SHARED CARE SCOTLAND

THE LASTING DIFFERENCE
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Healthcare Improvement Scotland

IMPROVING VARIETY AND CHOICE IN SHORT BREAKS

2022-2023 funding and support programme
LEARNING REPORT

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FOREWORD

We are delighted to present this evaluation report on our Promoting Variety 'test of change' programme. The programme was designed to enable local partnerships to apply the principles of our original Promoting Variety market facilitation framework to address identified gaps in short breaks provision within their communities.

Anchored by the principles of co-production and co-design, this programme aims to ensure that solutions for short breaks are created in partnership with carers, enabling them to access breaks in ways that are both meaningful and beneficial to them.

This report is an intricate tapestry of insights, drawn from the year-long programme involving multiple stakeholders. We collaborated with seven local partnerships, including carer organisations, service providers, commissioners, and the Health and Social Care Partnerships. Our collective efforts sought to meet five key learning outcomes, aimed at enhancing local intelligence, fostering co-production, building capacity for ethical commissioning, ascertaining effective methods for provision, and contributing robust evidence for policy development.

In the chapters that follow, you will find detailed evaluations based on the three-stage process of market facilitation which was the bedrock of our Promoting Variety framework. We began with a stage dedicated to intelligence gathering, proceeded to innovating ideas, and culminated in a phase where these ideas were put to the test. Each stage was accompanied by targeted funding and support, reinforcing our commitment to turning theoretical models into tangible outcomes for our carer communities.

As you read this report, we encourage you to not just examine the outcomes, but also consider the avenues it opens for future endeavours. It is through the marriage of policy, practice, and persistent collaboration that we can manifest the change we aspire to see, ensuring that all unpaid carers have access to the short breaks they so crucially need.

We extend our grateful thanks to Graeme Reekie of The Lasting Difference for his expert guidance throughout the duration of this project. We also thank everyone who has engaged with and contributed to this pivotal body of work. Your involvement is an essential component in the continued journey towards a more supportive, equitable, and resilient future for short breaks provision in Scotland.

Don Williamson,
Shared Care Scotland

Des McCart,
Healthcare Improvement Scotland

EXECUTIVE SUMMARY

The Promoting Variety programme and its partners have tested and demonstrated ways to increase variety in short breaks. These were sometimes limited by capacity within systems, services and carers' lives, however, sustained change is already evident in local processes, partnerships, peer support models and practice. The learning here can be applied by others.

- Generating intelligence and using data helps make decision-making better.
- Involving carers in developing ideas and coproducing their implementation increases choice and control.
- Facilitating peer support creates capacity and lasting impact.
- Commissioners and providers working together improves understanding and responsiveness.
- Proper partnership working fosters shared accountability.
- Funding provides space for innovation, but intent is what counts.

Together, these things improve outcomes and ensure sustainable support. They promote variety.

INTRODUCTION

This report presents the learning from a year-long programme of funding and support developed with seven local partnerships involving carers, carer organisations, commissioners, service providers and others. It is based on project reports, illustrated with quotes from carers and other partners.

The programme had five intended learning outcomes:

- Increased intelligence about the choice and availability of short breaks locally.
- Increased coproduction of short break planning and provision in local areas.
- Increased ability for Health and Social Care Partnerships (HSCPs) to implement ethical and collaborative commissioning.[1]
- Increased learning about what works for improving short break variety and choice.
- Better evidence to help inform the development of policy and legislation, including the 'right to a break' proposed in the Independent Review of Adult Social Care.[2]

Part Four of the report explores the ways in which these and other outcomes were achieved. In terms of the final outcome, the key learning is that any statutory right for carers to have a short break is only meaningful if the right breaks are available and if people have choice. To make this a reality, current commissioning approaches, provision and mindsets need to change.

1 Ethical commissioning is defined in Scottish Procurement Policy Note 7/2021. Collaborative commissioning is explored in these CCPS guides.

2 Now referred to in Part 3 of the National Care Service Bill.

The three stages of market facilitation

INTELLIGENCE

Stage 1: Gathering intelligence about existing provision, gaps, aspirations, and available resources.

IDEAS

Stage 2: Developing plans and ideas to achieve the right balance of short breaks provision.

IMPLEMENTATION

Stage 3: Taking action to deliver the market required by carers, communities and commissioners.

BACKGROUND

Promoting Variety[3] is a systematic guide to improving the choice of short breaks for unpaid carers by shaping services, markets and systems (a process known as market facilitation). Accompanying research[4] and learning events since 2020 have highlighted how Health and Social Care Partnerships (HSCPs) are improving short break planning and provision – and what more could be done.

In 2022 this led to a programme of funding and support to help local partnerships to apply Promoting Variety in practice. It was structured around three stages of market facilitation.

Stage 1: Intelligence – May to August 2022
Local partnerships formed to gather intelligence on short breaks. 27 organisations attended information events, with eight partnerships going on to submit Stage 2 proposals.

Stage 2: Ideas – October to December 2022
Six local demonstration projects were each awarded £10k and support to develop innovative ideas – new models of short break provision that meet clearly identified outcomes.

Stage 3: Implementation – January to July 2023
Projects were awarded up to £40k additional funding to test the effectiveness of their planned ideas.

Partnerships who did not wish to access funding, or were not ready, could follow the journey via learning exchanges.

3 www.sharedcarescotland.org.uk/resources/tools/promoting-variety/

4 www.thelastingdifference.com/wp-content/uploads/2023/09/SCS-Implementing-Variety-2021-WEB.pdf

Timeline

2017

Initial scoping event with commissioners and carers' leads

2018-2019

A think tank of commissioners and carers' organisations creates Promoting Variety

2020

Promoting Variety published

2021

Research on the guide's implementation. Guide updated in response to this, the Independent Review of Adult Social Care and the pandemic

2022

Funding programme launched, intelligence gathering and idea development begin

2023

Funding programme concludes following Stage 3: Implementation

PROMOTING VARIETY PRINCIPLES

The programme's design and facilitation modelled Promoting Variety's core principles:

- **The voice and involvement** of carers and cared-for people should inform each stage.
- **Outcomes** should drive commissioning and procurement, not the other way around.
- **Short breaks** should be defined and interpreted as broadly as possible.
- **Market sustainability** is a responsibility shared by commissioners and providers.
- **Commissioned support** is one part of a wider system, and should complement it.
- **Risks** should be evidenced and discussed openly.
- **Innovation** requires time and space for creative thinking about how to meet outcomes.

