Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Trustees' Annual Report and Financial Statements For the Year Ended 31 March 2026

Carers Centre
Lomond House
29 Lomond Street
Helensburgh
G84 7PW

Tel: 01436 673444

Email: hello@hlcc.org.uk
Website: www.hlcc.org.uk

Registered Scottish Charity No. SC033382
(A Scottish Charitable Incorporated Organisation)

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Charting the history of services for unpaid carers in Helensburgh and Lomond

Before 2000 there were no statutory or voluntary services in Argyll & Bute offering support to unpaid carers as their primary function. However, that year, the Scottish Government allocated funding to each local authority to determine what services carers in their areas required and to contribute to the costs of providing those services. In Helensburgh and Lomond, a Steering Group conducted a consultation exercise, and concluded that unpaid carers needed a local Carers' Centre to act as a contact point for the provision of information, advice and support.

The Steering Group set up an office in the Royal Sailors Rest, Braeholm, Helensburgh, and employed a Project Co-ordinator and Administrator. A voluntary Management Committee was formed in November 2000 to launch and oversee the development of what was initially called the South East Argyll Carer's Project. At that time, carers were largely invisible to the statutory agencies and an early priority was to raise awareness of the contribution they make to families and communities, as well as the challenges many faced sustaining this support.

In 2001, the Project joined the Network of Carers Centres across the UK, operating under the umbrella of The Princess Royal Trust for Carers, and in 2002, it became a Registered Scottish Charity, as a Charitable Association. In 2004, it changed its name to Helensburgh and Lomond Carers' Project and moved from Braeholm to leased offices at 17 East King Street, Helensburgh. However, in 2006, it moved again to larger premises in the same office complex, which enabled the Carers' Centre to be properly established and services for carers expanded.

Following a governance review in 2010, the Constitution was amended and the word 'Project' removed from its title, in preparation of changing the Charity's legal form to a Scottish Charitable Incorporated Organisation (SCIO). This meant establishing a separate legal entity, to replace the existing Charitable Association on the Scottish Charity Register. The approval of the Office of the Scottish Charity Regulator was secured, and on 30 March 2012, the Charitable Association was removed from the Register and formally dissolved on 5 April 2012.

New Beginnings

Helensburgh & Lomond Carers SCIO was entered onto the Scottish Charity Register on 30 March 2012, as a new Charity. The 4 members of staff then employed, as well as the assets, liabilities and undertakings of the Association, transferred to the SCIO on 1 April 2012, and it assumed responsibility for all its activities. These were not the only changes to take effect on that date, as the Princess Royal Trust for Carers merged with Crossroads Care (England and Wales) to form a new charity called the Carers Trust. The SCIO became and remains a member of the Carers Trust Scotland Network.

The Charity continued to expand its services following these changes, including introducing services for young carers in April 2012. By 2015 the number of staff employed had increased to 11 and in February 2016, it relocated to its current accommodation in Lomond House, in Helensburgh, which is leased from NHS Highland.

On 1 April 2016, the Argyll & Bute Health and Social Care Partnership was formed, when NHS Highland and Argyll & Bute Council integrated certain health and social care services, as required by the Public Bodies (Joint Working)(Scotland) Act 2014. The Partnership is governed by an Integration Joint Board, with responsibility for planning, resourcing and overseeing the operational delivery of the integrated services, including services for unpaid

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

carers. Both the Council and Health Board were core funders of the Charity, through grants and contracts, and the Integration Joint Board became the provider of that financial support.

Prior to 2016, the Scottish Government produced a number of strategies and legislation to give unpaid carers rights to receive support from the statutory health and social care services, but these proved to be relatively ineffective. Following a review, the Scottish Parliament passed the Carers (Scotland) Act 2016, which consolidated existing rights and placed new duties and responsibilities on local authorities and health boards aimed at improving the support for both adult and young carers. Responsibility for implementing the Act was delegated to the Integration Authorities, but this was delayed until 1 April 2018, to allow the Government to publish supporting regulations and statutory guidance.

