



Equality, Human Rights and Fairer Scotland Duty Impact Assessment

Stage 1 Proportionality and Relevance

What Integration Joint Board (IJB) report or Partnership decision does this proportionality and relevance assessment relate to:

Carers Strategy and Implementation Plan

Relevant protected characteristics materially impacted, or potentially impacted, by proposals (employees, clients, customers, people using services) indicate all that apply

Age	Disability Learning Disability, Learning Difficulty, Mental Health, Physical Neurodiversity	Gender	Gender Reassignment	Marriage and Civil Partnership	Pregnancy and Maternity	Race	Religion and Belief (including non-belief)	Sexual Orientation
X	X	X	X			X	X	X

Equality and Human Rights Measurement Framework – Reference those identified in Stage 1 (remove those that do not apply)

Education	Work	Living Standards	Health	Justice and Personal Security	Participation
Higher education Lifelong learning	Employment Earnings Occupational segregation Forced Labour and trafficking*	Poverty Housing Social Care	Social Care Health outcomes Access to health care Mental health Reproductive and sexual health* Palliative and end of life care*	Conditions of detention Hate crime, homicides and sexual/domestic abuse Criminal civil justice Restorative justice Reintegration, resettlement and rehabilitation*	Political and civic participation and representation Access to services Privacy and surveillance Social and community cohesion* Family Life*



*Supplementary indicators

Main Impacts	Are these impacts positive or negative or a combination of both	Are the impacts significant or insignificant?
The Scottish Borders Health & Social Care Partnership Carers strategy will be designed to drive forward long- term changes that will improve the lives of unpaid carers, particularly those communities who experience inequality of outcome.	Positive.	Significant

Is the proposal considered strategic under the Fairer Scotland Duty?	Yes
E&HRIA to be undertaken and submitted with the report – Yes If no – please attach this form to the report being presented for sign off	Proportionality & Relevance Assessment undertaken by: Name of Officer John Barrow (SDS/Carers Lead) Date: 10 November 2023





Scottish Borders
Health and Social Care
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Equality Human Rights and Fairer Scotland Duty Impact Assessment

Stage 2 Empowering People - Capturing their Views

Report Title

Living Well in the Scottish Borders – Plan for Unpaid Carers 2024-2028


Equality Human Rights and Fairer Scotland Impact Assessment Team

Role	Name	Job title	Date of IA Training
HSCP Joint Executive Team	Gwyneth Lennox	Head of Adult Social Work	
Responsible Officer	John Barrow	SDS/Unpaid Carer Lead	
Mains Stakeholder (SBC)	Stacy Patterson	Team Leader/Acting Commissioning Officer	
Third/Independent Sector Rep(s)	Lynn Gallacher	Borders Carers Centre CEO	





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Evidence Gathering (will also influence and support consultation/engagement/community empowerment events)

Evidence Type	Source	What does the evidence tell you about the Protected Characteristics/Communities Experiencing Inequalities/People with Lived Experience
<p>What equalities information is routinely collected from people currently using the service or affected by the policy?</p>	<p>Borders Carers Centre collect information on the age and sex of Adult Carers in compliance with Scottish Carers Census Requirements.</p> <p>There is no current data on Young Carers provided by Scottish Borders included in the Carers Census 2022-23.</p> <p>The annual Pupil Census whereby Scottish Government gathers data from Education, includes young carer information held by schools.</p> <p>Young Carers information is important due to transition planning.</p>	<p>This tells us that the majority of Adult unpaid Carers in Scottish Borders are female and aged between 18 and 64 years. There are a higher no. of older males caring than younger. From this we can state the majority of Carers in the Scottish Borders are working age females caring for a child, parent or partner. (Carers Census/BCC Data)</p> <p>The Evidence also tells us that 70 young carers currently access services from CHIMES.</p> <ul style="list-style-type: none"> • 26 children also affected by parental substance use, of whom most are reported to be young carers to some extent. <p>When cross referenced with information from Education:</p> <ul style="list-style-type: none"> • 25 do not receive a service from CHIMES and are not known to their service. • 41 are known to CHIMES as they are ex-service users. • 14 are currently in the CHIMES service. <p>More work is required to ensure consistency in the gathering and use of data regarding Young Carers.</p>
<p>Data on populations in need</p>	<p>2019 Scottish Survey Core Questions</p>  <p>Equality_Mainstreaming_Update_Report_20</p>	<p>The 2019 Scottish Survey Core Questions found that 17.6% of adult respondents provided unpaid care to a relative or a friend.</p>



	<p>2011 National Census</p> <p>At present we continue to await a more detailed breakdown regarding Unpaid Carers from the last National Census in 2022.</p>	<p>2011 National Census found that 9.1% of people in Scottish Borders provided unpaid care (10,346 people (Scotland = 9.3%)</p> <p>The 2011 Census cited in the Scottish Borders Council Equality Mainstreaming Update Report 2023-2025) found that:</p> <p>:</p> <ul style="list-style-type: none"> • 59% of Carers were female (59.2%) • 54.4% were employed (53.2%) • 22.4% were aged over 65 (19.3%) • 1.8% were aged under 16 (2%) <p>This confirms that working age females constitute the highest numbers of carers.</p>
<p>Data on relevant protected characteristic</p>	<p>Scottish Borders Council Equality Mainstreaming Update Report 2023-2025</p> <p> Equality_Mainstreaming_Update_Report_2023-2025.pdf</p> <p> Needs Assessment report Sept22 v.02.doc</p>	<p>Gender and Age</p> <p>Our local data from the Carers Census 2022-2023 from the Carers Centre reflects National trends:</p> <p>22% Male 18-64</p> <p>78% Female 18-64</p> <p>35% male 65+</p> <p>65% Female 65+</p>



	<p>National Care Service - adult social care: equality evidence review - gov.scot (www.gov.scot)</p>	<p>National Care Service - adult social care: equality evidence review (2022): Older working age women more likely to be unpaid carers than any other group in Scotland (45-64). Impact on women's ability to earn and contribute to a pension and leading to financial disadvantage.</p>
	<p>Young Carers Information reported through CHIMES and Scottish Borders Education department. (Options are male, female, self ID, unknown)</p>	<p>Male – 38 Female – 57 Self ID – 1 Total = 96</p>
	<p>From National Carers Strategy Equality Impact Assessment Record April 2023</p> <p> national-carers-strategy-equality-impact-as</p>	<p>Disability:</p> <p>“Overall in the Scottish Borders, almost 19% of the population reported some level of disability-related limitation to their daily activities (a little or a lot). 6,995 people specifically said they had a physical disability specifically. We do not have accurate data at present but this needs to be embedded as we go forward. We are aware that there are carers in receipt of both Carers Allowance and Disability benefits.”</p> <p>From National Carers Strategy Equality Impact Assessment Record April 2023:</p> <ul style="list-style-type: none"> • 41% of carers, compared to 29% of non-carers have a long-term health condition. • 16% were deaf or had partial hearing loss; 16% had a physical disability; 11% had a mental health condition; and 44% had another condition not listed.



