumstances when deciding on an award, including whether or not the applicant has any caring responsibilities.

We will continue to work with carers to assess whether further assistance, including carer-specific support, is needed separately to the support described above.

Actions about poverty and cost of living

We will continue to work with unpaid carers to direct them to appropriate sources of support during the cost crisis.

We will work with debt advice services and carer centres to understand and respond to the continuing impact of the rising cost of living on these services, and will ensure that the specific needs of unpaid carers are reflected.

We will draw on the findings from the Scottish Welfare Fund review to inform any future policy improvements.

Supporting carers and employment

Carers in the workforce

Before the COVID-19 pandemic, around 270,000 people in Scotland combined work and unpaid care²⁹. This represents around 1 in 8 of the workforce. These numbers are likely to grow in the context of an aging population and more people living longer with complex conditions. Most people will be carers at some stage in their working lives.

Working-age women are most likely to be carers, and the likelihood of having caring responsibilities increases for those in their late-40s and early-50s. Over a quarter of women in this age bracket are carers. This represents a large and skilled portion of the workforce.

Balancing care with employment can be tricky. Caring roles tend to change over time, with the intensity and impact of the role linked to changes in the life stages and health and wellbeing of the carer and the person for whom they care. Many carers give up work or reduce their hours in order to provide the care that is needed. This may be a personal choice for some, but others may feel that there is no other option when insufficient support is available to allow work and caring responsibilities to be held in balance.

People should not be forced to reduce their working hours in order to care for someone. As discussed in the Carers Act section of Chapter 4, carers' personalised plan for social care support should take account of their situation, willingness and ability to care, and aspirations for work or study.

Giving up work can reduce financial security for a carer and their family, as well as increasing social isolation and loneliness. It can have a longer term impact on someone's career prospects and their opportunities to return to work. This also has a wider cost to the economy, with people's valuable skills and experience removed from the workplace.

Scotland's economy cannot afford to lose skills and experience when a person decides to give up work or reduce their working hours to allow them to care for a loved one. In addition to the personal impact on individuals, it is estimated that unpaid carers leaving employment cost the UK public purse £2.9 billion a year in welfare payments and lost tax revenue³⁰. The impact of women reducing hours, not taking or applying for promotions, or leaving the labour market altogether in order to provide unpaid care contributes towards Scotland's gender pay gap.

Supporting carers to enter or stay in work brings vital benefits to carers, employers and the economy. Many of the challenges faced by carers are due to financial hardship, and tackling the systemic issues that force many to reduce their working hours is a fundamental aim of the Carers Strategy. A range of Scottish Government policies recognise this and promote greater opportunities for carers. For example, the Workplace Equality Fund supports employers to deliver innovative solutions to

²⁹ The Scottish Government (2015). *Scotland's Carers report*.

³⁰ London School of Economics (2018). *Supporting unpaid carers to remain in employment*.

overcome workforce inequalities faced by groups such as carers, and to encourage employers to embed Fair Work practices within their workplaces. We will continue to promote and support this fund.

When caring roles end or change, carers can find it difficult to re-enter the workforce after long absences. Many of them are older women, who may face additional barriers to getting back into work. We support a range of work to support people to return to work and to promote positive working practices which will encourage them to do so.

No One Left Behind is our strategy for placing people at the centre of the design and delivery of employability services to ensure those services are flexible, tailored and responsive to the needs of individuals, including carers, and local labour markets. We published our [No One Left Behind: delivery plan](#) in 2020. It is intended to tackle inequalities in Scotland's labour market and drive sustainable economic growth.

We need to ensure that the specific circumstances of carers are recognised and some elements of current interventions may need to be redesigned to reflect particular challenges experienced by carers. Careers information, advice and guidance, and employability services which carers can access must be relevant to their needs. We will undertake a survey of those with experience of providing unpaid care to better understand their experience of returning to work to inform our strategic policy approach, including developing new or bespoke provision as needed.

We will hold a Roundtable event on employability which will include carers, carer organisations, Local Employability Partnerships (LEPs), Skills Development Scotland, Age Scotland and other relevant groups.

Our aim is to support people into work by ensuring the employability offer in Scotland is person-centred, flexible and responsive to the needs of individuals and employers. We believe this is critical to help people access fair work and achieve their potential in an inclusive and fair economy. We will ensure that carers' interests are considered in the development and implementation of fair work policies.

Work is also underway to explore a Minimum Income Guarantee (MIG) for Scotland. This is an assurance that no one will fall below a set income level that would allow them to live a dignified life. This work is being developed by a Steering and Expert Group who are expected to report before the end of this parliament and will identify and prioritise actions to support steps towards a MIG within current devolved powers. Carers organisations are represented on the Expert Group to ensure that carers' voices are integral to the design and development of the Steering Groups recommendations. We will take account of any interim reports published before the work is complete.

Policies which support carers to enter or re-enter employment

Young adult carers and transition to employment

Skills Development Scotland promotes Fair Work both through its Careers Service delivery and through their employer services. This includes raising awareness of the benefits of inclusive and supportive workplaces and has supported the promotion of Carer Positive through their employer and learning provider networks.

