

Falkirk Health and Social Care Partnership

Unpaid Carers Needs Assessment

March 2018



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Summary

This report aims to look at what is currently known about carers in Falkirk as well as service provision while considering factors which will impact on demand and will support in the development of the Carers Strategy. Main points:

- The Scotland's Carers 2015 report considers 17% of the adult population (16+) and 4% of children aged 4-15 as the best estimate of the number of carers in Scotland (Scottish Health Survey 2012/13). If the situation is similar in Falkirk there may be over 22,000 (22,274) adult (16+) and 864 young carers (aged 4-15) in Falkirk which would mean there could be over 8,000 'hidden' carers. While these estimates are based on 2016 mid year population estimates using 2013 estimates yield similar results (21,905 carers 16+ and 843 aged 4-15).
- In 2016/17 there were 2,047 adult carers across Falkirk known to the Falkirk and Clackmannanshire Carers Centre. The Young Carers Project is currently in contact with 171 young carers. The Carers Centre completed 273 Adult Carer Support Plans for Falkirk Carers and there were 1,624 Carer Assessments carried out in Falkirk Council (includes carers assessments completed and/or carer's needs incorporated into client's assessment).
- As at February 2017 there were 3,572 carers entitled to Carers Allowance in Falkirk.
- The 2011 Census showed that women were more likely to report being carers than men and over a third of carers provided 35 hours of care a week or more, equivalent to working full time. Over half of adult carers were employed or self employed and a quarter retired. It also showed that a greater proportion of carers in the most deprived areas in Falkirk reported more substantial caring and the highest number of carers and proportion of the population providing unpaid care was in the East locality.
- The number of children who said they provided care rose with age and their self reported health status deteriorated as the level of care they provided increased.
- Carers are more likely to have health conditions and perceive their health as poorer than noncarers.
- There is room for improvement in the quality of carers' experiences with health and care services. While three quarters of carers were positive about their caring/life balance a third said it had a negative impact on their health and wellbeing and less than half felt support to continue caring and that the services for the person they cared for were well coordinated. A high proportion were satisfied with their involvement in care package design.
- An increasing number of carers in Falkirk are accessing information and/or support from the Carers Centre and the number claiming carers allowance has been increasing. While it has been decreasing recently a large number of Carer Assessments are carried out by Falkirk Council. It is likely that an increase in the number of carers will have an impact on both preventative and statutory support which, in general, is already increasing.
- Many factors will impact on demand and indications are the cared for population in Falkirk is likely to grow. Falkirk's older age population is expected to increase considerably and people are living for longer. Long term conditions including dementia, diabetes and stroke as well as those with multiple long term conditions are all projected to increase. The majority of people with a physical disability are also older. The potential for the number of people providing unpaid care in turn is likely to increase as will the number who may require help and support.

1 Introduction

A carer is 'a person of any age who provides unpaid help and support to a relative, friend or neighbour who cannot mange to live independently without the carer's help due to frailty, illness, disability or addiction' (Scottish Government, 2016).

Anybody can become a carer at any time in their life and sometimes for more than one person at a time. They can be any age, from young children to the elderly. Some carers provide an intensive amount of support over a long period of time whilst for others it may be providing help for a short period of time and they do not need to be living with the person they care for to be considered a carer. Carers are not paid workers although some can receive payment for part of their time caring (e.g. through Carer's Allowance).

Unpaid Carers are the largest group of care providers in Scotland, providing more than the NHS and Councils combined. The Valuing Carers 2015¹ report estimates the economic value of the contribution made by carers in Falkirk as £337 million per year. Research from Carers UK suggests that three in five people will be carers at some point in their lives² and it is important to consider the intensity of the caring role as well as the impact of caring on health and wellbeing among other factors. Caring can be a rewarding experience but can have an impact on a person's own health and wellbeing. Supporting Carers has been identified as one of the priorities within the <u>Falkirk Integrated Strategic Plan 2016-2019</u>.

The Carers (Scotland) Act 2016 takes effect from 1st April 2018 and its intention is to ensure that carers are supported to continue with their caring role, should they wish to do so, and are able to have a life alongside their caring responsibilities. It places a duty on local authorities to provide support to those carers who meet local eligibility criteria and introduces a universal entitlement to assessment for carers, regardless of the level or frequency of care they provide. The Act introduces a range of new provisions to identify, assess and support carers. These include Adult Carer Support Plans (ACSP) or Young Carers Statement (YCS), to provide support for those who meet local eligibility criteria, as well as support and/or information and advice to those who do not, the waiving of all charges for support provided to carers, the joint creation of a local carer's strategy by health board and local authorities, a short break statement by local authorities, to include carers in hospital discharge planning and a greater requirement to involve carers in service design and delivery.

Part 5 of the Act covers local carer strategies and sets out the duty of each local authority and relevant health board to prepare a local carer strategy. Section 31(2)b states that the local carer strategy must include an assessment of the demand for support to relevant carers. Assessing current and future demand is not an exact science and many factors will determine demand.

¹ Buckner, L & Yeandle, S (2015). *Valuing Carers 2015, The rising value of carer's support*. University of Leeds.

² Carers UK (2001). It Could Be You – A report on the chances of becoming a carer.

This includes the extent to which carers are identified, the changing national demographics with the growth in the older population, more adults with complex and multiple care needs, more children with complex needs surviving into adulthood, local demographics, the impact of local publicity and communications regarding support for carers as well as the extent to which carers are supported by family, friends and neighbours rather than by statutory services.

The Carers Act is likely to result in an increase demand for assessment and support services. Following the act the Scottish Government expects the demand for assessments to increase slowly with the percentage of carers receiving an Adult Carer's Support Plan rising to 16% for 2021/22.

This report aims to look at what is currently known about carers in Falkirk as well as service provision while considering factors which will impact on demand and will support in the development of the Carer Strategy. No one data source currently gives a comprehensive picture of the number of carers and their needs. Instead this report has drawn from both national and local information, including Scotland's Census 2011, the Scottish Health Survey, Scottish Government publications as well as Local Authority and Carer's Centre information. It will review what information is available around identifying carers, characteristics of carers and their health and wellbeing, supports for carers as well as factors which may impact on demand.

More robust information will be available following the Carer's Census 2017 which will collect information to monitor the implementation of the Carers Act as well as information for the year prior to implementation. Included in the Census will be all carers known to partnerships (Health, Social Care, Carers Centres, third sector) and other organisations who provide assessment and/or support for carers on behalf of local authorities. Appendix A provides an overview of what is to be collected in the Carers Census for the baseline year (up to 31 March 2018) and from April 2018 onwards.

2 Identifying Unpaid Carers in Falkirk

The number of unpaid carers in each local authority is difficult to identify exactly. Many carers do not recognise themselves as a carer, rather simply as family or a friend. Identifying yourself as a carer may only come when the intensity of the caring role increases or at key junctures such as giving up employment to care. Furthermore, there may be reluctance among some carers to identify themselves and make their needs known out of fear or anxiety, particularly for young carers and carers of people with, for example, mental health or drug and alcohol problems.

Based on results of the Scottish Health Survey (SHeS) 2012/13 and the 2011 Scotland Census:

- There may be over 22,000 carers aged 16+ providing unpaid care in Falkirk. This is based on Scotland-level estimates from the Scottish Health Survey 2012/13 of 17% of all people aged 16+ having a carer responsibility (22,274 in Falkirk based on 2016 population estimates). This is higher than the 14,752 carers aged 16+ who were counted via the 2011 Census.
- The Scotland's Carers 2015 report considers 17% of the adult population (16+) as the best estimate of the number of carers in Scotland. This would mean that there could be as many as around 7,500 (7,522) 'hidden' adult carers in Falkirk.
- The Scottish Health Survey (SHes) 2012/13 estimate that 4% of children aged 4-15 are carers. If the situation in Falkirk is similar to that of Scotland there may be around 860 (864) children aged 4-15 who act as a carer for someone. This is higher than the 304 carers aged under 16 who were counted via the 2011 Census. If taken as the best estimate of the number of young carers (children aged 4-15) there could be as many as 560 'hidden' young carers in Falkirk.
- Although based on the latest mid year population estimates using 2013 mid year population estimates yield similar results (21,905 carers 16+ and 843 aged 4-15).

Information from the Carers Centre, local authority and Department of Work and Pensions show that in 2016/17:

- There are currently 2, 047 adult carers across Falkirk known to the Carers Centre, in that they have been provided with some form of information and/or support. The number of carers provided with information and/or support has been increasing over the past few years. The Young Carers Project is currently in contact with 171 young carers in Falkirk and 82 young carers were referred to them in 2016/17.
- The Carer's Centre completed 273 Adult Carer Support Plans for Falkirk Carers, which has been increasing annually over the past five years.
- There were 1,624 Carer Assessments carried out in Falkirk Council, which has been decreasing over the past two years (includes carers assessments completed and/or carer's needs incorporated into client's assessment).
- As at February 2017 there were 3,572 carers entitled to Carers Allowance.