		<ul style="list-style-type: none"> • Nearly 6% of carers report having a long-term mental health condition compared with 4% of non-carers. • The percentage of carers with one or more long-term health condition increases with the number of hours.
	<p>National Carers Strategy Equality Impact Assessment Record April 2023</p>	<p>Religion or Belief:</p> <p>Scottish Borders Council Equality Mainstreaming Update Report 2023-2025:</p> <p>In the 2019 Scottish Survey Core Questions, 59% of Scottish Borders adult respondents said they had no religion. This was based on a small sample of respondents.</p> <p>The report goes on to say “In the older, but more representative, 2011 Census:</p> <ul style="list-style-type: none"> • 39.4% of the 113,870 respondents identified with Church of Scotland (32.4%) • 6.3% identified as Roman Catholic (15.9%) • 7.6% identified as Other Christian (5.5%) • 0.2% identified as Muslim (1.4%) • 0.7% identified with another religion (1.1%) • 37.8% said they had no religion (36.7%) “ <p>Scottish Borders does not routinely collect data on the religion or belief of carers.</p>



	<p>Scottish Borders Health & Social Care Partnerships Joint Strategic Needs Assessment 2022</p>	<p>Sexual orientation:</p> <p>“There are some groups which may experience health and social care services differently or be otherwise subject to inequity. It should be noted that in local systems ethnicity is often poorly recorded and similarly data on LGBT / LGBTQ+ status are not easily found in routine sources. Consideration should be given to gaps in data and how to better capture this information to address inequity and evidence progress.”</p>
	<p>National Carers Strategy Equality Impact Assessment Record April 2023</p>	<p>“Research published in 2007 by the Lesbian, Gay, Bisexual Transgender and Intersex (LGBTI) Centre for Health and Wellbeing reported that 0.8% of respondents from Edinburgh, the Lothians and the Borders provided full-time caring.”</p>
	<p>National Carers Strategy Equality Impact Assessment Record April 2023</p>	<p>Race:</p> <ul style="list-style-type: none"> • 96% of carers are of a “White Scottish / British / Irish” ethnicity, while 4% are of “Other” ethnic backgrounds. • 8.7% of the Pakistani population in Scotland provide some form of unpaid caring. This compares with 4.3% of the Chinese and 5.5% of the Indian communities. • People from other ethnic groups such as “White: Scottish” and “White: Other British” were the most likely to provide unpaid care. People from ethnic groups with younger age profiles, such as the “Arab” and “White: Polish” groups, were least likely to provide unpaid care.
	<p>Scottish Borders Health and Social Care Partnership Joint Strategic Needs Assessment September 2022</p>	<ul style="list-style-type: none"> • “In 2018, 70.4% of Scottish Borders identified as white Scottish, compared to 76.7% in Scotland, and nearly 22%



		<p>identified as white British compared to 12.1% in Scotland.</p> <ul style="list-style-type: none"> • In the Scottish Borders, 1.6% of the population identified as white Polish, which is equal to the Scottish average. 3.2% of the population identified as “White: Other” which includes Irish, Gypsy/Traveller, and “White: Other Ethnic Group”, compared to 5% in Scotland. • The remaining 2.9% of the Scottish Borders population (4.6% for Scotland) identified as Asian or “All other ethnic groups” which includes African, Caribbean or Black, and “Other Ethnic Group”. <p>This is reflected in the figures below from Borders Carers Centre:</p> <p>Breakdown of 3014 carers 2023-2024</p> <ul style="list-style-type: none"> • 0.15% - Asian, Asian Scottish, Asian British • 0.05% – mixed or multiple ethnic group • 0.25% - other ethnic background • 7.48% - not disclosed • 92.07% - white British/Scottish
	<p>National Carers Strategy Equality Impact Assessment Record April 2023</p>	<p>Gender Reassignment:</p> <p>No evidence nationally.</p> <p>No evidence gathered by Scottish Borders.</p>



	National Carers Strategy Equality Impact Assessment Record April 2023	<p>Marriage and civil partnership:</p> <p>The Scottish Government does not require assessment against this protected characteristic unless the policy or practice relates to work, for example HR policies and practices.</p>
	National Carers Strategy Equality Impact Assessment Record April 2023	<p>Pregnancy and Maternity:</p> <p>No evidence identified but as above carers are predominantly female and aged late 40s and early 50s.</p>
	National Care Service – Adult Social Care: equality evidence review (2022)	<p>There is no national data about carers and pregnancy and maternity. However, as noted above (see section 2.2), a substantial proportion of unpaid carers are working age women. Almost half (47%) of all carers included in the 2020-2021 Carers Census were female aged 18-64. The prevalence of unpaid care in young/mid-life women means that it is likely many women will be experiencing pregnancy and maternity alongside undertaking unpaid care.</p> <p>We do not have specific data in relation to impact.</p>
<p>Data on service uptake/access</p>	<p>Data regarding Unpaid Carers is currently gathered by:</p> <ul style="list-style-type: none"> • Borders Carers Centre • Scottish Borders Council 	<ul style="list-style-type: none"> • Pathfinder system on MOSAIC currently being developed will provide up to date statistical information regarding the no. of Carers who receive a Carers budget to be able to take breaks, in addition to some data on the no. of unpaid Carers known to the department. This will include ethnicity data. • Work will be required to ensure statistical consistency between Scottish Borders Council’s data and that of the




		<p>Borders Carers Centre. Not all known to the Carers Centre.</p> <ul style="list-style-type: none"> • At present we continue to await a more detailed breakdown regarding Unpaid Carers from the last National Census in 2022. • Carers Census and Carers Support Plan data is provided by Borders Carers Centre as part of their commissioned role, who also collect ethnicity data and socio-economic data. No ethnicity report available at the time of writing but information will shortly be made available. • Partnership working with commissioned services (i.e. Alzheimers Scotland) should be considered, in order to gather additional unpaid Carers data.
<p>Data on socio economic disadvantage</p>	<p>Data regarding Unpaid Carers is currently gathered by:</p> <ul style="list-style-type: none"> • Borders Carers Centre • Scottish Borders Council 	<p>There are ten categories of Adult Unpaid Carers from 1 – Most Deprived, to 10 - Least Deprived 1-3%, 2-4%, 3-4%, 4-10%, 5-17%, 6-22%, 7-17%, 8-14%, 9-4%, 10-5% n:700 (New referrals 2022-23)</p> <ul style="list-style-type: none"> • Carers are financially disadvantaged and a fifth of Carers are struggling to afford the cost of food • Over a third had to cut back on essentials such as food or heating • 62% of carers agreed that they've been struggling financially due to the the increase in the cost of living • 60% of carers were worried about the impact of caring on their finances • 65% of carers agreed that the increased cost of living was having a negative impact on their mental health. • Two thirds of carers are worried about their ability to save and plan for the future.



		<ul style="list-style-type: none"> • 50% of carers said they needed more financial support.
Research/literature evidence	<p>Hidden Carers Unheard Voices: Informal Caring within the Gypsy Travellers Community in Scotland MECOPP 2011/12</p> <p>https://www.mecopp.org.uk/</p>	<p>MECOPP Gypsy/Traveller Carers' project findings:</p> <ul style="list-style-type: none"> • Most did not identify as a carer or use the term carer to describe themselves. • Many felt isolated from services due to misunderstanding and prejudice. • The majority of Gypsy/Traveller carers are not accessing health, social care services, voluntary or statutory on a regular basis or at all. • The physical health of many Gypsy Traveller carers is poor. • "Nearly all reported mental health concerns relating to their caring role, including the stress of caring and other issues such as financial struggles, discrimination, isolation and much more." • "High levels of illiteracy impact significantly on a carer's ability to search for support e.g. using the internet, the phone or written correspondence."
	<p>The Race Equality Foundation:</p> <p>https://raceequalityfoundation.org.uk/blog/</p>	<p>"Many Black, Asian and minority ethnic unpaid carers don't recognise themselves as carers. Some languages even lack a distinct word for 'carer'."</p> <p>"When comparing the experiences of carers from Black, Asian and minority ethnic backgrounds to White carers, the research found that carers from Black, Asian and minority ethnic backgrounds were:</p> <ul style="list-style-type: none"> • more anxious about their current financial situation • more likely to be impacted by the closure of local services