Skills Development Scotland have worked with Carers Trust to develop an e-learning module for their Modern Apprenticeship learning providers which improves their understanding of the barriers to work that unpaid carers may face, and how they can better support them to access and achieve their apprenticeship. Learning providers also complete an Initial Assessment with all apprentices which includes identifying needs for additional support to complete their apprenticeship, for example as a result of caring responsibilities.

Careers advice and guidance is available from Skills Development Scotland³¹, with a blend of online services, helpline and direct adviser support from offices across Scotland. For those carers who feel they will need additional support to get into work, Fair Start Scotland³² is available in every area and offers pre-work support for up to 18 months and in work support for up to 12 months.

We will continue to raise awareness of the current employability support for carers through our engagement with key partners, via the [Carer Positive website](#) and through carer centres and other networks.

Policies which support carers to remain in employment

As part of addressing the systemic issues that affect carers we must make it easier for people to remain in work.

Employers can play a unique role in promoting awareness and openness about caring roles. This can encourage people to identify themselves as carers and to seek support from their employers. Carer-friendly policies, awareness and access to flexible working arrangements within an organisation can support carers to remain in work alongside a fluctuating caring role, benefitting both the employer and the carer.

Carer Positive employer accreditation scheme

Carer Positive³³ is an accreditation scheme that recognises those employers who put in place flexible and supportive working practices for people juggling work with unpaid care. It promotes the benefits for businesses, individual carers, society and the wider economy of supporting unpaid carers to remain in work alongside caring.

Carer Positive is free for employers of all sizes, across the public, private and third sectors. The requirements for accreditation are designed to be flexible and proportionate to the size and nature of the organisation involved. The scheme offers three levels of accreditation, Engaged, Established and Exemplary. These reflect the different stages an employer may be at on their journey to supporting carers in their workforce. Carer Positive is funded by Scottish Government and delivered on our behalf by Carers Scotland.

³¹ Skills Development Scotland. [Scotland's Careers Services](#).

³² Scottish Government (2022). [Fair Start Scotland: get help to find a job](#).

³³ Carer Positive.

There are over 230 recognised 'Carer Positive' organisations across Scotland. We will continue to work to promote this among employers and encourage Carer Positive accreditation within procurement, commissioning and grant funding conditions.

Claire Hawkins, Director of Corporate Affairs and Investor Relations, and Executive Sponsor of the Phoenix Group Carers Network, said: "Carers provide an invaluable service to friends and loved ones and should be celebrated. At Phoenix Group we see first-hand the important skills that working carers bring to the workplace and believe they should be supported to stay in or be able to access good work. "Supporting carers is not just the right thing to do, it makes good business sense. "It has been fantastic for Phoenix Group to participate in the Carer Positive process and we were delighted to be recognised as an Exemplary employer in 2020 due to our support for working carers. We know our colleagues really value the 10 days paid carers leave we offer to all employees every year."

Promoting flexible working

Although the legal powers governing flexible working are currently reserved to Westminster, we are committed to working with employers directly and through their representative bodies to explore ways of promoting and encouraging flexible, agile and inclusive workplaces that while benefitting all employees, is of particular importance to carers.

The Scottish Government, through the Social Innovation Partnership (SIP), is funding **Flexibility Works** in 2022/23 to support and promote the development of flexible and family friendly workplaces.

Student Awards Agency Scotland (SAAS) funding support

Support available from SAAS to carers who are students includes tuition fee payment and living-cost support of up to £8,100 per annum. Additional grants are available, notably the Dependents' Grant. This is an income-assessed grant of up to £2,640 a year to which student carers who meet eligibility criteria may be entitled. Support available to student carers from SAAS includes tuition fee payment and living-cost support of up to £8,100 per annum.

Actions about employment

We will explore a Minimum Income Guarantee (MIG) for Scotland, developed by a Steering and Expert Group, and ensure that carers' voices are integral to the design and development of the Steering Groups recommendations.

We will gather intelligence around the current range of careers information, advice and guidance and employability services to identify whether this service provision meets the particular needs of carers.

We will enhance employment support services with the aim of supporting more parents, some of whom will be carers, to enter and progress in sustainable and fair work.

We will continue to fund and promote increased uptake of the Carer Positive employer accreditation scheme, working with employers to support flexible, agile and inclusive workplaces that benefit workers with caring responsibilities.

We are providing over £750,000 in year 1 of our new multi-year Workplace Equality Fund 2022 to 2024 to overcome workforce inequalities faced by groups such as carers.

We will publish a refreshed Fair Work Action Plan, and engage with carers with lived experience of barriers to employment and employers.

Social isolation and loneliness

Scotland's carers deserve to be able to live a full life, which includes time for social activities. Research from Carers UK³⁴ suggests that "8 out of 10 carers have felt lonely or socially isolated as a result of looking after a loved one". Research from British Red Cross during the COVID-19 pandemic identified carers as one of the groups particularly at risk of isolation. We recognise that the pandemic put carers under immense pressure and exacerbated loneliness and isolation. That is why a key part of our Carers Strategy will be to drive progress to combat social isolation and loneliness.³⁵

In 2018, we launched "A Connected Scotland", our national strategy for tackling these issues and building social connections.³⁶ The strategy highlights carers as a group at risk of social isolation and loneliness and focuses on 4 priorities: empowering communities and building shared ownership; promoting positive attitudes and tackling stigma; creating opportunities for people to connect; and supporting infrastructure that fosters connections. Each of these will contribute to creating more carer-friendly communities.