There is a considerable difference in the estimated number of carers and those identified through receiving support from the Carers Centre, local authority assessments or claiming carers allowance. Many carers may feel that they do not require help or support, they may even be being supported by family and friends rather than statutory services. Perhaps it is those that have a more intensive caring role that are more likely to seek support.

At present it is not possible to determine this but the Carers Census will ask for information on caring hours and duration and so further analysis on this should be possible.

There is currently no one system that records all information on carers and the services that they access. There are local systems in Carers Centre as well as local authority social work systems. Information is also recorded on carers by other professionals. For example, GP practices in Forth Valley hold and maintain a Carers Register. It has not currently been possible to obtain information on carers held on the register but consideration should be given to this as a means of identifying and engaging with carers. GPs are often people's first contact with the health service and they are in a key position to make contact with carers, particularly hidden carers. There is also a means of recording whether a young person is a carer on SEEMis, the Education Management Information System used in schools. The number recorded on this is likely however to be low as children may be less likely to come forward as a carer, sensitivity around this being recorded as well as variation in recording practices. Schools are a good way to reach young carers to offer help and support if and when required. Information on carers is also recorded on health system by, for example, district nurses.

While Scotland's 2011 Census is thought to underestimate the extent of low level caring it does provides a good estimate of people with substantial caring responsibilities and information is also available for small geographies. The Census also allows us to assess changes in the levels of unpaid care provided over a ten year period. The table below shows that while there has been a 7% increase in the population in Falkirk the number of carers self-reporting has increased by only 1%. There has however been a considerable increase in the number reporting substantial caring responsibilities. This suggests that carers are providing more hours of care a week than they were ten years prior.

	Census	All people	Provides Care	Provides 1 to 19 hours care a week	Provides 20 to 49 hours care a week	Provides 50 or more hours care a week
Falkirk	2001	145,191	14,914	9,381	2,014	3,519
	2011	155,990	15,056	8,169	2,796	4,091
	Difference	10,799	142	-1,212	782	572
	% change	7%	1%	-13%	39%	16%
Scotland	2001	5,062,011	481,579	305,600	60,305	115,674
	2011	5,295,403	492,231	273,333	86,816	132,082
	Difference	233,392	10,652	-32,267	26,511	16,408
	% change	5%	2%	-11%	44%	14%

Table 1: The provision of unpaid care in Falkirk, 2001 and 2011

Source: Scotland's Census 2001 and 2011

By 2021 the population in Falkirk is expected to increase slightly although this varies widely by age with the number of older people (65+) projected to increase by 26%. Crude projections have been estimated below by applying population projections to the number of carers in each age group from the 2011 Census. While it is acknowledged that the Census underestimates the number of carers this shows the potential increase in the number of older carers.

Table 2: Estimated future number of carers in Falkirk by 2021

Age Group	2011 population	2021 population projection	Population change from 2011-2021	Number of Carers in 2011	Projected Number of Carers in 2021	Projected Increase in Number of Carers from 2011-2021
0-15	28,377	28,520	0.5%	304	306	2
16-24	[.] 16,344	15,564	-4.8%	801	763	-38
25-34	19,103	18,925	-0.9%	1,359	1,346	-13
35-49	36,288	31,623	-12.9%	4,548	3,963	-585
50-64	30,582	35,659	16.6%	5,308	6,189	881
65+	25,296	31,905	26.1%	2,736	3,451	715
Total	155,990	162,196	4.0%	15,056	16,018	962

Source: 2011 Census and National Records of Scotland (NRS) 2014-based population projections

Identifying Unpaid Carers Overview

The Scotland's Carers 2015 report considers 17% of the adult population (aged 16+) and 4% of children aged 4-15 as the best estimate of the number of carers in Scotland. If the situation is similar in Falkirk there may be over 22,000 adult (16+) and around 860 young carers (4-15) in Falkirk which would mean that there could be over 8,000 'hidden' carers. There is a considerable difference in the estimated number of carers and those identified through receiving support from the Carer's Centre, local authority assessments or claiming carers allowance. Many carers may not feel that they require help or support or perhaps they are being supported by family and friends rather than statutory services. It may be that it is those without this network or those with more substantial caring responsibilities that seek support.

3 Characteristics of Carers

While Scotland's 2011 Census is acknowledged to under count the number of people who provide unpaid care it still provides useful information on the characteristics of caring as well as providing a good estimate of people with substantial caring responsibilities.

The following is taken from Scotland's 2011 Census and aims to provide an overview of the characteristics of carers in Falkirk.

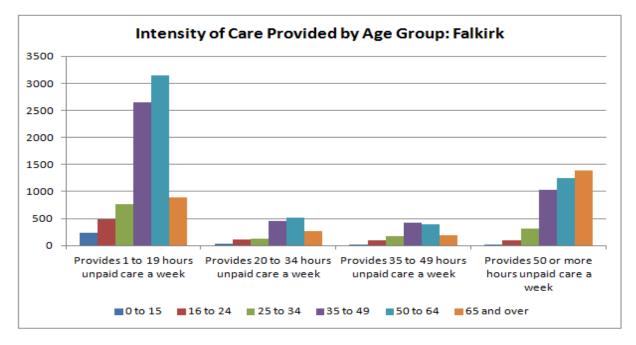
- There were 15,056 carers identified in Falkirk, 9.7% of the population.
- 304 were aged under 16 and 14,752 were aged 16 and over.
- Women were more likely to report being carers than men (59% and 41% respectively). This gender difference remains broadly similar regardless of the number of hours of care a week provided.
- Of those providing care 8,169 provided 1-19 hours a week (5.2% of the population), 1,506 provided 20-34 hours a week (1% of the population) and 5,381 provided 35 hours or more a week (3.4%) of the population.
- 17% of the 50-64 population reported that they provided unpaid care, higher than any other age group.
- Providing 1 to 19 hours per week was the most common level of care provision in all age groups bar the oldest (65 and over) where providing 50 hours a week was the most common. Providing 50 hours a week of care increased with age. Overall, over a quarter of carers in Falkirk provided over 50 hours of unpaid care a week.
- Over half of unpaid carers provided less than 20 hours of care a week with over a third providing in excess of 35 hours a week.
- The majority of carers in Falkirk considered themselves as White Scottish, Other British or Irish. 9.8% of the White Scottish, Other British or Irish population were unpaid carers compared to 5.8% of other ethnicities.
- Over half of adult carers were employed or self-employed (57%) and a quarter retired (24%). For carers caring for more than 35 hours a week over a third (37%) were still employed or self-employed with a greater proportion (35%) being retired.

 Table 3: Number of Falkirk residents identified through the 2011 Scotland Census as providing unpaid care, by gender and age group

Age group*	Number of Males	Number of Females	Both genders combined	Number of carers in this age group as a percentage of all ages	Percentage of population in this age group who provided unpaid care
0 to 15	140	164	304	2.0%	1.1%
16 to 24	335	466	801	5.3%	4.9%
25 to 34	489	870	1359	9.0%	7.1%
35 to 49	1700	2848	4548	30.2%	12.5%
50 to 64	2171	3137	5308	35.3%	17.4%
65 and over	1265	1471	2736	18.2%	10.8%
Totals	6,100	8,956	15,056	100.0%	9.7%

Source: Scotland's Census 2011



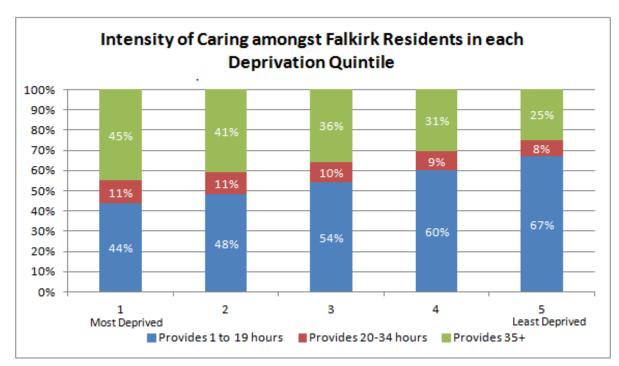


Source: Scotland's Census 2011

The Census also provides information on small geographies and allows us to look at where carers live in terms of deprivation, locality and urban/rural classification.

The Scottish Household Survey showed that almost double the number carers in the most deprived areas care for 35 hours a week or more than those in the least deprived areas (47% and 24% respectively). To determine if there was a similar pattern locally 2011 census information was extracted at datazone level and then aggregated by Information Services Division (ISD) Scottish Index of Multiple Deprivation (SIMD) 2016 Council Area level population-weighted quintiles (this is based on 2014 population estimates).