THE (CONTINUING) NEED FOR PROMOTING VARIETY

"Carers [are] experiencing a loss of services, replacement care and access to respite cover for the cared-for person. Additionally, there is a lack of flexibility around using SDS budgets for the carer and a lack of ability to take time out to future plan and take some control of their daily lives."*

Promoting Variety is a response to the difficulties carers experience in accessing appropriate breaks. The pandemic exacerbated the existing challenges of rising demand and declining public budgets. Unprecedented numbers of carers registered for carers centre support,[5] while respite services closed and short break providers strained to sustain provision. Carers with individual budgets struggled to find opportunities to use them.

The programme sought to understand these challenges better. Following implementation, partnerships identified the following issues.[6]

- **Increased pressure on carers**: many caring roles have become more intensive post-pandemic, particularly for those who have lost regular residential overnight respite. Parents who care for disabled children (parent carers) were identified by three of the partnerships as a high-priority group. Parent carers reported lacking regular breaks from caring, little time together as parents, few opportunities for peer support and shortages of skilled, confident childminders or babysitters.

***This quote, and those that follow, comes from partner project reports.**

5 www.careinspectorate.com/images/documents/6923/Unpaid%20carers%20report%20December%202022.pdf

6 These are consistent with findings from the recent review of the Time to Live short breaks fund.

- **Lack of replacement care**: carers highlighted the lack of opportunity to simply 'get out of the house' for everyday activities such as shopping, medical appointments or seeing friends and family.

- **Lack of information and support**: carers commonly prioritise the needs of the person they care for above their own. They may not know what they are entitled to, how to seek support, or want to share their story repeatedly in order to access it. It can also be difficult to identify and describe what might be the right break, and in one partnership choosing a direct payment also brought nervousness on how or whether it could be spent on short breaks.

- **Reduced workforce and provider capacity**: pressures on providers of care-at-home and other services (e.g. cost of living, recruitment) mean that they lack capacity for service delivery, innovation and development.

Other needs and challenges are set out in Part 5 where capacity for implementation is explored.

PROJECT DETAILS

Seven partnerships were selected to be part of the programme, six of whom received funding. Their main activities and aspirations, identified in Stage 1 (Intelligence), are summarised below.

ABERDEEN

Alternative and enhanced respite

"We are committed to offering a market of choice to unpaid carers and this can only happen if all those involved in supporting unpaid carers and those they care for collaborate to develop an approach."

The Aberdeen partnership between the HSCP, private and voluntary sector service providers tested two novel approaches for carers of older people with high-level needs (e.g. individuals significantly impacted by dementia).

Technology-enabled replacement care (overnight respite)

Virtual reality (VR), along with fun visual and auditory props, was used to enhance residential nursing home respite experiences. Based on plans made by the carer and cared-for person, VR gave a personalised respite experience e.g. simulating past holidays, concerts, or experiencing similar activities to those the carer was having on a break.

Carer respite: bookable breaks

An accessible two-bedroom property was rented within a retirement community operated by a social landlord. Community links and wellbeing opportunities were provided by the local voluntary sector carer service. Flexible, responsive visiting care, commissioned via a 'PIN' (a Prior Information Notice) was available where needed, e.g. in a joint break for the carer and cared-for person.

EAST RENFREWSHIRE

Timebanking and sitter service

"Parents spoke about how their child's additional needs meant that they found it hard to get a babysitter with the necessary skills, confidence and availability. The parents proposed a time exchange whereby they could babysit for each other."

This partnership between the local HSCP, Carers Centre and Voluntary Action service aimed to provide breaks through a 'sitter service' where trained volunteers provide companionship to a cared-for person. Parent carers also proposed a timebanking scheme for carers who would be willing to babysit for others whose children have similar support needs. A Volunteer Coordinator was employed for 12 months for testing and developing these ideas.

Five carers were also offered an SDS Option 1 direct payment of £2,000 and supported by the Carers' Centre short breaks worker to consider creative ways of getting breaks. The Carers' Centre held the budget and paid invoices, removing a potentially complex barrier for carers.

"We want to reduce the social isolation of carers and individuals with support needs…We also want to explore non-statutory supports and build on the community spirit and volunteering opportunities that are a legacy of our community's response to the pandemic."

Initial learning is that although timebanking is not for every carer, parent carers and young carers are particularly receptive to the idea.

EDINBURGH HEALTH AND SOCIAL CARE PARTNERSHIP

Short break hub

"We believe that if we test a model with a small number of families we can scale it up to reach many more."

This project, one of two partnerships developed in the city, has shown how an existing 'Short Break Hub' model for carers of people with a learning disability can equally meet the needs of people with a physical disability.

Supporting people to understand the variety of short break options available to them was an important part of this, alongside other brokerage roles such as sourcing replacement care and coordinating relationships between families and service providers. Other market facilitation roles emerged, including advice to social work practitioners (e.g. on SDS Options and Personal Support Plans) and partnering existing and potential providers to develop short break provision.

EDINBURGH VOLUNTARY SECTOR

Cooperative and peer support

"Carers, particularly carers in high-end caring roles with intense personal care or one-to-one caring commitments, have shared with staff how they are struggling to access any kind of short break without linked respite provision in place for the cared-for person."

This Edinburgh partnership was a collaboration between three charities. Edinburgh Voluntary Organisations Council (EVOC) coordinated the partnership, with each of the other partners leading a different strand.

Edinburgh Development Group worked with its existing cooperative for parent carers looking after a young adult with a learning disability (Our Future Our Hands). This allowed carers to review their involvement in the cooperative, re-establish links with each other and support each other with future planning, identifying challenges, changes and possible solutions.

