**CONSULTATION QUESTIONS**

The NHS Tayside Board response has focussed on aspects relating to overarching proposals. Those elements which are particular to local areas and partnerships have not been included, but will have been captured in partnership responses from our Local Authorities, Community Health Partnerships and local organisations.

**Information and Advice**

Question 7: Should we introduce a duty for local authorities to establish and maintain a service for providing people with information and advice relating to the Carer's Support Plan and support for carers and young carers?

☒ Yes                                                    ☐ No

Comments:
The Patient Rights (Scotland) Act 2011 provisions relating to providing information and the introduction of the Patient Advice and Support Service demonstrates how this can be enacted and should be taken into consideration in developing such a duty.

Question 8: Should we repeal section 12 of the Community Care and Health (Scotland) Act 2002 about the submission of Carer information Strategies to Scottish Ministers, subject to reassurances, which are subject in turn to Spending Review decisions, about the continuation of funding to Health Boards for support to carers and young carers?

☒ Yes                                                    ☐ No

Comments:

Introducing a duty to establish and maintain an information and advice service would supersede the need for a carer information strategy. The continuation of funding is important but should potentially be addressed through joint commissioning with Health and Local Authority input.

**Carer Involvement**

Question 14: Should there be carer involvement in the planning, shaping and delivery of services for the people they care for and support for carers in areas outwith the scope of integration?

☒ Yes                                                    ☐ No

Comments:

Yes there should and the Patient Rights (Scotland) Act 2011 provides for patients and their carers to be involved in decision making. It also gives them a right to provide feedback on services. Scottish Government Guidance to NHS Boards in the form of Chief Executive Letter (CEL) 4 (2010) regarding "Informing, engaging and consulting people in developing health and community care services" provides clear guidelines to routinely involve stakeholders in planning, shaping and delivering services. Carers are identified stakeholders in this process. The NHS also works to Participation Standards which provide for a self assessment process of ensuring that there is continuous improvement in how patients, carers, families and other stakeholders are involved and contribute to planning and shaping services and that there is a governance structure to support this.

Question 15: Should we make provision for the involvement of carers' organisations in the planning, shaping and delivery of services and support falling outwith the scope of integration?

☒ Yes                                    ☐ No

Comments:

The provision however should take cognisance of existing provision within the Patient Rights (Scotland) Act 2011 and the Scottish Government Guidance on Informing, engaging and consulting people in developing health and community care services.

Question 16: Should we establish a principle about carer and young carer involvement in care planning for service users (subject to consent) and support for themselves in areas not covered in existing legislation?

☒ Yes                                    ☐ No

Comments:

Again the provisions of the Patient Rights (Scotland) Act 2011 should be taken into consideration in developing the principles.

Question 17: What are your views on making provision for young carer involvement in the planning, shaping and delivery of services for cared-for people and support for young carers?

Comments:

Again the provision of the Patient Rights (Scotland) Act 2011 and Scottish

Government Guidance in the form of CEL 4 (2010) regarding "Informing, engaging and consulting people in developing health and community care services" would support the inclusion of young carers as identified stakeholders. Young people regardless of whether or not they are a young carer are routinely involved in various engagement activities across the services to ensure that they are given the opportunity to contribute to improving not only delivery of services but health and wellbeing initiatives and programmes.

**Planning and Delivery**

Question 18: Should we introduce statutory provision to the effect that a local authority and each relevant Health Board must collaborate and involve relevant organisations and carers in the development of local carers strategies which must be kept under review and updated every three years?

☒ Yes                                          ☐ No

Comments:

Yes in principle. Aspects relating to the involvement of carers and organisations are already captured in earlier sections eg questions 16 and 17. Any legislation in relation to the need for local carer's strategies between local authority and each relevant Health Board should take cognisance of the structure of the Integrated Bodies and also the provision of services which will not fall under the Integrated agenda.

Question 19: Should we introduce statutory provision to the effect that local authorities with Health Boards must take steps to ensure, in so far as is reasonably practicable, that a sufficient range of services is available for meeting the needs for support to carers and young carers in the area?

☒ Yes                                          ☐ No

Comments:

**Identification**

Question 20: Should there be no legislative provision for GPs or local authorities to maintain a Carers Register in order to support the identification of carers?

☒ Yes                                          ☐ No

Comments:

GP's and Local authorities should be encouraged and supported to identify carers

and maintain registers as a marker of delivering quality without the need for legislation.

Question 21: Should the Scottish Government ensure that good practice is widely spread amongst Health Boards about the proactive use of Registers of Carers within GP practices?

☒ Yes                                                                    ☐ No

Comments:

Health Boards are already actively sharing good practice and learning across a diverse range of areas in Primary care. The national Primary care Leads group could also play a role in helping to share and learn.

Question 22:  Should the Scottish Government ask Health Boards to monitor compliance with the core contractual elements of the GP contract?

☐ Yes                                                                    ☒ No

Comments:

Contract monitoring and payment verification systems are already embedded within all health boards. It should be up to each health board and local PV team to decide for themselves around which contractual areas should be monitored according to Boards own systems and processes.

Supporting and facilitating (rather than just monitoring) GP's to actively manage their carers register with input from the integration teams is likely to provide a far richer experience for professionals and carers alike and more beneficial outcomes for carers and their families. This approach should be supported by shared learning and active input from locality integration agendas.