ISD ranks data zones from the most to least deprived using the Scottish Governments un-weighted SIMD and by using National Records of Scotland population estimates splits this into 5 deprivation quintiles with approximately 20% of the population in each quintile. The figure below shows a similar pattern with a greater proportion of carers in the most deprived areas reporting more substantial caring.





Source: Scotland's Census 2011 and SIMD 2016 Council Area level population-weighted quintile

Scotland's Census data can also be used to indicate the number of carers resident in each of the three localities within Falkirk. Again, 2011 census information was extracted at datazone level and built up into the three Falkirk localities. The table below shows that the highest proportion of the population providing unpaid care was in the East Locality with the lowest in Central.

Table 4: Number of Falkirk residents identified in the 2011 Scotland Census as providing unpaid care by locality of residence

	Total population 2011	Number providing	
Locality	(all ages)	unpaid care	% Providing Unpaid Care
Central	44261	4022	9.1%
East	65424	6511	10.0%
West	46305	4523	9.8%
Falkirk Total	155990	15056	9.7%

Source: Scotland's Census 2011. Information was extracted at datazone level and aggregated to localities.

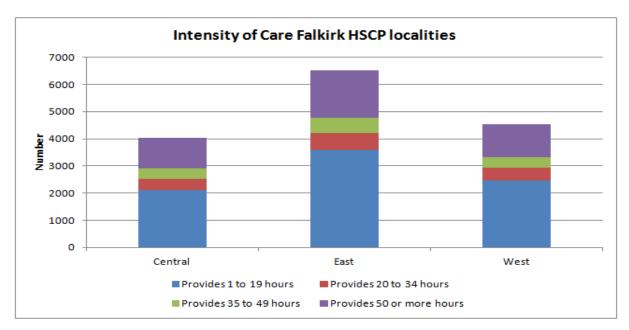


Figure 3: Intensity of care by Falkirk Health and Social Care Partnership (HSCP) localities

Source: Scotland's Census 2011. Information was extracted at datazone level and built up to locality level

In terms of urban/rural classification there are no large urban areas in Falkirk and the vast majority of unpaid carer's live in 'Other Urban Areas'. The urban/rural distribution of carers is similar to that of Falkirk's population. The highest percentage of people providing unpaid care was in the most rural areas and the lowest in the most urban.

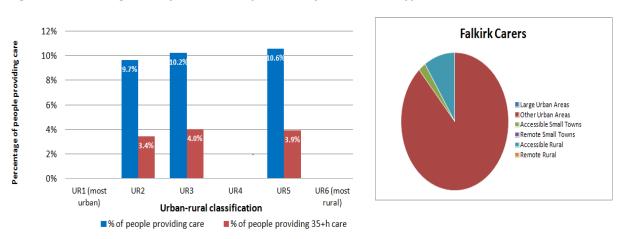


Figure 4: Percentage of Unpaid Carer Population by urban/rural type, 2011

1 Large Urban Areas: Settlements of 125,000 or more people; 2 Other Urban Area: Settlements of 10,000 to 124,999 people; 3 Accessible Small Towns: Settlements of 3,000 to 9,999 people and within 30 minutes drive of a settlement of 10,000 or more; 4 Remote Small Towns: Settlements of 3,000 to 9,999 people and with a drive time of over 30 minutes to a settlement of 10,000 or more; 5 Accessible Rural: Areas with a population of less than 3,000 people, and within a 30 minute drive time of a settlement of 10,000 or more; 6 Remote Rural: Areas with a population of less than 3,000 people, and within a 30 minute drive time of over 30 minutes to a settlement of 10,000 or more; 6 Remote Rural: Areas with a population of less than 3,000 people, and with a drive time of over 30 minutes to a settlement of 10,000 or more.

Source: Scotland's Census 2011 (Scotland's Carers 2015)

Who is being cared for?

There is currently very little information available on the relationship between the unpaid carer and the person they care for. The Carers Census requests that from April 2018 onwards information is recorded on the relationship of the cared for person to the carer and so analysis of this should be possible in the future.

While Scotland's census cannot tell us who each carer cares for it does allow us to identify people in households who may require care. It tells us that the majority of carers in Falkirk were in a couple (80%), 8% were a lone parent, 6% were the child of a lone parent and 6% were the child of a couple. Children who live with a lone parent are much more likely to be a carer (6.2% are carers) than a child who lives with two parents (2.4% are carers). They are also more likely to have substantial caring responsibilities: nearly 2.5% of children living with a lone parents. It is important to highlight that this does not infer the caring relationship. Being a carer who is a member of a couple does not mean that they are a carer to their partner although it is likely that children of lone parents or couples are a carer to their parent.

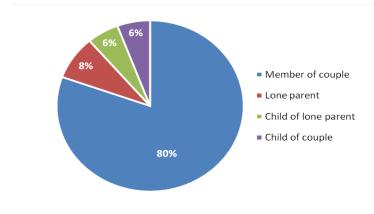


Figure 4: Family status of carer (people in families only), Falkirk 2011

Source: Scotland's Census 2011 (Scotland's Carers 2015)

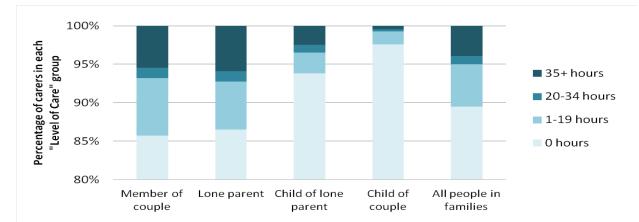


Figure 5: Family status of carer and level of care per week, 2011

Source: Scotland's Census 2011 (Scotland's Carers 2015)

Further information from the Census is provided about the family situation of carers and whether there are any children living in the family. The likelihood of being a carer increases as children get older and is most likely for family situations where there are no dependent children.

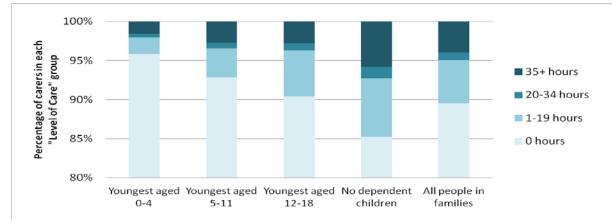


Figure 6: Carers who have dependent children, by level of care per week, Falkirk

Source: Scotland's Census 2011 (Scotland's Carers 2015). Excludes- carers who live alone.

Characteristics of Carers in Falkirk Overview

The 2011 Census tells us a lot about the characteristics of carers and where they live. Women were more likely to report being carers than men and over a third of carers provided 35 hours or more care a week, equivalent to working full time. Of these carers over a third were employed or self employed and over a third retired. Over half of all carers were employed or self employed and around a quarter were retired. The majority of carers were in a couple and children who lived with a lone parent were more likely to be a carer than a child of a couple and were also more likely to have substantial caring responsibilities. The likelihood of being a carer increases as children get older and is most likely for family situations where there are no dependent children.

4 Young Carers

The Scottish Health Survey 2012/13 estimates that 4% of children aged 4-15 are carers. If the situation is similar in Falkirk this would mean that there could be around 860 young carers (864). This is higher than the 304 carers aged under 16 who were counted via the 2011 Census and would mean that there could be as many as 560 'hidden' young carers in Falkirk.

In 2016/17 there were 82 young carers referred to the Young Carers Project and they are currently in contact with 171 young carers in Falkirk. This is a contrast to both the number reported in the Census and the Scottish Health Survey estimate.

While the Scottish Health Survey is considered to provide the best estimate of the number of young carers it does not allow for more detailed analysis and while underestimating the number of young carers Scotland's Census 2011 does allow for further analysis of the young carers who did self report.

Of the 304 unpaid carers under the age of 16 in Falkirk counted via the 2011 Census the majority provided lower levels of care (less than 20 hours a week).

In summary:

- Over three quarters (232 young carers) said they provided care for up to 20 hours per week;
- 13% said they provided care for 20-34 hours per week (40 young carers);
- 10% said they provided more than 35 hours of care per week (32 young carers) and 7% more than 50 hours of care per week (22 young carers).

In addition there were 801 unpaid carers aged 16-24 years old and similarly the majority provided lower levels of care (less than 20 hours a week):

- Just under two thirds (490 young adult carers) said they provided up to 20 hours per week;
- 14% said they provided care for 20-34 hours per week (112 young adult carers);
- 25% said they provided more than 35 hours of care per week (199 young adult carers) and 12% more than 50 hours of care per week (96 young adult carers).

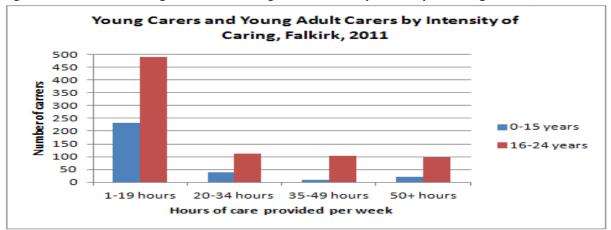


Figure 7: Number of Young carers and Young Adult Carers by Intensity of Caring, Falkirk, 2011

Source: Scotland's Census 2011

Scotland's census also shows that in Falkirk the number of children who say they provide care rises with age.

