



Moray Integration Joint Board

Thursday, 24 November 2022

SUPPLEMENTARY AGENDA

The undernoted reports have been added to the agenda for the meeting of the **Moray Integration Joint Board** to be held at **Council Chambers, Council Office, High Street, Elgin, IV30 1BX** on **Thursday, 24 November 2022** at **09:30**.

AGENDA

7a. **Draft Strategy for Unpaid Carers in Moray 2023-26**

3 - 60



REPORT TO: MORAY INTEGRATION JOINT BOARD ON 24 NOVEMBER 2022

SUBJECT: DRAFT STRATEGY FOR UNPAID CARERS IN MORAY 2023-26

BY: LEAD OFFICER FOR CARERS

1. REASON FOR REPORT

- 1.1. The Carers (Scotland) Act 2016 requires the Moray Integration Joint Board (MIJB) to prepare and review a local carer strategy. The purpose of this report is to present a draft of Health and Social Care Moray Carers Strategy 2023-26 and seek the approval of the Board to consult with stakeholders on the draft strategy.

2. RECOMMENDATION

2.1. It is recommended that the Moray Integration Joint Board:

- i) **consider and note the draft all-ages strategy for unpaid carers in Moray (Appendix 1);**
- ii) **note the engagement work that has taken place to date (Appendix 2);**
- iii) **agree that as the strategy covers young carers, it will be presented to Moray Council's Education, Children's and Leisure Services Committee on 14 December 2022 for comment.**
- iv) **agree that the draft strategy is published for consultation in January 2023; and**
- v) **instruct the Lead Officer for Carers to present the final version of the strategy at the meeting of the Board on 30 March 2023 for approval prior to it being launched in April 2023.**

3. BACKGROUND

- 3.1. Unpaid carers provide vital support to the people they care for and are fundamental to Moray's health and care system. It is estimated that around 16,200 people in Moray are likely to be providing some form of care to a partner, family member, friend or neighbour who could not manage without their support.

- 3.2. During the Covid-19 pandemic, the responsibilities of unpaid carers increased considerably. There are more unpaid carers than ever before, and most of those who provided unpaid care before the pandemic are now spending more time on providing care for another person. However, carers tell us they continue to feel invisible, undervalued and unable to rest or have a break.
- 3.3. There is a clear social, human rights and economic case for supporting carers which can be summarised as follows:
- Sustain carer in caring role by having a life alongside caring;
 - Reduce strain and stress on carer;
 - Reduce likelihood of carer health problems and breakdown;
 - Better outcomes for carers and for cared-for persons
 - Reduce costs to statutory services of meeting health needs and replacing care by unpaid carer with paid care.
- 3.4. The Carers (Scotland) Act 2016 came into force on 1 April 2018 and extends and enhances the rights of carers who are defined as someone who provides or intends to provide care for another individual. The aim is to better support carers on a more consistent basis so that they can continue to care, if they so wish, in good health and to have a life alongside caring. In relation to young carers, the intention is similar to that for adult carers but also that young carers should have a childhood similar to their non-carer peers.
- 3.5. Publication of the new National Carers Strategy which will articulate the Scottish Government's overall ambitions for unpaid carers and for carer support is due in November 2022.
- 3.6. The Act also requires local carer strategies to be developed which set out plans to identify carers, provide information about local support, and provide support and services. The duty to prepare local carer strategies applies to local authorities and relevant health boards but is delegated to integration joint boards.

4. KEY MATTERS RELEVANT TO RECOMMENDATION

- 4.1. A review of the previous Moray strategies for adult and young carers indicated that while many of the priorities have been addressed in part, there was still significant work required to make Moray a place where all adult and young carers are recognised and valued for the contribution they make, are enabled to provide the right support for the people they care for and are supported to balance their caring responsibilities with the other parts of their lives.
- 4.2. To develop the all-ages Moray 2023-26 strategy, a Strategy Development Group was established which includes officers from Health & Social Care Moray, a representative from Quarriers which is the commissioned carer support service, and the carer representative on the Board. Many of the members currently represent Moray on a number of national carer organisations and forums.
- 4.3. The Strategy Development Group reviewed the support currently available in Moray and engaged with carers through focus groups and a questionnaire to identify the areas where there is a need for further development or improvement.

- 4.4. The draft strategy outlines three strategic priorities to be delivered on over the next three years. These are: recognition of carers; valuing carers; supporting carers. The ambition of the strategy is that by 2026, unpaid carers in Moray should:
- Be able to identify themselves as a carer early in their caring journey
 - Have timely access to the information and advice they need
 - Know and understand their rights
 - Feel listened to and valued as an equal and expert partner by people working in services
 - Be fully engaged in the planning and delivery of services
 - Be empowered to manage their caring role and have access to effective support which enables them to look after their own health and wellbeing
 - Have access to regular and sufficient breaks from their caring role
 - Be able to achieve their own goals, free from discrimination, and be able to maintain their education and/or employment as they wish.
- 4.5. A number of high-level actions are set out in the strategy which will be further developed into the implementation plan. This is intended to be a live document with new actions added as they are identified and indicators in place to support performance reporting.
- 4.6. Unpaid carers and other stakeholders will be invited to be part of a Carers Strategy Steering Group to monitor delivery of the priorities through the action plan.
- 4.7. The steering group will actively involve carers, carers groups and partners in pieces of work that arise from the action plan so that their lived experience, ideas and input continues to inform ongoing improvement work. This will include the commissioning of the carers support service.

5. SUMMARY OF IMPLICATIONS

(a) Corporate Plan and 10 Year Plan (Local Outcomes Improvement Plan (LOIP)) and Moray Integration Joint Board Strategic Plan “Moray Partners in Care 2019 – 2029”

Carers who are supported to carry out their role in a way that supports their own health and wellbeing and their educational and economic potential, are key to achieving the ambitions of the Moray IJB Strategy Plan, the Corporate Plan and LOIP. The strategy will support HSCM to demonstrate impact on Outcome 6 of the National Health and Wellbeing Outcomes.

(b) Policy and Legal

Having a local carer strategy in place meets the legal obligation on the Moray IJB as prescribed in the Carers (Scotland) Act 2016. It also supports carers' right to:

- Access a local information and advice service
- Be included in the hospital discharge of the person they are caring for
- Request an Adult Carer Support Plan (if over the age of 18) or a Young Carer Statement (if under aged 18 or younger)

- Access Support if they have eligible needs
- Be consulted on services for them and the person they are caring for

(c) Financial implications

Annual Carer Act funding is in place to support delivery of the strategy. The actions outlined within the Strategy and Action Plan, including the commissioning of the local information and advice service, require to be delivered within the existing resource envelope and through additional, applied for, funding streams where available.

(d) Risk Implications and Mitigation

The provisions of the Act are considered to contribute to overall risk management across the responsibilities of the health and social care partnership. Demand for support is likely to increase significantly as more people are identified as carers. A local eligibility criteria is in place to determine whether a carer should receive formal support.

(e) Staffing Implications

The strategy will be delivered by the workforce in partnership with unpaid carers, the public, third and independent sectors, and the wider community.

(f) Property

None arising directly from this report.

(g) Equalities/Socio Economic Impact

Carers are more likely to experience inequality of outcome and more likely to be in poor health than people who do not undertake a caring role. The strategy aims to enhance equality of opportunity for all carers.

(h) Climate Change and Biodiversity Impacts

None arising directly from this report.

(i) Directions

No Direction required.

(j) Consultations

Consultations have taken place with the Carer Representative on the Board, Chief Officer, Interim Chief Financial Officer, Heads of Service and Corporate Manager, and comments incorporated regarding their respective areas of responsibility.

6. CONCLUSION

6.1 The contribution of unpaid carers of all ages to the health and social care system in Moray must be acknowledged and celebrated.

6.2 The draft strategy articulates the renewed commitment of the Board and Health & Social Care Moray to full implementation of the Carers Act in order to improve the experiences of unpaid carers and support them to live well and achieve their own wellbeing outcomes.

6.3 It is a result of engagement with unpaid carers and people working in the public and third sectors. The continued involvement of people with lived experience of the caring role will ensure the strategy is fully implemented to meet the needs and aspirations of carers in Moray.

Author of Report: Fiona McPherson, Involvement Officer

Background Papers:

Ref:



Recognised, Valued, Supported

Moray Carers Strategy 2023-2026

**Health & Social Care Moray's approach to improving
outcomes for adult and young carers**

Consultation draft

1. Foreword

Dear fellow carers

On behalf of the Moray Integration Joint Board, I am pleased to introduce this new strategy for unpaid carers in Moray.

Carers play an essential role in society, often without recognition of the commitment they make and the impact it can have on them. The Board would like to express its gratitude to carers across Moray and publicly recognise the outstanding contribution they make to our health and care system and to our communities.

The Covid pandemic has been hard on everyone but carers have shouldered more of the burden than most. Many took on a caring role for the first time or saw their caring responsibilities increase.

Carers have told us they are worn down and struggling to have a life of their own. They tell us the challenges they experience are made worse because of the frustrations of trying to navigate a health and social care system which does not seem to be on their side. They do not feel listened to or valued as equal and expert partners in care.

Yet caring is everyone's business. The majority of us will become carers at some point in our lives, or we may need care ourselves. It is a role that

can develop gradually or may happen unexpectedly and is one for which we are rarely given a choice.

For many, supporting friends, families and communities can provide a sense of well-being. For others, caring responsibilities can have a substantial impact on every aspect of their lives and additional support is needed to manage the demands of the role and reduce the negative impact.

Our new strategy, **Recognised, Valued and Supported**, is grounded in the lived experience of unpaid carers and my thanks goes to everyone who has been involved.

It reflects what carers say matters to them. It recognises where we are now and where we want to get to over the next three years to improve the experiences of carers.

The strategy and supporting implementation plan will guide the work of health, social care and community partners towards a better Moray where carers of all ages are recognised, valued and supported to enjoy healthier and more fulfilled lives.

I look forward to continuing to work with fellow carers and partners to turn our priorities into positive action to ensure Moray's unpaid carers are **Recognised, Valued and Supported**.

Ivan Augustus
Carer Representative
Moray Integration Joint Board

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The Carers Strategy Development Group would like to thank all partners and every unpaid carer who has given their time to share their lived experience as part of the development of the strategy. Your input has been invaluable in improving our understanding of the challenges and priorities for carers, and has informed the actions that will guide the work we do for carers.

3. Summary

The Carers Strategy sets out how Health & Social Care Moray (HSCM) plans to deliver on its commitment to support unpaid carers of all ages in Moray over the next three years.

It will inform all other HSCM strategies and transformation plans so that meeting the needs and aspirations of carers is embedded in all services across the partnership, including those it commissions externally.

The strategy will be underpinned by an implementation plan with clear actions setting out how we will take a human rights approach to working together to improve the health, wellbeing and experiences of carers.

Our Carers Strategy has been shaped by the voice and experience of carers, and the organisations that support them, to ensure that the priorities for the future are based on what is most important.

Our vision

For carers in Moray to feel recognised, listened to and respected as equal and expert partners in care, and to be supported in their vital role so they can live well alongside caring.