		<ul style="list-style-type: none"> • more likely to state that the services in their area did not meet their needs.” <p>Looking specifically at the experiences of Black, Asian and minority ethnic carers, the study found that they typically provided more hours of care than White carers.</p> <table> <thead> <tr> <th>Ethnic group</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Asian</td> <td>53%</td> </tr> <tr> <td>Black</td> <td>48%</td> </tr> <tr> <td>White</td> <td>43%</td> </tr> </tbody> </table>	Ethnic group	Percentage	Asian	53%	Black	48%	White	43%
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Existing experiences of service information	<p>Carers Workstream Needs Assessment 2022</p>  <p>2022 needs assessment report.pdf</p>	<p>This survey was the circulated to Unpaid Carers across the Scottish Borders and received 245 responses.</p> <ul style="list-style-type: none"> • Within the report data on the specific Protected Characteristics was not collected. • In terms of gender, we do know that 76% of respondents were female and 23% male. • 75% of respondents did not feel supported by Primary Care and 48% reported feeling supported by third sector organisations and community care. • 73% felt their health was affected by their caring role. • 118 Carers reported a lack of appropriate and insufficient services. 								
Evidence of unmet need	Carers Workstream Needs Assessment 2022	<p>There was no specific data collected in relation to protected characteristics and unmet need, however 76% of respondents were female and 23% were male, 30% of respondents were aged 65+ and 70% 18 to 64.</p> <p>“Most respondents reported indicators of poor wellbeing: for example, having no time to themselves and feeling unable to</p>								



		<p>make suitable care arrangements for scheduled appointments. In addition, many carers are neglecting their own health due to their carer responsibilities.</p> <p>Overall, most of those surveyed stated they would like additional support for time out from caring. The majority of requests for additional support were for practical, tangible forms of support, either in terms of buildings-based day services, an at home sitting service, community support & activities or addition time from professional carers.</p> <p>Many of those surveyed reported being able to access appropriate information across a number of local and national organisations, however, it was evident that improvements to information and its accessibility could be made to help carers, especially those new to a caring role.”</p>
<p>Good practice guidelines</p>	<p>Public Health Scotland: Working with Gypsy/Traveller communities: a good practice guide – Scottish Government</p> <p>https://publichealthscotland.scot/media/25979/final_public-health-messaging-for-gypsy-travellers-good-practice-guide.pdf</p>	<p>“This guide is a point of reference for professionals working with Gypsy/Traveller communities. It can help ensure Gypsy/Travellers are involved in developing resources and have access to appropriate health information for making informed decisions.”</p>
	<p>Improving support for black and minority ethnic (BME) carers (2011) (IRISS)</p> <p>https://www.iriss.org.uk/resources/insights/improving-support-black-minority-ethnic-bme-carers</p>	<p>Recommendations include:</p> <ul style="list-style-type: none"> • Training on conducting culturally competent assessments should be provided to staff for undertaking community care/carer assessments • Training on cultural diversity is recommended to increase staff confidence and to avoid racial stereotyping.



	Carers UK: Supporting LGBTQ+ Carers. A Good Practice Briefing https://www.lgbthealth.org.uk/services-support/carers/	Embed recommendations in practice – i.e. Using diverse language and imagery and involving LGBTQIA+ community in design and delivery of services.
	Race Equality Foundation: Carers UK Supporting Black, Asian and minority ethnic carers. A good practice briefing https://www.carersuk.org/media/3izlulum/cuk-black-asian-and-minority-ethnic-carers-good-practice-briefing.pdf	“This report is an important step forward for ensuring that carers from minority backgrounds are adequately supported. It is essential that organisations recognise the distinct challenges that carers from Black, Asian, and minority ethnic backgrounds face. This briefing can help organisations improve their processes and work to provide all carers in their communities with support that is tailored to meet their cultural needs.”
	EPIC (Equal Partners in Care) – Caring for Unpaid Carers – Core Principles NHS Knowledge Hub	Embed EPIC’s guidance in all practice: “Communicate and engage sensitively with carers in a way that recognises and respects equality and diversity Signpost carers to sources of information and support appropriate to their cultural and communication needs”
Other – please specify		
Risks Identified	Risks associated with the non-engagement of unpaid carers with protected characteristic, to inform the design and delivery of services.	Embed good practice guidance and improve engagement with carers with protected characteristics
Additional evidence required	Updated Census information following the 2022 Census.	Embed statistics in the EIA when data is available.



Consultation/Engagement/Community Empowerment Events

Event 1: Carers 1st

Date	Venue (if in person) Otherwise state format	Number of People in attendance by category*	Protected Characteristics/Communities Experiencing Inequalities/People with Lived Experience Represented
27/2/24	Old Gala House, Galashiels	8 Unpaid Carers 2 Carers Centre Employees	Gender (2 men/6 women) Age

*Attendance by category – including but not limited to: People using the service, people not using the service - currently, unpaid carers, paid carers, key stakeholders (organisation and job title)

Views Expressed	Officer Response
Gender: 1 Male participant stated that many men find it difficult to come forward in their caring role due to being conditioned not to talk about their emotions and feelings with friends and family. Resulting in men not self-identifying or being recognised as a Carer.	Marketing and promoting the role of unpaid carers in male dominated environments e.g. bowling clubs, the Men's Shed, golf courses with the view to promoting and recognising men as unpaid carers.
Age: 1 Man of pension age stated that the loss of his Carers Allowance impacted on his financial situation as a Carer.	Investigate the potential financial disadvantage and the alleged negative impact on the obligations of the Fairer Scotland Duty in relation to this statement.

Event 2: We are With You

Date	Venue (if in person) Other state format	Number of People in attendance by category*	Protected Characteristics/Communities Experiencing Inequalities/Lived Experience Represented
8/3/24	We Are with You - Galashiels	2 Unpaid Carers of people with issues relating to drugs and alcohol addiction 1 female employee	Gender (2 Women) Age (1 carer aged over 65)



Views Expressed	Officer Response
<p>Stigma</p> <p>A sense of shame, that somehow as a mother this is my fault and the stigma associated with addiction prevents people coming forward for support.</p>	<p>Work collaboratively with We are with You, to</p> <ul style="list-style-type: none"> • raise awareness and promote carer identification • the benefits of being a member of We are with You e.g. Advocacy and a listening ear • promote We are with You CRAFT (Carers training for families experiencing Addiction problems) • Link to the Borders in Recovery network to liaise with Carer support workers.
<p>Gender</p> <p>Women are expected to assume and maintain the caring role and that they may not think of themselves as carers as a result. In their experience men are not expected to assume the role of carers. This can impact on their ability to take breaks.</p>	<p>Raise awareness and promote the rights and role of women as unpaid carers in the in workplace and educational environments, i.e. the statutory sectors (SBC & NHS Borders), independent care sector, hospitality, retail, high schools, and further education settings e.g. Borders College & Textile College.</p>
<p>Employment</p> <p>The expectation that women take on the Carer role impacts on their ability to earn money and take up other opportunities.</p>	<p>To promote the Carers Positive Award.</p>
<p>Identification</p> <p>One carer received information through a conversation with a Housing Officer.</p>	<p>Explore diversifying referral routes to Borders Carers Centre by raising awareness with registered social landlords.</p>



Emergency services are also key to information as people are often in contact with the police and emergency medical services when their loved ones are in crisis.	Explore diversifying referral routes to Borders Carers Centre by raising awareness with emergency services such as Scottish Ambulance Service, Police Scotland.
Support GP and Health points of contact are felt to be essential in terms of carer support and should be the source of referrals.	Indicators suggest that GPs are central for support, yet data captured by Borders Carers Centre demonstrate little to no referrals coming from this source at the present time. Collaborative work required with GPs to explore referral barriers, routes and appropriate referral options.
Neither woman was made aware of local Carer Centre supports until recently, both having been carers since the cared for person was young.	Work jointly with Parent Carers and Parent Carer Workers to map what currently exists with a view to reviewing effectiveness of these services. This to influence and inform future commission, marketing and promotion of services which meets the needs of Parent Carers and Young Carers.