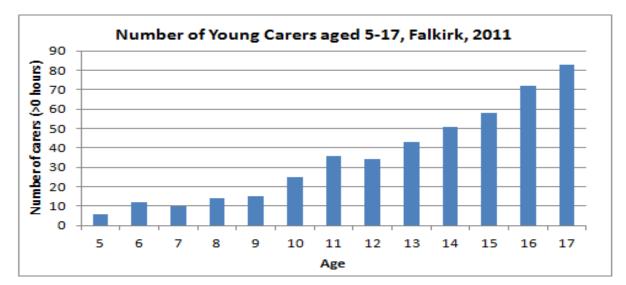


Figure 8: Young Carers aged 5-17 in Falkirk, 2011

Source: Scotland's Census 2011

Scotland's Census also allows us to see how young carers rate their own health compared to their non carer peers. While the same proportion rate their own health as bad or very bad this proportion increases with the amount of unpaid care provided: 4% of those providing 50 hours or more a week or care rate their health as bad/very bad compared to 1% of those providing no care and less than 20 hours of week of care. This shows that the self reported health status of the carer deteriorates as the level of care provided increases.

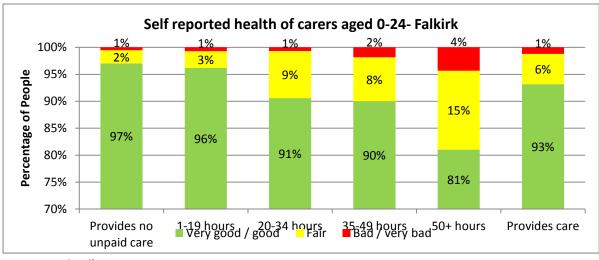


Figure 9: Self reported health of carers aged 0-24, Falkirk, 2011

Source: Scotland's Census, 2011

On a similar note, 81% of carers under 25 providing 50 hours or more of unpaid care a week consider themselves to be of good or very good health, compared with 97% of non-carers of the same age. Again there is a decrease in reporting health as good or very good as the intensity of care increases.

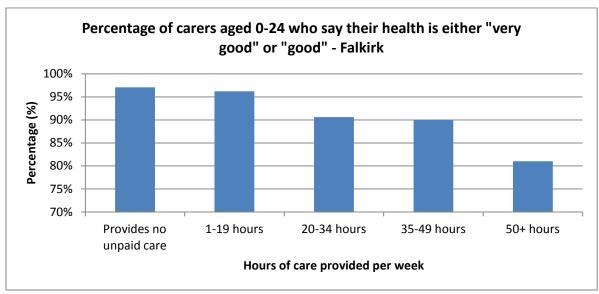


Figure 10: Percentage of carers 0-24 who say their health is good or very good, Falkirk, 2011

Young Carers Overview

The Scottish Health Survey 2012/13 estimates that 4% of children aged 4-15 are carers and if the situation is similar in Falkirk this would mean that there could be around 860 young carers. This is higher than the 304 carers aged under 16 who were counted via the 2011 Census and would mean that there could be as many as 560 'hidden' young carers in Falkirk. The majority of young carers and young adult carers reported in the 2011 Census provided less than 20 hours of care a week, the number who said they provided care rose with age and their self reported health status deteriorated as the level of care provided increased.

Source: Scotland's Census, 2011

5 Health and Wellbeing of Carers

Caring can be a rewarding experience but can also have an impact on a person's health and wellbeing. This section looks at what we know about the health and wellbeing of carers in Falkirk including their experience of health and care services.

Carers are more likely than non-carers to have a long term condition. The chart below looks at carers who have one of more long term condition by the level of care they provide. It reflects the national picture of around four out of ten carers (42%) having one or more long term condition, greater than those not providing care.

The prevalence of long term conditions rises with increasing intensity of care; 35% of people providing less than 20 hours of unpaid care per week reported having a long term condition rising to 51% of people providing more than 35 hours of care per week.

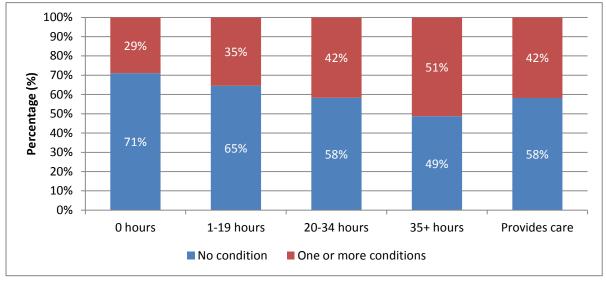


Figure 10: Percentage of carers who have one or more condition, by level of care, Falkirk

Source: Scotland's Census 2011 (Scotland's Carers 2015)

While overall carers are more likely than non-carers to have a long term condition the likelihood of having a long term condition increase with age for both carers and non-carers. Young carers are twice more likely to have a long term condition compared with their non-carer peers whereas carers and non carers aged 50 or older are equally likely to have a long term condition. This may simply be a reflection of people being more likely to develop a long term condition as they get older.

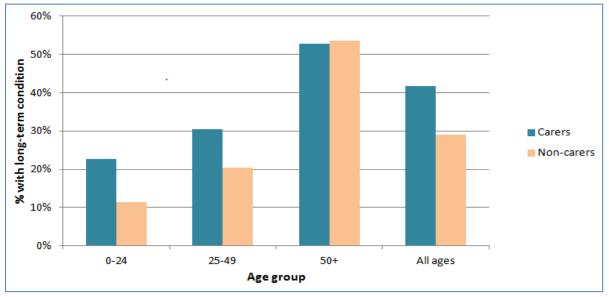


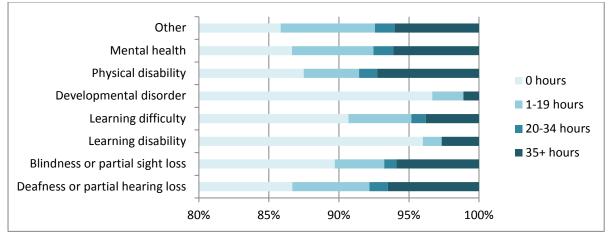
Figure 11: Percentage of carers and non-carers who have long-term conditions, by age, Falkirk

Source: Scotland's Census 2011 (Scotland's Carers 2015)

The Census also shows us the types of long-term conditions and disabilities experienced by carers in Falkirk and the amount of caring they do. In Falkirk for carers who said that they had one or more long-term conditions:

- 13.3% were deaf or had partial hearing loss
- 12.5% had a physical disability
- 13.3% had a mental health condition
- 14.2% had some other condition not listed.

Figure 12: Long-term conditions of carers and level of care per week, Falkirk



Source: Scotland's Census 2011 (Scotland's Carers 2015)

Carers are more likely than non-carers to have a mental health condition. The 2011 Census showed that 6% of carers had a mental health condition that had lasted or was expected to last at least 12 months compared to 4% of non-carers. While a greater percentage of carers under 25 and between 25 and 49 years of age had a mental health condition compared to their non carer peers this was the reverse for people aged 50 or over.

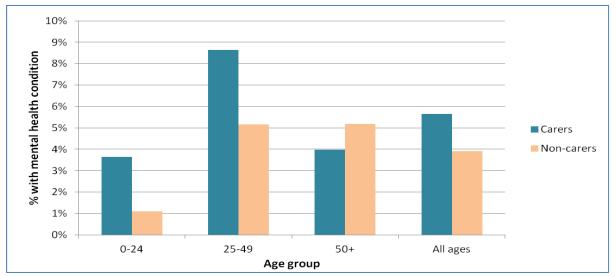


Figure 12: Percentage of people with a mental health condition, Falkirk

Carers are less likely to report their health as good than non-carers and this deteriorates as the level of unpaid care provided increases. The 2011 Census also tells us about the health and wellbeing of carers in Falkirk. Carers are less likely to report their health as 'good' or 'very good' than non carers - 83% of non carers reported 'good' or 'very good' health compared with 74% of carers. This is similar to Scotland and may partly reflect that carers are likely to be older and may have age-related health conditions.

The percentage of carers rating their own health as bad or very bad increased with the increasing amount of unpaid care provided. This displays a clear pattern showing that the health status of the carer deteriorates as the level of care provided increases.

Less than 60% of carers providing the highest level of care (50+ hours per week) consider themselves to be of good or very good health, compared to over 80% of those who do not provide unpaid care. Perhaps unsurprisingly young carers considered themselves to be in better health than carers of other age groups although self-reported health deteriorates with age across all caring intensity.