Care for Carers tested peer support in a mixed group of carers and the people they care for (with a range of disabilities). Many of these carers had lost statutory break provision, local service support and/or had not had a break away with their cared-for person before.

The partnership matched the Promoting Variety funding with monies from Edinburgh HSCP. Learning is being integrated into a report on EVOC's related action research project, the Carers Landscape Edinburgh Action Research Project (CLEAR).[7]

7 www.evoc.org.uk/projects/carers-landscape-edinburgh-action-research/

HIGHLAND

Workforce development and digital inclusion

"Innovation will be developed by hearing from service users, talking to carers and supporting referrers to have the time to engage in detailed conversations with carers. This will ensure that individual short breaks are well catered to the carer's individual circumstances."

This partnership, hosted by NHS Highland, involved carers, carer organisations, adult social care staff, NHS Community Engagement team and NHS Carers team. It supplemented Highland's existing Short Breaks Scheme which provides opportunities for carers to get a personalised break via an SDS Option 1 payment.

The project used different approaches to understand how best to realise good outcomes for carers.

- IT equipment was provided to four carers to enable them to be part of the core project team.
- A series of 'vignettes' – real-life examples of creativity in action – were developed to help people to think differently about what a break can mean.
- 'Carer Conversations' training was delivered for around 60 staff in different agencies to explore how conversations can be structured to bring out detailed information on carer outcomes, develop productive working relationships and lead to more effective short breaks.
- Carers' events were hosted where carers could hear about the services and providers available and be introduced to the Short Breaks Scheme.

NORTH AYRSHIRE

Intelligence and involvement

"We recognise the critical role of carers and the need to provide support which meets their needs and those of the person they care for… (Promoting Variety) provides a framework that could help us to make best use of the existing and recently created opportunities."

North Ayrshire HSCP's Learning Disability Service coordinated this partnership with external service providers and internal HSCP teams including Day Opportunities; Self Directed Support and Unpaid Carers; and the Finance and Transformation Team.

As this was part of a broader change programme around day opportunities, the partnership did not seek Promoting Variety funding. However, it took part as an equal member, working and learning alongside the other partnerships.

Its focus was engaging with clients and carers, building relationships and getting a better sense of their short break aspirations. From there, partners are exploring the existing market and aim to implement a small number of tests of change.

PERTH AND KINROSS

Peer support and activity programme

"We had identified a gap in services… parent carers… being able to access a calendar of regular short breaks…(they) didn't feel enough of these types of peer support groups were available in P&K and those that were weren't very accessible."

The local Carers' Centre was the lead partner in this partnership involving other carer organisations and the HSCP. The aim was to work alongside parent carers and partners to develop and deliver accessible short break opportunities that best meet parent carers' needs.

A member of staff was recruited, leading a far-reaching consultation exercise about the type of short breaks parent carers would benefit from. This led to a calendar of short break opportunities, including activity days; gym sessions; wild water swimming; picnics; therapeutic massage; and first aid training. A Facebook group, moderated by project partners, has proven a popular place to exchange information, with a new dedicated page on the PKAVS website also being well used.

PROGRAMME OUTCOMES

The programme had five learning outcomes.

The first four are set out along with key findings below. Together, these lead to the fifth outcome: generating evidence to inform the development of policy and legislation, including the right to a break.

OUTCOME 1

Increased intelligence about the choice and availability of short breaks locally.

OUTCOME 2

Increased coproduction of short break planning and provision.

OUTCOME 3

Increased ability for HSCPs to implement ethical and collaborative commissioning.

OUTCOME 4

Increased learning about what works for improving short break variety and choice.

OUTCOME 5

Generating evidence to inform the development of policy and legislation, including the right to a break.

Partnerships could work directly towards the outcomes and/or choose their own, based on the local needs and aspirations identified during the Intelligence stage.

Three partnerships adopted their own outcomes, see 'Additional outcomes' below. This adaptiveness, alongside the expectation to report on what works and what doesn't, is an important element of ethical, collaborative funding.

OUTCOME 1

Increased intelligence about the choice and availability of short breaks locally

"I'm feeling so much better in myself which obviously has a positive impact on my child too." – Carer feedback

1. Information and validation are the foundation

"Talking with others in a similar position to them was…hugely validating and as a result there was a collective understanding that looking after themselves would support their own health and wellbeing which would only benefit their caring responsibilities."

All three partnerships that tested the idea that peer support would lead to increased choice had their assumptions confirmed. Peer support provided reassurance to carers that they weren't alone and validated their right to a break. It increased the flow of information about and ideas for breaks. For these reasons, time spent with peers was sometimes seen as a break in itself. One project noted however that structured, developmental activities were more likely to be acceptable to carers.

"(Carers) have a lot of guilt attached to spending time on themselves, however training or educating themselves to better support the person they care for was something that they would readily set time aside for."

> "I'm feeling so much better in myself which obviously has a positive impact on my child too."
>
> **– Carer feedback**

2. Examples open up possibilities

Highland case study

Highland's creation of 'vignettes' illustrates how practical examples of creative breaks can help carers and practitioners to think more flexibly.

"One practitioner identified the difference it had made to one family when the carer used their short break funding to buy driving lessons. Once the carer was able to drive, this had unintended outcomes of calming the cared-for person, providing a break for other family members when the carer took the cared-for person out for a drive, and providing more flexibility in managing time for the carer… some participants were surprised that short breaks funding could be used in this creative way."

Highland is also using carers' events to share information about services available locally. Examples of creative breaks have in turn helped to publicise these.

"This was an effective and targeted event which saw around 40 unpaid carers engaging directly with service providers… As well as securing basic announcements of the event in a number of local papers, there was a full-page feature in the Inverness Courier about a local unpaid carer and their funded trip to buy a prize ram. This ran in advance of the event, encouraging people to attend."

3. Brokerage and peer support increase carers' short break options

Whether in groups or one-to-one, supporting people to shape what a break really means for them led to a wider range of different options being taken up.

