

Carers Act

Monitoring and Evaluation

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Update:

Today we'll cover:

- Carers Census
- Carers Census: Information Governance
- Monitoring and Evaluation subgroup



Carers Census

What's been happening?

- Have held a couple of events (in Glasgow and Edinburgh) and a webex session to discuss the census and possible methods of data collection
- Have surveyed all data providers asking for their views and preferences
- Provided updates at Carers Leads meetings
- Met with a couple of local partnerships and carers centres
- Working on getting IT systems written and in place
- Developed spreadsheet template for Carers Centres to use and held session last week to get some feedback on this
- Working on Information Governance documentation



Carers Census

What's been decided?

- For the first year 2018-19, data will be collected twice:
 - 1st April 2018 – 30th September 2018
 - 1st October 2018 – 31st March 2019
- For future years data collection will be annual
- Data will be securely transferred from Carers Centres and LAs to Scottish Government using the ProcXed system which is managed by the ScotXed team in Scottish Government
- Personal data (date of birth, postcode and gender) will be kept in a separate file from the census data and statisticians will not have access to any personal identifiable data.



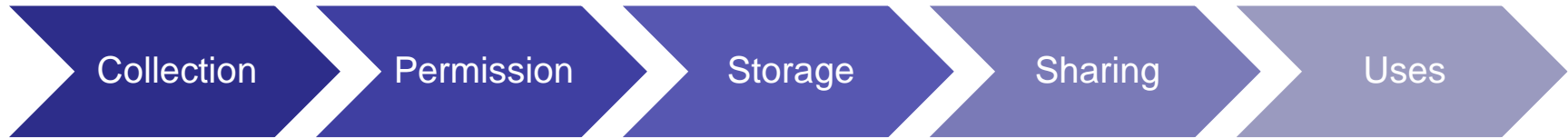
Carers Census

Information Governance

- With GDPR (General Data Protection Regulation), have been a lot of questions regarding Information Governance. Main questions are:
 - can we legally share personal data with SG?
 - do we need to get consent from Carers?
 - do we need consent from the person they care for?
- We have carried out a DPIA (Data Protection Impact Assessment) to address all these points and will make this available on the SG website.



Data Journey - summary



Administrative data collected by local partners LAs, HBs, IJB, Carers Centres.

Includes personal data – date of birth, postcode.

Special category personal data – ethnicity.

SG purpose is for Statistics and Research only. Therefore consent is not required.

GDPR Article 89(1) Statistics exemption.

Privacy notices are provided to share with Carers so they can understand how their data will be used.

Personal data is required to determine where same carer is known to LA and carers centre.

Data held securely and managed by ScotXed team.

NRS receive only the personal data.

When data is shared SG become data controller.

Analysis file is anonymised so statisticians never have access to personal data.

Outputs are subject to disclosure control so individuals cannot be identified.

Used only for statistics and research purposes.

Used to publish Official Statistics.

Used nationally and locally to support policy and service planning.



Data Journey



- Administrative data collected by local partners - LAs, HBs, IJB, Carers Centres
- Includes personal data – date of birth, postcode
- Includes special category personal data – ethnicity, disability
- Legal gateway for sharing:
 - Social Work (Scotland) Act 1968
- Lawful basis for processing:
 - Article 6(1) of the GDPR: for official functions
 - Article 89(1) of the GDPR: for statistical purposes
 - Article 9(2) of the GDPR: for public interest, research or statistical purposes

See DPIA for further detail.



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Data Journey



- SG purpose is for Statistics and Research only. Therefore consent is not required nor desired as carers opting out could skew statistics.
- GDPR Article 89(1) Statistics condition.
- Privacy notices are provided to share with Carers so they can understand how their data will be used.
- Carers centres and others can use these privacy notices or write their own based on these. These can be shared in a variety of different ways e.g. through leaflets, posters, newsletters, at time of assessment.
- There is no personal identifiable data collected for cared-for person.



