



EQUALITY IMPACT ASSESSMENT

BACKGROUND

Date of Assessment:	12 July 2023
Title of document being assessed:	Angus Carers Strategy 2023 - 2026
<p>1. This is a new policy, procedure, strategy or practice being assessed. (If Yes please check box) <input checked="" type="checkbox"/></p> <p>This is a new budget saving proposal (If Yes please check box) <input type="checkbox"/></p>	<p>This is an existing policy, procedure, strategy or practice being assessed? (If Yes please check box) <input type="checkbox"/></p> <p>This is an existing budget saving proposal being reviewed (If Yes please check box) <input type="checkbox"/></p>
<p>2. Please give details of the Lead Officer and the group responsible for considering the Equality Impact Assessment (EQIA)</p>	Sally Wilson, Service Manager -Integration
<p>3. Please give a brief description of the policy, procedure, strategy or practice being assessed, including its aims and objectives, actions and processes.</p>	<p>The Carers (Scotland) Act 2016 places a duty on local authorities and health boards to prepare and publish a local Carers strategy. The duty to prepare the Angus Carers Strategy (ACS) is delegated to Integration Joint Board (IJB) which is responsible for planning health and social care services in Angus.</p> <p>The Angus Carers Strategy sets out our commitments to Carers and describes how Angus Health and Social Care Partnership (AHSCP) will support carers of all ages during 2023-2026. The vision is that Carers of all ages are valued as equal partners, fully involved in shaping services and supported to have fulfilling lives alongside caring.</p> <p>The Strategy builds upon our previous Carers Strategy 2019 – 2022 which was extended in response to operational demands brought about by COVID-19. Despite the challenges of the pandemic, the majority of the actions identified to support the delivery of the last strategy have been achieved.</p> <p>The ACS identifies five strategic priorities;</p> <ul style="list-style-type: none"> • Visibility: Carers will be more visible

	<ul style="list-style-type: none"> • Empowerment: Carers will be supported and empowered to take full control their caring role • Life-balance: Carers will be supported and empowered to take full control their caring role • Influencing: Carers will be supported and empowered to take full control their caring role • Equity: Carers will be supported and empowered to take full control their caring role <p>The Carer Strategic Delivery Plan provides details on the programmes of work and projects to be undertaken in relation to each priority, the timescale within which it will be delivered and the strategic measures.</p> <p>The Angus Carers Strategic Partnership Group (ACSPG) has overseen the development of the Strategy and will continue to meet regularly to review and monitor actions and work together to improve the support provided to Carers. The ACS has been presented to the Strategic Planning Group for approval.</p>
<p>4. What are the intended outcomes of this policy, procedure, strategy or practice and who are the intended beneficiaries?</p>	<p>Carers of all ages are recognised and valued as equal partners, are fully involved in shaping services in Angus and are supported to have fulfilling lives alongside caring.</p>
<p>5. Has any local consultation, improvement or research with protected characteristic communities informed the policy, procedure, strategy or practice being EQIA assessed here?</p> <p>If Yes, please give details.</p>	<ul style="list-style-type: none"> • The National Carers Strategy 2022 estimates that the economic value of the contribution made by unpaid carer in Scotland is £13.1 billion a year. • The role and contribution of carers is likely to be even more critical as a result of the increasing demand for health and social care which is predicted to grow by 25% by 2031. Without their Carers, many people would not be able to live their lives as they do. <p>Scotland's Census 2011 data provides a range of additional evidence to inform demand, for example:</p> <ul style="list-style-type: none"> • 1 in 10 people living in Angus has two or more long term conditions. • 7,489 people in Angus are living with a physical disability. • 5/1,000 people in Angus have a learning disability. • We also know that 1 in 6 people are likely to have a mental health problem at any one time in Angus (Scottish Health Survey 2022). • The most elderly of Carers in Angus are

delivering the most hours of care per week. 1026 Carers over the age of 65 are delivering more than 50 hours of care per week ([Scotland's Census 2011](#)).