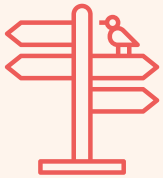
This isn't just because carers are better informed. Outcome-focused conversations can also provide evidence that make it easier for social work teams to understand and approve what was being asked for.

"At our first point of contact a worker goes through all options of SDS and identifies which option would meet an individual and carers needs…We can evidence this in the personal support plan and have seen a greater variety of short break options being approved in locality teams, especially evident with those opting for a Direct Payment."

Key points:

The foundation: information and validation

Examples open up possibilities



Brokerage and peer support increase choice

OUTCOME 2

Increased coproduction of short break planning and provision

Carer representation in partnerships was a requirement for how projects operated. One partnership focused on discrete carer engagement events but intends to build its next steps around the learning this has generated. Otherwise, partnerships involved carers in two main ways, both of which are valuable examples of person-centred, community-led planning and collaborative commissioning.

1. Carers as core partners and co-designers

Three partnerships involved carers as core members of planning groups. Highland provided carers with IT connectivity across the region. The example from East Renfrewshire below shows how partnering carers generated insights and innovations in service design that wouldn't have otherwise happened.

East Renfrewshire case study

Promoting Variety was discussed at a local Short Breaks Working Group, giving carers the opportunity to discuss what good short break provision would look like. It was carers at this group who highlighted the challenge in relation to replacement care and having the opportunity to "get out of the house," for activities such as shopping, medical appointments, or simply a coffee.

This aligned with feedback from parent carers who spoke about the challenges having a night out as a couple, "like all our friends do." The parents spoke about how their child's additional needs meant that they found it hard to get a babysitter with the necessary skills, confidence and availability. The parents proposed a time exchange whereby they could babysit for each other.

Both these ideas were explored further with carers and stakeholders to consider how volunteers could support carers in ways other than providing a 'sitter' service. Activities such as gardening, cooking, cleaning, shopping, driving and dog-walking were mentioned as causing carers stress, where support could ease the pressure of caring.

We then invited groups of local carers to design the volunteer sitter service model. Through the engagement we gained valuable feedback that was incorporated into the design of the service. This included needs and expectations from the service and volunteers, (long-term commitment, consistency), required training, protection requirements, and matching and induction process.

Further consideration was given to using timebanking approaches with carers and possibly incorporating elements of timebanking with a sitter service. Based on feedback, our focus for this approach has shifted to parent/guardian carers and youth carers. We continue to engage with both groups to explore how carers could support each other through informal peer support networks using a timebanking ethos.

2. Groups of carers planning their short break programmes

"We dealt with some very difficult issues with respect and care and [the organisation's] facilitation helped us make real progress." – Carer

Two partnerships brought peer support groups together and provided facilitation for carers to design specific breaks or activity programmes. In both cases, carers tailored the programmes they took part in by identifying outcomes and agreeing what they needed from breaks, activities, events, venues and support.

Ahough the model of carer involvement that emerged was different from that originally envisaged, it still achieved the intended outcomes. It required large amounts of time, skill and sensitive facilitation, particularly because breaks were designed not just for carers but for the people they care for too. Facilitating peer support has proven to be an effective way to build carer capacity and sustain the impact of projects into the future – see Part Six below.

"We have learnt a lot about how much more complex organising, planning and facilitating these shared carer and cared-for person breaks are than carer only breaks." – Carer organisation

OUTCOME 3

Increased ability for HSCPs to implement ethical and collaborative commissioning

There is good evidence from four of the six participating HSCPs that they are now more able to implement ethical commissioning, in three main ways.

1. Embedding collaborative commissioning in HSCP strategies and policies

"Short Breaks are now one of four priorities of local Collaborative Commissioning work that will focus on greater use of SDS Option 1 and the use of volunteers."

Local Carer and Self-Directed Support Strategies are where programme learning has most commonly been embedded. For example, in some areas parent carers have been newly identified as a group requiring targeted support. Other developments include support to service providers.

One area identified the financial risks service providers face with payment in arrears and has begun to offer upfront payment. It also plans to support service providers to offer shared, standardised induction training, addressing recruitment problems efficiently.

"The Promoting Variety Project has developed the networks between carers services and with carers in such a way that new possibilities have opened up into both the development of a new carers-led Carers Strategy and to pursuing a new approach to Collaborative Commissioning across the sector."

2. Workforce development

Three areas identified workforce development as a key way to embed the principles of Promoting Variety and a wider move towards person-centred, outcome-focused commissioning. Specifically, they focused on the 'good conversation' approach that puts personalised outcomes at the heart of assessment, planning and service delivery.

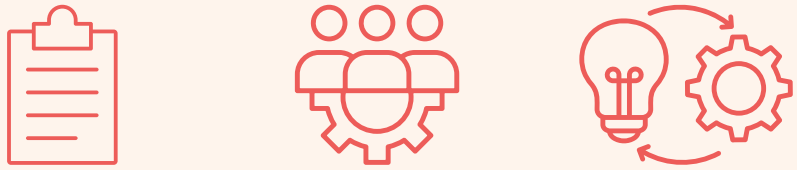
While this is welcome, it also demonstrates how far away the 'right to a break' proposed by the National Care Service Bill[8] is from being realised. Outcomes, personalisation and collaboration were required by the Self-Directed Support (Scotland) Act[9] 10 years ago. Consolidating the basic skills required to facilitate these rights should not be dependent on separate programme funding. There needs to be local investment in time and training to facilitate outcome-focused conversations.

3. Promoting Variety in practice

"We don't think traditional competitive tendering will help realise the shape and quality of services modelled [in this programme]. Rather we would like to develop this collaborative approach built upon a shared understanding of principles and priorities."

Partnerships have proactively shared their progress and learning in ways that help to ensure a lasting legacy (see also Part Six, Sustainability). These include supporting social work teams to facilitate carer choices, forming stronger working alliances with communities, and informing strategic planning and partnership groups (e.g. Carer, Disability and Day Service Forums).