Following the publication of "A Connected Scotland", we established a Social Isolation and Loneliness Advisory Group, chaired by the Minister for Equalities and Older People. The group comprises key organisations with a role in driving progress to embed a cross-sectoral approach.

We are working with the Social Isolation and Loneliness Advisory Group to develop and implement of a shared delivery plan for A Connected Scotland, which will be published in 2022.

³⁴ Carers UK (2017). The world shrinks: carer loneliness - Tackling Loneliness Hub.

³⁵ British Red Cross. The longest year: life after lockdown.

³⁶ The Scottish Government (2018). A Connected Scotland Strategy: our strategy for tackling social isolation and loneliness and building stronger social connections.

Other initiatives will help to combat social isolation and barriers to employment. In particular, efforts to support digital inclusion and to ensure reliable and affordable public transport can tackle some of the challenges faced by carers. We will take a joined-up approach to this work to ensure that carers benefit.

Digital solutions

Access to public, economic and social life is increasingly being driven by the internet and digital technology. The last two years has seen the pace of change accelerated due to the impact of COVID-19, requiring services both to respond to the immediate demands of the pandemic and to maintaining essential health and social care services.

The extent to which carers are able to engage with digital services in this new landscape has been affected by a number of factors: access to devices; cost; connectivity; and digital literacy. Little carer-specific research in this area currently exists but more general research highlights that disability, age, employment status and social isolation/exclusion are key factors in determining the extent to which individuals have access to, and use of, the internet, devices and online services.

We will work with carers to understand barriers to their digital participation, including through Connecting Scotland. We will take action to remove barriers and enable greater digital inclusion among carers both directly and through wider initiatives to provide superfast broadband to every home and our commitment to introduce 4G connectivity in remote rural and island areas. This can be transformative to reducing social isolation among carers.

Carers and transport

Adequate and affordable transport is a lifeline for many carers. A lack of transport can be a significant barrier to being able to travel to and from work, but can also restrict social opportunities. Lack of access to public transport or not owning a car can be barriers to carers accessing employment or socialising. We know that caring can sometimes force people into poverty, meaning that these effects are felt particularly among some carers. These are issues that affect many people in Scotland, not just carers; however, this Strategy will provide a means to ensure that in tackling these issues across Scotland, the specific circumstances of carers are taken into account.

Actions about social inclusion

We will ensure that the specific barriers faced by carers are taken account of when tackling broader societal issues such as digital exclusion and lack of access to public transport.

We will publish the Connected Scotland delivery plan in 2022.

We will extend the Connecting Scotland programme to reach up to 300,000 people by the end of this Parliament. The new delivery model will consider the needs of carers into account.

Carers and the cost of care

Charging for non-residential social care

In Scotland personal and nursing care is free for anyone who is assessed as eligible by their local authority, to receive this service, regardless of their age, income or circumstances. Support for unpaid carers is not subject to charging.

However people may still be charged for adult social care support that is not classed as personal care or support for unpaid carers. Charges for social care support are usually dependent on a financial assessment also carried out by the local authority which is means tested. The COSLA National Strategy and guidance defines a set of principles to underpin the development of local charging policies.³⁷ Charging policies at both a national and local level should be accessible, transparent, fair and equitable, and developed from a human rights perspective.

Actions about social care charging

We will continue to work with COSLA to progress our shared commitment to end all charges for non-residential social care support. We will work with stakeholders to develop and implement options as soon as practicable and within the lifetime of the Parliament.

³⁷ COSLA (2022-23) [Social Care Charging Guidance 2022-23](#)

5. Young Carers

Strategic outcomes

- Young carers are supported and protected from inappropriate caring and negative impacts on their education, social lives and future opportunities.
- Young adult carers are supported when moving from education to training and work while balancing an ongoing caring role.

Why this is important

Caring can be a positive experience for many young people, where they are supported to manage that role appropriately, and to have a life alongside it. Through caring, young people often develop skills and values, as well as a sense of pride and increased self-esteem from their role.³⁸ There are an estimated 28,000 young carers in Scotland under the age of 18 although this is generally regarded as an underestimate. Young carers often go above and beyond what is expected of them as young people.

However, caring can also put pressure on young people, especially where they undertake inappropriate caring responsibilities or spend long hours providing care. Without the right support, young carers are at risk of negative impacts on their educational attainment, relationships with their peer group and their mental health.

Young carers often find it challenging to recognise that they have additional responsibilities. Many have grown up with caring being part of their family dynamic and these extra tasks can feel normal to them.³⁹ Sometimes families or young people will have concerns about potential negative repercussions of social work intervention⁴⁰, leading to young carers actively avoiding seeking help or support.