- The average age of Carers in Angus is 52.2 years ([Scotland's Census 2011](#)).

Numbers of Carers in Angus

- [Scotland's Census 2011](#) identified 10,582 Carers in Angus, equivalent to 10% of population of Angus. The Scottish Health Survey (2022) indicates that 13% of the Angus population are unpaid Carers (15,096).
- As of 31 March 2023, 1924 Adult Carers were registered with Angus Carers Centre. This suggests that there are 8658 adult Carers not known to services.
- Carers in Angus are supporting people with a variety of physical and mental health conditions. The highest number of Carers support people with a learning disability followed by people living with Dementia.
- Nationally 4% of Scottish children under 16yrs are Carers. If we apply this to Angus we can estimate that there are 746 young Carers in Angus ([National Records of Scotland 2021](#)).

Health and Wellbeing of Carers

The more hours a Carer provides, the more likely they are to report poor health ([Scotland's Census 2011](#))

- In 2021/22 30% of Carers in Angus (30% in Scotland) felt supported in their caring role. (Health and Care Experience Survey)

The [Scottish Census 2011](#) tells us that ethnic minority Carers make up 4% of all Carers in Scotland. As of June 2023, there were 17 Carers registered with Angus Carers Centre who are of an ethnic minority.

Informing the new strategy

The voice of lived experience has been at the centre of the development of the ACS, with over 140 Carers in Angus sharing their views and shaping priorities. We also engaged with a range staff across Angus HSCP and partner organisations.

6. Fairer Scotland duties:

- 1) Does this report have an impact for Angus citizens under Fairer Scotland?
- 2) If Yes, what are these implications and how will they be addressed?

What evidence do you have about any socio-economic disadvantage/inequalities of outcome in relation to this strategic issue?

Are there any potential impacts this strategy may have specifically on the undernoted groupings? Please remember to take into account any particular impact resulting from Covid-19. Please state if there is a potentially positive, negative, neutral or unknown impact for each grouping.

1. Low and/or No Wealth (e.g. those with enough money to meet basic living costs and pay bills but have no savings to deal with any unexpected spends and no provision for the future.
2. Material Deprivation (i.e. those unable to access basic goods and services e.g. repair/replace broken electrical goods, warm home, leisure and hobbies
3. Impact Area Deprivation (i.e. where people live (e.g. rural areas), or where they work (e.g. accessibility of transport).
4. Impact Socio-economic Background i.e. social class including parents' education, people's employment and income

[Carers UK](#) report that the Cost of Living Crisis is exacerbating the difficulties faced by Carers with many already unable to work due to their caring role, or being of pensionable age. Rising debts and struggles to make ends meet are prevalent and pose a risk to caring.

[The Scottish Government Equality Outcomes: disability evidence review](#), found that people who live with a disabled adult in their family are more likely to be in relative poverty than those who do not.

The Census 2011 identified 10,582 unpaid Carers in Angus (around 1 in 10 of the whole population) of whom 60% were female, 21.7% were aged 65+, 2.5% were aged under 16 and 52.5% were employed.

Carers living in Angus are less likely to be employed than those living across Scotland and are more likely to be aged 65+ or under 16. The average age of Carers living in Angus is 52.2 years.

ACC reported that 82% of financial awards were given to carers were due to financial hardship in 2021-22.

There is no doubt the COVID-19 pandemic had a substantial impact on all Carers and further highlighted the critical role they have in the sustainability of the health and social care system.

Low and/or No Wealth: potentially positive impact

This strategy has a potentially positive impact on Carers in Angus with low and / or no wealth, supporting them to access grants and be informed of their rights and entitlements. Angus Carers Centre offers support and advice around benefits and rights for Carers and refer to more specialist support when required: Citizens Advice Bureau, Welfare Rights etc.

Via the AHSCP Contributions Policy and Waiving Of Charges Policy, no carer will be charged for a support that is designed to enable them to continue in their caring role.