Implementing ethical and collaborative commissioning



Embed in HSCP strategies and policies

Develop the workforce

Embed in practice

8 www.parliament.scot/-/media/files/legislation/bills/s6-bills/national-care-service-scotland-bill/introduced/bill-as-introduced.pdf

9 www.legislation.gov.uk/asp/2013/1/contents/enacted

OUTCOME 4

Increased learning about what works for improving short break variety and choice

Partnerships identified several factors that influence the variety and choice of available breaks, explored below in order of their prevalence in end-of-programme reports.

1. Partnership

"As a result of this project strong and lasting partnerships have been developed …These partners have been a great source of support."

The programme encouraged more local partnerships, particularly between carers' organisations, service providers and colleagues from different HSCP teams. New relationships have been formed that will give carers access to more services and opportunities. For example, HSCPs connected with existing and new providers to support them to think creatively about business models and service design for short breaks. This is market facilitation in action.

Partnerships often found that even when capacity limited other organisations' ability to be core programme partners, they willingly promoted the opportunities and helped reach new audiences. Highland hosted events where carers could meet service providers in person, while Edinburgh HSCP assigned a link person for organisations to meet regularly, share information and build stronger relationships for carers.

2. Safety and trust

"The Project Team has…come to acknowledge that occasionally carers may feel angry about their relationship with services – and for many of these this is a result of a feeling that they have had to fight for services."

Safety and trust were paramount for carers. In one area, people who have received support for some time are more likely to be more confident using services than those with new or progressive conditions. Partnerships noted that trust is earned. This takes time and can be addressed in different ways.

East Renfrewshire carers wanted consistency and continuity from volunteers, so volunteers were asked to commit to at least six months in the role. The partnership also ensured volunteers received good quality induction, training and support, for example on different health conditions. It then used social media to further build trust in the programme by sharing carers' and volunteers' stories appropriately.

Highland commissioned a small company to run a 12-week creative wellness project for carers to explore their experiences differently and seek new perspectives.

"Evaluations showed significant improvement in mental wellbeing for some family carers. However, when trust in services and support has been broken the deep trauma-based responses mean a longer process towards recovery of self-worth, self-esteem and a sense of hope."

3. Brokerage – with service providers and with navigating internal systems

All six of the funded partnerships used some of their funding to provide additional staff time; five created a new post. Having a dedicated, independent point of contact helped to facilitate links between carers and services.

Edinburgh case studies: Short Break Hub

A carer wanted support to use Direct Payment funds for a family break. They had not had a short break for several years and did not engage with traditional services. Work with the carer helped them identify outcomes for the joint break including:

- relief from everyday housekeeping and caring for the family's health and wellbeing.
- the pleasure and reassurance of seeing the cared-for person taking part independently in an opportunity and confidently socialising with others.
- eliminating separation anxiety, freeing them to follow their own interests.
- generating experiences among the whole family which could encourage more things to be done independently in future.
- the chance to relax and recuperate.

The Short Break Hub helped the carer to explore alternative short break options, find suitable accommodation and agree a price in line with what traditional services would have cost. They put together the Personal Support Plan and sent it on for approval, reassuring social work teams of the Hub's ongoing involvement supporting the carer with their Direct Payment.

Another carer wanted the person that they care for to join in activities with peers that would give them regular short breaks. The carer asked the Short Break Hub to manage their budget on their behalf as an Individual Service Fund (ISF). They identified the individuals' likes and dislikes and pooled their ISF to organise a group activity with other like-minded people. This helped nurture friendships and facilitated an overnight break together, sharing the cost of support staff.

The outcomes identified for the carer were:

- Knowing their loved one was safe, taking part in enjoyable activities and making and maintaining friendships.
- Having regular planned evening breaks and time for themselves.
- Building a relationship with a service who would provide future breaks.

By facilitating a short break in this way the Short Break Hub showed how pooling budgets can maximise a person's individual budget so they can achieve meaningful breaks and balance their outcomes with those of the person they care for.

4. Administrative support for Individual Service Funds (ISFs)/Direct Payments

Three partnerships offered practical administrative support to hold budgets and pay invoices for carers. This is significant: it removes the budget management that sometimes puts people off exploring all SDS options.

In Edinburgh, it enabled the HSCP to support smaller providers who have been unwilling to work with ISFs due to the amount of administration involved. By removing this burden, the service supported several smaller organisations to grow at a sustainable pace.

ADDITIONAL OUTCOMES

"The progress we made as a group went far beyond my expectations." – Carer feedback

Familiarity with outcome-based planning and reporting varied significantly among the seven partnerships. Three partnerships identified and reported against their own outcomes, including reduced social isolation and increased collaboration. The illustrations here show that individual, operational and programme-level outcomes should and can link together with ease. This is vital in shifting from procurement-led to person-centred commissioning.

Edinburgh voluntary sector partnership

Individual outcomes	Partnership outcome	Programme outcome
I feel less isolated since using the project	Increase the positive social impacts of a break on the carer and cared-for person.	Increased coproduction of short break planning and provision in local areas.
I feel more connected to my community		
I am more able to participate in community activities		

Edinburgh HSCP

Individual outcomes	Partnership outcome	Programme outcome
Carers have increased knowledge about SDS options for carers	Carers have improved access to replacement care options.	Increased intelligence about the choice and availability of short breaks locally.
Carers are better informed about short break options		
Carers have increased access to a range of short break providers		

CHALLENGES AND CHANGES

Three main themes emerge on the challenges with implementing initiatives (Stage 3 in the Promoting Variety cycle of market facilitation):

SYSTEM CAPACITY

SERVICE CAPACITY

CARER CAPACITY

> “Market shaping plans need to explore not just short breaks, but the replacement care that often enables them.”
>
> Promoting Variety guide

SYSTEM CAPACITY

Lack of replacement care

"The biggest challenges parent carers told us about when we set out on this project around the lack of respite support for the cared for still very much exists."

Replacement care was one of the key challenges for carers and commissioners when Promoting Variety was developed in 2018-2019 and it remains so. Many carers can't access short breaks unless there is somewhere or someone to look after the person they care for. Partners identified several factors that influence this, including:

- Lack of awareness of short breaks among carers and professionals.
- Limited social work understanding of, or flexibility with, short break budgets.
- Recruitment challenges across the system, with one area reporting that as many as seven in 10 staff leave soon after starting in post.