Research also shows that young carers feel that their experiences and knowledge about the cared-for person are often overlooked by professionals, leaving them feeling excluded and undermined.⁴¹ There can also be stigma associated with a younger person undertaking a caring role. Coupled with a lack of awareness or support for their caring role, this can leave young people feeling lonely and isolated.

The impact of all of these factors is that many young people who are providing care do not self-identify as a carer.

Evidence shows that young carers have poorer physical and mental wellbeing than non-carers, and are more likely to live in the most deprived areas.⁴² Young carers also report experiences of social isolation.⁴³

³⁸ Becker (2007).

³⁹ Morrow (2005); Moore and McArthur (2007); Cass et al. (2009).

⁴⁰ Moore and McArthur (2007).

⁴¹ McAndrew, Warne, Fallon and Moran (2012).

⁴² Scotland's Census (2011): [2011 census | Scotland's Census \(scotlandscensus.gov.uk\)](https://www.scotlandscensus.gov.uk)

⁴³ Carers Trust. [Protecting the Health and Wellbeing of Young Carers.](https://www.carers-trust.org.uk)

Young people aged 16-18 are often at a transition point in their lives as they finish school, get their first job, or undertake further study and training. However, opportunities that are the norm for most young people can be restricted for young carers due to the additional responsibilities and pressures that come with caring.

Throughout the COVID-19 pandemic we consulted with young carers and organisations supporting them about the issues they faced, and how best we could help them. Many young carers benefit greatly from support from local young carer services. As restrictions have been removed, young carer services are now offering a mixture of face to face and online support. We continue to work closely with service managers and the national carer organisations to ensure that these services continue to have the resources they need to do this safely.

Many of the rights, policies and opportunities laid out in the preceding chapters also apply or are available to young carers. This chapter therefore highlights policies and approaches specific to young carers which contribute to recognising, valuing and involving carers, health and social care and financial and social inclusion.

How we will achieve this

Getting it right for every child (GIRFEC)

Getting it right for every child (GIRFEC)⁴⁴ is Scotland's approach to strengthening the wellbeing of every child and young person, including young carers who hold a caring role. A young carer is still entitled to the same support, protection and opportunities offered to other children. The principles and values at the core of the GIRFEC approach apply for young carers just as they do any other child.

GIRFEC is central to all government policies which support children, young people and their families and is delivered by encouraging service providers, third sector organisations and public bodies to work in collaboration with children, young people and their families. This will allow children and young people to achieve their full potential across all of the wellbeing indicators (sometimes known as "SHANARRI" indicators)⁴⁵, helping them to thrive and be able to better respond to the challenges and opportunities that life brings. GIRFEC also respects parents' rights under the European Convention on Human Rights (ECHR).⁴⁶

Recognising, valuing and involving young carers

Scottish Young Carers Festival

The Scottish Young Carers Festival⁴⁷ is an annual event that has taken place since 2008. It is funded by the Scottish Government and delivered on our behalf by Carers Trust Scotland and the Scottish Young Carers Services Alliance.

⁴⁴ The Scottish Government. [Getting it right for every child \(GIRFEC\)](#).

⁴⁵ The Scottish Government. [Wellbeing \(SHANARRI\)](#)

⁴⁶ The European Court of Human Rights and the Council of Europe. [European Convention on Human Rights](#).

⁴⁷ Carers Trust Scotland. [Scottish Young Carers Festival](#).

As well as enabling young carers from across Scotland to take a break from caring and have fun with their peers, the Festival gives young carers an opportunity to have their voices heard by talking to local and national decision makers about what matters to them and providing feedback for national consultations. In recent years, this has helped bring some key young carer issues to the fore and played a role in influencing national and local policy development.

Young carers are usually able to attend the Festival in a group from their local young carers service.

Young carers are also one of the target groups for youth arts and youth music funding delivered via Creative Scotland, including the [Youth Music Initiative Funding](#) and the 2020-21 [Youth Arts Fund](#). These programmes have provided project funding for arts and music projects working with young carers in locations across Scotland.

We must support young carers to be able to have the same kinds of experiences and opportunities as young people who do not have caring responsibilities. Engagement so far has involved sessions at the Young Carer Festival, survey work and in depth facilitated conversations with children and young people.

Involving young carers in improving mental health support

As part of the ongoing work of the [Children and Young People's Mental Health and Wellbeing Joint Delivery Board](#), the Scottish Government and COSLA are working together to improve mental health and wellbeing support for children and young people across Scotland. The voices and experiences of children, young people and their families/carers are a key part of our work to improve access to mental health support. This includes decision making, service design, delivery and evaluation.

Actions about recognising, valuing and involving young carers

We will continue to recognise and involve young carers as part of all of the actions highlighted in [Chapter 2](#).

We will continue to support the Young Carers Festival where they will have the opportunity to engage with attendees and feed into future policy making.

We will continue to engage with young carers in order to improve mental health and wellbeing support.

We will work with Young Scot to develop a social media based awareness campaign to target young carers.