Material Deprivation: potentially positive impact
By Carers registering or connecting with Angus Carers Centre they will be aware of their route to support. Via their relationship with them such

difficulties should be disclosed enabling staff to signpost the Carers to a multitude of grants if appropriate. Angus Carers Centre offers support and advice around benefits and rights for Carers and refer to more specialist support when required e.g. Welfare Rights, Scottish Welfare Fund etc.

Via association with support services Carers in Angus will be provided information and advice relevant to their circumstances to help them meet their needs.

Impact Area Deprivation: potentially positive impact

[The Rural Deprivation Evidence Summary \(2016\)](#) found that people living in rural areas experience deprivation differently from those living in towns and cities. Issues in rural areas include:

- higher consumption of fuel for heating and transport
- less accessible key services including healthcare, childcare and broadband
- limited opportunities to earn adequate income compared to urban areas.

Commitment to improving Carer representation and enabling Carers to influence practice and shape future developments is contained within the strategy. This will be achieved via development of a group called 'Caring Influencers' and they will help us to understand the issues of importance to Carers in Angus. It is also planned to have carers representatives participating in Locality Improvement Groups that will support our understanding of differing needs in different areas. The Delivery plan contains an action to seek to better understand and respond to the needs of Carers in rural Angus.

Impact Socio-economic background: potentially positive impact

[The Carers Census Scotland 2021](#) tells us that nationally, impacts on carers' finances were reported for 35% of carers in all Scottish Index of Multiple Deprivation (SIMD) data zones, but were reported for 44% of carers living in areas within the most deprived SIMD areas. 16% of young carers in the Carers Census lived in areas within the most deprived SIMD areas compared

to 4% who lived in areas in the least deprived areas.

Carer employment:

[Carer Positive Accreditation Scheme](#) Carer positive accreditation is awarded to businesses for having systems in place that support Carers to balance their caring roles with their working lives and includes opportunities to work flexibly and recognition of the need for additional leave on occasions. We will work with local businesses and increase membership of this scheme to create better working conditions for Carers. We will start with reaching out to the larger local employers in Angus. In this way we hope to support Carers to remain in work.

Income:

The Waiving of Charges policy prevents Carers from paying for services that support them to continue in their caring role.

EQUALITY IMPACT ASSESSMENT (EQIA) - RELEVANCE SCREENING

1. Has the proposal already been assessed via an EQIA process for its impact on ALL of the protected characteristics of: age; disability; gender; gender re-assignment; pregnancy/maternity; marriage and civil partnership; race; religion and belief; and sexual orientation?

No

1 a. Does the proposal have a potential to impact in ANY way on the public and/or service users holding any of the protected characteristics of age; disability; gender; gender reassignment; pregnancy/maternity; marriage and civil partnership; race; religion and belief; and sexual orientation?

Yes - Proceed to the Full Equality Impact Assessment (EQIA).

~~No - please state why not (specify which evidence was considered and what it says)?~~

1 b. Does the proposal have a potential to impact in ANY way on employees holding any of the protected characteristics of age; disability; gender; gender re-assignment; pregnancy/maternity; marriage and civil partnership; race; religion and belief; and sexual orientation? This applies to employees of not only NHS Tayside and Angus Council, but also the 3rd sector.

Yes - Proceed to the Full Equality Impact Assessment (EQIA).

~~No - please state why not (specify which evidence was considered and what it says)?~~

2. Name: Sally Wilson

Position: Service Manager

Date: 12 July 2023



FULL EQUALITY IMPACT ASSESSMENT (EQIA)

Step 1.

Is there any reason to believe the proposal could affect people differently due to their protected characteristic? Using evidence (e.g. statistics, literature, consultation results, etc.), justify whether yes or no. If yes, specify whether impact is likely to be positive or negative and what actions will be taken to mitigate against the undesired impact of a negative discrimination. When considering impact, please consider impact on: health related behaviour; social environment; physical environment; and access to & quality of services of NHS Tayside, Angus Council or 3rd sector social justice.