Source: Scotland's Census 2011 (Scotland's Carers 2015)

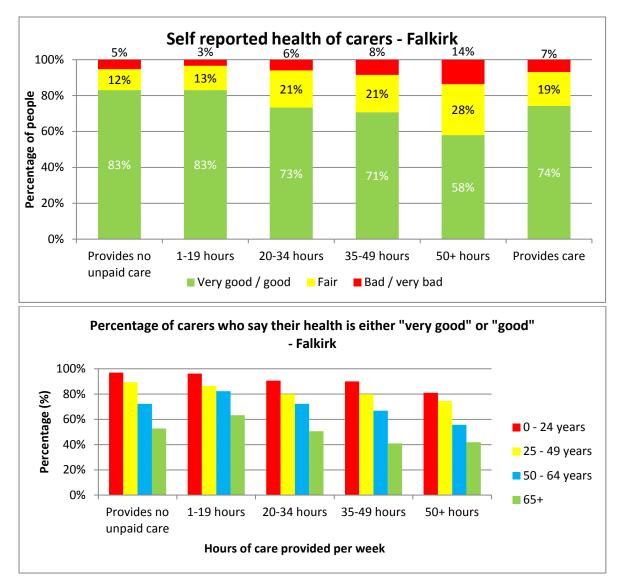


Figure 13: Self reported health of carers, 2011

Source: Scotland's Census 2011

The Experience of Carers

The Scottish Health and Care Experience survey 2015/16 aims to provide local and national information on the quality of health and care services from the perspective of those using them. It looks at the experience of the care recipients and, while the sample is small, does provide useful information on the experiences of adult (16+) carers.

In Falkirk, 2,863 survey respondents answered the question on carer responsibilities with 413 people (14%, weighted) indicating that they did provide unpaid care. Despite three quarters of carers being positive about their caring/life balance less than half (44%) said that caring had not had a negative impact on their health and wellbeing with a third (34%) saying it had had a negative impact.

Only 45% feel supported to continue caring, 48% felt the services for the person they cared for were well coordinated and 56% felt that they had a say in the services provided for the person they cared for (a substantial increase from the previous year).

While these results indicate that there is room for improvement, with around only half of carers responded positively to four out of the five questions, there has been some improvement from the previous year and Falkirk Carer's are responded more positively than carers nationally.

	Number of responses	Very Positive	Positive	Neutral	Negative	% Positive 2013/14	% Positive 2015/16	Change from 2013/14	Difference from Scotland
Carers have a good balance between caring and other things in their life	410	27%		49%	17% 8%	70%	75%	+5%	+7% ^s
Caring has had a negative impact on carers' health and wellbeing	382	16%	28%	22%	34%	43%	44%	+1%	+4%
Carers have a say in the services provided for the person they look after	381	17%	39%	27%	17%	46%	56%	+10% ^s	+6%
Local services are well coordinated for the people carers look after	378	16%	32%	32%	20%	49%	48%	-1%	+6%
Carers feels supported to continue caring	382	16%	28%	39%	17%	45%	45%	-1%	+3%

Figure 14: Summary of Carer Experiences in Falkirk 2015/16

Source: Health and Care Experience Survey 2015/16

Falkirk Council also report on carer's experience from information recorded on their Single Shared Assessment. The table below shows a comparable figure in terms of carers feeling supported to continue caring. A high proportion feel satisfied with their involvement in care package design and a low proportion feel able to continue with support which has been declining in the past two years.

Table 5: Carers experience, Falkirk Council

	2013/14	2014/15	2015/16	2016/17	2017/18*
Carers satisfied with their involvement in the					
design of care package?	89.7%	91.5%	91.8%	92.7%	92.2%
Carers who feel supported and capable to					
continue in their role as a carer	53.1%	51.3%	51.7%	49.8%	48.1%
Carers able to continue with support	33.4%	36.6%	37.6%	31.1%	31.2%

*Figures for 2017/18 are for the first half of the financial year. Source: SWIS Single Shared Assessment Screen – Carer's Assessment

Health and Wellbeing of Carers Overview

The results indicate that carers are more likely to have health conditions and perceive their health as poorer than non-carers and that there is room for improvement in the quality of their experiences with health and care services. Carers are more likely than non-carers to have a long term condition and the prevalence of long term condition increases with caring intensity. The likelihood of having a long term condition however increases with age for both carers and non carers and young carers are twice more likely to have a long term condition than their non-carer peers. A slightly higher percentage of carers had a mental health condition than non-carers.

Carers are less likely to report their health as 'good' or 'very good' than non carers and the percentage of carers rating their own health as bad or very bad increases with the increasing amount of unpaid care provided. About a third of carers said that caring had had a negative impact on their health and wellbeing and just under half felt supported to continue caring and that services for the person they cared for were well coordinated. Information from Falkirk Council indicates a high proportion are satisfied with their involvement in care package design and low proportion feel able to continue with support.

6 Support for Carers

There are a number of support services available to carers in Falkirk. This section aims to look at information on specific service provision including the Carers Centre, local authority carers assessments and respite care as well as carers allowance.

Carers Centre

Falkirk & Clackmannanshire Carers Centre provides information and support to carers of all ages living in Falkirk district and Clackmannanshire. The organisation seeks to ensure that carers are recognised, valued, receive the information and support they need to allow them to care with confidence and in good health, and are empowered to have a life of their own outside caring. Information and support is provided by a team of workers who are based in the Carers Centre in Falkirk and Clackmannanshire, Forth Valley Royal Hospital, Falkirk Community Hospital and Clackmannanshire Community Healthcare Centre. They provide a range of services for carers including one to one support, developing personalised Carer Support Plans, group support activities and events and training. In general, the centre has seen an increase in activity for carers in Falkirk and the following aims to give an overview of service provision in 2016/17.

Adult Carers

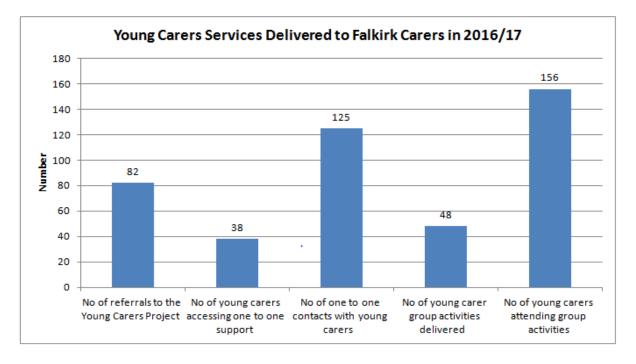
- There are currently 2,047 adult carers across Falkirk known to the Centre, in that they have been provided with some form of information and/or support. The number of carers provided with information and/or support has been increasing over the past few years.
- Individual (one to one) support continues to be in high demand: there were 1,265 enquiries
 relating to 930 carers, a decrease from the previous year. Three quarters of these carers
 were female and a quarter male There have been 600 new carers provided with individual
 support which is consistent with the previous two years. The majority of support provided
 was classed as 'General Chat', 'Information/Advice Given' or 'Listening support' which was
 consistent with previous years.
- The number of Adult Carer Support Plans recorded has been increasing annually over the past five years with a large increase from 179 in 2015/16 to 273 in 2016/17.
- There were 149 training sessions attended by 271 carers (1,054 attendees in total). The number of sessions and attendees has been increasing over the past few years.
- There were 101 group meetings attended by 126 carers (915 attendees in total). The number of group support meetings for adults, and as such attendees, has been decreasing over the past few years.

Young Carers

• In 2016/17 82 young carers were referred to the Young Carers Project. 38 young carers accessed one to one support with 156 young carers overall attending the 48 group activities. Currently the Young Carers Project are in contact with 171 young carers in Falkirk.

Adult Carers			Falkirk	District	
		2013-14	2014-15	2015-16	2016-17
Carer Contacts	Number of carers provided with	1487	1648	1916	2047
	information/support				
Individual (one to one) support Number of Enquiry Actions/Conta		3294	4111	3868	2863
	Relating to: Number of enquiries	1217	1371	1555	1265
	Made by: Number of individual carers	814	942	1016	930
	Of which: Number of new carers	458	596	610	600
Carer Support Plans	Carer Support Plans	114	177	179	273
	Carers Support Plan Reviews	39	69	54	152
Group Support	Number of Group Meetings	139	120	118	101
	Number of Attendances	1058	908	954	915
	Number of Carers Attending	166	157	144	126
Carer Training	Number of Sessions	73	114	122	149
	Number of Attendances	525	695	846	1054
	Number of Carers Attending	175	263	274	271
Mailing List	Number of carers on mailing list in	1157	1309	1507	1646
	May				

Table 6: Falkirk and Clackmannanshire Carers Centre – Service Provision to carers across Falkirk



Source: Clackmannanshire and Falkirk Carers Centre

In addition to staff based in Carers Centre there is also one link worker based in each of hospitals across Forth Valley including Forth Valley Royal Hospital, Stirling Community Hospital, Falkirk Community Hospital and Clackmannanshire Community Healthcare Centre.