Other factors will include lack of suitable, available provision; demand outstripping supply; reduction in places due to service closure or staff capacity (due to increasing costs and diminishing income); changes from commissioned services to spot purchasing and a rise in emergency placements meaning fewer places for planned respite breaks.

None of these obstacles on its own is insurmountable, but together they require the system-wide, market shaping approach that Promoting Variety encourages.

The compromise that some partnerships found was for the carer and cared-for person to attend the short break or activity together. This was not always the best solution: it resulted in fewer and less personalised breaks for carers and cared-for people despite requiring more staffing resource by service providers.

Existing system requirements

"The challenges for us have come from internal systems and structures that are embedded into practice. Although our team has begun to challenge a lot of these systems, it will take a wider cultural shift within the partnership to see significant change."

Existing procurement practices limited the variety of service providers that could be attracted to an area and the ease with which they could set up to provide short breaks. To address this, Promoting Variety helpfully distinguishes between 'red rules' and 'blue rules'. The former are those that are required by law, the latter stem from custom and practice and can be changed. For example, two HSCPs worked with their finance colleagues to change systems that inhibit outcome-based commissioning.

Three partnerships noted that the lack of choice available to carers was a result of social work practice. One commissioner noted that the way social workers present respite options shapes people's thinking and expectations. Social work teams' perceptions of what was an 'allowable' use of someone's personal budget also limited choice. It was even common for different teams within the same local authority to have different understandings of and appetites for the personalisation that should be guaranteed by Self-Directed Support.

One partnership has identified Individual Service Funds as a potentially simple solution to these challenges but notes that developing the accompanying contracts for this will be a lengthy process.

"Fundamentally, there remain challenges to changing the ethos of practice in a way which promotes flexibility, choice and personalisation."

SERVICE CAPACITY

"External providers who could have supported this now tell us they are at full capacity and anyone wishing support will have to join an ever-growing waiting list."

Two partnerships who used the funding to enhance the support already on offer, experienced an increased number of referrals and demand as a result. It is positive that more carers are being identified and offered support, however, partnerships also found that referrals are increasing in complexity and/or come when carers are at crisis point, meaning it takes more staffing and resource to support them. These factors resulted in support being diluted or rationed, for example by closing the doors to referrals for a period or reducing the amount of grant available for breaks. Long term, one partnership anticipates limiting its finite resources only to those who are most in need.

Recruitment

Staff and volunteer recruitment were both found to be challenging. For example, one partnership seconded staff from another team to the project, having had no responses to a job advert. Other partnerships also used this model, with one noting that being able to assign an experienced member of staff saved time on induction and contributed to the success of the project.

Carer engagement and consultation fatigue

Three partnerships found a lack of trust affected relationships with carers. This stemmed either from carers' previous experiences of feeling let down by services (see Outcome 4 above) or from the concerns that pilot projects were intended to replace statutory services. One partnership also noted that carers' groups are often in demand for consultation and may not have capacity to respond to all the requests they receive.

Partnership

Although the programme required a partnership approach to planning and delivery, some found that not all the original partners were able to participate as fully as planned, due to pressures of workload, recruitment and demand. One, however, reported that its members embraced the opportunity to reach new carers and professionals and that shared accountability for success was a key ingredient.

"Everyone feels accountable and aware of time/skills necessary for planning events and completing the project report."

CARER CAPACITY

"I feel tired. Not because of the activities, we loved them, but more mentally exhausted. I need to work on fears of being judged about not always coping." – Carer feedback

Even when carers were interested in a partnership's project, they didn't always have the energy or capacity to take part. The Edinburgh voluntary sector partnership's residential break for carers and cared-for people identified some important learning in this regard.

"Carers may underestimate how much support they might need with their caring roles…For example, cared for people with hidden disabilities and complex disabilities where the level of care needed is not immediately apparent. Unless the carer feels completely safe with the replacement care and/or carers, they might not take up a break offer for themselves. Or [they may] go together if there is any uncertainty over the environment or people around them."

SUSTAINABILITY

The programme did not require that projects continue beyond the short-term funding available. However, by emphasising partnership and learning it sought to have a sustainable impact. Partnership reports show strong signs of sustainability in terms of embedding Promoting Variety and making practical changes in local:

- **PROCESSES**
- **PARTNERSHIPS AND COMMUNITIES**
- **PEER SUPPORT FOR CARERS**
- **SYSTEM-WIDE APPROACHES**

PROCESSES

"Increasing emphasis was…placed on the importance of trying to support a larger number of carers with smaller scale, more creative uses of the available resource."

Many new procedures were developed and embedded as a result of the programme, ensuring that support for carers and their outcomes can be sustained into the future. Examples included:

Carer resources

- Short break websites, information and FAQs
- Streamlined or simplified carer assessment forms
- Outcome planning and evaluation tools

One partnership also plans to develop an animation which will be voiced by carers and will provide tailored information and advice to other parent carers.

Staff and volunteer resources

- Volunteer and training courses and handbooks
- Carer and volunteer matching process
- Risk assessment forms

Service resources

- Referral processes
- Eligibility criteria
- ISF budget tracking tool.

PARTNERSHIPS AND COMMUNITIES

"The work Promoting Variety partners have done to highlight the range of services currently available to unpaid carers has helped build strong working relationships across the sector"

Every partnership has developed strong relationships between partners, with processes that can sustain these. Most have also made stronger links to communities, whether through community-led support partnerships, service providers or carers' groups. This has led to training being shared, referral routes being established, and short break opportunities being more widely promoted.