1a. The public and/or service users holding the Protected Characteristics:

	POSITIVE IMPACT	NEGATIVE IMPACT	Intended mitigating actions against the b) Negative Discrimination
	a) Positive Action	b) Negative discrimination	
AGE	<p>The Scottish Health Survey shows that the likelihood to being a carer increases with age. The average age of a carer in Angus is 52.2 years. The ACS recognises that the most elderly of Carers in Angus are delivering the most hours of care per week.</p> <p>It is also noted that Angus has an ageing population and this is likely to result in more people becoming a Carer.</p> <p>It is a priority of the plan to identify carers early and raise the profile of caring in Angus so that we can build supportive relationships that mitigate against crisis development</p>	N/A	

	<p>for all protected characteristics.</p> <p>Service re-design of young carer services into the following groups: 8-12 years, 13-17yrs and 18-24yrs will result in age and stage appropriate supports.</p>		
GENDER	<p>Both sexes are represented in the available demographic information about Carers.</p> <p>Overall 60% of Carers are women. Under our priority of influencing, commitment is made to improving the diversity of carer representation. We aim to raise the profile of caring so more people are aware of a caring role. We aim to provide information, suitable for all genders, evidencing equality in opportunity and access.</p>	N/A	
DISABILITY	<p>The implementation of the ACS will focus on empowering an informing all carers in Angus regardless of disability.</p> <p>The Scottish Census 2011 showed that 19% of residents in Angus report as being limited by a long term health problem or disability in their day to day activities either a "little" or a "lot".</p> <p>We intend to provide information and</p>	N/A	

	support to all Carers regardless of disability, evidencing equality in opportunity and access.		
ETHNICITY/ RACE	The ACS and improvement actions are designed to meet the needs of all Carers facilitating communication where required through interpreting services if required. Under our priority of influencing, commitment is made to improving the diversity of carer representation and increasing numbers of registered Carers who are of an ethnic minority.	N/A	
SEXUAL ORIENTATION	The Scottish Surveys Core Questions (2015) tells us that in 2015, 1.8% of Scottish adults (aged 25-75+) and 3.7% of young people (aged 16-24) identified their sexual orientation as LGBTI. The ACS and the priorities and commitments contained, intend to provide information and support to all residents of Angus regardless of sexual orientation, evidencing equality in opportunity and access.	N/A	
RELIGION/ BELIEF	The ACS is inclusive and ensures that there are positive impacts for people of all religions and beliefs.		
GENDER REASSIGNMENT	Of the protected characteristics, transgender people are one of the most		

	<p>marginalised in society. The Scottish Transgender Alliance: transgender experience in Scotland 2008 tells us that 25% of respondents had to move from a family home due to family reactions. This often results in homelessness.</p> <p>Transphobic abuse in relationships had been experienced by 46%, and 62% had experienced transphobic abuse from strangers in public places. Mental health problems were reported by 96% of young trans people with 63% experiencing suicidal thoughts.</p> <p>The ACS 23-26 and the priorities and commitments contained, intend to provide information and support to all residents of Angus regardless of sexual orientation, evidencing equality in opportunity and access.</p>		
<p>PREGNANCY/ MATERNITY</p>	<p>If a Carer or Cared for person was pregnant then this would be acknowledged within Carer Support Planning and appropriate support provided based on assessment need.</p> <p>The ACS 23-26 and the priorities and commitments contained, intend to provide information and support to all residents of Angus regardless of pregnancy status, evidencing equality</p>		

	in opportunity and access.		
OTHER: CARERS OF OLDER AND/OR DISABLED PEOPLE (Although carers are not considered as a PC in itself, they are protected by the Equality Act 2010 from “discrimination by association” with the PCs of age and disability)	The aim of the ACS is to support Carers to sustain their caring role and enable them to have a fulfilling life alongside caring, and has been developed in partnership with Carers in Angus.		