Comparing activity from the first half of the 2016/17 financial year with the same period the previous year shows that there has been a considerable increase in demand from via the link worker based at Stirling Community Hospital.

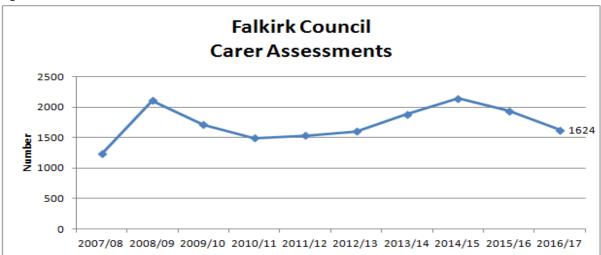
For example, there has been an increase in the number of new carers identified (92 from 52), carer enquiries (1505 from 1164), professional enquiries (516 from 299), appointments or drop in support (318 from 91) and telephone or email support (841 from 572). Demand via the Falkirk Community Hospital has increased slightly with there being an increase in the number of new carers identified (76 from 58), carers supported (102 from 98), carer enquiries (108 from 100) and telephone/email/post/text support (148 from 132). Appointments or drop in support has dropped by 2 to 66.

There has been a slight decrease in activity via Clackmannanshire Community Healthcare Centre. While the number of new carers is similar (11 from 12), the number of carers supported, carer enquiries and support (appointment/drop in or telephone/email/post/text) has decreased. Additional resource has been allocated to pick up referrals from the electronic referral systems at Forth Valley Royal Hospital in the absence of the worker who supports carers throughout Forth Valley.

Local Authority Carer's Assessment

When someone who is providing care is identified by social services they are offered a Carers Assessment. This is the means by which social service and health service providers can be informed by carers about the care that they provide, the impact of caring on their own lives and the support they need to continue caring.

In 2016/17 there were 1,624 Carer Assessments carried out in Falkirk Council. The number of Carer Assessments has been decreasing in the past two years where it peaked at 2,139 in 2014/15. Further investigation would be required to determine how many of these had an Adult Carers Support Plan as completed by Falkirk Carer's Centre.





*Source: SWIS. Includes 'Carer's Assessment completed' and/or 'Carer's needs incorporated into client's assessment'.

The Social Care Survey presents figures for Social Care services provided or purchased by Local Authorities in Scotland. These services give people the support, practical help and personal care they need to live as independently as possible in the community. It presents information on Home Care, Community Alarm/Telecare and Direct Payments (now Self-directed Support "Option 1").

One of the fields in the Social Care Survey indicates whether the client is known to have a carer (although it does not identify the carer). In the 2017 return 1,530 (20%) out of 7,569 reported service users were known to have a carer; 861 (11%) known not to have a carer and 5,178 (69%) not known whether they have a carer.

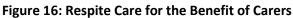
Respite Care for the Benefit of Carers

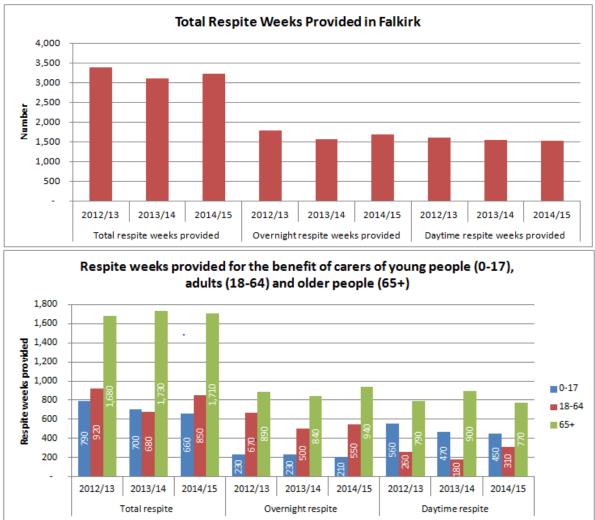
Respite care is a service intended to benefit a carer and the person they care for by providing a short break from caring tasks. There are many different types of respite care. For example, the cared-for person has a break away from home for a few nights or alternatively services can be put in place to support the cared-for person to allow the carer to have a break away from home.

Some people want to have a break together, with additional support to make this happen, and sometimes the service is provided in the home of the cared-for person. The government report, Respite Care Scotland 2015, documents the level of respite care provided or purchased by local authorities in Scotland. Overnight respite stays and daytime respite care are looked at separately and respite nights and hours are converted to respite weeks.

The following aims to provide an overview of respite care for the benefit of carers in Falkirk from 2012/13 to 2014/15:

- While the total number of respite weeks provided increased slightly from the previous year daytime respite slightly decreased.
- In 2014/15 over half of respite care (53%) was provided for the benefit of carers of older people (65+) where overnight respite increased and daytime respite decreased from the previous year. This indicates a significant demand from carers of older people.
- While respite care for the benefit of carers of young people (0-17) has been decreasing more daytime respite is provided than overnight.
- Respite care for the benefit of carers of adults (18-64) was predominately overnight.





Source: Respite Care Scotland 2015. All figures rounded to the nearest ten. Total may not add up to the sum of components due to rounding. Falkirk advised that there was a possible undercount in respite nights for adults in 2013/14, corrected for 2014/15.

Recent information on respite care provided by Falkirk Council is presented in the table below. This shows that there has been a fall in provision and, similar to the above, more provision (overnight and daytime) is provided to older people. In the last two years respite to older people has fallen by 10% (overnight by 5%, daytime by 15%-) and the number of services users fell by 8%. Respite to other adults has fallen by 20% (overnight by 17%, daytime by 29%-) and the number of service users fell by 9%.

Two major service providers, Crossroads and Alzheimer Scotland provide around 80% of daytime respite, and they provided 18% less hours to older people and 35% less to other adults than in 2015/16. This accounted for 73% of the overall fall in daytime respite for older people and 87% for other adults. Overnight respite placements in Care Homes fell by 5% for older people and 19% for other adults. This accounted for nearly all of the fall in overnight provision. There was an increase in overnight respite provided at home or other locations, but the overall numbers do not compensate for falls in Care Home respite.

There are a number of reasons for these falls in provision including people not wanting to change provider and so will go without if their provider is not available, a change in the number and flow of assessments and a broadening range of respite experiences which will not necessarily be reported. Respite provided to children decreased in 2016/17 for a range of reasons including older children transitioning services, difficulties in recruitment and the temporary unavailability of two carers. There is also a preference by carers for daytime respite sessions.

	2014/15	2015/16	2016/17
Total respite weeks	3,103	3,026	2,679
Overnight respite weeks total	1,695	1,462	1,316
Daytime respite weeks total	1,408	1,564	1,364
Overnight respite weeks provided to older people aged 65+	939	742	707
Overnight respite weeks provided to adults aged 18-64	546	521	432
Overnight respite weeks provided to children aged 0-17	210	199	177
Daytime respite weeks provided to older people aged 65+	774	962	821
Daytime respite weeks provided to adults aged 18-64	186	204	146
Daytime respite weeks provided to children aged 0-17	447	398	397

Table 7: Respite Weeks Provided, Falkirk Council

Source: Abacus Financial records, Short Breaks Bureau & individual providers

Carers Allowance

Carers Allowance was introduced on 5th July 1976 and is paid to carers who look after a severely disabled person for at least 35 hours a week, who are not gainfully employed and who are not in full-time education. The severely disabled person must be getting either the highest or middle rate of Disability Living Allowance (DLA) care component, or Attendance Allowance, or a Constant Attendance Allowance at the maximum rate under the War Pensions or Industrial Injuries Scheme. To claim Carers Allowance you must be aged 16 or over.

The following provides an overview of the number claiming carers allowance in Falkirk:

- The total number claiming Carer's Allowance at February 2017 was 3,572, an increase from February 2016.
- Around two thirds were female and a third male.
- Of the total number claiming Carers Allowance, 39% were entitled to the benefit but receiving no payment.
- In the last three years the number entitled to Carer's Allowance has been increasing. This
 may be a reflection of an increased awareness of carers allowance or an increase in carers or
 an increase in caring responsibilities. Either way there are a large number of carers who are
 caring for at least 35 hours a week, the equivalent of a full time job.