Between 2018/19 to 2022/23 the Government provided 5 years of additional funding to local authorities to assist implement the Act and, in Argyll & Bute this was managed by the Integration Joint Board. The Board allocated some of this funding to the local carers centres to help sustain carer services, whilst it reviewed how best to comply with the Act. The review became protracted, but this Charity was commissioned by the Board to deliver carer services in Helensburgh & Lomond for 2020/21-2021/22, which was subsequently extended to 31 March 2023 and then to 31 March 2026. This funding helped to stem staff losses over the previous 4 years, arising from a reduction in grant income, which resulted in the staff complement falling to 6 at 31 March 2021. The number employed had increased to 12 by 31 March 2025 and remained at that number throughout 2025/26.

During the 4-year period from 2020/21 to 2023/24 the Charity had to contend with the effects of the coronavirus pandemic and cost of living crisis, which resulted in surges in the number of unpaid carers seeking support. The Scottish Government accepted the pandemic had exposed shortcomings in the health and social care system and, to address these, it introduced the National Care Service (Scotland) Bill to the Scottish Parliament, with the aim of having this new service fully functioning by the end of the Parliamentary term in May 2026. Parliamentary challenges led to the withdrawal of structural reform proposals in the Bill, a retitling to the Care Reform (Scotland) Bill, and a shift toward other improvements, including proposals to amend the Carers (Scotland) Act 2016 so that assessments consider whether carers can take sufficient breaks and, where they cannot, to support them to do so.

The revised Bill became the Care Reform (Scotland) Act 2025 in July 2025, but the implementation of its provisions awaits Scottish Ministers preparing the necessary regulations and statutory guidance on how these should be put into practice. Providing unpaid carers with the right to take sufficient breaks is a significant step forward, but will have both financial and capacity implications for the Health & Social Care Partnerships, as well as carers centres, that need to be addressed.

Towards the end of 2025/26, confirmation was received that the Charity's contract with the Integration Joint Board would be extended to cover 2026/27, but its value had still to be determined. It is the case that most Integration Authorities in Scotland have faced significant financial challenges since they were first established and that has reached a critical point. This includes the Argyll & Bute Integration Joint Board and, for that reason, the value of the contract for 2025/26 was frozen at the 2024/25 level. At the Board's meeting on 25 March 2026 it approved its 2026/27 Budget, which included a 15% cut to the value of the Charity's contract. This will result in the loss of two staff posts, early in 2026/27 and take the number down to 10.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

CONTENTS

	Page
Foreword	1
PART 1 - TRUSTEES' REPORT	
Section 1 – Reference and Administrative	**6**
Details of the Charity, its trustees, staff and agents	6
Section 2 – Governance	**8**
Constitution	8
Charitable Purposes	8
Mission	8
Carer Definition	9
Members	9
Election of Trustees	9
Office Bearers	10
Governance Framework	10
Remits and Terms of Reference	10
Sub-Groups/Working Groups	11
Scheme of Delegation	11
Business Planning	12
Argyll & Bute Health and Social Care Partnership	13
Single Authority Model	14
Carers (Scotland) Act 2016	14
National Care Service	16
Care Reform (Scotland) Act 2025	17
Carers Act Funding	17
Commissioned Services for Unpaid Carers	18
Monitoring and Measuring Performance	19
Risk Management	20
Quality Assurance Accreditation	21
Partnerships	21
Argyll & Bute Joint Working Partnership	22
The Carers Trust Scotland	22
National Carer Organisations in Scotland	23
Section 3 – Operational Area	**24**
Area of Operation	24
Population/Demographics	25
Accessibility - Urban/Rural Classification	26
Access to Services	27
Scottish Government's Depopulation Action Plan	28
Employment and the Economy	29
Social Care Employment	30