PEER SUPPORT

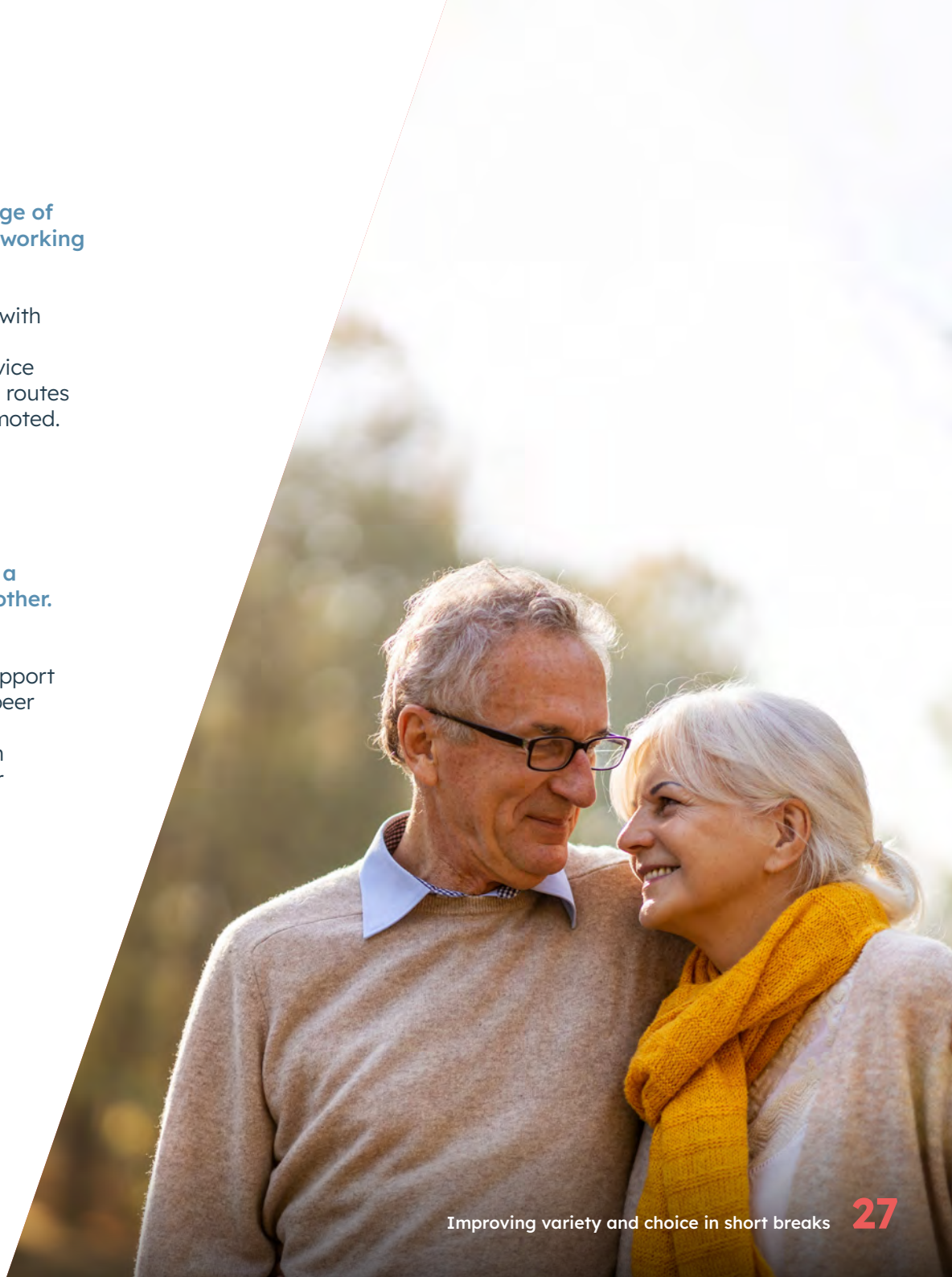
"Definitely feel less isolated. Now we have a group of good friends in a similar position to us. We are able to chat and be in touch with each other. Support is only a phone call away." – Carer feedback

The best way to make a lasting difference is to better equip people to support themselves and others in future.[10] All three partnerships that developed peer support found that carer isolation reduced and information about short break opportunities increased. For example, having gained confidence in having a break together, carers supported by Edinburgh voluntary sector partners are planning another trip with their cared-for people in 2024.

SYSTEMS APPROACHES

Peer support also benefits workers. Three areas noted the benefits for staff in different services collaborating and sharing ideas. These included resources being used more effectively, more training being provided, recruitment efforts being combined, and more creative, less resource-intensive approaches to short breaks being developed.

10 The Lasting Difference guide to sustainable capacity and impact



COLLABORATIVE COMMISSIONING: LEARNING FROM PRACTICE

> “The greatest advantage of this project lay in the premise that, at its core, it was a research-gathering venture without a preconceived agenda.
>
> This allowed for a more fluid approach ensuring that the project was fully invested in the gaps in localised support for parent carers.”

The Promoting Variety programme modeled the ethical, collaborative commissioning approaches it promotes.

This design was influenced by recommendations from the Independent Review of Adult Social Care and learning from other social care ‘challenge funds’.[11] These resulted in the following partnership criteria:

- **Person-centred first**: involvement of carers and supported people at each of the three Promoting Variety stages.
- **Squarely focused on improving outcomes**: developing solutions based on what’s best for people and outcomes, particularly when this means changing existing services and structures.
- **Clearly identified local needs and aspirations**: with a shared vision, rationale and agreement between partners and comfort with respective roles.
- **Rooted in Promoting Variety**: clarity on how the guide and programme could help.
- **Fostering innovation**: investing in new approaches and committing to programme participation, learning and evaluation.
- **Credible, with strategies for sustainability and exits**: learning from evaluation and developing sustainable approaches.

This section of the report offers learning from applying these aims in the hope of providing a blueprint for other programmes and tests of change, local or national. Links to practical tools are therefore also provided.

11 For example, Shared Care Scotland’s Public Social Partnerships (2016) and CCPS’s ‘Building Collaboration Fund’ (2021)

PROGRAMME DESIGN

Scoping

Before the programme began, a scoping phase tested the initial idea. Previous Promoting Variety 'think tank' members and participants highlighted the lack of time and resource within HSCPs for data analysis and idea development. This validated the funding element of the programme as a means for creating space and freedom away from existing budget constraints.