Event 3: The LGBT+ Forum

Date	Venue (if in person) Otherwise state format	Number of People in attendance by category*	Protected Characteristics/Communities Experiencing Inequalities/People with Lived Experience Represented
13/3/24	Teams Meeting	3	Sexual Orientation Gender reassignment Disability Age

Views Expressed	Officer Response
Safety and inclusion	



<p>Fear of discrimination against the LGBT+ community and a lack of safety when attending Carers Groups.</p> <p>Carers must feel safe to express their views and share feelings.</p> <p>The group expressed the importance of training involved trainers and professional staff to actively challenge discriminatory language and behaviour in groups.</p> <p>The group requested that staff have a better understanding as to what discrimination can feel like.</p> <p>A former member of a Young Carers group referenced the LGBT Charter system as a method of ensuring safety.</p>	<p>Working collaboratively with the LGBT Forum the Carers Lead will, via the Carers Workstream develop an LGBTQ+ Staff Awareness tool/session to raise awareness of discrimination, unacceptable behaviour, and the need for safety within Carer group settings. Staff involved in support groups will also be invited to attend any awareness sessions organized.</p> <p>The LGBT Charter for Education will be contacted for guidance, advice and training as it encourages safety and inclusivity in educational settings, focusing on positive messages which state that the school, college or university is a champion of LGBTQ, and a place where + inclusion where LGBTQ+ staff, parents and learners will be safe, supported and included. The programme accreditation lasts 3 years. The organisation also offers one off awareness training.</p>
<p>GDPR</p> <p>The group also suggested that there needs to be clear guidance in groups around confidentiality in carer support groups, as many LGBT+ carers have not disclosed their sexual orientation. It was also stated that there is sometimes a lack of available staff to oversee meetings.</p>	<p>Work with LBGT Forum to develop clear guidance around GDPR within support settings, tied into those suggested above.</p>
<p>Age</p> <p>Age is sometimes a barrier to accessing services, people sometimes lying on the fringe of services. There should be a smooth transition for Young Carers moving onto into Adult Carer services.</p>	<p>Work with transitions workers and Carers representatives in the Local Authority and Third sector, including Education, to develop smoother pathways for Young Carers who will require supports as Adult Carers.</p>



<p>Transitions</p> <p>It was also noted that the transition process can be difficult, and that people can lose services when moving on from Young Carers groups, losing supports they have become reliant upon.</p>	<p>Work with transitions workers and Carers representatives in the Local Authority and Third sector, including Education, to develop smoother pathways for transition between services. The creation of a Parent Carers pathway will be a vital component in designing future work, to develop smoother transitions from child to Adult Services by listening to the views of Carers.</p>
<p>Identification</p> <p>It was noted that Carer identification often happens by chance and that there should be improvements in reaching the unpaid carer community.</p>	<p>The LGBT forum and other carer networks will be consulted and involved in work to co-design and promote future Carers Events, and to address issues of discrimination to support carers to access services.</p>
<p>Budget transparency</p> <p>The Council need to be transparent and realistic about what they will deliver. If any of the suggestions made during the consultation are not possible to deliver, then be clear as to why not (e.g. budgetary constraints).</p> <p>The group requested transparency regarding limitations of funding and resources in communications with carers and the third sector.</p>	<p>The Carers Workstream will have oversight of the Strategy and Carers Act budget. Health and Social Care finance representatives and managers, some of whom are already members of the Carers Workstream, will be invited to report to the Workstream on a regular basis to give updates on spending.</p> <p>The Workstream will also have an important voice in the co production and design of proposals, including the Carers Plan</p>
<p>Support</p> <p>The Council cannot expect small communities to pick up the burden of a lack of services.</p>	<p>The current consultation plan regarding Day Supports will be spread out to communities across the Borders, to ascertain the wishes of communities in terms</p>



	<p>of services. It is important that the voices of small communities are heard in this process. Carers Lead to raise this issue in relevant task and finish groups.</p> <p>What Matters Hubs worker is identifying resources to support outreach work in remote rural communities to support cared for people and their carers. These include mobile units and lunch clubs.</p> <p>Mapping of Community supports to prevent crisis is also currently ongoing, as part of Social Prescribing.</p>
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Event 4: The Neurodivergent Parent Carers Forum

Date	Venue (if in person) Otherwise state format	Number of People in attendance by category*	Protected Characteristics/Communities Experiencing Inequalities/People with Lived Experience Represented
26/3/24	The Buccleuch Hotel, St. Boswells	12 Unpaid Carers CEO/Manager	Gender (12 Women) Disability (Neurodivergence) Age (18-64)

Views Expressed	Officer Response
<p>Diagnosis:</p> <p>Carers and children who are Neurodivergent are not seen until they are older, when the crisis has been around for years. The trigger for support is pathology led, after a diagnosis.</p> <p>Adult Carers of neurodivergent children have experienced frustration through a lack of support for younger children. "Magic"</p>	<p>The Carers Strategy Implementation plan will propose a forum to support the development of a Parent Carers pathway for Neurodivergent Children, which will provide important support and a voice for Carers at an early stage of their journey. The proposed forum should involve Carers, Carer representatives and front-line professionals from the Third Sector (i.e. Borders Additional Needs Group and Meeting of Minds), Education, Health, Children and Adult services, including the Learning Disability Team and the Children Affected by Disability Teams.</p> <p>The development of a Parent Carers pathway forum will map the peer and professional support networks currently available to Carers. The proposal of a</p>



<p>age of 7-8 before supports offered. Earlier intervention is required. Information and Support doesn't come fast enough. An advice centre would be of benefit.</p> <p>There is no emotional or practical support offered after a diagnosis.</p> <p>The bar is set high for access to services for children and parent Carers. Often it takes a complaint to get things started.</p>	<p>Parent Carers Advice Centre and what form this should take will be considered through the Parent Carer forum.</p> <p>See above.</p> <p>The view that services are inaccessible will be taken forward through the development of a Parent Carer forum and pathway. This view can then be addressed in discussion with relevant Children and Adult Carers managers and Education representatives.</p>
<p>Wellbeing and Inclusion:</p> <p>The Adult Carers Workstream needs to diversify to include more Parent Carers from the Neurodivergent community.</p>	<p>The Adult Carers Workstream currently includes a manager and carer from the Neurodivergent community. Regular reviews of membership to be discussed on the Workstream to consider the balance of the group based on Carers data.</p>
<p>Mental and Emotional Health:</p> <p>Parent Carers experience loneliness and isolation</p> <p>Carer stress is often misinterpreted as a general anxiety, when often the result of frustration.</p>	<p>Current Professional and peer supports to be mapped as part of the development of a Parent Carer pathway, to identify gaps and inform future plans. Current Educational supports and School Hubs should be mapped, in addition to support groups held in schools for Parent Carers of Neurodivergent children and young people should be included in the mapping exercise.</p>
<p>Stigma:</p> <p>Parent carers from the neurodivergent community often feel judged as a result of the difficulties they face.</p>	<p>Neurodivergent Parent Carers forum to explore current supports for advocacy, advice, information, professional and peer support as part of a carer pathway, and to identify gaps in support available for carers to deal with issues around stigma.</p>



<p>Parent Carers often have to email or phone for help and can then be left feeling guilty for asking, or vulnerable. There can be the fear of children being taken into care. Reassurance is required.</p> <p>ID would be beneficial for the carers of Neurodivergent children.</p>	<p>Carers Rights, including the right to a Carer Support Plan to be promoted and marketed in schools and colleges, in addition to relevant support groups, including peer supports.</p> <p>Suggestion of ID to be discussed as part of the development of the Neurodivergent Parent Carer pathway to be raised with Carer representatives to ascertain the options already available and to invite further discussion through the Carers Workstream.</p>
<p>Education:</p> <p>Teachers don't listen to the views of parent carers, particularly at the point of transition to High School when they fear their children will not be able to cope.</p> <p>Schools do not appreciate the needs of parent carers of Neurodivergent children.</p> <p>Holiday periods are when parent carers from the Neurodivergent Community are most at need of breaks.</p>	<p>Parent Carers forum to support the development of a Parent Carers pathway to address the issues raised by Carers regarding transitions from Primary to Secondary education. The forum could consider suggestions put forward, such as Information or Advice Hubs and Carer support groups in primary schools or nurseries. Education representatives to be included in the forum.</p> <p>Carers Rights to a Support Plan and to be assessed for respite to be promoted through Parent Carer networks, included the proposed Parent Carer forum.</p> <p>Befrienders are found to be a very effective form of support. Carers Lead to contact relevant services in the third sector, i.e. Interestlink</p>
<p>Support:</p> <p>Accessible information is required regarding websites, rights, law and accommodation.</p>	<p>Peer support networks to be mapped, developed and marketed both face to face and online as part of the development of a pathway. Information must be accessible and include Easy Read leaflets or online options. They must also be available in a variety of languages.</p>