Health and social care support for young carers

Carers Act for young carers

The Carers (Scotland) Act 2016 introduced many of the same rights for young carers as it provides for adult carers. The Act gives young carers a right to a young carer statement. This involves an outcomes-based conversation about the young carer's

personal circumstances and must include information about the impact of caring on their wellbeing and whether the care they provide is appropriate.

If any of the young carer's identified needs meet local eligibility criteria then they have a right to support to meet those needs. The authority must consider whether the young carer would benefit from a short break as part of this conversation.

The Act also includes duties to involve carers in individual and strategic decision making, as well as a duty for health boards to involve carers in decisions about the hospital discharge of the person they are caring for. We will continue to work with the Carers Rights and Support Steering Group bringing together carers, carer organisations, COSLA, integration authorities and others to support and guide Carers Act implementation.

Published summaries of young carers' rights under the Carers Act are:

- [The Carers' Charter](#)
- [Young Scot Guide to the Carers Act](#)
- [Carers Act Jargon Buster for Young Carers](#)

To assist with the transition from young carer to adult carer, the Carers Act requires a young carer statement, and any support that comes from it, to be maintained until an adult carer support plan is prepared. We will continue to work with authorities to ensure that this is done consistently in a way that best supports the specific needs of each young carer.

Actions about health and social care for young carers

We will continue to provide health and social care support for young carers as part of the actions highlighted in [Chapter 3](#).

We will continue to support work to ensure health and social care staff have the skills, knowledge and confidence to identify, support and involve young carers in line with the Carers Act.

Support in schools

We know that young carers often report feeling isolated, stigmatised, bullied and unsupported in schools due to their caring role and that caring can lead to increased absenteeism or lateness.⁴⁸ The following sections set out our actions to address this, including how we will work to make young carers aware of them.

Education authorities have duties to identify, provide for and review the additional support needs of all their pupils, and in particular young carers. This includes ensuring that there are the staff and resources in place to support them in their learning.

⁴⁸ Sempik and Becker (2010). Protecting Young Carers from Bullying.

Education plays a unique role in identifying and supporting young carers. Education staff have a responsibility to support the wellbeing of every child and GIRFEC provides a framework for this. They need to take into consideration any wider influences on the child or young person when thinking about their wellbeing, so that the right support can be offered. This includes the impact of caring on a child or young person.

Anti-bullying in schools

Young carers are more likely to be bullied because of their caring role. The Bullying and Equalities Module on SEEMiS, the schools management information system, was updated to reflect the new approach. SEEMiS now allows schools to select 'young carer' as a perceived reason for bullying.

In November 2017, the Scottish Government published updated anti-bullying guidance: '[Respect for All: The National Approach to Anti-bullying for Scotland's Children and Young People](#)'. We will continue to develop materials to support young carers in school.

Transitions from secondary education to higher and further education

Young carers may face particular pressures as they leave school and make the transition into college or university. At this key stage, it can also be especially hard to juggle this change with the demands of their caring role.

Education authorities have specific duties to prepare pupils with additional support needs for their post-school transition. This should happen no later than 2 years before they leave school.

Young people with additional support needs should engage personally in the transition planning process. It is good practice that whatever prospective school leavers require to learn in order to make the transition successful, should be planned carefully and in a timely manner.

We published an updated [Additional support for learning: action plan](#) and a joint [Additional support for learning action plan: progress report](#).

Actions about support for young carers in schools and education

We will continue to support work to raise awareness of young carers in schools by funding a full time Education Officer post with Carers Trust Scotland and working closely with NHS Education for Scotland.

We will help young carers secure the use of their own rights under additional support for learning legislation via the service My Rights, My Say.

Social and financial inclusion

Education is the most important component of most young carer's lives in terms of social inclusion, so most of the initiatives highlighted under the education heading above are also relevant here.

Young Carer Grant

The Young Carer Grant is available to young carers who provide care to someone normally paid a qualifying disability benefit, care for 16 hours a week and not in receipt of Carer's Allowance. The young carers do not need to be in education and can combine the number of hours spent providing care for up to three people in order to meet the 16 hours eligibility criteria.

It is intended that the Grant helps young carers to:

- look after their own health and wellbeing, improve their quality of life and reduce any negative impact of caring
- participate fully in society and, if they choose, engage in training, education and employment opportunities, as well as social and leisure
- have an increased sense of control and empowerment over their lives.

Education Maintenance Allowance (EMA)

EMA is available in Scotland to eligible people aged 16 to 19 who have reached school leaving age.

Scottish Funding Council guidance⁴⁹ encourages local authorities and colleges to promote the uptake of EMA to young carers. The guidance also highlights that a degree of flexibility around attendance patterns should be afforded to young carers when administering EMA. To enable this to happen, young carers should highlight their caring responsibility on the EMA application form. A conversation to agree on a suitable flexible attendance pattern should take place with the school or college, and then written into the student's learning agreement.

Young Scot card extra discounts and opportunities

The Scottish Government funds the Young Scot package of discounts and opportunities for young carers with a Young Scot card across Scotland to access and enjoy.

Co-created with a young carer "vision panel", the package has been fully informed by young carers. A simple application is required through the [Young Scot website](#) which also contains further information about what's on offer.