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

	Page
Unpaid Carers in Employment	30
General Health	31
Deprivation Data Zones	31
Cost of living in Rural Communities in Scotland	32
Section 4 - Carers Profile	**34**
Carers in Scotland	34
Age Profile of Scotland	35
Population and Age Profile of Argyll & Bute and Helensburgh & Lomond	35
Estimated number of unpaid carers in Argyll & Bute Helensburgh & Lomond	35
Carers Register	36
Total Number of Carers Registered at 31 March 2025	36
Hidden Carers	37
Scotland's Carers Census	38
Carers Census Profile of Carers in Helensburgh & Lomond	39
Profile of Cared-for Persons	42
Geographic Location of Unpaid Carers	43
Impact of Caring	44
Data Collection	44
Section 5 – Support for Unpaid Carers	**45**
Supporting Carers	45
Information and Advice	45
Interventions	46
Determining Carers' Needs	46
Local Eligibility Criteria	47
Short Breaks and Respite Care	47
Care Reform (Scotland) Act 2025	48
Argyll & Bute Fair Access and Threshold of Care Policy	49
Section 6– Staffing and Volunteers	**50**
Funding Sources - Staff Costs	50
Staffing Structure in 2025/26	50
Staff Remuneration	51
Increase in Employers National Insurance Contributions	52
Staff Pensions	52
Contracted Services	52
Sessional Workers	53
Volunteers	53
Student Work Experience Placements	54
Section 7 – Accommodation and Facilities	
Lomond House	55
Review of Accommodation Requirements	56

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

	Page
Outreach Bases	56
Health & Safety	57
Information Technology and Digital Communications	57
Cyber Attack	58
Computer Hardware and Software	59
Scotland's Digital Health and Care Strategy	60
Scotland's AI Strategy – 2026-2031	61
Artificial Intelligence	61
Asset Management	63
Insurance Cover	63
Section 8 - Strategic Priorities	**64**
Carer Outcomes	64
Business Plans	64
Planning Cycle	65
Aims	65
Objectives	66
Key Performance Indicators	67
Evaluation	67
Carers Census	68
National Health and Wellbeing Outcomes	68
Section 9 – Service Delivery	**69**
Diverse Roles of Unpaid Carers	69
Becoming an Unpaid Carer	69
Early Identification and Intervention	70
Carers Pathway	70
Registered Carers	71
Adult Carers Support Plans	71
Young Carers Statements	71
Eligibility Criteria	72
Emergency Care Planning	73
Future Care Planning	73
Welfare Health Checks	73
Information and Advice	74
Signposting	75
Advocacy	75
Citizens Advice Bureau	76
Legal Advice	76
Carer Money Matters Programme	76
Health and Wellbeing	77
Programmes of Activities and Events	78
Holistic Therapies	78
Counselling/Cognitive Behavioural Therapy Services	79
Emotional and Peer Group Support	79
Activities and Short Breaks	79

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

	Page
Activities for Young Carers	80
Residential Timeline – 2025/26	81
Day Trips/Activities	82
Service Benefits for Carers	82
Section 10 – Performance	**84**
Milestones	84
Governance Indicators	84
Financial Indicators	85
Organisational Indicators	86
Operational Objective: Indicators and Targets	87
Indicator 1 - Raising Awareness	87
Indicator 2 - Offering information, advice, training and support	88
Indicator 3 - Supporting young carers	89
Indicator 4 – Mental and Physical Health and Wellbeing	89
Indicator 5 - Support to enjoy a life outside caring	90
Indicator 6 - Carers Recognised and Valued	91
Measuring Progress against the Objectives	91
Evaluating Carer Outcomes	92
Section 11 – Finance and Funding	**94**
Preparing the Budget Estimates	94
Balances Brought Forward	94
Incoming Resources	94
Expended Resources	95
Fixed Assets	95
Closing Balances	96
Restricted and Unrestricted Funds	96
Reserves	96
PART 2 - FINANCIAL STATEMENTS	
Section 12 – Financial Statements	**98**
Trustees' Responsibilities in relation to financial statements	98
Independent Auditor's Report	99
Statement of Financial Activities for the year ended 31 March 2026	103
Balance Sheet as at 31 March 2026	104
Notes to the Accounts for the Year ended 31 March 2026	106

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

FOREWORD

On behalf of the Charity's Trustees' I am pleased to present our Annual Report and Financial Statements for the Year Ended 31 March 2026. Part 1 is the Trustees' Report, which looks back at the financial year 2025/26 and records the key activities, challenges, setbacks, achievements and developments over that 12 month period, as well as assessing the impact all this had on the health and wellbeing of unpaid carers in Helensburgh & Lomond, who are the Charity's sole beneficiaries. Part 2 contains the Financial Statements, which have been prepared in accordance with the accounting policies set out in Note 1 to the Accounts, the Charity's Constitution and relevant legislative requirements. We also consider it important for our Trustees' Reports to be set in the context of any political, economic, social, technological, environmental or legal factors that had a bearing on the aims, objectives and outcomes for carers we were striving to achieve.