Data Journey



- Personal data is required to determine where the same carer is known to LA and carers centre. The personal data is shared with NRS who index the data under trusted 3rd party model in line with good practice for data sharing. NRS do not have access to any of the census data or the special category personal data.
- Data held securely and managed by ScotXed team in Scottish Government,
- The Scottish Government is a central government department, GSI accredited network accredited to handle Restricted material. The Scottish Government is an ISO27001 compliant organisation and as such have business continuity plans, including a risk incident register.
- Data will be held by Scottish Government in a database protected by network security and access is permitted only for those whom it is authorised and necessary to fulfil their functions.
- Because data is only for statistical and research purposes, the pseudonymised Carers Census data will be kept indefinitely. The personal data used for indexing will be subject to regular review.



Data Journey



- When data is shared **SG become data controller** for the Carer Census data.
- Analysis file is anonymised so statisticians never have access to personal data:
 - CHI is encrypted on upload to ProcXed system
 - Only month and year of birth is included in analysis file
 - Postcode is replaced by datazone and other geographies for analysis file
- Outputs are subject to disclosure control so individuals cannot be identified.
- The Scottish Government fully comply with the Code of Practice for Official Statistics.

<https://www.statisticsauthority.gov.uk/code-of-practice/>



Data Journey



- The Carers Census data can only be used only for statistics and research purposes.
- We will use the data to publish Official Statistics which will be available publically on the Scottish Government website.
- Scottish Government will use analysis of the data to support policy development.
- Expect that locally data will be used for policy development and service planning.
- Data can be shared with other bodies e.g. academics for statistics and research purposes only and subject to relevant permissions and approvals being in place.



Monitoring and Evaluation Group

- Work so far:
 - Carried out Evaluability Assessment and developed Theory of Change model:
 - Currently considering what data is available to measure outcomes set out in theory of change
 - Considering what gaps there are in the evidence base – whether more research is required.
 - Next meeting of group is on 7th June 2018

<http://www.gov.scot/Topics/Health/Support-Social-Care/Unpaid-Carers/Implementation/Carers-scotland-act-2016/monitoring-and-evaluation-subgroup>



Carers Act Parts 2-6

Adult Carer Support Plans and Young Carer Statements:
 - duty to prepare
 - content and review
 - provision of information
 - continuation of YCS

Provision of support:
 - local and national eligibility criteria
 - duty to provide

Carer involvement

Local carer strategies
 -preparation, publication and review

Information and advice for carers
 -information and advice service
 - short breaks services statements
 - Carers' charter

Activities

Involvement of carers as an equal partner at a strategic planning level.

Reflection of carers needs in local service planning and delivery.

identification of carer's needs and personal outcomes through a person-centred approach.

Agreement and action amongst local partners re their strategic role in relation to carers

Availability of local information on advice and support services to all carers.

Individual carer outcomes

1. Carer's views in relation to the cared for person are taken into account.

2. Carer is actively involved in the preparation and review of their assessment.

3. Carer is equipped to continue in their caring role.

4. Caring responsibilities reflect carer's needs and wishes.

5. Young carer has inappropriate caring responsibilities removed.

6. (Individual) carer can obtain relevant, understandable and usable advice.

Carer population group outcomes

7. Increased numbers of population providing care are identified.

8. Increased numbers of "hidden" young carers are identified, assessed and supported.

9. Increased proportion of carers satisfied with caring role.

10. Fewer young carers undertaking inappropriate caring responsibilities.

11. Increased proportion of carers who feel more confident and supported in their caring role.

12. Increased proportion of young carers who feel supported to achieve their educational potential.

13. Increased proportion of carers who feel more able to manage their caring role.

14. Increased proportion of carers able to have a life alongside caring.

15. Increased proportion of young carers able to participate in social, recreational and therapeutic opportunities.

16. Increased proportion of carers who feel better informed and more empowered about issues relevant to their caring role.

Population level outcomes

17. Carers have improved health and wellbeing.

18. Carers experience improved economic/ financial wellbeing.

19. Carers feel valued within their community.

20. Reduced inequalities
 - between carer groups
 - between carers and non-carers e.g. health, employment etc.

21. Our local communities are more resilient.

Key assumptions: 1) People (adults and young people) providing or intending to provide unpaid care are identified. 2) Young carers are seen as children and young people first and foremost and are relieved of inappropriate caring roles.

Any Questions?



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