To achieve the vision, we will focus improvement actions for local carers under these three areas of strategic priority:

Recognised	•	Valued	•	Supported
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By 2026, every unpaid carer in Moray should:

- Be able to identify themselves as a carer early in their caring journey
- Have timely access to the information and advice they need
- Know and understand their rights
- Feel listened to and valued as an equal and expert partner by people working in services
- Be fully engaged in the planning and delivery of services
- Be empowered to manage their caring role and have access to effective support which enables them to look after their own health and wellbeing
- Have access to regular and sufficient breaks from their caring role
- Be able to achieve their own goals, free from discrimination, and be able to maintain their education and/or employment as they wish.

4. Introduction

Health & Social Care Moray wants to recognise the significant contribution unpaid carers make every day to ensuring that people in our communities in need of care continue to experience a good quality of life.

It is estimated that three in five adults in the UK will become an unpaid carer at some point in their lives. In Moray, the 2011 census recorded just over 8,000 people identifying as a carer. However, we know many individuals providing care do not recognise themselves as a carer because it so easily becomes part of their everyday routine. Each year more people take on new or increased caring responsibilities and that number has increase since the start of the Covid-19 pandemic.

Carers are valued for their vital role in enabling the people they care for to stay as well as possible and continue living at home. We recognise they are key to the sustainability of our health and care system but that their caring role is often at the detriment of their own health and wellbeing, education and employment opportunities, finances and aspirations to live the life they choose.

We are committed to working with local carers and partners to create positive change which reduces the negative impact of the caring role and improve carers' experiences.

The Moray Carers Strategy 2023-2026 will build on the range of services currently in place, address gaps in provision and improve support to all carers in Moray.

It has been informed by listening to the views and lived experiences of Moray's carers. It provides clear direction to Health & Social Care Moray on where resources should be focused to meet the needs, aspirations and rights of carers.

A strategy implementation group will be established to oversee a delivery plan setting out clear actions, timescales and measures for monitoring progress. The plan will be developed through continued engagement with carers and strategic partners. It will evidence how funding allocated towards carers is being used by the partnership to support carers to live well and achieve their own improved health and wellbeing outcomes in line with the priorities set out in this strategy and the Moray Strategic Plan, and is enabling us to meet the requirements of the Carers (Scotland) Act 2016.

5. Why supporting carers matters

People are living longer but often the increase in longevity comes at a cost of increased years in poor health with complex care needs. This is putting more pressure on the health and social care system.

In response, Health & Social Care Moray is progressing initiatives to prevent unnecessary hospital admissions and premature admissions to long-term residential care, to reduce delays in discharge from hospital, reduce demand for formal support services, and to help people remain as independent as possible in their own home.

Unpaid carers in Scotland represent a larger workforce than the paid health and social care support workforces combined. They are integral to good care and are often best placed to understand and advocate for the needs, rights and preferences of the person they support

Although for many, caring can have positive and rewarding aspects, it is profoundly challenging. Carers often put the interests of the person they care for ahead of their own needs. The care provided by unpaid carers is often physically and emotionally demanding, with consequences for the carer's own health and wellbeing. Caring responsibilities can affect a carer's own health and wellbeing, their relationships with others, their access to education, employment opportunities and finances, and limits the time and energy they have to do things for themselves.

Our engagement work to develop this new strategy highlighted the toll caring can take. For many, the difficulties faced before Covid-19 have been exacerbated, but new challenges have also emerged. Hours spent caring have increased and carers have taken on more or different caring tasks.

The increased caring responsibilities and lack of breaks has resulted in added pressure and impacted upon carers' ability to continue to care. Carers are reporting fatigue and there has been an increase in reports of crisis interventions needed to respond to carer breakdown.

We recognise the value carers bring and importance of ensuring they are included as equal partners in care. This strategy sets out our commitment to supporting carers in order to:

- Uphold their human rights
- Reduce the impact of their caring role
- Promote their health and wellbeing
- Sustain them in their caring role if they so wish
- Help people to continue to live in their own homes and communities
- Achieve better outcomes for carers
- Achieve better outcomes for the cared for person
- Sustain the health and social care system

6. Carers in Scotland

This strategy is for anyone who supports another person on an unpaid basis – whether that be a family member, child with additional needs, relative, friend, or a combination of these people. This is not the same as someone who provides care professionally, or through a voluntary organisation.

Anybody can become a carer at any time in their life. Someone can be a carer for more than one person at a time. Carers can be any age, from young children to older people. Carers UK predicts that 3 in 5 of us will be a carer at some point in our lives.

Carers differ in age, the number of hours that they spend caring and in the number of people they care for. They may have their own health challenges and may be juggling their caring responsibilities alongside work, studies, and other family or community commitments.

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. The 2020 Scottish Health Survey telephone survey results suggest there were 839,000 adult carers living in Scotland in August-September 2020.

Young carers	Working age carers	Older carers
<ul style="list-style-type: none"> • There are an estimated 29,000 young carers in Scotland - 4% of the under 16 population • Many are doing jobs around the house that an adult would normally do. They may be providing emotional support • Their caring responsibilities are likely to impact on their education and stops them spending time with friends • Young carers are more likely to not be in education, training or employment 	<ul style="list-style-type: none"> • Working age women are more likely to be carers than men • Over 250,000 people in Scotland are juggling paid work alongside their caring responsibilities • National research suggests 1 in 5 carers give up employment to care • The loss of earnings, savings and pension contributions can mean carers face long-term financial hardship into their retirement 	<ul style="list-style-type: none"> • Census data shows 11% of people aged 65 and over in Scotland are carers • Over half of older carers provide 35 hours of care a week or more • Older carers are more likely to have their own health and care needs and their caring role can impact on these • Nationally, one third of older carers say they have cancelled an appointment, treatment or operation because of their caring responsibilities

7. Carers in Moray

Information from Scotland's 2022 census, the official estimate of every person and every household, will start to be published next year. The most recent information we have is from the 2011 census when 8.3% of the Moray population identified as being a carer compared to 9.3% in Scotland.

Of the 7,809 people providing unpaid care, 59.9% were female; 21.2% were aged 65 and over; 3.6% were under the age of 16; and 52.9% were in employment. 4.8% provided 1-19 hours of care a week; 0.7% provided 20-24 hours a week; 0.6% provided 35-49 hours a week; and 2.2% provided 50 or more hours of care a week.

Carers Scotland has reported that approximately 17.5% of the adult population of Scotland are carers. In June 2020, Moray had an adult population of 79,673 (National Records of Scotland), giving an estimated 13,500 adult carers. Around 4% of the under 16 population are carers – in Moray this would equate to approximately 2,700 young carers.

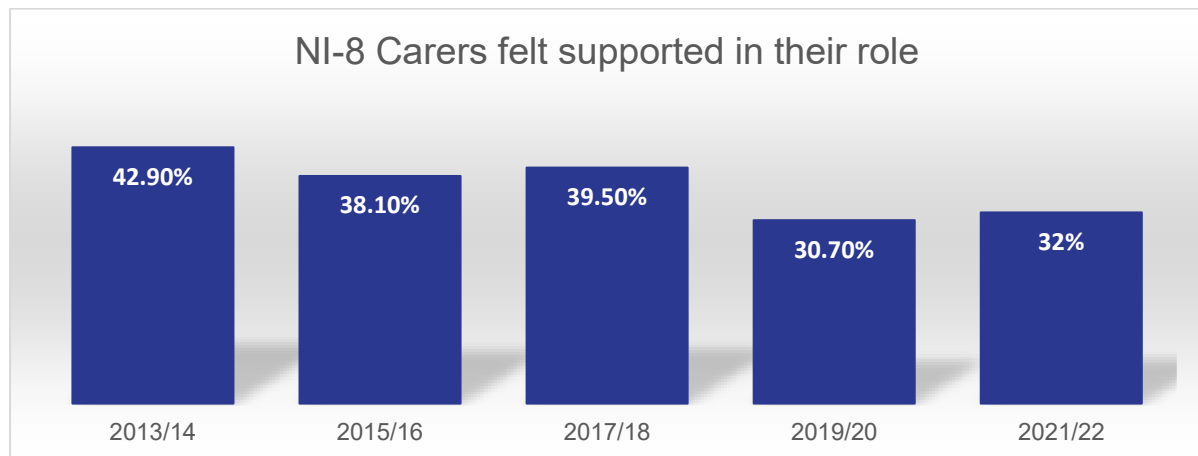
This would mean there are an estimated 16,200 carers in Moray – more than double the 2011 census figure. Not all may need formal support from statutory services to assist them to manage the demands of the role but carers legislative rights are enshrined by the Carers (Scotland) Act 2016 which recognises that preventative support at an early stage can reduce the risk of carers coming to crisis and help them to continue to manage their caring role.

Experiences of caring and impact on wellbeing

The biennial Scottish Health and Care Experience Survey (HACE) asks a sample of carers about their experiences of specific aspects of caring and the impact on their wellbeing. As with the previous survey, the responses in 2021/22 were mixed. However, overall locally and nationally the results were less positive than in previous years. Carers were most positive about the balance between caring and other things in their life with 60% responding positively to this question in 2021/22. Carers were least positive about local services being well coordinated for the person(s) they look after.

	2021/22		
	Positive	Neutral	Negative
I have a good balance between caring and other things in my life	60% (63% Scotland)	19% (20%)	21% (17%)
I have a say in services provided for the person(s) I look after	44% (39%)	31% (36%)	24% (25%)
Local services are well coordinated for the person I look after	31% (29%)	30% (39%)	39% (32%)
I feel supported to continue caring	32% (30%)	37% (43%)	31% (28%)

Carers feeling supported in their role is one of the national integration indicators against which Health & Social Care Moray measures its progress in relation to the national health and wellbeing outcomes.

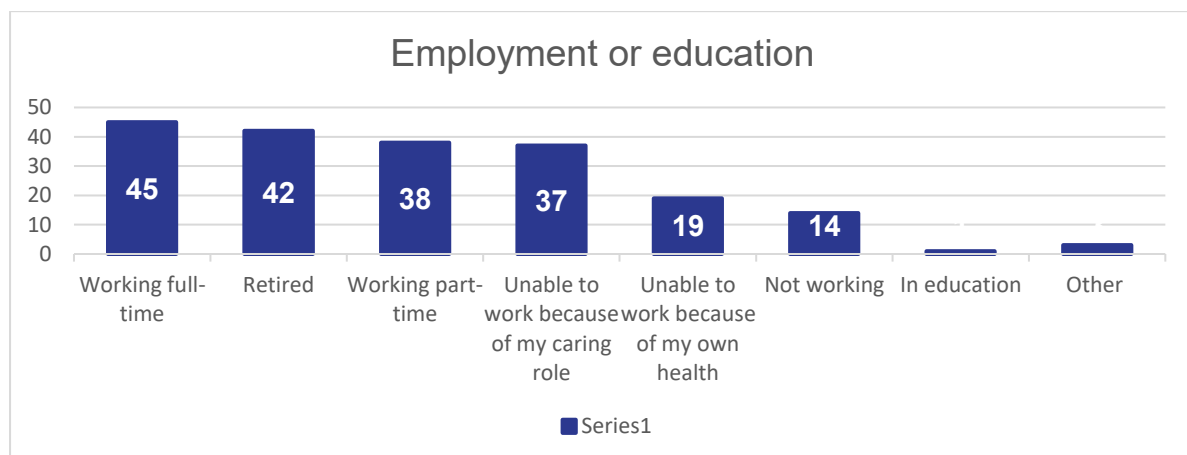


Our strategy engagement work saw 181 carers complete a questionnaire to share their lived experience of being a carer in Moray.