1b. The employees holding the Protected Characteristics:

[Carer Positive](#) is a Scottish Government funded initiative which recognises employers who offer the best support to Carers, allowing them the flexibility they often need to deliver care. We are promoting the initiative through the ACS. Both Angus Council and NHS Tayside, who employ people who work in Angus HSCP, are Carer Positive organisations.

	POSITIVE IMPACT	NEGATIVE IMPACT	Intended mitigating actions against the b)
	a) Positive Action	b) Negative discrimination	Negative Discrimination
AGE	The average age of a carer in Angus is 52.2 years. The ACS aims to raise awareness of the caring role and supported to have fulfilling lives alongside caring.		
GENDER	Overall, 60% of carers in Angus are women and 40% are men. Throughout their working years, women are more likely to be carers than men. Gender stereotypes surrounding caring are still present in our society. There is a risk that women feel more pressurised to		

	undertake caring roles. This pressure can negatively impact on a woman's career path and be a key driver of the gender pay gap.		
DISABILITY	1 in 10 people living in Angus has two or more long term conditions and 7,489 people in Angus are living with a physical disability which may limit their day to day activities and this can include Carers. By raising awareness of the caring role and the supports available to Carers, the ACS aims to support all Carers to have fulfilling lives alongside caring.		
ETHNICITY/ RACE	The ACS is designed to meet the needs of all Carers and be inclusive of ethnicities.		
SEXUAL ORIENTATION	The Strategic Plan is inclusive and ensures that there are positive impacts for people of all sexual orientations.		
RELIGION/ BELIEF	The ACS is designed to meet the needs of all Carers and be inclusive of faith/belief.	N/A	N/A
GENDER REASSIGNMENT	The ACS 23-26 and the priorities and commitments contained, intend to provide information and support to all residents of Angus regardless of sexual orientation, evidencing equality	N/A	N/A

	in opportunity and access.		
MARRIAGE/CIVIL PARTNERSHIP	The relationship of the Carers or cared for person can be acknowledged with the Carer Support Plan.	N/A	N/A
PREGNANCY/MATERNITY	If a Carer was pregnant then that fact could be acknowledged within the Carer Support Plan based on assessed need	N/A	
OTHER: CARERS OF OLDER AND/OR DISABLED PEOPLE (Although carers are not considered as a PC in itself, they are protected by the Equality Act 2010 from “discrimination by association” with the PCs of age and disability)	The aim of the ACS is to support Carers to sustain their caring role and enable them to have a fulfilling life alongside caring, this includes carers who work.	N/A	

1c. Does the proposal promote good relations between any of the Protected Characteristics?

YES ✓ NO NOT SURE

Specify further (e.g. between which of the PCs, and in what way, or why not or not sure)

Feedback has been used to inform the final version of the Plan. Angus Health and Social Care Partnership (HSCP) want to continue the conversation with all Carers and professionals who support Carers in Angus as we deliver the ambitions of the ACS.

1d. What steps will you take to collect the Equality Monitoring information needed to monitor impact of this proposal on PCs, and when will you do this?

Where will the Equality Impact Assessment (EQIA) be published?

Angus Health and Social Care Partnership website and Angus Health and Social Care Partnership page on Angus Council website.
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CONTACT INFORMATION

Name of Department or Partnership:	Angus Health and Social Care Partnership
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Type of Document	
Human Resource Policy	<input type="checkbox"/>
General Policy	<input type="checkbox"/>
Strategy/Service	<input type="checkbox"/>
Change Papers/Local Procedure	<input type="checkbox"/>
Guidelines and Protocols	<input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>

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Signature of author of the policy: **Date:** 12 July 2023

Sally Wilson

Signature of Director/Head of Service:

Date: 12 August 2023

Eunice McLennan

Name of Director/Head of Service: EUNICE MCLENNAN

Date of Next Plan Review: July 2024