The Charity's work for unpaid carers sits within a wider framework of health and social care planning and commissioning in Argyll & Bute. Under the Public Bodies (Joint Working) (Scotland) Act 2014, responsibility for the planning, resourcing and oversight of integrated health and social care services, including support for unpaid carers, rests with the local Integration Authority. In Argyll & Bute, this is delivered through the Argyll & Bute Health and Social Care Partnership, with the Integration Joint Board acting as its governance body and overseeing the strategic direction of services.

The Charity has been contracted by Argyll & Bute Council, on behalf of the Integration Joint Board, to deliver services for unpaid carers in Helensburgh & Lomond since 2016, which is when the Board first took up its responsibilities. The contract for 2025/26 commenced on 1 April 2023 and was initially set to expire on 31 March 2025, however, an option to extend this for another year into 2025/26 was agreed. Those governance and commissioning arrangements formed the backdrop to the increasingly difficult financial environment in which the Charity was required to operate during the year.

From the outset, it was evident to our Management Committee that the Charity was entering 2025/26 in a highly uncertain and fragile financial context. A significant factor in this was the deteriorating financial position of the Integration Joint Board, our principal funder, which inevitably cast a shadow over the Charity's own financial outlook. The Accounts Commission has reported that Integration Joint Boards across Scotland are facing unprecedented pressures and financial uncertainty, with funding not keeping pace in real terms with inflation, rising demand and workforce costs. It has also warned that reserves and vacancy management are not sustainable solutions, and that Health & Social Care Partnerships are being forced to consider redesigning, reducing or discontinuing services in order to remain financially viable. Against that backdrop, the Charity began the year knowing that maintaining support for unpaid carers would be increasingly challenging in an operating environment defined by instability, constraint and difficult funding decisions.

Most significantly, the Charity's principal source of income, its contract funding for 2025/26, was frozen at the same cash level as in 2024/25, with no uplift to reflect the increasing number of unpaid carers requiring support, the rise in Employers' National Insurance Contributions from April 2025, continuing inflationary pressures, or the higher costs the Charity was facing for salaries, external services, activities and other forms of support for carers. These pressures were being felt across the voluntary sector in Scotland, but for this Charity the effect was

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

particularly acute because of the widening gap between the real cost of delivering services and the income available to sustain them during the year. This threatened not only the financial resilience of our own Charity, but also that of many third sector organisations across Argyll & Bute, which were facing the same combination of rising costs, static public sector funding and increasing need.

The Argyll & Bute Integration Joint Board has a statutory duty under the Carers (Scotland) Act 2016 to put arrangements in place to identify carers, offer and prepare Adult Carer Support Plans and Young Carer Statements, assess personal outcomes and needs for support, apply local eligibility criteria lawfully, and provide appropriate information, advice and support. These duties are intended to ensure that carers' needs are recognised and addressed at the earliest possible stage, rather than only when circumstances reach crisis point, and we are one of the contracted service providers, working closely with Social Work staff. In practice, however, delivering meaningful support for unpaid carers requires more than the fulfilment of statutory responsibilities alone.

We deliver a wider, wrapped-around service that extends well beyond the minimum statutory requirements of the Act. While our contract funding supports an important part of this work, it covers only a proportion of the services that carers rely upon and has been diminishing in real terms. Through grants, fundraising and donations, the contribution of volunteers and sessional staff, and collaboration across third sector networks, the Charity has been able to provide essential additional support for both adult and young carers, including peer groups, short breaks, counselling, legal advice, advocacy, wellbeing therapies, help with income and energy issues, and a wide range of social activities. These non-statutory services play a vital role in sustaining carers' resilience, wellbeing and capacity to continue in their caring role.