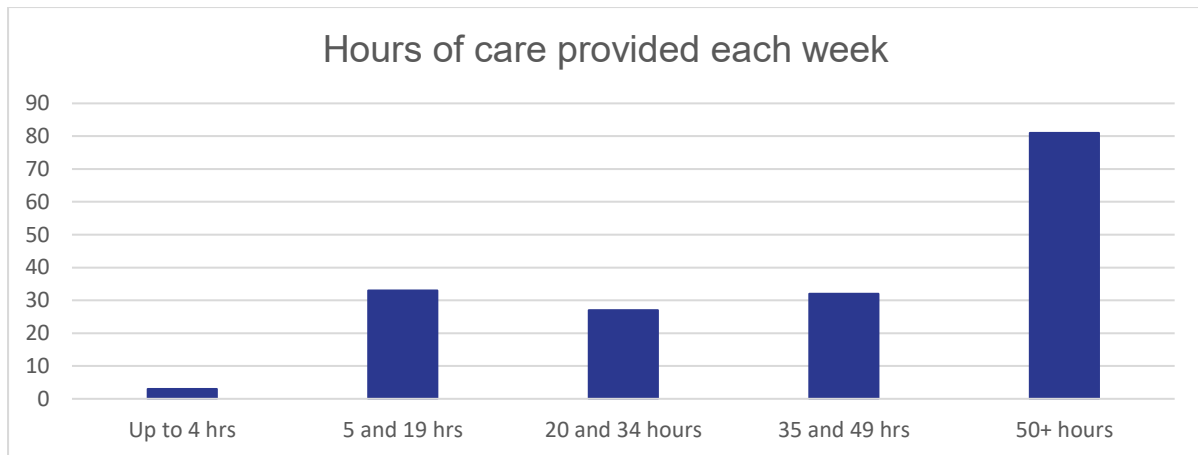
85% of people identified as female, and 15% identified as male. Most carers completing the survey were aged between 46-59 (40%), 60-74 (29%) and 30-45 (27%). The survey had a limited response from carers under the age of 30 or the 75s and over. Half of respondents indicated they themselves had a health condition or disability.

More than half (96) were providing care to an adult person. 57 were caring for an adult aged 18-64 and 48 were caring for a child or young person.

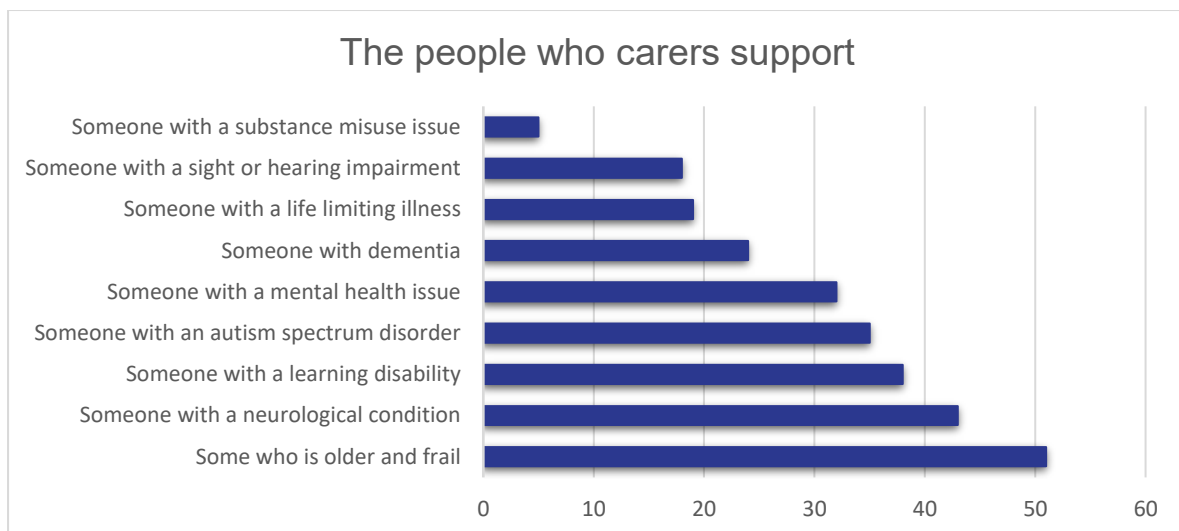
A quarter of carers were working full-time with 23% being retired. 21% worked part-time with the same unable to work because of their caring role. 11% were unable to work due to their own health issues.



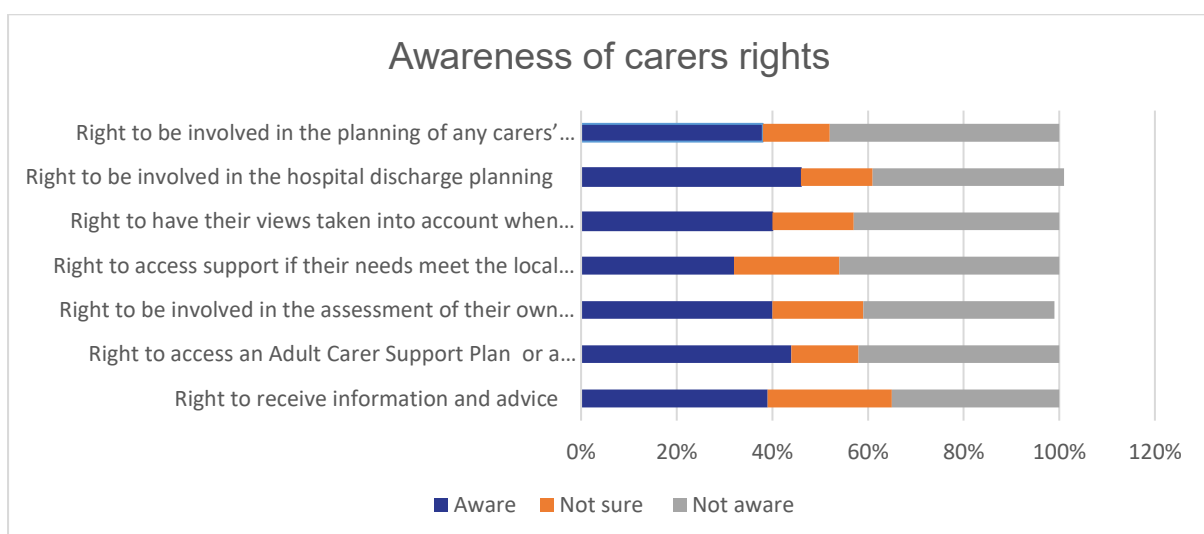
Almost half of respondents (46%) were caring for more than 50 hours a week.



Carers were caring for people with a range of conditions. The survey had multiple options for respondents and many respondents indicated that more than one applied.



Less than 50% of carers were fully aware of their rights under the Carers (Scotland) Act 2016.



8. Listening to and learning from carers

Over 200 carers participated in some form of engagement through joining focus groups and responding to a questionnaire to inform the development of the strategy.

Carers experienced many struggles before the pandemic and have faced new and additional challenges and pressures as a result of lockdowns, loss of informal support and disruption to services.

Carers own health issues, as well as the declining health of the person they care for, has been a concern. The demands of the role impacts on both physical health and mental wellbeing. Carers spoke of the stress they were under, their lack of sleep and tiredness, isolation, anxiety and feelings of guilt which had made it more challenging to cope. The inability to have a break was the biggest challenge for most carers and had a negative impact on many aspects of their life including relationships.

“Providing 24 hour care without any respite provision. Physical and mental exhaustion.”

“Loss of a wife and partner. Physically having to do everything to keep the house going.”

“My role as a carer is very physically and emotionally demanding on me. I too have disabilities so my physical and mental health is really suffering... I feel very lonely and isolated and don't have much of a life outside of my caring role.”

“If he doesn't sleep at night then nor do I but I still have to work the following day.”

- ❖ Carers told us there is a lack of awareness of who is a carer and the role carers have in supporting the cared for person, the health and social care system and the wider community
- ❖ Many carers only become known when they reach a crisis
- ❖ There is a lack of understanding in schools and in health and social care about the impact of the caring role on all aspects of the carer's life, particularly their health and wellbeing
- ❖ Many are reluctant to seek formal support but when they do they often do not feel listened to or heard

“Health, Education and Social Work have no real understanding of my child's condition. This is a problem because suggested supports are almost always counterproductive.”

- ❖ Carers highlighted the importance of being made aware of available support. They want easy access to carer information and to health condition information and training
- ❖ They want to be able to access effective support when and where is right for them
- ❖ School holidays are very challenging for parent carers

- ❖ Carers still face challenges in navigating the complex social care system and assessment process on behalf of the person they support. Processes and decision making is not always open and transparent
- ❖ Their involvement in the development of care, support and treatment plans for the cared for can be sporadic, depending on the professional.
- ❖ Communication from health and social care is said to be poor. Carers struggle to get hold of professionals and are often left waiting for updates

“Red tape when trying to make life easier for my Mum.”

“Lack of support and communication from social care.”

“Health, Education and Social Work have no real understanding of my child's condition. This is a problem because suggested supports are almost always counterproductive.”

“Not enough support from services. Phoning and phoning for my call to be answered weeks later. Chasing medications.”

- ❖ They are concerned by a lack of consistency in support staff and the quality of their training in some cases
- ❖ Timings of support services don't meet the needs of working carers
- ❖ Carers have struggled with the pandemic changes to GP appointments
- ❖ Dealing with day to day challenges of their caring role make it difficult to plan for the future
- ❖ Carers welcome the opportunities to connect with other carers for peer support
- ❖ During the pandemic many embraced the use of digital technology
- ❖ Carers face additional financial challenges

“Universal Credit covers my mortgage and nothing else: no bills, food, transportation, etc. My energy is limited so although I'm looking for part-time work, I am very concerned about being able to work AND continue caring for my child.”

“It's also frustrating not being able to work due to being an unpaid carer and having to rely on benefits.”

“Can't find work around caring & can't join in a lot of things as no respite e.g. no day care available after 3/3.30.”

- ❖ Achieving a good work/life balance is a challenge
- ❖ Carers need a regular break and what a break looks depends on the carer. Carers do not always know what they are entitled to, what is available and how to access it. They want to see increased choice in what is available, including planned and emergency breaks, accommodated and non-accommodated respite
- ❖ Some people did not feel they had benefited as a result of having an adult carer support plan
- ❖ Carers expressed difficulty in prioritising their own health and wellbeing needs above those of the person they support

9. Supporting carers – where we are now

There are services and support options available in Moray for carers, although we recognise we need to work together to improve these to ensure carers experiences are positive and that there are gaps which need to be addressed and

Since the previous strategies for adult and young carers in Moray were published, the Carers (Scotland) Act 2016 has been introduced. It is designed to support carers' health and wellbeing and help make caring more sustainable.