<p>Parents of Neurodivergent children often require safe strategies and advice.</p> <p>Parents who themselves are diagnosed as neurodivergent struggle to reach out for support to obtain information, as a result their own learning difficulties.</p> <p>Peer Support works best for parent carers of neurodivergent children.</p> <p>Befrienders are a brilliant form of support for Neurodivergent children, giving respite for carers.</p> <p>Neurodivergent parents need advocacy to know where information and support lies.</p>	<p>Carer specific information on Scottish Borders Council website planned to begin March 2025. This should include reference to information for Carers from the Neurodivergent community which should be coproduced with carers in the Workstreams.</p> <p>Social media networks, i.e. facebook, will be used to promote of information.</p> <p>The proposed Parent Carer forum will also consider how What Matters Hubs in schools and the community can be developed as sources of information and support for Carers.</p> <p>Parent Carers should be provided with a variety of accessible support options in the community which include:</p> <p>Networks should include (amongst others):</p> <ul style="list-style-type: none"> • Borders Additional Needs Group • Meeting of Minds. • Autism Initiatives • Borders Carers Centre • Local Area Coordination • Befriending agencies, i.e. Interest Link • Online options for information and support • Offshoot support groups for parents of neurodivergent children, currently underway in Melrose, or Tweedbank
<p>Employment:</p> <p>Visiting the Job Centre can be a “nightmare” for a Neurodivergent person and their carers. Job Centre lack of awareness when treating those that cannot work due to care responsibilities</p>	<p>The proposed Neurodivergent Parent Carer forum will invite a representative from the Job Centre to discuss the anxieties and issues experienced by carers and the person they look after when called for appointments.</p>



<p>A supportive workplace which understands the problems Neurodivergent carers face is very important to allow for the flexibility required.</p>	<p>Plan campaign to raise awareness of Carers support needs with employers in the Scottish Borders and promote the Carers Positive Award. Develop a more flexible and understanding approach towards unpaid carers in the workplace, who may be experiencing demands on their time or personal resources as a result of their caring role.</p>
<p>Carer Identification:</p> <p>Carer Identification is an issue.</p> <p>GPs and surgeries are pivotal in identifying carers and the supply of information when carers are isolated.</p> <p>There is little professional recognition of parent Carers from the Neurodivergent community. Parent Carers are often simply viewed as parents, despite the difficulties and stress they face.</p>	<p>Carers and their representatives from across the partnership and third sector will explore with GP surgeries and leads how we increase knowledge and understanding of unpaid carers and promote Carer identification.</p> <p>The Parent Carer pathway will explore how we support carers through the emotional impact of their journey, in particular the process when the parenting role develops into a long-term unpaid caring role. Professionals and unpaid carers will be involved in the development of the pathway.</p>
<p>Transitions:</p> <p>Transitions to other Local Authorities and between services are often accompanied by delays to support, a feeling that Carers are starting over again. Transitions between children and adult services is particularly challenging.</p>	<p>The proposed Parent Carers forum will start a discussion on their experiences of Transitions, with a view to identifying gaps and advising how services could improve. Relevant professionals from the Health and Social Care Partnership should be involved in this discussion and planning process, including a representative from proposed Young Persons Team, currently in development. Transitions workers from Scottish Borders Council, Borders Carers Centre and Borders Additional Needs Group should be invited to attend.</p> <p>Link to Transitions work which will be addressed in the Self-Directed Support Improvement Group in the future. Carers Lead to raise issues regarding Transitions between authorities in the relevant National discussion Forum, for information and wider discussion.</p>



Event 5: Ability Borders, Forum for Older People and people with Disabilities and Long Term

Date	Venue (if in person) Otherwise state format	Number of People in attendance by category*	Protected Characteristics/Communities Experiencing Inequalities/People with Lived Experience Represented
3/4/24	Social Enterprise Chamber, St. Boswells	11 (7 unpaid carers)	Gender (5 Women/3 Men) Age 2 men aged under 50 years, others present over 60 years. Disabilities/Long Term Conditions

Views Expressed	Officer Response
<p>Carer Identification:</p> <p>ID card for Carers with QR codes to establish a data base was suggested. One carer received a card through Carers UK.</p> <p>Older couples often don't see themselves as Carers through a sense of duty. Some will not pursue benefits or services as they do not want to ask for support. They can also feel guilty when asking to take a break.</p> <p>The needs of Carers who are disabled can be overlooked by services.</p>	<p>To be raised with Carer representatives to ascertain the options already available and to invite further discussion through the Carers Workstream.</p> <p>Outreach work in community meeting places largely attended by older people, to support the process of Carer identification and promote options available to unpaid Carers. Relevant meeting places should include clubs, cafes, village halls, social groups, hairdressers, societies, activity and interest groups.</p> <p>Provision for support for carers to take breaks is continuing to expand.</p> <p>Carer Support Plans will continue to be promoted across services, to reflect the support needs and circumstances of Carers.</p> <p>Awareness training for social work staff is ongoing.</p>



<p>Transitions:</p> <p>Carers find that they are not routinely identified in hospitals and that discharge from hospital is not a smooth process at the present time.</p> <p>Transitions between child and adult services are very disjointed and delayed.</p> <p>There is little “fluency” between the different sectors or organizations. There should be “joined up” services.</p> <p>Transfers between authorities also create interruptions and delays in services.</p>	<p>Link to work Hospital Liaison work through the Borders Carers Centre in relation to the Carer’s pathway and identification of role.</p> <p>Transitions issues to be addressed as part of the Parent Carer pathway process, the Parent Carer Forum being chaired by the Carers Lead. Professionals will be invited from Children and Families and Adult services and will include transition support workers.</p> <p>This work may will also link to work planned for the Self-Directed Support Improvement Group in the future, chaired by the Self-Directed Support Lead and which includes service users and representatives from the Third sector and Local Authority.</p> <p>Communication issues between departments must be addressed as part of Transitions work. Front line customer service representatives to be invited to join discussion forums to be part of the information chain.</p> <p>Carers Lead to raise issues regarding Transitions between authorities in the relevant National discussion Forum.</p>
<p>Hospital and Health Services:</p> <p>No Carer ID card available through Borders Carers Centre.</p> <p>Regarding equipment, one carer gave the example of a person who was palliative being unable to return home due to the delay in the sourcing of a hospital bed. Carers feel that more must be done around the resourcing of equipment.</p>	<p>Joint Work in relation to Hospital discharge and Carer identification process is ongoing in hospital wards and teams between the Health and Social Care Partnership and the Borders Carers Centre in order to deal with these issues, a Hospital Liaison worker being in place from the Borders Carers Centre.</p>