Young carers told us that the transition into adulthood is an important time, which is why we fund Young Scot to offer a special Transitions Package. Young carers aged 18, who are about to age of the Young Carers Package, can get some extra support with a flexible £100 voucher which can be used for a variety of items

"I have only recently become a young carer and it has been a big change for me and my parents. We have all been through a traumatic time. I have had good support from my local carers centre and I have attended a young carers consultation. I have found the young scot website interesting, helpful and generous."

⁴⁹ The Scottish Funding Council (2018). [Education Maintenance Allowance: guidance and processes](#).

Actions about financial and social inclusion for young carers

We will continue to encourage uptake of the Young Carer Grant by signposting via our partner organisations.

We will continue to fund the Young Scot young carer package and have expanded this for 2022-23.

6. Monitoring

Carers Strategy - implementation and monitoring

We will use the existing Carers Rights and Support Steering Group to oversee the ongoing implementation of the Strategy, extending its membership to include additional carers and other relevant organisations. We will review the Terms of Reference, membership and structure of the existing group to ensure it has sufficient influence and ambition for implementing the strategy. We will ensure that carers are directly involved in the process.

The group will be responsible for ensuring that the actions in the Strategy are implemented, monitoring their impact and ensuring that the Strategy remains relevant, particularly as we continue to learn to live with COVID-19 and manage the effects of the cost crisis.

Carers will be involved directly in measuring and monitoring the impact of the strategy during its lifespan. This will allow carers to share their experiences, measure success and advise on next steps. We will also look to engage with those carers who don't engage with formal services.

Any monitoring will be based around outcomes for carers. Improvements in carer health and wellbeing could also be captured using existing surveys as a baseline. We will seek to ensure that monitoring activity collects only the most relevant information to measure progress and inform future activity.

Reporting

As well as monitoring our progress and measuring the outcomes of our work, it is important that we report on the progress we are making towards our targets. This will provide transparency and allow us to reassess our action plan to consider whether further or new actions are required.

Measuring outcomes

As part of our co-production on the National Carers Strategy, it was agreed that we would take an outcomes-focused approach. We received feedback from a range of partners including carers, carer organisations, local government, the Third Sector, the NHS and the wider public sector.

Working with the Carers Rights and Support Steering Group and other key stakeholders, we will develop this further.

Review

We will keep this strategy under review so that we are able to respond to changing circumstances and ensure progress towards meeting the actions contained in Annex A.

7. Annex A – Action Plan

Living with COVID-19

1. Ministers and officials will continue to engage with carers to ensure their voices are heard, including ongoing support for those whose risk may still be higher.
2. We will continue to ensure that carers receive accurate and up-to-date information about living with COVID-19.
3. We will continue to closely monitor all emerging evidence on COVID-19 treatments and their clinical effectiveness.
4. Unpaid carers will continue to be able access free PPE until March 2023. The provision of PPE beyond this is under review.
5. We will continue to meet carers and carer organisations regularly to hear current concerns so we can provide up-to-date information. This includes funding and engaging with MECOPP (Minority Ethnic Carers of People Project) to ensure information meets the needs of carers with one or more protected characteristic.
6. We will encourage employers to be more supportive and flexible to support unpaid carers, through our Carer Positive scheme, which may include ensuring that sick pay and staffing practices support public health aims, adapting premises to make them safer for customers and staff, and enabling hybrid working where that makes sense.
7. We will take measures to ensure our public buildings and businesses are as safe as they can be.
8. We will encourage shops and other public spaces to display Distance Aware signage about personal distance.
9. We will work with partners to raise awareness and increase the uptake of emergency and future care plans.
10. We will work to improve carer recognition, health and social care support, and financial and social inclusion for carers, through the actions set out in the following chapters.
11. We provided £21 million funding in 2021-22 and have committed £15 million funding in 2022-23 for community-based initiatives to promote good health and wellbeing and tackle the mental health issues made worse by the COVID-19 pandemic and the cost of living crisis (the Communities Mental Health and Wellbeing Fund).
12. As we develop Scottish Carer's Assistance, we are considering the best way to support carers to recover from the COVID-19 pandemic and future proof our benefits system to ensure there is flexibility to respond to changing circumstances.