Work was carried out across Moray in 2018 to publicise the Act and the rights of carers which include:

1. Adult carers have a right to an 'Adult Carer Support Plan'.

An Adult Carer Support Plan is the new name for the carer's assessment. It is a conversation that identifies the extent to which the carer is able and willing to provide care and the 'personal outcomes' which matter to the carer in order to carry out their caring responsibilities, as well as any needs a carer may have. This will be arranged through Quarriers Carer Support Service, the local commissioned service provider.

2. Young carers have a right to a 'young carer statement'.

A Young Carer Statement is a plan that sets out information about the young carer's circumstances and caring role. The plan will set out a young carer's 'personal outcomes', the goals which matter to the young carer in order continue to provide care, where that is appropriate, and have a life alongside caring. It will set out the needs a young carer may have and the support available to meet the carer's needs.

Adult carer support plans and young carer statements are prepared by Social Work and by Quarriers Carer Support Service.

Recruitment to additional officer posts in Health & Social Care Moray has increased support to carers. There has been improved recording of carer support on the social care information system used by adult and children's services.

3. Carers have a right to support to meet any 'eligible needs'.

The local eligibility criteria is a framework used to identify whether an adult or young carer should receive support from Moray Council and Health and Social Care Moray to meet their identified needs. Following consultation with carers, it was agreed that in Moray we would use the national eligibility framework.

If a carer meets the local eligibility criteria support may take the form of self-directed support (SDS). Carers may also be offered support such as breaks from caring. If a carer's identified needs do not meet the local eligibility criteria, support can still be provided for example, information and advice; education and training and/or general support available in the local community.

Health & Social Care Moray publishes a [Short Breaks Services Statement](#) with information about short breaks services available for local carers.

4. Carers have a right to be involved in services.

Health & Social Care Moray has a duty to consult with carers when shaping services which impact on their caring role. This includes preparing local carer strategies.

Engagement with carers has informed the development of this strategy and carers will be offered opportunities to be involved in the planning and delivery of services, including the recommissioning of the carers support service.

5. Carers have a right to be involved in the hospital discharge process of the cared-for person.

The health board must ensure it involves the unpaid carer in hospital discharge planning.

Working with Quarriers, we are currently testing a hospital discharge project to improve processes.

6. Information and advice for carers

There is a duty on Health & Social Care Moray to have access for carers to information and advice services, covering a range of mandatory areas, including emergency planning

Quarriers Carer Support Service is commissioned to provide information, advice and support to young carers and adult carers in Moray.

Support is provided to carers of all ages by a team which includes family wellbeing workers and a young carer development worker who operate from the carers centre based in Elgin.

The service also provides carers with learning opportunities for skills and confidence training, professional counselling and opportunities for peer support including carers' cafes. Quarriers has been able to secure funding from Shared Care Scotland to enable some carers to benefit from small grants that help them take a break from their caring role.

Partnership working has also included: delivery of awareness raising programmes to increase self-identification by carers; roll-out of carer awareness training to internal staff and external partner agencies; production of the Moray Carer Aware alert card for carers; organisation of multi-agency staff training sessions to raise awareness of the Carer Aware Card and promote the use of the carers' emergency planning toolkit; annual celebration of National Carers Week to raise awareness of the role of carers and provide opportunities for peer support

Information on support for carers can be found on the Moray Council website here: http://www.moray.gov.uk/moray_standard/page_77507.html or by calling the Access Care Team on 01343 563999.

Information on Quarriers adult carer support service is available [here](#) and the young carer support service [here](#) or by calling 01343 556031.

10. Priorities for 2023-2026 – making a difference going forward

Through our engagement work the following 3 strategic priorities have been identified.

Priority 1 – Recognition for carers

We want carers to be able to say, ‘I can identify as a carer. I am able to access the information and advice I need as a carer and I know and understand my rights’.

Our focus

To raise the profile of all carers of all ages in Moray, and support individuals to both recognise carers, and be recognised as carers, as early as possible in their caring role as the first step to support.

Our actions to improve recognition of carers

- Develop and deliver awareness raising programmes to NHS staff, Adult Social Care, Children’s Social Care, Schools and UHI, wider Moray Council and NHS staff, third sector and other community/business providers across Moray.
- Embed Turas Carer Aware training in the core skills requirement for all NHS staff.
- Progress and develop Carer Positive in HSCM, Moray Council and within NHS Grampian in Moray.
- Enable easy referral and registration for carers to the commissioned Carer Support service, including online, in-person and paper processes.
- Develop and make easily available a carers ID card, recognised across Moray
- Support carers during periods of transition: age and circumstance related.
- Improve identification and support for carers of family members using substances, recognising the sensitivities around identifying as a carer and the impact of cared for non-engagement.

How we will know this is working:

- Pre- and post-learning feedback will evidence increased understanding of carers and carer needs across all audiences.
- Achievement of level 2 Carer Positive award for Moray Council; evidence of Moray contribution to NHS Grampian Carer Positive award.
- Carers report easy access to the commissioned Carer Support Service, and response rates fall within agreed KPIs.
- Moray Carers ID card numbers increase year on year.
- Carers report improved experiences at transition points: YC moving to Secondary School are highlighted in advance of the move, YC moving into further/higher education report confidence in the process and their ability to make the move, YC seeking employment are aware of their rights as carers and confident to present their skills and experience to prospective employers.

- Increased numbers of family members of people using substances identify as a carer, complete an ACSP/YCS and are assessed for eligibility for additional supports in their own right.

Priority 2 – Valuing carers

We want carers to be able to say, ‘I am listened to and valued as an equal and expert partner by people working in health and social care. I am involved in the planning and delivery of services and support for myself and for the person/s I am caring for’.

Our focus

To involve, respect and listen to carers in planning the care and support of the person they care for, and themselves

Our actions to improve how carers are valued

- Support the development of appropriate Carer Voice opportunities for carers of all ages, enabling effective feedback on strategic outcomes progress and carer experience in Moray.
- Build on the Test of Change work in hospitals in Moray, to seek Carer Champions on wards and easy links to the commissioned Carers Support Service.
- Develop and introduce a Carer Passport and Pathway of Support in Moray hospitals, to aid carer journey when the cared for is admitted, through to discharge and beyond.
- Adopt the Triangle of Care to support carers of people with poor mental health
- Ensure carers have access to skills development and training/awareness opportunities linked to the condition of the person they care for, to help them best support their care.
- Improve carer access to self-management support in their role.

How we will know this is working:

- Moray has a recognised process for carers to regularly comment on their experience and support needs, providing feedback and informing service development and delivery across a broad spectrum of health and social care initiatives.
- More carers are actively involved in presenting lived experience to decision-makers, and indicate confidence to do so.
- Every hospital in Moray is referring carers to the commissioned Carers Service, and has a process in place to ensure carers are supported on-site as necessary.
- Carers are involved in hospital discharge processes for the cared for.
- Every hospital in Moray recognises and responds appropriately to the Carer Passport and Carer Support Pathway.

- Carers of people with poor mental health are actively involved in planning and managing the care required, at every step of the process.
- Carers report increased confidence to manage the care they provide.
- Carers report increased confidence and ability to manage their caring role.

Priority 3 – Supporting carers

We want carers to be able to say, ‘I am able to manage my caring role and reduce any negative impact on my health and wellbeing. I can access the support and services which are right for me. I am able to take a break from my caring role when I need to. I am not disadvantaged because I am a carer. I am able to achieve my own goals and maintain my education and/or employment’.

Our focus

To empower carers to manage their caring role, to enable them to look after their own health and wellbeing, and maintain a life of their own alongside caring. For young carers, provide support to learn, develop and thrive, and where applicable maintain an appropriate caring role.

Our actions to improve support for carers

- Provide a fully accessible Information and Advice service for carers of all ages.
- Review and improve the Adult Carer Support Plan and Young Carer Statement templates and process to best support identification of carer support needs and services/support required to achieve personal outcomes.
- Provide practical support to help carers manage the impact of their caring role.
- Ensure carers of all ages are supported to plan for the future (their own and that of the person they care for), by identifying them and working together to consider long term needs and preferences.
- Develop targeted Carer Respite policies, for adult, parent and young carers
- Facilitate carer breaks through a variety of models, including participation in the national Respite programme.
- Participate in national programmes to improve schools’ awareness of, and support for, young carers in education.
- Adopt a continuous improvement approach to monitoring and evaluating carer experience in Moray, aiding consistent reporting to the Scottish Carers Census and informing commissioning and development activity to improve outcomes for carers.

How we will know this is working:

- The commissioned Carers Service is able to evidence satisfaction from carers accessing information and advice.
- Carers report increased confidence and ability to manage their caring role.
- The numbers of carers with Emergency/Contingency Plans in place, and sharing them with those who need to know, has increased.

- Carers will have clear information about their rights to respite, and the arrangements for achieving it.
- Carers will have access to a range of short breaks, including some facilitated by the commissioned Carers Service, and to information to help them plan and achieve the break of their choice.
- Schools in Moray will have an ongoing programme of awareness raising, increasing the numbers of young carers identified, referred to the commissioned Carers Service for support, and supported in school.

11. Making it happen

The delivery of this strategy and associated implementation plans will only be achieved by working with carers themselves, alongside partners in the third sector, education, housing, employment support, and health and social care, to support and meet the needs of young carers and adult carers.

In order to implement the Moray Carers Strategy over the next three years, we will work with carers, partners and stakeholders to form a Strategy Steering Group to direct implementation. This group will support the development of a detailed action plan, push forward the priorities, agree how and when agreed actions will be delivered, and coordinate the work.

We will actively involve carers, carers groups and partners in pieces of work that come from the action plan so that their lived experience, ideas and input continues to inform ongoing improvement work. This will include young carers, young adult carers, working carers and carers in different circumstances, as required for specific projects.

The strategy document, action plan and updates on its progress will be published on the HSCM website. Opportunities for involvement will be shared by HSCM and partners through existing communication and engagement channels.

The work being undertaken by the strategy implementation group will be monitored by HSCM's Strategic Planning and Commissioning Group. Strategy progress reports will also be provided to the Moray Integration Joint Board to provide assurance that the rights of Moray's unpaid carers are being upheld and health and wellbeing outcomes for carers are improving.

To learn more please get in touch.

Call: 01343 567187

Email: involvement@moray.gov.uk

Write: Health & Social Care Moray, 9C Southfield Drive, Elgin, IV30 6GR.

Website: <https://hscmoray.co.uk/index.html>

Follow us on social media: @HSCMoray

Appendix 1 – Who the strategy is for

This strategy is for all unpaid carers who live in Moray. It is for carers who provide everything from a couple of hours of care a week to round the clock care for their child, parent, relative, friend or neighbour.