Funding also helped make the business case for change by creating extra capacity for development. At the same time, a lot of what the programme achieved could be done without additional money. What mattered was creating the time and commitment to do something differently.

Application and assessment

Another insight from scoping was that unrestricted funding could disappear into budget deficits. Clear criteria were developed for the fund. Applicants and the independent assessment panel had access to these via a short but comprehensive guidance document.[12] Asking for expressions of interest before the application deadline helped identify that demand was likely to be manageable without additional guidance (e.g. for priorities or trade-off decisions).

To keep the process independent, programme hosts did not assess applications.[13] however they checked applications for completeness and eligibility before passing to the independent panel.

Contracting

Post-award, a simple partnership agreement[14] was developed to ensure good governance and mutual commitment to the programme. Following a short contracting meeting to establish expectations, sign-off from a senior member of staff in the lead agency was needed. The contracting meeting proved an effective way to build relationships as equal partners, rather than as funders and funded.

The space and trust that the programme gave were reciprocated. For example, partnerships routinely sought permission or advice before making changes to their plans. They contributed their expertise generously to others in formal or informal learning exchanges.

Budgeting

The initial assumption of keeping things simple with a flat grant for each partnership was quickly tested. One HSCP found that external funding was a potential obstacle as there were no systems for managing it. Others needed detailed budgets for their respective partners' contributions. It was decided to keep Stage 2 funding flat (£10k for the Ideas phase) to get projects started quickly, but that detailed budgets would be needed before being accepted into Stage 3.

Partnerships would also apply for a place on the programme even if they just wanted support, not funding, as this still required capacity and resources from the programme hosts.

> **"A lot of what the programme achieved could be done without additional money. What mattered was creating the time and commitment to do something differently."**

12 Guidance document available here.
13 Application template available here.
14 Partnership agreement template available here.

STAGE 1 INTELLIGENCE:

Measure twice, cut once

Stage 1 started before the funding and support element of the programme. Partnerships were asked to come together and gather intelligence about local provision, needs and aspirations before committing to Stage 2. Allowing five months for this held some partnerships back from implementing ideas they had already identified. However, taking time to identify and explore issues before starting to develop ideas or attempt solutions paid off in terms of the developments that came from engaging properly with communities.

STAGES 2 AND 3:

Iterating between ideas and implementation

Partnerships moved through Stages 2 and 3 relatively fluidly and iteratively, developing and refining ideas, in some cases by revisiting Stage 1 and generating new intelligence with carers and other stakeholders.

As anticipated, some partnerships made more use of the non-financial support on offer than others. The main focus of support was on developing community-led planning approaches more widely. Other elements on offer (e.g. partnership facilitation, working with data, developing models, measuring impact) were less in demand but were catered for to an extent in quarterly learning exchanges. These were well attended by partnerships and external stakeholders, who appreciated them as an effective way to spread learning and practice.

"The sharing sessions involving areas in the Promoting Variety programme have been a rich source of learning regarding the range of innovation already taking place across Scotland with regard to short breaks."

Reporting

As a learning programme, a key message was that success meant learning about what works – and what doesn't. This was reinforced at every stage, from initial contracting to learning exchanges and reporting. Reflective responses to the report template[15] show that partnerships embraced this: each report identifies challenges, changes and learning that took place.

15 The template was based on the good practice standards in Harmonising Reporting and is available here.

RESOURCES

Promoting Variety

The Promoting Variety guide: sharedcarescotland.org.uk/resources/tools/promoting-variety

Implementing Variety research: thelastingdifference.com/wp-content/uploads/2023/09/SCS-Implementing-Variety-2021-WEB.pdf

Guidance document: thelastingdifference.com/wp-content/uploads/2023/09/Application-Criteria-and-Guidance.pdf

Application template: thelastingdifference.com/wp-content/uploads/2023/09/PV-Application-Form.docx

Partnership agreement: thelastingdifference.com/wp-content/uploads/2023/09/Partnership-Agreement-TEMPLATE-v0.1.docx

Report template: thelastingdifference.com/wp-content/uploads/2023/09/Report-template-DRAFTv2.docx

Policy and research

The Independent Review of Adult Social Care in Scotland: gov.scot/groups/independent-review-of-adult-social-care/

National Care Service (Scotland) Bill: www.parliament.scot/-/media/files/legislation/bills/s6-bills/national-care-service-scotland-bill/introduced/bill-as-introduced.pdf

Self-Directed Support (Scotland) Act 2013: www.legislation.gov.uk/asp/2013/1/contents/enacted

Care Inspectorate Inquiry into adult carers' experiences of social work and social care services: www.careinspectorate.com/images/documents/6923/Unpaid%20carers%20report%20December%202022.pdf

Carers Landscape Edinburgh Action Research Project (CLEAR): www.evoc.org.uk/projects/carers-landscape-edinburgh-action-research/

Commissioning and market shaping

Ethical commissioning definition in Scottish Procurement Policy Note 7/2021 www.gov.scot/publications/preparing-to-transition-towards-a-national-care-service-for-scotland-sppn-7- 2021/

Collaborative Commissioning resources (CCPS) www.ccpscotland.org/our-work/collaborative-commissioning/

Shifting Shapes: how can local care markets support personalised outcomes? Needham et al, 2021 www.birmingham.ac.uk/documents/college-social-sciences/social-policy/publications/shifting-shapes.pdf

Funding and sustainability

Shared Care Scotland 'Time to Live' Impact Report: www.sharedcarescotland.org.uk/media/shzd4i2g/time-to-live-impact-report-2022-23.pdf

Coalition of Carer and Support Providers Scotland 'Building Collaboration Fund' (2021) www.ccpscotland.org/ccps-news/building-collaboration-learning-from-provider-led-collaborations-in-scotlands-social-care-sector/

Harmonising Reporting good practice standards: evaluationsupportscotland.org.uk/what-we-do/harmonising-reporting/

The Lasting Difference guide to sustainable capacity and impact: www.thelastingdifference.com/wp-content/uploads/2017/07/Sustainable-Impact.pdf

SHARED CARE SCOTLAND

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