<p>Support:</p> <p>When you are older or are disabled becoming a carer can result in a lack of self-care due to the isolation, pressure and stress of looking after others. Support for Carers to be able to take breaks is essential.</p> <p>Older people require flexibility in services provided due to their range of needs. This includes flexibility in the timing of support services and appointments.</p> <p>People working in reception or customer services in Health and social care services should be trauma informed.</p> <p>Clear communication, efficient processes and a holistic approach are key. One person said, “the right hand often has no idea what the left hand is doing”. Involved professionals need to listen and avoid jargon. One participant commented, “not all disabilities are visible”.</p>	<p>Work is required to promote Carer identification and awareness, also to promote carers’ rights to breaks and Carer Support Plans. Promotional work across surgeries, health and community settings is to be developed, in addition to Carer awareness sessions run by Borders Carers Centre for relevant professionals.</p> <p>Outreach work is required in settings and groups largely attended by older people in the community to support the process of Carer identification and to discuss and promote the options available to unpaid Carers. This should include visits to lunch clubs, social cafes or bowling clubs.</p> <p>Customer services representatives to be consulted to establish what Carers awareness training is offered to front line staff and to identify where there may be gaps in knowledge.</p> <p>To be followed up as part of work to develop a Parent Carers pathway, improve Transitions processes, continue Carer awareness training for professionals and to consult customer services representatives.</p>
<p>Transportation:</p> <p>Accessibility of transportation is a massive issue for older people and disabled people. A question was asked regarding whether taxis could be contracted to provide affordable services to those requiring support.</p>	<p>Community transport options work raised in the draft Implementation plan and to be taken forward. Transition ongoing to Border Wheels. Question regarding affordable taxis to be raised by Carers Lead with Transport managers.</p>



Event 6: Syrian Community

Date	Venue (if in person) Otherwise state format	Number of People in attendance by category*	Protected Characteristics/Communities Experiencing Inequalities/People with Lived Experience Represented
22/4/24	Email from Resettlement Worker, Safer Communities	Worked with 2 Unpaid Carers between 2016-2021	2 Syrian parent carers for children with disabilities

Views Expressed	Officer Response
Refugee families with limited English language proficiency face significant barriers due to language and cultural differences. Understanding the routines here and navigating paperwork and administration can be particularly challenging for them.	Accessibility of information and need for translated material when navigating the Health and Social Care system.

Event 7: Ukrainian Community

Date	Venue (if in person) Otherwise state format	Number of People in attendance by category*	Protected Characteristics/Communities Experiencing Inequalities/People with Lived Experience Represented
22/4/24	Email response from Local Area Coordinator, Ukrainian Resettlement Project	2 Unpaid Carers were consulted by the LAC worker	2 Ukrainian parent carers for children with disabilities

Views Expressed	Officer Response
Require Easy Read information in bullet point form.	Ensure benefit, support and signposting information is available in Easy Read format, both on the SBC website and in leaflet format. Liaise with communication teams to develop suitable written and online formats.



Event 8: Neurodivergent Adult Carers

Date	Venue (if in person) Otherwise state format	Number of People in attendance by category*	Protected Characteristics/Communities Experiencing Inequalities/People with Lived Experience Represented
26/4/24	Focus Centre, Galashiels	17 Unpaid Carers	17 Female Unpaid Carers Age 18 - 64 Disabilities

Views Expressed	Officer Response
<p>Carer Identification:</p> <p>No advice or support offered following the medical diagnosis (of the cared for person), you are just left.</p> <p>It is difficult to switch to viewing yourself as a carer, having considered yourself to be a parent for so long.</p> <p>Carer Identification relies on word of mouth in the community, there was nothing official from schools or hospitals.</p>	<p>As in Event 4, The Carers Strategy Implementation plan will propose a forum to support the development of a Parent Carers pathway for Neurodivergent Children, which will provide important support and a voice for Carers at an early stage of their journey. The proposed forum should involve Carers, Carer representatives and front-line professionals from the Third Sector (i.e. Borders Additional Needs Group and Meeting of Minds), Education, Health, Children and Adult services, including the Learning Disability Team and the Children Affected by Disability Teams.</p> <p>A Pathway Forum should draw a map of the peer and professional support networks available to Carers, to be promoted through relevant networks, i.e. schools and hospitals.</p>
<p>Education:</p> <p>Some neurodivergent pupils are not visible in the classroom as they do not “act out”. Professionals should be trained in what to look for.</p>	<p>Views expressed on teacher training and the referrals process with Children Services managers and Education representatives will be taken forward through the creation of a Parent Carer forum, which will involve Education and Social Work professionals in addition to unpaid Carers. To be chaired by Carers Lead officer.</p>



<p>Teachers require training to identify and support carers.</p> <p>Educational support should include making referrals to relevant agencies.</p>	<p>In addition to the above point, proposed consideration of a Carers pathway for Parent Carers to consider the promotion of information and advice hubs and Carers support groups at an earlier stage, i.e. in primary schools or nurseries.</p> <p>Carers Rights and benefit of a Carer Support Plan to be highlighted in schools and colleges, in addition to relevant support groups. Carers Awareness training to be considered for relevant Education staff.</p>
<p>Access to services:</p> <p>There should be a single point/person to contact to oversee everything. Professionals from across services often contradict themselves.</p> <p>To obtain support you must shout for a very long time. The time frames are “ridiculous”.</p> <p>It takes a lot of energy to access services, it is so hard to be listened to.</p> <p>A pathway is required. There is currently no easy to access pathway, it should be a smooth process.</p> <p>You often get told you don’t need a diagnosis, yet the gateway to services generally depends on a diagnosis.</p>	<p>See also information above in Event 4.</p> <p>All points regarding access to services will be discussed and addressed as part of the development of a pathway, which will be co-produced through discussion with Carers in the proposed Parent Carer forum.</p> <p>Carers and their representatives from across the partnership and third sector to explore with GP surgeries and leads how we increase knowledge and understanding of carers and their requirements, to promote Carer identification and awareness of support services.</p>



<p>Support needs:</p> <p>Peer support is extremely important, i.e. like the regular support and coffee morning groups held in the Focus Centre held at BANG. A Support Centre for advice would be of benefit.</p> <p>Carers require advocacy, support and legal advice.</p> <p>Access to equipment is sometimes required.</p> <p>Affordable transportation is a problem to access services.</p>	<p>These points will be considered and addressed through the proposed Pathway and Parent Carer Forum. Advice and front line support networks will be mapped and marketed both face to face and online, as part of the development of a pathway. Information must be accessible and include Easy Read leaflets or online options. They must also be available in a variety of languages.</p> <p>Networks should include (amongst others):</p> <ul style="list-style-type: none"> • Borders Additional Needs Group • Meeting of Minds. • Autism Initiatives • Borders Carers Centre • Local Area Coordination • Befriending agencies, i.e. Interest Link • Online options for information and support • Offshoot support groups for parents of neurodivergent children, currently underway in Melrose, or Tweedbank • Borders Independent Advocacy Service <p>To be taken forward in Carer Pathway planning. Community transport options work also raised in the draft Implementation plan and to be taken forward. Transition ongoing to Border Wheels.</p>
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Date	Venue (if in person) Otherwise state format	Number of People in attendance by category*	Protected Characteristics/Communities Experiencing Inequalities/People with Lived Experience Represented
26/4/24	Focus Centre, Galashiels	2 Unpaid Carers	Age: 6 Young People aged between 16-21. Gender: 3 Females, 3 Males Disability: 6 members of the Neurodivergent community



Views Expressed	Officer Response
<p>A Safe Space or Social Space is preferred to the term Day Centre. Neurodivergent Carers need to trust that their young people will be looked after.</p> <p>Flexible peer support options are preferred.</p> <p>Neurodivergent carers require time to prepare to go anywhere for emotional safety. They require flexible approaches to be able to plan ahead. They also require detailed information about the arrangements on the day, i.e. regarding transportation and venue.</p>	<p>Carers Lead to link with current work in Eildon appraising relevant day support options. Discuss invite for a representative from the Neurodivergent community to relevant planning groups.</p> <p>The proposed Parent Carers forum to identify gaps in current supports for Neurodivergent Carers with a view to developing future supports. Representatives from Borders Additional Needs Group, Meeting of Minds and specialist worker from Borders Carers Centre to be asked to join the forum and will be consulted.</p> <p>The opportunity for an induction and accessible information, including videos where appropriate, will be made available to carers from the Neurodivergent community when considering Carer supports.</p> <p>Information should include Emergency and Contact details in the event of any difficulties on the day.</p>



Equality, Human Rights and Fairer Scotland Duty Impact Assessment

Stage 3

Analysis of findings and recommendations

Report Title

Living Well in the Scottish Borders – a plan for unpaid carers 2024-2028

Please detail a summary of the purpose of the proposal being developed or reviewed including the aims, objectives and intended outcomes

Living Well is a plan for unpaid adult carers living in the Scottish Borders and recognition of the significant and vital contribution that carers make in supporting those they care for and in line with Carers Act Scotland and the National Carers Strategy. It sets out the approach and the implementation plan by which the Health and Social Care Partnership of NHS Borders and Scottish Borders Council will deliver on their visions and outcomes for carers, ensuring that carers are fully involved in the implementation of the plan and in monitoring its progress. The vision of this plan is a Scottish Borders, which recognises and listens to carers so that they feel valued, with the outcome that carers will be supported to easily access flexible support, advice and information to best meet their personal outcomes and those of the person the look after.