For the purpose of this strategy we are using the Carers (Scotland) Act 2016 definition of a carer as “an individual who provides or intends to provide care for another individual (the cared-for-person).”

Carers include:

- Young carers under the age of 18 who are in school, or further or higher education
- Young carers under the age of 18 who may be in or seeking employment
- Young carers under the age of 18 who may not be in education or employment
- Young adult carers aged 18-25, who have needs around the transition from children and young people’s services into adulthood and accessing age appropriate adult supports. Young adult carers also require support to create a life beyond caring and explore opportunities for employment, further education, or moving into their own homes; •
- Parent carers who are parents of children who have a disability or additional needs.
- Carers who are managing both a caring role and trying to start, sustain, or return to employment
- Mutual carers who require care and support and are also providing care and support (interdependent caring).
- Sandwich carers who have caring responsibilities for different generations, such as children and parents at the same time
- Older carers who in addition to caring for someone with support needs may also be managing their own health needs and impacts of ageing.
- Former carers who have ceased their caring role, usually because of a change in condition of the cared for person. This includes the death of the cared for person, the cared for person recovering and no longer needing care and support, the cared for person moving into long term residential/nursing care, or the carer choosing or having to stop providing care.

It is important to distinguish unpaid carers from paid care workers. Carers provide unpaid care alongside their other responsibilities, with many putting their lives on hold to provide care for a friend, neighbour or relative. This care could be for a few hours a day or more and could be around the clock care.

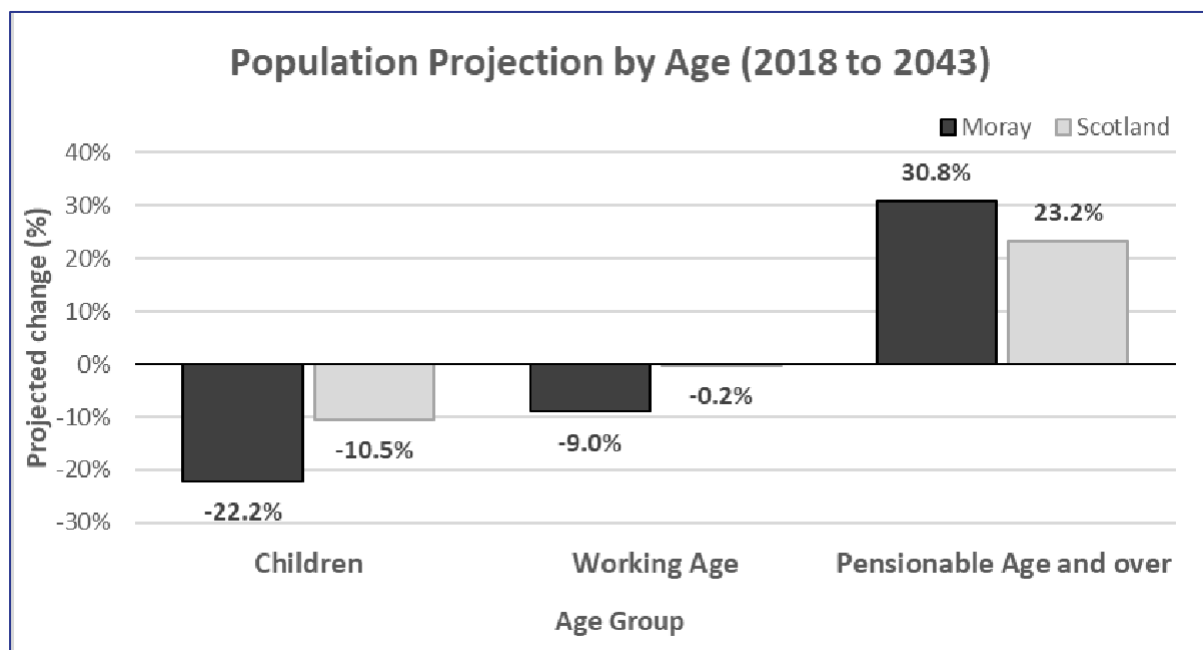
Appendix 2 - Strategic needs assessment of carers in Moray

Demographic context

Between 1998 and 2020, the population of Moray increased by 10.3% to 95,170. In terms of overall size, the 45 to 64 age group was the largest in 2020, with a population of 27,544. In contrast, the 16 to 24 age group was the smallest, with a population of 9,019. The 75 and over age group saw the largest percentage increase (+62.4%).

In Moray, life expectancy at birth is higher than at Scotland level for both females and males.

The table below sets out projected population growth for Moray and Scotland. Across Scotland there is a projected reduction in children, limited change in the working age population, but significant growth in adults of pensionable age. By comparison it is projected that Moray will have marked decreases in children and those of a working age, and a significantly higher change in those of a pensionable age.



TBC with data from Care First and Quarriers etc

Appendix 3 - National and local policy drivers

This strategy has been developed within the context of legislation, policy and strategic direction set nationally and locally. Key to these are the Carers (Scotland) Act 2016.

The Act is designed to support carers' health and wellbeing and help make caring more sustainable. Since April 2018 new duties for local authorities have included:

- The provision of support to carers, based on the carers' identified needs which meet the local eligibility criteria.
- The offer and preparation of an adult carer support plan and young carer statement to identify carers' needs and personal outcomes.
- The provision of an information and advice service for carers in areas such as; emergency and future care planning, advocacy, income maximisation and carers' rights.



The Carers' Charter¹ has been drawn up to help carers understand their rights under the Carers (Scotland) Act.

The Act supports Outcome 6 of the National Health & Wellbeing Outcomes - People who provide unpaid care are supported to look after their own health and wellbeing,

¹ <https://www.gov.scot/publications/carers-charter/pages/1/>

including to reduce any negative impact of their caring role on their own health and well-being.

Under the Carers Act, Health & Social Care Moray's Integration Joint Board is required to prepare and publish a local Carers Strategy setting out its plan for identifying and supporting carers in our community.

Carers' rights will continue to be upheld through the implementation of the Moray Carers Strategy 2023-2026 and in line with current and developing national and local policy and strategic ambition such as:

- The National Carers Strategy - currently being refreshed by the Scottish Government and due to be published by autumn 2022.
- The Scottish Government Policy Getting it Right for Every Child (GIRFEC) that supports children and young people so that they can grow up feeling loved, safe and respected and can realise their full potential.
- Social Care (Self-directed Support) (Scotland) Act 2013 and the framework of standards which are intended to provide people with freedom, choice, dignity and control. Self-directed enables people to have more choice and control over some or all of the support they need to live as independently as they wish to.
- The Moray Integration Joint Board's Strategic Plan 2019-2029 is being refreshed. The current priorities are: building resilience, home first and choice and control.
- Moray's Children Service's Plan 2020-2023 which has four strategic priorities – the wellbeing of children and young people is improved; children and young people are safe and free from harm; the impact of poverty on children and young people is mitigated; outcomes for looked after and care experienced children and young people is improved.
- NHS Grampian Plan for the Future 2022-2028 which is constructed around three pillars – people, places and pathways – to create sustainable health and care.

The National Care Service (Scotland) Bill builds on the findings of the Independent review of Adult Social Care in Scotland which was published in 2021. The Bill allows Scottish Ministers to transfer social care responsibility from local authorities to a new, national service.

The legislation – which could see the new national service established by 2023 – includes unpaid carers having a new legal right to a break.

The implications for Health & Social Care Moray and this strategy will be reviewed in response to this.

Appendix 4 – Guiding principles

Equality, Diversity and Human Rights

The principles of equality, diversity and human rights are the basic rights for all.

We will work to ensure that carers' are aware of their rights under the legislation and that no carer is disadvantaged owing to age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity, race; religion or belief; or sex or sexual orientation, in line with the Equality Act 2010.

All children and young people have an established set of rights and principles based on the United Nations Convention on the Rights of the Child. These say that nobody should treat a child or young person unfairly and that when adults make a decision about a child or young person it is what's best for the child or young person that should be the most important thing to consider. The child or young person must have their say too.

Awareness of their rights, and those of the person that they care for, can help adult and young carers' get fair access to things that most people take for granted.

Equal Partners in Care

Underpinning this strategy are the Equal Partners in Care (EPiC) principles which mirror our priorities and outcomes.

EPiC is a joint NHS Education Scotland (NES) / Scottish Social Services Council (SSSC) project which developed a learning resource for health and social care staff to support improved conversations and interactions with carers. The aim is to make a positive difference and improve outcomes for carers and the people they care for.

The principles are:

1. Carers are identified.
2. Carers are supported and empowered to manage their caring role.
3. Carers are enabled to have a life outside of caring.
4. Carers are fully engaged in the planning and shaping of services.
5. Carers are free from disadvantage or discrimination relating to their role.
6. Carers are recognised and valued as equal partners in care.

If you need information from Moray Council in a different language or format, such as Braille, audio tape or large print, please contact:

إذا كنتم في حاجة إلى معلومات من قبل مجلس موراي وتكون بلغة مختلفة أو على شكل مختلف مثل البراي، أسطوانة أوديو أو أن تكون مطبوعة باستعمال حروف غليظة فالرجاء الإتصال بـ

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اگر آپ کو مورے کونسل سے کسی دیگر زبان یا صورت میں معلومات درکار ہوں مثلاً "بریلے، آڈیو ٹیپ یا بڑے حروف، تو مہربانی فرما کر رابطہ فرمائیں:

STRATEGY DEVELOPMENT GROUP

Developing the next strategy to support Unpaid Carers in Moray



Supporting Unpaid Carers

Engagement report - March 2022



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This report is available on our website –
<https://hscmoray.co.uk/engagement>

If you would like a copy of this document in an alternative format, have any questions about the information contained in the report or would like to be involved in the work being taken forward to develop the next strategy for Unpaid Carers in Moray, please contact us.

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1. Thank you

The Strategy Development Group would like to thank all participants who gave their time to share their lived experience as an unpaid carer in Moray during the first phase of our engagement.

We recognise that we only reached a small proportion of the growing number of people who provide or have provided care to a family member, friend or neighbour, but hope those we were able to engage with feel this report presents an accurate reflection of the experiences and issues they shared.

Caring at any time is a challenge. It was evident from what we were told that the past two years have been

incredibly hard for carers - impacting on their physical and mental health and wellbeing, social and financial inclusion and their ability to participate in education and employment.

The Covid-19 pandemic has further highlighted the many and increasing demands faced by unpaid carers and reinforced how essential they are not just in terms of the support they provide to the people they care for, but collectively as a vital partner within the health and social care system.

It is more important than ever that carers are recognised and valued, and that the right support is in place to help them throughout their journey as a carer.

2. Introduction

The Moray Integration Joint Board has delegated responsibility for community-based health and social care services. This includes support for unpaid carers.

Services are provided directly through Health & Social Care Moray – a partnership of Moray Council and NHS Grampian – and with the Third and Independent Sectors.

Both the Board and Health & Social Care Moray are committed to improving the ways they actively involve people who have lived experience in the planning, design and delivery of services.