Valuing, Recognising and Supporting Carers

1. We will make it easier for people to recognise themselves as carers and to access support and advice.

2. We will foster a culture shift towards greater recognition and valuing carers and a connected approach to carer support across government by: connected leadership in the delivery of this strategy, ensuring carers issues are represented in the review of the National Outcomes.
3. We will update the Carers' Charter to reflect carers' rights to information and advice; new rights for carers of people with terminal illness; and, subject to Scottish Parliament approval, the right to breaks from caring.
4. We will support local carer centres to build capacity and ensure all carers can access consistent and up-to-date information.
5. We will keep the need for further national communications campaigns under review.
6. We will ensure that policy is informed by lived and living expertise, by working with carers and carer organisations to ensure carer voices are represented and heard in national policy making, including in shaping the National Care Service.
7. We will continue to support the Carers Parliament to engage carers in policy making and ensure their voices are heard by decision-makers. We will engage with carers to shape future Parliaments.
8. We will continue to support national work to engage, raise awareness and support carers' voices to be heard across all relevant issues.
9. We will involve carers through the Social Security Experience Panels and Social Security Scotland research, including the Client Survey and the Client Panels.
10. We will continue to support the Carers Collaborative and draw on reports and use this knowledge to inform future activity.
11. We will continue to prioritise the enhancement of carer involvement in local strategic decision making under the current system. Providing carers with support and access to national training events remains a primary focus of this work.
12. We will also continue to collaborate with third and independent sector bodies that enable carers in their role within integration authorities.
13. We will ensure that unpaid carers are involved in planning support and services under a future National Care Service through their involvement in co-design activity.
14. We will continue to work with partners and people with lived and living experience to make sure that our social care services work for everyone, including ensuring support for carers becomes more accessible and consistent.
15. We will continue to support improvement work to ensure health and social care professionals are aware of their duties to involve carers and have the skills and resources they need to work together as equal partners in care.
16. We will ensure that the Independent Review of Adult Social Care recommendations on effective carer involvement are delivered as a key element in a NCS.
17. We will continue to fund Healthcare Improvement Scotland (HIS) and NHS Education for Scotland (NES) to work in partnership and explore what 'involvement' in hospital discharge means to unpaid carers and what 'good practice' looks like.

18. We will improve the involvement of carers in decisions where the cared-for person has mental ill health.
19. We will respond to any recommendations of the Mental Health Law Review for improvements to the experience of unpaid carers, including young carers, within mental health.
20. We will update the Code of Practice for continuing and welfare attorneys to reflect changes in the legislative environment, taking into account UNCRPD as well as recent case law.

Health and Social Care Support

1. Where possible, we will increase funding to carer centres and young carer services.
2. We will continue to encourage authorities to spend their full share of carers Act funding on expanding carer support, ahead of establishing a National Care Service making Ministers responsible for social care spending decisions.
3. We will support improvements in the data collected under the Carers Census so that only the most necessary information is collected and used to improve support for unpaid carers.
4. We will review and update Scotland's Carers.
5. We will introduce a statutory right to breaks from caring under the Carers Act and fully fund its implementation.
6. We will work with stakeholders to improve the availability and range of short breaks, supported by evidence to support our approach.
7. We will continue to work with local service commissioners, Shared Care Scotland and others to promote greater availability and choice of short break support in different areas.
8. We will build on our recent investment to increase funding for short break support to increase availability of easy-access preventative breaks support.
9. We will continue to promote the importance and regular review of Short Break Service Statements, to ensure carers understand their right to a break and the breaks available in their area.
10. In addition to updating the SDS Statutory Guidance, we will continue to work with and through delivery partners, including Local Authorities, to support and improve delivery of SDS consistently throughout Scotland and to support national conversations promoting improvement, early intervention, capacity-building, innovation and good practice.
11. In the medium-term, we will embed SDS principles and a human rights-based approach into the development of the National Care Service.
12. We will continue to focus on creatively and flexibly supporting carers through SDS.
13. We will consider how to provide flexible health appointments for carers, including how we provide replacement care for appointments.

14. We will continue to engage with NHS Boards to help drive implementation and support them to test and spread improvements to person-centred visiting.
15. We will reinforce to NHS Boards their statutory duty to involve carers in decision making about when the person they care for leaves hospital, and work in partnership to help them deliver this consistently.
16. We will support effective and carer-aware multi-disciplinary teams in every locality, both in and out of hours, involved in the strategic planning and delivery of services, including through the development of GIRFE.
17. We will consider what further resources and signposting of support may be needed to support carers' mental wellbeing within the National Wellbeing Hub.
18. We will work with relevant stakeholder groups to ensure that carers are aware of the range of mental health and wellbeing resources and advice available to them, and to consider whether carer-specific advice is needed.
19. We will share learning and examples of practice that emerge through our work on the Communities Mental Health and Wellbeing Fund projects in relation to supporting the mental health and wellbeing of carers.
20. We will improve training and support for health and social care professionals to help identify and support unpaid carers at risk of suicide and those who care for people at risk of suicide by promoting learning resources and awareness-raising on suicide prevention.
21. By spring 2023, we will publish a long-term delivery plan for the National Trauma Training Programme setting out how we will continue to support, embed and sustain trauma-informed workforces, services and care. This will include a priority focus on trauma training and support for adoptive parents, kinship, foster and supported carers to support delivery of The Promise.
22. We will engage widely throughout 2022/23 and co-produce with people living with dementia, carers, statutory, third sector and independent sector partners to develop our new National Dementia Strategy, building on our internationally recognised action in areas such as rights-based care and post-diagnostic support.
23. We will use the framework priorities to increase support for people with autism and their carers.
24. We will work closely with people with learning disabilities as role models, their carers and leaders to raise awareness and challenge perceptions in Scotland.
25. We will work with the NHS boards, integration authorities, neurological and carer organisations to help ensure carers of people living with neurological conditions are aware of their rights under the Carers Act; and that local carer services know how to access the most relevant information and training for carers of people living with neurological conditions.
26. We have committed £32 million of funding in 2022/23 directly to Children's Service Planning Partnerships (CSPPs) to build local service capacity for transformation and to support the scaling of existing transformational practice of whole family support services in local areas.