The plan has been informed through engagement with key stakeholders and people from the protected characteristic communities. Their views have been reflected in the plan.



Scottish Borders
Health and Social Care
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Section 1: Equality Act 2010 – Relevant Protected Characteristics as identified in Stage 1 or during Stage 2

Protected Characteristic	Equality Duty	What impact and or difference will the proposal have	Measures to evaluate/mitigating actions
Age	Eliminating discrimination, harassment, victimisation, or any other prohibited conduct	<u>Working Age Carers (45+)</u> Carer Lead to engage with employers in the Scottish Borders. Hold an event for employers to promote Carer Positive Award	Number of events held, number of organisations obtaining Carer Positive Award
	Advancing equality of opportunity	<u>Parent Carers</u> Parent Carers Forum of Neurodivergent Children to be established	Forum membership, workplan and associated minutes of meetings
	Fostering good relations by reducing prejudice and promoting understanding	<u>Working Age Carers (45+)</u> <u>Parent Carers</u> Promoting the role of carers and the need for employers to be flexible in approach will foster good relations between employees who having a caring role and those that do not.	Number of events held, number of organisations obtaining Carer Positive Award
Disability	Eliminating discrimination, harassment, victimisation, or any other prohibited conduct	<u>Physical Disability, Mental Health and Sensory Impairment</u> Review of Carers Awareness training to be undertaken with disabled unpaid carers with a view to coproducing a revised format which has a focus on the needs of unpaid carers living with a physical disability, mental health or sensory impairment.	Number of awareness sessions delivered (output) 6 monthly survey of people with a disability to establish if there in an increase in the number advising that their quality of life has improved as a result of improved awareness (outcome)



		<u>Physical Disability, Mental Health and Sensory Impairment</u> Unpaid carers with physical disabilities will be able to access information, support services and groups, have their own support needs recognised and that any barriers are identified at the point of referral.	User feedback to be developed to establish if carers with physical disabilities/sensory impairment are accessing services and feel supported.
	Advancing equality of opportunity	<u>Physical Disability</u> All venues used for carer support and carer training are assessed for accessibility prior to being identified for use.	Building Audit completed and presented to Carers Workstream.
	Fostering good relations by reducing prejudice and promoting understanding	None identified at this time.	None identified at this time
Gender	Eliminating discrimination, harassment, victimisation, or any other prohibited conduct	<u>Male</u> Marketing and promoting the role of unpaid carers in male dominated environments e.g. bowling clubs, the Men's Shed, golf courses with the view to promoting and recognizing men as unpaid carers	Marketing materials, number of events held Reported increase in the number of male carers being supported in their caring role
		<u>Male</u> Engage with male carers to scope their needs and any requirement for a men only support group	Outcome of scoping exercise reported to Carers Workstream. Establishment of a Male only support group



		<u>Women</u> Carers First and the Carers Workstream to be flexible in their approach to enable working age women to engage in the work of both groups	Reporting and increase in the number of female carers of working age participating in the work of Carers First and the Carers Workstream.
	Advancing equality of opportunity	<u>Women</u> Carer Lead to engage with employers in the Scottish Borders to deliver an understanding of the unpaid caring role that female employees undertake as a way of supporting women sustain paid employment	Number of events held, number of organisations obtaining Carer Positive Award
		<u>Women, Men and Parent Carers</u> GP Initiative to improve identification of Unpaid Carers at an earlier stage.	Referral rate from GPs to support services.
	Fostering good relations by reducing prejudice and promoting understanding	<u>Men</u> Actively promoting that men also undertake an unpaid caring role	Marketing events and associated materials
Gender Reassignment	Eliminating discrimination, harassment, victimisation, or any other prohibited conduct	None identified at this stage	Involvement events with the LGBTQAI+ to be organised, the outcome of which will be reported in future reports and used to influence and inform the implementation plan.
	Advancing equality of opportunity	None identified at this stage	See above
	Fostering good relations by reducing prejudice and promoting understanding	None identified at this stage	See above



Marriage and Civil Partnership	Eliminating discrimination, harassment, victimisation, or any other prohibited conduct	None identified at this stage	None identified at this stage
	Advancing equality of opportunity	None identified at this stage	None identified at this stage
	Fostering good relations by reducing prejudice and promoting understanding	None identified at this stage	None identified at this stage
Pregnancy and Maternity	Eliminating discrimination, harassment, victimisation, or any other prohibited conduct	None identified at this stage	None identified at this stage
	Advancing equality of opportunity	None identified at this stage	None identified at this stage
	Fostering good relations by reducing prejudice and promoting understanding	None identified at this stage	None identified at this stage
Race	Eliminating discrimination, harassment, victimisation, or any other prohibited conduct	A review of carer support across the region is to be undertaken jointly with organisations and representatives of the Scottish Borders diverse communities e.g. MECOPP, Ukrainian Community	Outcome of review to be used to influence and inform The Living Well Implementation Plan
	Advancing equality of opportunity	Current information material to be translated into accessible form, including online information.	Audit of effectiveness of material produced with community representatives
	Fostering good relations by reducing prejudice and promoting understanding	Working jointly with organisations and representatives of the Scottish Borders diverse communities e.g. MECOPP, Ukrainian Community to ensure that services are fully aware of culture difference and that environments are welcoming spaces	Increase in the number of people attending current services.



Religion & Belief including non-belief	Eliminating discrimination, harassment, victimisation, or any other prohibited conduct	Review of existing and new services to be assessed with members of Interfaith Borders to ensure that all respite facilities are able to cater for diverse religious needs, e.g. Halal and Kosher foods and there and spaces for worship available	Number of assessments undertaken.
	Advancing equality of opportunity	None identified at this stage	None identified at this stage
	Fostering good relations by reducing prejudice and promoting understanding	None identified at this stage	None identified at this stage
Sexual Orientation	Eliminating discrimination, harassment, victimisation, or any other prohibited conduct	Consult relevant organisations, i.e. LGBT Charter for Education, to ensure that Carer support workers are fully informed to challenge incidents of discrimination.	Establish training and awareness events for professionals involved with unpaid Carers.
	Advancing equality of opportunity	Working in partnership with the LGBTQIA+ community to ensure that services meet needs and are accessible without barriers	Establish representation of the LGBTQIA+ community on the Carers Workstream. Seek the views of the LGBTQIA+ community in survey form.
	Fostering good relations by reducing prejudice and promoting understanding	Ensure that Carer support settings are welcome and safe for members of the LGBTQIA+ community.	Increased attendance by members of the LGBTQIA+ community.