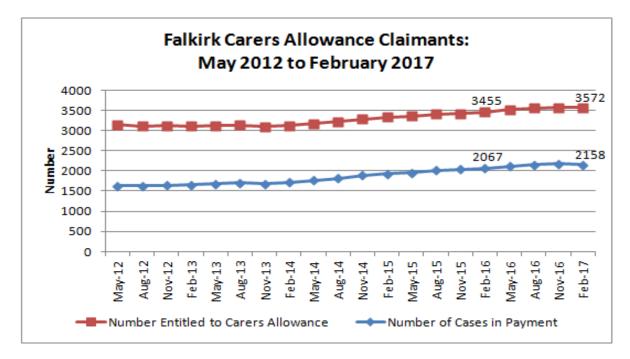
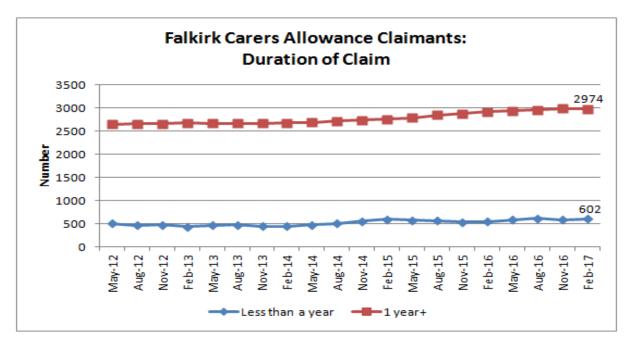


Figure 17: Number of Carers Allowance Claimants in Falkirk

* Statistical disclosure control has been applied to avoid the release of confidential data. Source: Department of Work and Pensions Stat-Xplore

Those who claim Carers Allowance for less than a year may be less likely to be interested in a formal carers assessment and support than those who have been caring for a longer time. The figure below shows that there is a large number of carers in Falkirk who have been claiming Carers Allowance for one year or longer, around 80% of claims in the last two years. The proportion of short claims versus long claims can also give an idea of the level of stability in the local carer population, i.e. how many new carers may be coming forward each year. In the past two years there has been around 5 long claims (1 year plus) for every short claim (under 1 year) indicating a level of stability in the carer population.





*Based on duration of claim of the number entitled to Carers Allowance. Statistical disclosure control has been applied to avoid the release of confidential data. Totals may not sum due to the disclosure control applied. Source: Department of Work and Pensions Stat-Xplore

Support for Carers Overview

There are a range of support services available to carers in Falkirk. An increasing number of carers in Falkirk are accessing information and/or support from the Falkirk and Clackmannanshire Carers Centre and a large number of Carers Assessments are carried out by Falkirk Council.

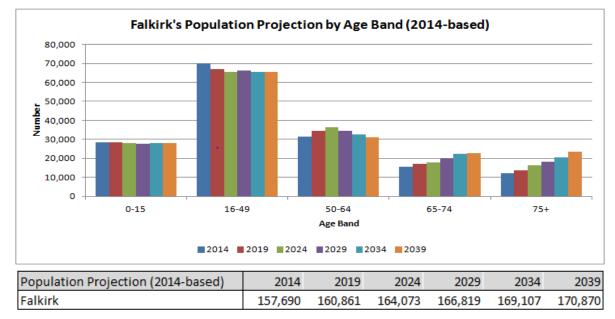
Over half of respite weeks were provided for the benefit of carers of older people (age 65 or over), respite provision has been decreasing and in the last three years the number entitled to Carer's Allowance has been increasing. This may be a reflection on an increasing number of carers, an increased awareness of supports available or an increase in caring responsibility.

It is noteworthy that the number claiming carers allowance is greater than either the number of Local Authority carers assessments or the number provided with information and/or support from the Carers Centre. It is likely that an increase in the number of carers will have an impact on both preventative and statutory support which, in general, is already increasing.

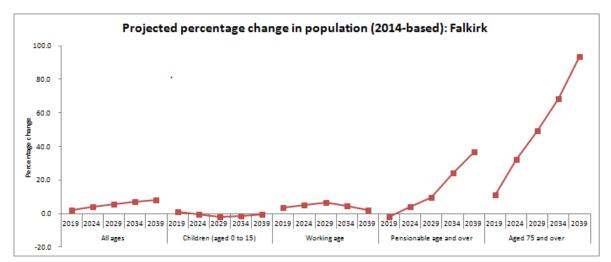
7 Factors Likely to Impact on Demand

There are many factors which will have an impact on demand including changing demographics, increasing complexity of people's health conditions and a raised awareness of available supports. This section will aim to look at the changing landscape in Falkirk.

There will be a growth in the older population. The size and makeup of the future population will be a key consideration when assessing the impact of demand. While the overall population in Falkirk is expected to grow the age distribution is expected to experience significant changes. Falkirk's older age population is expected to increase significantly with there being little change in the younger age groups. For people of pensionable age and over, Falkirk's population is expected to increase by 36.5% by 2039 and for those aged 75 and over by 93.5%. As people health tends to decrease with age it is likely that there will be significant increase in the cared-for population.







Source: National Records of Scotland (NRS) population projections

Note: Working age and pensionable age and over are estimated from State Pension Age. As set out in the 2014 Pensions Act, between 2014 and 2018, the state pension age will rise from 62 to 65 for women. Then between 2019 and 2020, it will rise from 65 years to 66 years for both men and women. A further rise in state pension age to 67 will take place between 2026 and 2028. The UK Government plan to review state pension age every five years in line with life expectancy and other factors.

Life expectancy has been increasing. Life expectancy is an estimate of how many years a person might be expected to live whereas healthy life expectancy is an estimate of how many years they might live in a 'healthy' state. In Falkirk both female and male life expectancy has been increasing, (at a greater rate for men) and is 80.9 for females and 77.4 for males, in line with the Scottish average.

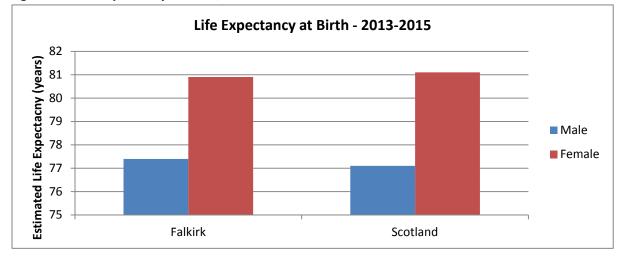


Figure 20: Life Expectancy at Birth, 2013-2015

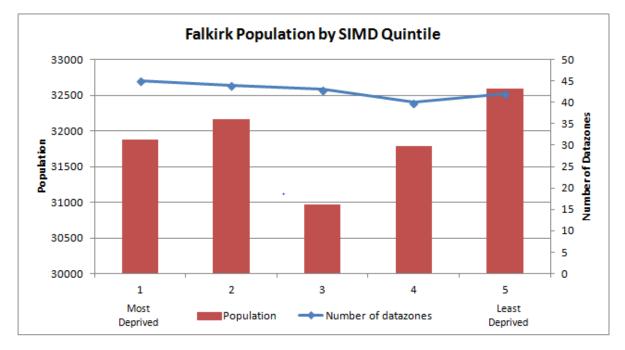
Healthy life expectancy for males is very similar at Falkirk and Scotland level while female healthy life expectancy is slightly less than the national average. There is a considerable difference in years not healthy between males and females; women are expected to live approximately two years longer in poor health than men.

	Fal	kirk	Sco	tland
	Male	Female	Male	Female
Life Expectancy	76.9	80.6	76.6	80.8
Healthy Life Expectancy	62.9	64.4	63.1	65.3
Expected Years "Not Healthy"	14.0	16.1	13.5	15.6

Source: Scotpho (<u>http://www.scotpho.org.uk/population-dynamics/healthy-life-expectancy/data/local-authorities</u>)

Given the projected increase in the pensionable age population, particularly the over 75s, and the possibility of people living these years in poorer health, it is likely that the number of people in need of care will increase. This may in turn result in an increase in the number of carers, at a time when the number of people of working age is projected to decrease.

Scottish Index of Multiple Deprivation (SIMD). The Scottish Index of Multiple Deprivation (SIMD) is the Scottish Government's official tool for identifying those places in Scotland suffering from deprivation. By using this and the National Records of Scotland population estimates ISD (Information Services Division) splits this into five deprivation quintiles with approximately 20% of the population in each quintile where 1 is the most deprived and 5 the least. The figure below illustrates the number of people and datazones in each quintile in Falkirk and shows that there are more people and less datazones which fall in the least deprived quintile than the most.





*Source: ISD Scotland. Based on SIMD Council Area level population-weighted quintile.

Long Term Conditions and Multiple Long Term Conditions are projected to increase. Falkirk's Health and Social Care Strategic Needs Assessment 2016 detailed how long term conditions were projected to increase in Falkirk. It forecasted that not only will there potentially be a lot more people with dementia but there will also be a significant difference in the number of female cases compared to males. Diabetes, Ischaemic Heart Disease (IHD) and Stroke were all predicted to increase. There will also potentially be more people with multiple long term conditions (also referred to as multi-morbidities), patients have more conditions as they age. It is therefore likely that the number of people requiring care will increase and, in turn, likely that the number of unpaid carers will also increase.