27. We are working in collaboration with CSPPs to provide a range of support to accelerate and share learning to drive whole system change in family support at local and national level.
28. We have committed a further £2.974 million of funding in 2022/23 to provide support to families on a low income who are raising disabled or seriously ill children and young people through the Family Fund who deliver support, advice and direct grants to families in Scotland.
29. As part of the Tackling Child Poverty Delivery Plan commitment, we will engage extensively with parents, carers and children to draft a strategic framework for Out of School Care by the end of this Parliamentary term.
30. As we design a system of wraparound childcare, we will integrate food and childcare provision wherever possible recognising the benefit to children and families of coordinating food, childcare and activities before school and during the holidays.

Social and Financial Inclusion

1. We will draw on responses to the Scottish Carer's Assistance consultation to shape future improvements to social security support for carers.
2. We will support people to receive what they are entitled to and work with a range of partners who have experience in benefit take-up, taking a lessons learned approach on what works best.
3. We will run advertising campaigns to reach hard-to-reach groups and raise awareness of our benefits. We will promote our payments and remove stigma to deliver a new system that treats people with dignity, fairness and respect.
4. In line with our second Benefit Take-up strategy we will develop a holistic approach to signposting and referral, ensuring clients of Social Security Scotland are helped to access wider support.
5. We will continue to work with unpaid carers to direct them to appropriate sources of support during the cost crisis.
6. We will work with debt advice services and carer centres to understand and respond to the continuing impact of the rising cost of living on these services, and will ensure that the specific needs of unpaid carers are reflected.
7. We will draw on the findings from the Scottish Welfare Fund review to inform any future policy improvements.
8. We will explore a Minimum Income Guarantee (MIG) for Scotland, developed by a Steering and Expert Group, and ensure that carers' voices are integral to the design and development of the Steering Groups recommendations.
9. We will gather intelligence around the current range of careers information, advice and guidance and employability services to identify whether this service provision meets the particular needs of carers.
10. We will enhance employment support services with the aim of supporting more parents, some of whom will be carers, to enter and progress in sustainable and fair work.

11. We will continue to fund and promote increased uptake of the Carer Positive employer accreditation scheme, working with employers to support flexible, agile and inclusive workplaces that benefit workers with caring responsibilities.
12. We are providing over £750,000 in year 1 of our new multi-year Workplace Equality Fund 2022 to 2024 to overcome workforce inequalities faced by groups such as carers.
13. We will publish a refreshed Fair Work Action Plan, and engage with carers with lived experience of barriers to employment and employers.
14. We will ensure that the specific barriers faced by carers are taken account of when tackling broader societal issues such as digital exclusion and lack of access to public transport.
15. We will publish the Connected Scotland delivery plan in 2022.
16. We will extend the Connecting Scotland programme to reach up to 300,000 people by the end of this Parliament. The new delivery model will consider the needs of carers into account.
17. We will continue to work with COSLA to progress our shared commitment to end all charges for non-residential social care support. We will work with stakeholders to develop and implement options as soon as practicable and within the lifetime of the Parliament.

Young Carers

1. We will continue to recognise and involve young carers as part of all of the actions highlighted in Chapter 2.
2. We will continue to support the Young Carers Festival where they will have the opportunity to engage with attendees and feed into future policy making.
3. We will continue to engage with young carers in order to improve mental health and wellbeing support.
4. We will work with Young Scot to develop a social media based awareness campaign to target young carers.
5. We will continue to provide health and social care support for young carers as part of the actions highlighted in Chapter 3.
6. We will continue to support work to ensure health and social care staff have the skills, knowledge and confidence to identify, support and involve young carers in line with the Carers Act.
7. We will continue to support work to raise awareness of young carers in schools by funding a full time Education Officer post with Carers Trust Scotland and working closely with NHS Education for Scotland.
8. We will help young carers secure the use of their own rights under additional support for learning legislation via the service My Rights, My Say.
9. We will continue to encourage uptake of the Young Carer Grant by signposting via our partner organisations.
10. We will continue to fund the Young Scot young carer package and have expanded this for 2022-23.



© Crown copyright 2022

OGL

This publication is licensed under the terms of the Open Government Licence v3.0 except where otherwise stated. To view this licence, visit nationalarchives.gov.uk/doc/open-government-licence/version/3 or write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk.

Where we have identified any third party copyright information you will need to obtain permission from the copyright holders concerned.

This publication is available at www.gov.scot

Any enquiries regarding this publication should be sent to us at

The Scottish Government
St Andrew's House
Edinburgh
EH1 3DG

ISBN: 978-1-80525-303-7 (web only)

Published by The Scottish Government, December 2022

Produced for The Scottish Government by APS Group Scotland, 21 Tennant Street, Edinburgh EH6 5NA
PPDAS1162402 (12/22)

W W W . g o v . s c o t