Section 2: Equality and Human Rights Measurement Framework Human– Reference those identified in Stage 1 (remove those that do not apply)

Domain	Indicator	Enhancing or Infringing	Impact and or difference will the proposal have	Measures to evaluate/mitigating actions
Education	Higher education and lifelong learning	Enhancing	There will be an increase in the number of carers who are enabled to engage in programmes of learning, educational environments or events of their choosing.	Baseline figure of current educational and learning opportunities for carers will rise, as will carer attendance and involvement. Ongoing evaluation via feedback from carers.
Work	Employment Earnings Occupational segregation Forced labour and trafficking*	Enhancing	There will be an increase in the number of carers aware of their legislative rights. Roll out of Carer Positive Award will enable more carers to manage paid work and unpaid caring	Increase in the number of employers in the Scottish Borders holding the Carer Positive Award. Feedback from carers.
Living Standards	Poverty Housing Social Care	Enhancing	There will be an increase in the uptake of Carers Support Plans which looks at housing and finances. Increase in the number of carers accessing grants and individual funding support. SBC Carers Hardship Fund	Increase in the uptake of Carers Support Plans. Outcome measures reported quarterly. Number of carers accessing funding support via Borders Carers Centre – reported annually Social Work budget allocation to Borders Carers Centre to support positive outcomes for those in high need as outlined in Adult Carers Support Plan



Health	Social Care Health outcomes Access to health care Mental health Reproductive and sexual health* Palliative and end of life care*	Enhancing	Recognition that to improve health outcomes for unpaid carers we need to get services right for the cared for person. Increase in the number of carers completing a Carers Support Plan Increased in the uptake of Carers Awareness training. Increase awareness in hospital settings including palliative care unit by early identification of those with a caring role	User feedback – increase in the number of cared for people accessing respite opportunities Health outcomes are recorded and reported quarterly Increase in referrals to Borders Carers Centre Measure uptake of ACSP from BGH, community hospitals and MKU and look to increase
Justice and Personal Security	Conditions of detention Hate crime, homicides and sexual/domestic abuse Criminal civil justice Restorative justice Reintegration, resettlement and rehabilitation*	Enhancing	Protection and safeguarding of those who are affected by any type of abuse from others through application of local guidance. Work with statutory services such as police, health and social work to raise awareness	Application of adult support and protection guidelines
Participation	Political and civic participation and representation Access to services Privacy and surveillance Social and community cohesion* Family Life*	Enhancing	The plan recognises the need to get services right for the cared for person and by doing so this will impact positively on the lives of unpaid carers. Improved services will enable carers to have more control and a life outside of caring. Increase in uptake of the Carers Support Plan will enable carers to feel more valued	Quarterly reporting via the Carers Support Plan Ongoing review of respite and day support services across the region, including attendance figures.



Section 3: Fairer Scotland Duty

<p>Identify changes to the strategic programme/proposal/decision to be made to reduce negative impacts on equality of outcome and or improving health inequalities</p>	<p>The implementation of the Living Well plan aims to improve the health financial and social care support for carers – this will improve outcomes for both carers and cared for. In order to achieve this the plan will be inclusive with the provision of online and an easy read version, direct engagement with ethnic minority communities and hard to reach groups also being required to promote their rights. Accessible service delivery will need to be reviewed and services will need to commit to being proactively carer aware.</p> <p>Commitment to develop Parent Carers Workstream to work in partnership with Health, CHAD, CAHMS CCRT and education, the UN Rights of the Child also being referenced.</p>
<p>Identify the opportunities the strategic programme/proposal/decision provides to reduce or further reduce inequalities of outcome and or improving health inequalities</p>	<p>The aim of the plan is to improve outcomes for unpaid adult carers living in the Scottish Borders by clearly setting out aims and objectives and via a robust implementation plan bringing together existing supports and services as well as new approaches to ensure that carers, including those from hard to reach groups, are recognised and supported in a joined up and cohesive way</p>

Section 4: Are there any negative impacts with no identified mitigating actions? If yes, please detail these below:

None identified at this time

Section 5: Equality, Human Rights & Fairer Scotland Duty Impact Assessment Recommendations

What recommendations were identified during the impact assessment process:

Recommendation	Recommendation owned by:	Date recommendation will be implemented by	Review Date
Services record protected characteristics data as detailed in	John Barrow – Carer Lead	August 2025	August 2027



the Equality Act 2010 and relevant guidance, to reduce inequality			
Set up a Parent Carer Workstream to ensure that parent carers have a strong voice and to develop a pathway for post diagnostic support and to reduce stigma and discrimination	John Barrow – Carer Lead	October 2024	October 2025
Annual event for ethnic minority and gypsy travelling communities	John Barrow – Carer Lead	April 2025	April 2026
Improve identification of carers and increase referrals from primary care – establish planning group to work in partnership	John Barrow – Carer Lead	September 2024	September 2025
Rolling programme of Carers Awareness training delivered in partnership with carers – scope viability of this becoming mandatory for professionals and rolling out to wider communities e.g. Mens sheds	John Barrow – Carer Lead	Ongoing	January 2026
Ensure services are accessible to all – scope venues and accessibility to information	John Barrow – Carer Lead	March 2025	March 2026
Establish benefit and legal sessions via Borders Carers Centre	John Barrow – Carer Lead	September 2024	September 2025
Proactive engagement with LGBTQAI+ community to ensure that there are no identified barriers to accessing support and to reduce discrimination	John Barrow – Carer Lead	February 2025	February 2026
Campaign to promote carers support services. Borders Carers	John Barrow – Carer Lead	October 2025	October 2026



Centre to redesign and relaunch website and carer web pages.			
Partner with addiction services to promote identification of hidden carers and to reduce stigma	John Barrow – Carer Lead	October 2024	November 2025
Roll out of Carers Positive Programme – hold promotion event in partnership with Borders Carers Centre	John Barrow – Carer Lead	December 2024	December 2025
Work with housing, RSLs and emergency services to develop a referral pathway to Borders Carers Centre and to promote identification of hidden carers	John Barrow – Carer Lead	December 2024	December 2025
Create a transition worker post within Borders Carers Centre to support transition from children to adult services and hospital to community services/Link with Transitions worker in BANGS	John Barrow – Carer Lead	June 2024	June 2025
Scope in partnership with Borders Carers Centre the need for a Men Only Carers Support Group	John Barrow – Carer Lead	October 2024	October 2025
Work in partnership with statutory partners and the equipment store to scope the viability of rapid access to equipment for unpaid carers	John Barrow – Carer Lead	April 2025	April 2026
Scope the viability of a local Carers ID card with third sector and statutory partners and via a survey with unpaid carers	John Barrow – Carer Lead	May 2025	May 2026



Work in partnership with transport agencies to ensure that any barriers to carers and cared for being able to access the community and support services are identified and addressed	John Barrow – Carer Lead	November 2025	November 2026
Develop a clear communication plan so that unpaid carers with protected characteristics are aware of their rights and supports available to them; Borders Carers Centre to develop a new accessible website which will be launched in the autumn of 2024	John Barrow – Carer Lead	October 2025	October 2026
Work in partnership with Communication Teams to Improve accessibility of Information for people with Protected Characteristics to include Easy Read and Translation in online and written formats.	John Barrow – Carer Lead	March 2025	March 2026

Section 6: Monitoring Impact – Internal Verification of Outcomes

How will you monitor the impact this proposal affects different groups, including people with protected characteristics?

<p>Quarterly statistics from Borders Carers Centre Scottish Government Carers Census – local data Satisfaction survey – carer feedback Ongoing assessment of events and training opportunities Increase in number of people accessing Carers Awareness Training</p>



Continuous engagement with representatives from Health, social care, voluntary sectors, thirds sectors, users of services and carers to inform on-going service delivery

Section 7: Procured, Tendered or Commissioned Services (SSPSED)

Is any part of this policy/service to be carried out wholly or partly by contactors and if so, how will equality, human rights including children's rights and the Fairer Scotland duties be addressed?

All future commissioning services will be informed and influenced by the findings of this EHRIA.

Section 8: Communication Plan (SSPSED)

Please provide a summary of the communication plan which details how the information about this policy/service to young people, those with a visual or hearing sensory impairment, difficulty with reading or numbers, learning difficulties or English as a second language will be communicated.

Consideration of an easy read version and SWAY approach to delivering information in a visual and interactive way. This can also be played electronically in any language.

Ensure that there is an easy read and summary version of the Living Well Plan and that it is shared in a variety of accessible formats

Signed Off By: Gwyneth Lennox



John Barrow



Head of Adult Social Work

SDS/Carers Lead

Date 02.05.24.

02.05.24