Learning disability and physical disability. There are some disabilities where it is likely that the person will have a carer, often a long term one. This may be the case with some people with a learning or physical disability.

The Learning Disability Statistics Scotland 2015 reports on the number of adults with learning disabilities known to services within their area.

This is likely to be an underestimation as there will be adults with learning disabilities not known to local authorities and possibly some that are known but not reported.

In 2015 there were 981 adults with learning disabilities known to Falkirk local authority, equating to 7.5 people with learning disabilities per 1,000 adults (16+). While the largest proportion of people with a learning disability were aged under 45, 40% were aged 45 or over, in line with the Scottish average of 41%. Just under a third (31%) lived with a family carer, slightly lower than the Scottish average (34.5%).

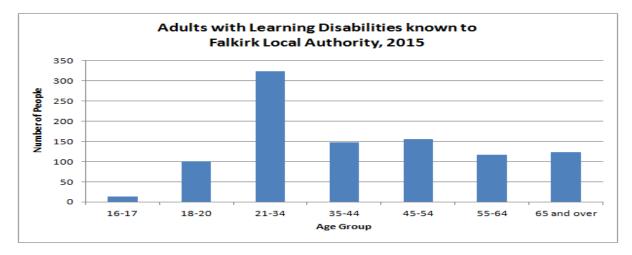


Figure 22: Number of people in Falkirk with a learning disability

Table 9: Number living with a family carer

	Adults who live with a family carer	Adults who do not live with a family carer	Not known	Lives with family carer as % of all adults	All adults
Falkirk	301	476	204	30.7	981
Scotland	9,386	11,804	6,028	34.5	27,218

Source: Learning Disability Statistics Scotland, 2015

The chart below shows the number of people who were recorded as having a learning disability by sex and age group at the time of the Census in 2011. It similarly shows that there are a number of older people with learning disabilities.

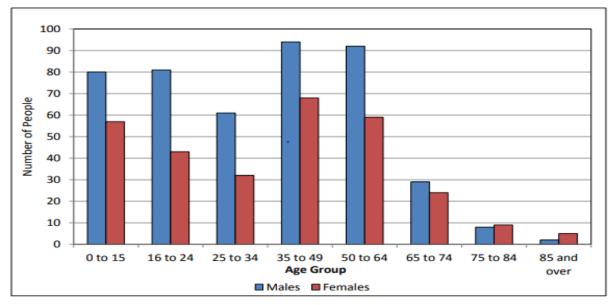


Figure 23: Number of people with a learning disability in Falkirk by age and sex, 2011

Source: Scotland's Census 2011

Due to significant developments in health care life expectancy of people with learning disabilities has improved considerably. In the 1930's life expectancy for a person with Down's syndrome was seven years, but it is now in the region of 50 to 60 years.

Scotland's Census also showed that there were 10,868 people in Falkirk recorded as having a physical disability (7% of the population) and that the proportion of those with a physical disability increases as people age. The majority of those with a physical disability were over the age of 50 and only 1% of the population aged 16-24 had a physical disability in 2011 compared to 33% for those aged 85 and over.

Age	Male	Female	Total	Percentage of total with physical disability	Percentage of age group with physical disability
0-15	122	112	234	2.2%	0.8%
16-24	105	98	203	1.9%	1.2%
25-34	163	161	324	3.0%	1.7%
35-49	678	732	1,410	13.0%	3.9%
50-64	1,540	1,689	3,229	29.7%	10.6%
65-74	1,194	1,279	2,473	22.8%	17.6%
75-84	846	1,235	2,081	19.1%	24.6%
85+	257	657	914	8.4%	32.8%

Table 9: Number of people in Falkirk with a Physical Disability by age and gender

Source: 2011 Census

Social Care Provision in Falkirk. An increase in the number of carers and assessments may result in an increase in demand for social care services. The following, taken from the latest Social Care Survey, aims to simply provide an overview of social care service demand in Falkirk and shows telecare as being in the highest demand.

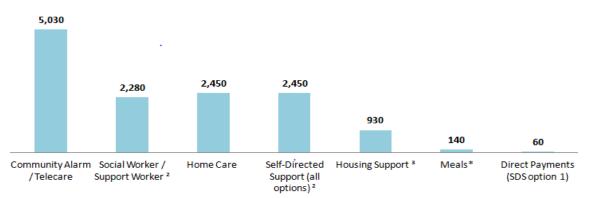


Figure 24: Social Care clients by type of service, 2016

Notes on chart

¹Community Alarm/Telecare, Direct Payments, SDS and Social Worker/Support Worker information are for the financial year. Home Care, Housing Support and Meals data is for the March Census week.

¹Clients can receive multiple social care services.

² Data on Social Worker / Support Workers and Self-Directed Support is in development, and not reported on in detail in this release. Follow-up analysis on these topics will be published at a later date.

Source: Social Care Survey, 2016

Factors Likely to Impact on Demand Overview

Many factors will impact on demand and indications are that the cared for population in Falkirk is likely to grow. Falkirk's older age population is expected to increase considerably and people are living longer with women living longer and for longer in poor health than men. Long term conditions including dementia, diabetes and stroke as well as those with multiple long term conditions are all projected to increase, the majority of people with a physical disability are older and with more children with complex needs surviving into adulthood the number of people requiring care will increase. The potential for the number of people providing unpaid care in turn will increase as will the number who may require help and support.

Appendix A

Carers Census 2017

What is collected in the Carers Census for the baseline year (up to 31 March 2018)?

For each Carer:

- Local Authority code
- ID Carer
- CHInumber
- postcode
- date of birth •
- gender
- ethnic group care hours

For Adult Care Support Plan / Young Carers Statement:

- ID Carer
- date ACSP/YCS requested/offered •
- type of ACSP/YCS new or review •
- ACSP/YCS completed?
- date completed
- ACSP/YCS declined
- date declined
- ACSP / YCS joint assessment with cared for person
- is carer eligible for support
- carers support needs

Items in pale text are not mandatory for 2017-18 but we would encourage you to return these if you already hold this data as this will help with discussion on taking forward data collection for these items which are still considered essential for the longer term data collection

Carers Census 2017

What is collected in the Carers Census from April 2018 onwards?

For each Carer:

- Local Authority code
- ID Carer
- **CHI number**
- postcode
- date of birth
- gender
- ethnic group
- care duration
- care hours
- care type
- care impact

For the person they care for:

- ID Carer
- Unique ID for cared for person
- ade droup
- does carer live with cared for person
- gender
- ethnic group
- client group
- relationship to carer

Items in pale text are not mandatory for 2018-19 but we would encourage you to return these if you already hold this data as this will help with discussion on taking forward data collection for these items which are still considered essential for the longer term

For Adult Care Support Plan / Young Carers Statement:

- ID Carer
- source of referral for ACSP / YCS
- date ACSP/YCS requested/offered
- type of ACSP/YCS new or review .
- ACSP/YCS completed?
- date completed
- ACSP/YCS declined
- date declined •
- ACSP / YCS joint assessment with cared for person
- is carer willing to care
- is carer able to care
- is carer eligible for support
- · carers support needs
- support provided / purchased by LA
- did review result in change to support
- Short break provided
- Number of short breaks taken •
- Replacement care provided
- Type of replacement care
- Daytime replacement care hours
- Overnight replacement care nights

For Young Carers Statement:

responsible Authority for young carer

- data collection.

8 Group Membership

Agnes McMillan, Centre Manager, Falkirk and Clackmannanshire Carers Centre Ande Hong, Senior Accountant, Social Work Adult Services, Falkirk Council Anne Stewart, Falkirk Council Calum MacDonald, Principle Analyst, Information Services Division (ISD), NHS Carol Vause, Falkirk Council Claire Bernard, Partnership Manager, CVS Falkirk and District David Smyth, Policy Assistant, Falkirk Health and Social Care Partnership Gillian Clark, Falkirk Council Holly Hoskisson, Falkirk and Clackmannanshire Carers Centre Lesley MacArthur, Integrated Care Fund Coordinator, Falkirk Council Lesley Thomson, NHS Forth Valley Lynne Hunter, Analyst, Information Services Division (ISD), NHS Margaret Petherbridge, Project Development Manager, Falkirk Council Marilyn Gardiner, Interim Service Manager, NHS Forth Valley Morag Odwyer, Falkirk Council Nikki Harvey, Falkirk Council Peter McLaren, Service Manager, Social Work Services, Falkirk Council Philip Morgan-Klein, Performance and Review Officer, Children's Services, Falkirk Council Rhona Cameron, Viewfield Medical Practice, NHS Forth Valley Robert Stevenson, Senior Planning Manager, NHS Forth Valley Roger Morden, Performance and Review Officer, Children's Services, Falkirk Council Stephanie Stevenson, Falkirk Council Suzanne Thomson, Programme Manager, Falkirk Health and Social Care Partnership Vivien Thomson, Service Manager, Falkirk Council