The existing strategies for adult carers and young carers in Moray are to be

updated by a single strategy which will take a whole life approach.

To ensure the strategy reflects and responds to local needs and aspirations, it is important carers of all ages are involved in its development.

This report presents the findings from the first phase of engagement to discover more about the experiences of unpaid carers in Moray and what matters to them.

The engagement was carried out from August - October 2021 by the Strategy Development Group which includes the unpaid carer representative on the Moray Integration Joint Board, officers from Health & Social Care Moray and from Quarriers Carer Support Service (Moray).

3. Summary of emerging themes and next steps

We analysed our notes from the discussion groups held with carers and the responses to the survey to identify five top level themes for the new strategy to deliver on. These are:

1. Carers are supported by carer-aware communities
2. Carers have access to information, advice and support
3. Carers are supported to have a life alongside caring
4. Carers are valued and empowered
5. Carers are supported in education and the workplace

During April, we will carry out further engagement to check we have heard and understood what is important to carers. We will discuss whether these themes are the right ones for Moray and if there are any other themes that should be included in the strategy. We can then begin to develop actions for improvement.

Details of how to get involved in this next stage are on Page 25.

We will continue to develop the next strategy with unpaid carers in Moray and expect to have the first draft of the document ready by summer. There will be a period of consultation before the strategy is finalised and presented to the Moray Integration Board for approval to deliver what carers have said will make a difference to their health and wellbeing.

Developing the next strategy to support Unpaid Carers in Moray

The following table summarised how the proposed themes for Moray would link to the existing national priorities and policy drivers.

Proposed strategy themes for Moray	Carers are supported by carer-aware communities	Carers have access to information, advice and support	Carers are supported to have a life alongside caring	Carers are valued and empowered	Carers are supported in education and the workplace
National priorities and policy drivers					
National health and wellbeing outcomes	<p>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 well-being.</p> <ul style="list-style-type: none"> ➤ I feel I get the support I need to keep on with my caring role for as long as I want to do that ➤ I am happy with the quality of my life and the life of the person I care for ➤ I can look after my own health and wellbeing 				
Carers Act 2016	Am I a carer?	Carer Support Plan / Statement	Support as a Carer	Involvement in services	Hospital discharge
Carers have the right to:	Access a local information and advice service	Request an Adult Carer Support Plan or Young Carer Statement	Access support to meet their eligible needs	Be consulted on services for them and the person they are caring for	Be included in the hospital discharge of the person they are caring for.
Equal Partners in Care	Carers are identified	Carers are supported and empowered to manage their caring role	Carers are enabled to have a life outside of caring	Carers are fully engaged in the planning and shaping of services	Carers are free from disadvantage and discrimination related to their caring role
Core principles					

- [National Health and Wellbeing Outcomes](#)
- [Carers Act 2016](#)
- [Equal Partners in Care](#)

4. Background

The actual number of unpaid carers living in Scotland is not known but it was estimated that there were around 700,000 to 800,000 prior to March 2020. Evidence suggests that number has now grown to over 1,000,000, with many people becoming a carer over the past two years of the Covid-19 pandemic, while others saw an increase in their caring commitments.

There are growing numbers of older carers and carers who are looking after more than one person. Nearly half of carers have long-term conditions themselves. The time individuals spend caring is also increasing and many carers are looking after people with complex needs.

It should never be assumed that all unpaid carers are fully able or willing to take on or continue in a caring role.

For many, supporting families, friends and neighbours can provide a sense of well-being. For others, providing support or balancing care alongside other commitments such as family life, employment and education, can have a major impact on every aspect of life.

Not all may need formal support from statutory services to assist them to manage the demands of the role but carers' legislative rights are enshrined by the Carers (Scotland) Act 2016. The Act recognises that preventative support at an early stage can reduce the risk of carers coming to crisis and help them to continue to manage independently.

The development of a new strategy for unpaid carers in Moray will be an opportunity to improve recognition of unpaid carers of all ages in Moray and ensure their rights are upheld.

The three year plan will need to respond to national strategic planning and policy developments for carers and determine local priorities which take into account the impact of the Covid-19 pandemic on unpaid carers and the opportunities identified by carers themselves to improve services, experiences and health and wellbeing outcomes.

5. Methodology

From August to October 2021, the Strategy Development Group carried out engagement work to inform the next unpaid carers' strategy.

Engagement consisted of initial focus group discussions followed by a questionnaire to better understand the impact the current situation and the caring role has had on carers in Moray, including understanding what has worked well and what could be improved in the future.

The focus groups were held in August 2021 and promoted by Quarriers to carers registered with the organisation. They took place virtually using the Zoom platform.

The survey launched on 01 October 2021 and remained open for a four-week period. It was hosted online using the Survey Monkey platform and printed copies were made available on request. It was promoted by partners via newsletters and social media using a number of networks and emailing lists for wider cascade, including circulation across Health & Social Care Moray, NHS Grampian, Third Sector Organisations and service providers.

Who we heard from

Eight focus group discussion sessions were conducted to provide carers with an opportunity to come together to share their experiences. These were facilitated by members of the strategy development group, promoted through Quarriers and took place virtually due to the ongoing pandemic. The table below gives a breakdown of the sessions held and the number of carers participating (where recorded).

Adults

Date	10.08.21	12.08.21	18.08.21	24.08.21	31.08.21
Group	Parent carers	Older carers	Working carers	Rural carers	Open
Numbers	2	8	NA	3	3

Young carers

Date	06.09.21	08.09.21	13.10.21
Group	Speyside High School	Lossiemouth High School	Quarriers
Numbers	4	NA	NA

Following the focus groups discussions, the opportunity was taken to expand the question set for use in the questionnaire.

The questionnaire was completed by 181 people. Almost all (98%) told us they were currently in a caring role or had been in the past. The remainder were people who support unpaid carers.

85% of people identified themselves as female, and 15% identified as male. No person completed any other options.

Most carers completing the survey were aged between 46-59 (40%), 60-74 (29%) and 30-45 (27%). The survey had a limited response from carers under the age of 30 or the 75s and over.

Almost half (46%) were caring for more than 50 hours a week.

96 carers said they were providing care and support to one or more adults aged 65+, 57 were caring for an adult aged 18-64 and 48 were caring for a child or young person.

Carers were caring for people with a range of conditions. The survey had multiple options for respondents and many respondents indicated that more than one applied. The reported conditions in order of frequency were: long term condition (75), physical disability (58), frailty (51), neurological condition (43), learning disability (38), autistic spectrum disorder (35), mental health (32), dementia (24), life limiting illness (19), sensory loss or impairment (18), substance use (5).

A quarter of carers were working full-time with 23% being retired. 21% worked part-time with the same unable to work because of their caring role. 11% were unable to work due to their own health issues.

Half of respondents indicated they themselves had a health condition or disability.

6. Discussions at carer focus groups

We asked focus group participants about the things that helped them continue in their caring role and what mattered most to them in terms of their own wellbeing.

Question - What helps you keep going in your caring role?

Adult carers	Young carers
<ul style="list-style-type: none"> • No alternative • Family members, friends and community groups play a supportive role • Access to support from GP, counselling, Shared Lives • Organisations switched to providing online digital support during the pandemic 	<ul style="list-style-type: none"> • Seeing friends • Support from extended family • Support worker from Quarriers • Support within school • Support for the person cared for • Having a break and time to follow personal interests • Pets

Question - Thinking about your own wellbeing, rather than the person you care for, what is most important to you?

Adult carers	Young carers
<ul style="list-style-type: none"> • Being in employment • Protected time • Support to have a break • Being aware of available support • Being able to access support easily and at the right time • Activities such as walking • Being able to socialise • Access to digital technology to keep in contact with others • Access to health services 	<ul style="list-style-type: none"> • Being respected • Professionals sticking with you • Teachers understanding the impact of the caring role • Not feeling different • Having time to myself • Spending time with friends in person or via social media • Having someone to talk to • Music, going for a walk, journaling • Being able to look forward for the future • LGBTQ group

We also asked focus group participants to share their views about the challenges they experience and what support would make a difference to help them to overcome the challenges. The table below provides a summary of the main points which were highlighted.

Question - What challenges have you experienced as an unpaid carer?

Adults

- Having no choice but to continue in the caring role as an alternative is not available
- Reluctance to ask for help
- Not being heard or listened to
- Lack of family support
- Increased pressures and demands as a result of the pandemic
- Loss of social care support due to Covid restrictions and unable to source alternative support
- Negative impact on mental health and wellbeing with carers experiencing issues of anxiety, stress and feeling overwhelmed
- Lack of emotional support
- Feelings of isolation
- No protected time to have a break
- Lack of opportunities during school holidays for children with additional support needs
- Being unable to access any formal social care support
- Difficulty in navigating the complex social care system and assessment process
- Long waiting times for social care support
- Poor communication from social care or being able to contact someone
- Social care feels like a battle
- Carers not being respected as equal partners and not being included in care and support planning
- Lack of continuity in the staff supporting the cared for causes anxiety
- Lack of services for certain age groups or people with certain conditions
- Lack of capacity in services
- Poor transition planning for young people moving into adult services
- Dealing with immediate challenges can make planning for the future impossible
- Financial challenges
- Completing forms
- Lack of help with practical tasks
- Balancing work and caring responsibilities
- Inability to take up employment
- Timing of social care services not matching working day
- Decision being made on the basis of budget rather than needs
- Lack of consistency in how SDS is used by people

Young carers

- The impact on family life of the condition of the cared
- The impact on studying, homework and school attendance of the caring role
- Stress
- Lack of recognition and understanding of the caring role from the school
- Not being in contact with other young carers
- No knowing where to go for information
- Not knowing where to go for support
- Not having a break, time to myself or time to follow my own interests

Question - What would help you overcome these challenges and help you in your caring role?

Adults

- Greater **awareness** of carers and the impact of the caring role
- Improved **identification** and **recognition** of carers as being expert in the needs of the cared for
- Greater **involvement** of carers in support planning
- Improved understanding of the impact of the caring role on someone's **health and wellbeing** with professionals responding appropriately
- More **support** to those who take on a caring role following a sudden change in circumstances
- Improved access to information
- A simpler **social care system** to make it easier to understand and navigate
- Improved **integration** of services
- More consistent **communication** and recording of information by professionals
- Improved provision of support for the cared for which is personalised and flexible to meet changing needs
- Greater provision of **short breaks** to increase choices available including planned and emergency breaks, accommodated and non-accommodated respite
- Improved access to **mental health support**, including counselling, to increase resilience
- Greater **consistency** in support staff for the cared for
- More **holiday programmes** for children
- Increased **funding** for carer support services
- More opportunities for **peer support**, support to gain confidence to join in activities and attend meetings
- Rapid access to **crisis** support
- Improved **availability** of social workers
- Increased **assurance** checks that services are meeting needs and improving outcomes
- Improved outcomes as a result of the **carers assessment**
- Improved **support** for young carers/sibling carers in education

Young carers

- Raised **awareness** of young carers
- Improved support for young carers within **schools** including support for homework
- Opportunity to **meet other young carers**
- Easy access to **carer information and support**
- Easy access to **health condition information/training**
- Being **included** in care, support and treatment discussions
- More opportunities to have a **break**, time to myself or time to follow my own interests

7. Carers questionnaire findings

The following is a summary of the general answers received to the questionnaire. Some individual responses are shared to highlight key points.

