

Draft Respite Guidance – A Summary

Background to the Guidance:

The Guidance replaces the 1996 respite guidance. Its purpose is to help local service planners improve respite provision in line with the overall principles of enabling self care and working with carers as partners in care, by:

- improving respite planning;
- shifting the balance towards preventative support; and
- personalising support to improve outcomes both for carers and those with care needs.

Actions and Expected Outcomes:

- strategic approaches to local planning, delivery and evaluation of respite and short breaks;
- carer and service user involvement in determining the shape, direction and level of provision of local respite and short break services;
- greater choice, flexibility and equity in the provision of services; and
- carers and service users feeling supported by the respite and short break services provided (linked to proposed National Outcome Measures).

Strategic Planning

Strategic plans for respite should set out a systematic joint approach for the delivery of planned and emergency respite. Plans should be based on:

- A shared vision setting out the shape and direction of service planning
- Clearly stated targets for improving services
- Multi-agency development and delivery, involving local authorities, NHS, carers and service users, voluntary sector and service providers
- Local needs, including feedback from service users and carers

Information Provision

Access to information is key to assist carers and service users make informed decisions about respite services and should include:

- What services are available and how to access them
- Assessment procedures
- Charging policies and eligibility criteria
- Where to go for more support

The methods of communicating information should be set out in local strategies, including NHS Carer Information Strategies

Eligibility Criteria

Partnerships should publish clear eligibility criteria, based on the outcomes of assessments. Both planned and emergency respite should be:

- Focused on prevention

- Available for those most at risk.
- Designed to enable carers to stay in employment

Carers and service users should be involved in the development and review of eligibility criteria and priorities

Indicators of Good Respite (Appendix A)

- based on thorough assessment and on-going review,
- appropriate to the needs and circumstances of the carer,
- appropriate for the age, culture, and level of need of the care recipient,
- able to maintain or improve the well-being of the care recipient,
- delivered by appropriately trained and caring staff,
- affordable, and
- reliable.

Examples of Good Practice (Appendix B)

This annex offers guidance on the variety of approaches that can be taken to planning and delivering respite. Including:

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| • Breaks in a care home | • Community based activities |
| • Breaks for young carers | • Breaks at home |
| • Breaks in the home of another individual or family | • Day care |
| • Providing equipment or adaptations to facilitate respite | • Holiday breaks |
| • Involving carers and service users in respite planning | • Respite in supported housing |
| • Self-Directed support for respite | |

Respite Needs of Specific Groups (Appendix C)

It is important to recognise there are many issues that effect carers and their need for respite.

Following are some of the main factors, but this list is not exhaustive:

- Those caring for a long time
- Adults living with older parent carers
- Carers of disabled children
- Carers of people with a terminal illness
- Carers suffering stress
- Caring relationships under pressure
- Carers with multiple caring roles
- Young carers

A full copy of the guidance will be available at the meeting, or you can request one from Claire Cairns by phone: 01786 825529 or by e-mail: coalition@carersnet.org. If you wish to submit your own comments regarding the guidance, you must first request a Respondent Information Form from Julie Wotherspoon at julie.wotherspoon@scotland.gsi.gov.uk