A. What or who helps you in your caring role?

Caring responsibilities can have a major impact on every aspect of a carer's life and additional support is needed to manage the demands of the role. We asked carers what or who they found supportive.

In their free text responses, many carers told us they had no help and were trying to cope as best they could with their situation and the fluctuating/increasing needs of the person they cared for.

"Nobody as struggling to get any help."

"I have looked after my wife for 7 years, never had a break, in fact I've never been away from her side in all that time."

"My wife's greatest pleasure is her garden but that is now not possible."

Some carers were able to turn to supportive family, friends and neighbours for practical and emotional help, but that often depending on the other person's own work or family commitments and was limited to certain times or tasks.

Many carers were trying to balance their caring role with other responsibilities. Social care services provided limited support for some.

"Recent health decline has meant that I need support to care in the mornings as although I am working at home three days a week I am 'working' and therefore cannot be available to deliver care simultaneously."

"Used to have a care company come in but they weren't any good & let us down badly so I changed job so now I work evenings so that my son, daughter & parents can be there when I work to ensure he takes his meds & that he eats."

"After a stay in hospital my husband now has a carer in once a day but only for a short time. This is great as someone is helping him shower and dress and make sure he is ok."

"My partner has a care plan and he receives a morning visit 7 days a week from the care worker to prepare him for the day. I do the rest as I work from home."

"Carers provided by an SDS package - without them what has been achieved for my wife would not have been possible."

A number of carers highlighted the assistance they receive from Quarriers which is commissioned by Health & Social Care Moray and Moray Council to provide services to adult and young carers. The organisation also attracts funding from a range of sources for additional carer activities.

“Quarriers newsletters are very helpful in providing information and pointing me to activities/groups/learning opportunities I might want to join.”

“Counselling service arranged by Quarriers.”

B. What challenges do you experience in your role as a carer?

Carers experienced many struggles before the pandemic and have faced new and additional challenges and pressures as a result of lockdowns, loss of informal support and disruption to services.

Carers own health issues, as well as the health condition of the person they cared for, has been a concern. The demands of the role impacted on both physical health and mental wellbeing. They spoke of the stress they were under, their lack of sleep and tiredness, worry, feelings of guilt and isolation which had made it more challenging to cope in the caring role.

The inability to have a break was the biggest challenge for most carers and had a negative impact on many aspects of their life including relationships.

“Providing 24 hour care without any respite provision. Physical and mental exhaustion.”

“Loss of a wife and partner. Physically having to do everything to keep the house going.”

“The constant asking of the same questions all day and every day. Not having any family close by to give me a break. Having to see to everything now - banking, insurances, all household repairs etc.”

“Not knowing when my son will have a meltdown or how violent it will be.”

“My role as a carer is very physically and emotionally demanding on me. I too have disabilities so my physical and mental health is really suffering... I feel very lonely and isolated and don't have much of a life outside of my caring role.”

“The relentless nature of caring for someone in the advanced stages of M/S.”

“If he doesn't sleep at night then nor do I but I still have to work the following day.”

“Loss of freedom to get out & about, loneliness at times.”

“Feeling that all I can offer is inadequate for my elderly mother who lives alone and gets lonely. I feel guilt as my time is limited.”

There were many comments from carers who had experienced the loss of support networks and suspension of services for the cared for in response to the pandemic.

“Covid has affected the person I care for due to being isolated from friends which has led to them feeling anxious.”

Carers reported a lack of social care support or barriers to accessing the system such as poor communication from social care and bureaucracy. They also highlighted issues with the capacity and quality of current care services.

“Red tape when trying to make life easier for my Mum.”

“Lack of support and communication from social care.”

“Health, Education and Social Work have no real understanding of my child's condition. This is a problem because suggested supports are almost always counterproductive.”

“Not enough support from services. Phoning and phoning for my call to be answered weeks later. Chasing medications.”

“Losing a good / flexible care package as no longer allowed to use self-employed carers. Hopeless care company for personal care, who are currently unable to meet my husband's care needs.”

“Not being involved in decision making.”

“From a service provider perspective, when they do not come to assist the user, I ended up doing the morning routine. The lack of reliability especially if you work can be stressful.”

“The length of time it takes to navigate through services to get an outcome.”

Difficulties accessing health support were also commented on.

“Getting mum seen by a doctor before it becomes a crisis situation has been very difficult the last couple of years due to covid.”

“Hospital appointments that coincide with my work hours. Access to the GP and refusal of outside care.”

Others spoke of the pressures of their financial situation and in trying to secure or maintain employment.

“...uncertainty about future finance for my son and myself.”

“Universal Credit covers my mortgage and nothing else: no bills, food, transportation, etc. My energy is limited so although I'm looking for part-time work, I am very concerned about being able to work AND continue caring for my child.”

“It's hard not being able to get a break. It's also frustrating not being able to work due to being an unpaid carer and having to rely on benefits.”

“Can't find work around caring & can't join in a lot of things as no respite e.g. no day care available after 3/3.30.”

“Not being able to take on addition job to earn extra income due to caring for my mum.”

C. What would support you to look after your own health and wellbeing?

There is an increasing focus on ensuring a whole-system approach to health and social care which focusses on keeping people well by anticipating health needs,

preventing illness, and reducing the impacts of poor health. This will be achieved in part by promoting positive health and wellbeing with and for all citizens, including self-care and self-management in everyday life.

Carers expressed difficulty, however, in prioritising their own needs above those of the person they support with many indicating they *“don’t have time to be ill”* or that they *“forget about myself until I have no choice but to see to health issues.”*

In response to a question on what would help carers maintain and improve their own health and wellbeing, most mentioned the importance of time away from the caring role in order to have a break, with suitable respite care to relieve them of their responsibilities and commitments so they could rest and recharge, or do something solely for themselves.

“Time for me.”

“Having a few hours to myself – a whole day now and again would be bliss.”

“Periods of residential respite care are essential to maintain my sanity.”

“Care for my daughter while I took a break.”

“Being able to relax and know that they had support without me.”

“A befriending service would be a big help as I would know my mum had some company other than me.”

Having someone to talk to and feeling listened to and understood were also mentioned.

“A listening ear, support from peers.”

“A mentor.”

“Availability of counselling.”

“More understanding of the effect of daily looking after someone with mental health issues who is also on the spectrum.”

Carers reported that their stress and worry would be reduced if the social care system was easier to navigate and if they were able to access - in a timely manner - the flexible and personalised support they needed or that the person they cared for required. They also called for better access to information on available support and high quality and appropriately resourced services which could be relied on.

“If there was a professional, say a social worker, assigned to make contact to see if any help is required & they could assist in getting things in place. This takes the pressure off working through the paperwork etc.”

“For care assessments and self-directed support (SDS) budgets to be agreed in a timely manner. For SDS/support budgets to be used creatively as intended to enable personalised outcomes, rather than what social work deems as outcomes.”

“Having ready access to carers to supplement the care I provide. I know how stretched care provision is and I already feel guilt for needing to ask for help. So if help was easily available when I do feel able to request it then that would help.”

“More freedom to choose the respite that suits my son and myself. The spirit of SDS is not allowed in Moray.”

“Better care provision, carers being trained to meet my husband's needs. Continuity of care so I don't have to worry about this.”

“Having the knowledge to know that I could call on the care team at short notice to provide more care in an emergency if I should become unwell and to know my parents can stay together at all times if possible.”

“We need the peace of mind that the person looked after will be supervised, otherwise you go out but your mind is not relaxed.”

“Being able to readily access information, services and resources and being able to do so timeously.”

For some, practical support with household tasks would make a difference, as would the peace of mind of having financial security.

“Not having to worry about the day to day stuff like housework quite so much.”

“Physical help with the house.”

“Better benefits for carers.”

“Discounts towards something for my health and wellbeing or money towards it so I can have a break.”

“To be able to get carers allowance so that some money is available for joining a club.”

“Not needing to work so I could just care for them full time without juggling.”

D. What would help you to have a life alongside your caring role?

The strategy will aim to address how resources can be used effectively to support carers to have fulfilling lives alongside caring. Respondents were asked what would help them.

Short break options would, carers said, provide the opportunity to have time for themselves. Many currently feel too exhausted to make the most of any time to themselves and highlighted the need for regular respite. Others spoke about having lost their support as a result of the pandemic or because the needs of the cared for had changed.

They reflected that flexible options were often not available due to a lack of staff resource. It was important to carers that they felt listened to by professionals as to what would benefit them and the person they cared for.

Parent carers called for improved support through transition from child to adult services and for children with additional support needs.

“To have a bank of respite carers, that are assigned based on locality, experience and areas of expertise.”

“Respite care so I know dad is safe and looked after if I want to have a night out or go away with my family on holiday.”

“If there was another person to share the responsibility of looking after my mother, but I know that isn't possible at the moment.”

“Time out for myself to pursue hobbies whilst my partner was cared for in my absence. The relentless nature of caring is exhausting.”

“Definitely something available in the later part of the afternoon (perhaps into teatime) as this restricts so much.”

“More respite, more opportunities to have a little time to myself as I have my son 24/7. This would allow me to be able to work on my mental health, recharge my batteries and try to get my friendships back.”

“To take away the guilt of leaving her with nobody else to keep her company, she gets lonely.”

Some form of recognition in the form of discounts or rewards was mentioned as was the suggestion that unpaid carers should be paid.

“Some recognition, monetary contribution or a thank you in some other way, perhaps carers card to give money off things when shopping.”

“Discount or money towards something.”

“To be paid according to the hours of caring I do.”

E. What changes would make the biggest positive difference to you as a carer?

In the survey, respondents were invited to share suggestions and ideas on what would be useful to them in their caring role and what would make the biggest difference.

Many reflected on a wish for better health for the person they care for or for themselves. Respondents said they would welcome the chance to share the caring role with others in their family rather than the responsibility always falling to them.

They called for more community activities suitable for the person they care for to attend to reduce social isolation. Information on what is available needs to be easy to access.

Carers want to be recognised and valued for what they do.

“Recognition that unpaid caring is actually a job in its own right. I had to stay at home, as do thousands of other unpaid carers, as my daughter needed stability... holding down a job was impossible.”

“Being able to reduce my working hours to enable me to spend quality time with the person I care for without forfeiting my own future financial security.”

The provision of high quality respite care so the carer could feel confident taking a short break, knowing that the needs of the cared for were being met, was again highlighted as a priority, along with improved support from health professionals – including a dedicated point of contact and timely access to the care and support needed.

“Time away from caring role, a listening ear, support from peers, appropriate support from services.”

“By treating clients with the care and respect they deserve. They don’t deserve to be messed about.”

“Available care - less formal arrangements to allow for spontaneity.”

“Keep the person I care for happy.”

Having suitable housing was also mentioned by carers.

F. Carers Rights

The Carers (Scotland) Act 2016 extends and enhances the rights of carers. The aim is to better support carers on a more consistent basis so that they can continue to care, if they so wish, in good health and to have a life alongside caring. In relation to young carers, the intention is similar to that for adult carers but also that young carers should have a childhood similar to their non-carer peers.

The survey sought to establish people’s awareness of their rights as unpaid carers and found that 1 in 2 carers were not fully aware of their rights.

Carers (Scotland) Act 2016	Yes I know about this	Yes I had heard about this but I'm not sure what it means	No I have not heard of this
Carers have the right to receive information and advice, including information about their rights as a carer.	39%	26%	35%
Carers have the right to access an Adult Carer Support Plan if they are an adult or a Young Carer Statement if they are under the age of 18.	44%	14%	42%
Carers have the right to be involved in the assessment of their own needs for support.	40%	19%	40%
Carers have the right to access support if their needs meet the local eligibility criteria for carers.	32%	22%	46%
Carers have the right to have their views taken into account when local authorities are assessing the needs of the person that they are caring for.	40%	17%	43%
Carers have the right to be involved in the hospital discharge planning of the person(s) that they are caring for, or plan to care for.	46%	15%	40%
Carers have the right to be involved in the planning of any carers' services that local authorities and health boards provide.	38%	14%	48%

G. What carer support services have you found useful?

Health & Social Care Moray and Moray Council contract with organisations to offer practical support, advice and information to carers who were asked what worked well for them in terms of dedicated carers support.

Some responded that they did not require a service or didn't have time or the opportunity to access services and a small number were not aware of the available support.

"Don't know of any, I don't think I class as a carer as don't get Carers Allowance."

"None as yet as info out here not as accessible or forthcoming as it should be."

"Not accessed these. Where do I get the time?"

Many had found the information, advice and support offered by Quarriers to be of benefit. The regular communication through newsletters and emails were praised by many.

“Being able to chat to someone at Quarriers as and when required, money from the government through Quarriers last year to buy something for myself.”

“Quarriers is a fantastic help with support and understanding for me.”

Social work was recognised as being supportive and there was mention of services such as care at home, respite breaks and the Shared Lives service, although carers also underlined a need for improvement in provision. Condition-specific national organisations were found to be helpful in providing support and information.

H. What would improve carer support service? What else is needed in Moray?

The survey was an opportunity to listen to ideas for improvement and what carers had to say about gaps in service provision.

The need for funding to maintain and extend provision of support for carers was highlighted, including flexible support out with working hours and via digital platforms. Carers said they need to be made aware - through advertising and the provision of information and advice – of what support is available and their rights under legislation, and be supported to have their voice heard. This included involvement in hospital discharge.

“Carer support services to have more funding, more staff, appropriate buildings to provide essential support to unpaid carers, scope to provide the support carers want not what the LA think they should want.”

“More services required, more information specifically regarding legislation and new policies.”

“Access to legal, medical and financial advice.”

“More money to Quarriers to enable them to do nice things for carers.”

“Quarriers does good things, but sometimes they are a one-off. Things like the class for parents of children of additional needs don't seem to be repeated but it was a life-saver. Please repeat things that work!”

“Strong advocacy service for carers.”

Support for carers mental health and wellbeing would be welcomed, as would development of carer friendly communities where there is greater understanding of the caring role and its impact on people.

Although the question asked about support services for carers, many answered on the need for services for the cared for. More respite options and the return of services which had been suspended in response to the Covid-19 pandemic were

called for. Carers in rural locations spoke about the lack of services, support and activities in their communities.

“More day services to allow the individual access to activities.”

“More services directed for young people with complex needs.”

“In effect something like a ‘baby sitter’ who can be available to stay overnight occasionally.”

“Support services that can provide emergency support easier without social work referral which is time consuming and does not meet needs of emergency care. More support services and companies to allow carers to access paid carers. There are so few healthcare organisations and providers in Moray it makes it nearly impossible to even have someone come in for a few hours a week.”

“Activities or a hub for children with disabilities no matter if physical or mental. Also help for their siblings too.”

“Drop in centre for difficult days.”

“More holistic approach to care needs, listen to what people want.”

“Respite locations and an understanding of what is really needed by parents of young adults who don't want to put them into care.”

“Support for carers not having to wait for approval from Social Services as this seems to be a big hold point for the majority of the support we need.”

I. If you were able to take a break from your caring role, what would a break look like for you?

Access to regular and meaningful breaks from caring is one of the most important factors in carers being able to maintain their own health and wellbeing. The national Independent Review of Adult Social Care has recommended a right to respite for unpaid carers.

Throughout the survey, access to respite came up repeatedly as a priority. Carers told us they had struggled to access breaks that met their needs prior to March 2020 and that the suspension of many respite services during the pandemic had put them under increased strain.

The responses from carers as to what a break would look like for them, underlined the requirement to develop a greater range and more imaginative options for both the supported person and unpaid carers to better meet needs and preferences.

They told us that a break is an opportunity to leave caring responsibilities behind for a time, to have a degree of ‘freedom’ and recharge. This obviously means different things to each carer - from a weekend away with or visiting family and friends, time to spend on an interest or hobby or just to read a book.

Carers need peace of mind that the needs of the cared for are being met in the right way while they are having a break.

“A day without having to worry about my mum.”

“A day out of the house relaxing.”

“Catching up on sleep.”

“Being sure my husband was safe.”

“Time away knowing my mum had someone else to keep her company, not just a random person but someone she grows to know and trust.”

Many carers felt there was no realistic prospect of them being able to have a break. Their caring role is constant.

“I cannot. Nobody will do what I have to do. I am stuck, I married for better or worse so I feel guilty having any break without her with me.”

“It would be a day where I don't worry if my daughter has woken up too early, can eat without a fight, can get dressed without a fight, not have to panic on her running all the way to school, not having to worry through the day every time my phone rings, what she is going to be like when picked up from school and how she is going to be at home and then bedtime. If I were to take a break all of these things would be here. I have no one to look after my daughter so getting away is not an option.”

“I'm crying thinking about this. I have no idea and don't dare think about it.”

“No break at all – always on duty.”

“I'd worry too much about what would happen if I wasn't there to do it.”

8. Emerging strategy themes

The following five draft themes have been identified from the experiences shared. These will start to inform the priorities for the next strategy. Each priority will contain a number of improvement actions to be achieved over the lifetime of the strategy.

Themes:

1. Carers are supported by carer-aware communities	
Where we are now	Where we want to be
Many people who have caring responsibilities do not recognise themselves as carers. This means that they may miss out on support available to them. Carers feel lonely and socially isolated as a result of looking after a loved one.	<ul style="list-style-type: none"> • There is improved identification, recognition and understanding of carers by those working in health and social care, by public services and by communities. • Communities are enabled to build their capacity to support carers.

2. Carers have access to information, advice and support	
Where we are now	Where we want to be
Carers are often not aware of the available help and support available to them.	<ul style="list-style-type: none"> • Carers have access to the right information and advice at the right time. • They can access practical, emotional and peer support and activities.

3. Carers are supported to have a life alongside caring	
Where we are now	Where we want to be
Carers are at increased risk of poor physical and mental health and wellbeing because they often put the needs of the person they care for before their own. The pandemic has taken a heavy toll on carers, challenging their ability to sustain relationships without their usual support. A quality break means different things to different people. It is important to carers that it benefits both parties.	<ul style="list-style-type: none"> • Carers are connected to the health and wellbeing services, training and carer support they need to look after their own health and wellbeing, with a greater focus on prevention and crisis support to keep people well and safe from harm. • All carers have the opportunity to take breaks from their caring role to enable them to maintain their own health and wellbeing and have a life alongside caring.

4. Carers are valued and empowered

Where we are now	Where we want to be
<p>Carers are not recognised as equal partners in care. Carers are frustrated by the current health and social care system which they find difficult to navigate. Communication is poor and decision-making is slow and unclear.</p>	<ul style="list-style-type: none"> • Carers are recognised as being equal, valued and expert and supported to make informed choices about the care they provide. • Carers are aware of and are able to exercise their rights. They have opportunities to engage in service planning, design and delivery. • Carers are able to access the support they need whilst caring and when the caring role comes to an end.

5. Carers are supported in education and the workplace

Where we are now	Where we want to be
<p>For young carers there is a risk that their caring role could negatively affect their education and opportunities for employment. Caring has a financial impact on carers. Carers have had to give up employment opportunities or reduce their work hours to care, which impacts on their financial wellbeing and increases social isolation.</p>	<ul style="list-style-type: none"> • Carers are free from disadvantage and discrimination related to their caring role. • Carers can supported to build and maintain social connections. • Carers are enabled to learn alongside their caring role through improved support in educational/training settings • Carers are enabled to work alongside their caring role through improved workplaces policies and practices • Carers can access the financial support and assistance they are entitled to.

9. Get involved in the next part of developing the strategy

We welcome all unpaid carers – whether they were involved in the first stage of engagement or not – to work with us to continue developing the future priorities and improvement actions for the strategy.

5 high level themes have been identified from the work so far:

1. Carers are supported by carer-aware communities
2. Carers have access to information, advice and support
3. Carers are supported to have a life alongside caring
4. Carers are valued and empowered
5. Carers are supported in education and the workplace

We now want to ask carers the following questions:

- Are these five themes the right ones for Moray?
- Are there any others which should be included?
- What are the top 3 improvement actions we need to work on under each theme?
- If you suggested any other themes, what are the top 3 improvement actions we need to work on?
- How will we know if the strategy and improvement actions are making a difference?
- Is there anything else we need to consider?

You can get involved in a number of ways.

Join one of our online discussion sessions

These will be held on the following dates – contact us by email to and we will send you the joining details.

- Monday 18 April – 10.30-11.30am
- Tuesday 19 April – 2-3pm
- Thursday 28 April – 7-8pm

Go to our online survey

You can use our online survey to answer the questions.

- <https://www.surveymonkey.co.uk/r/MorayUnpaidCarers>



Send your comments to us

involvement@moray.gov.uk

Involvement Officer
Health & Social Care Moray
9C Southfield Drive
Elgin IV30 6GR

10. Lived Experience Advisory Forum – come and join us

Health & Social Care Moray is supporting people to come together to form a new Unpaid Carer Lived Experience Advisory Forum.

The forum will be a community of people who know what it is like to be a carer and who are want to make a difference to the lives of fellow carers by sharing their lived experience, their views on hot topics and ideas for improvement.

Meetings of the forum will be both in person and on line to give as many carers as possible the opportunity to take part.

The collective voice of the Lived Experience Advisory Forum (LEAF) will help to inform and influence strategic development, service planning and delivery.

It will be chaired by the Unpaid Carer Representative on the Moray Integration Joint Board (MIJB), enabling them to ensure their involvement as a Board member is reflective of the views of a wider range of carers.

Members of the group will also have opportunities to champion carer involvement as equal, expert and valued partners within the governance structures of the MIJB and within Health & Social Care Moray's transformation and improvement programmes.

Anyone interested is asked to contact the Involvement Officer at Health & Social Care Moray who can provide more information.

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