Where unpaid carers do not receive timely assessment and appropriate advice and support, the consequences can be far-reaching. The burden on carers may increase to unsustainable levels, placing their own health and wellbeing at risk, undermining the stability of caring arrangements, and creating additional pressure on statutory health and social care services. In that sense, insufficient support for carers is not simply a matter of unmet individual need; it also carries wider system implications, both in human and financial terms. The statutory framework recognises this by linking support for carers to the continuation of caring roles and by treating information, advice, short breaks and local carer strategies, as integral to effective support.

At 1 April 2025, the Charity had 1,493 carers on its register and that total had increased only marginally, by 31 March 2026, to 1,496. This relatively static overall figure reflected an exercise undertaken during the year to ensure that those registered remained active carers, and led to the removal of a number of adult and young carers from the register and archived. Some will find themselves acting as carers again at later stages of their life and they can be reinstated on the appropriate Register. Nevertheless, the 1,496 carers registered at the end of 2025/26 comprised 1,162 adult carers and 334 young carers, and the number of newly identified carers requiring support remained high. Looking back over recent years, there was an exceptional increase in registrations in 2022/23, driven by the combined effects of the pandemic and the cost of living crisis. This has eased somewhat, but demand remained significant, with 257 new carers identified in 2025/26 compared to 238 the previous year.

Against the difficult economic backdrop, the Manager worked hard throughout the year to prepare and submit grant applications to help to sustain and strengthen services. Those efforts

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

were successful and resulted in a number of important grants being secured during 2025/26. Shared Care Scotland, in particular, provided five separate grants, totalling more than £119,308, to support short breaks and delivery costs, welfare support and programmes of activities for adult and young carers. The Carers Trust provided £45,670 for the Carers Money Matters Programme and individual grants for young carers. The National Lottery continued its support for services for young carers through the second year of a three-year award, providing £34,350 across 2025/26 and 2026/27. Shepherd & Wedderburn LLP, which looks after a number of Trust funds, awarded £21,500 for counselling, and BBC Children in Need provided £5,000 for young carers. Other funders also made valuable contributions to specific services and projects, including Scottish Families Affected by Drugs & Alcohol proving £5,000 from its Grow Your Own Routes Fund for young carers; Helensburgh Heart, which provided £1,190 for therapies; the Third Sector Interface, which awarded £4,738 from the Community Mental Health and Wellbeing Fund to support carers; and the Miss E C Hendry Charitable Trust, which provided £1,000 to support outreach work.

The grant funding secured during 2025/26 was critical in enabling the Charity to meet some of its staff costs, sustain its full range of services and introduce some additional activities during the year. Demand continued to rise for therapeutic services addressing carers' mental health and emotional wellbeing, including counselling, cognitive behavioural therapy and wider emotional support. Through the Carers Money Matters Programme, there were also significant increases in the number of carers seeking help to maximise income, manage household bills, and access legal advice, advocacy and related support. As in previous years, the demand for short breaks from caring also remained consistently high, but there was insufficient funding to meet all that demand.

Throughout 2025/26, the Charity retained its highly experienced, skilled and committed staff team, by continuing to invest in their professional development and looking after their welfare. They have faced and overcome significant challenges in recent years, and their resilience was again tested when, on 27 May 2025, we experienced our first cyber-attack. Our Microsoft 365 account was compromised, resulting in a temporary loss of access to Microsoft services. The attack was promptly contained and did not affect the separate systems holding registered carer information or financial data, and no data nor funds were lost. With the assistance of one of our volunteers, contingency arrangements were put in place to maintain business as usual until systems were restored on 18 June 2025, and the incident led to further review and strengthening of the Charity's cyber security arrangements. The staff were praised by Police Scotland's Cyber and Fraud Centre Scotland for doing all the right things in dealing with the attack.

The Charity's ability to respond to that incident and manage its workload was strengthened by the quality of its relationships with partner organisations across Helensburgh & Lomond. We have established strong working arrangements with local service providers and are able to refer carers to organisations with specialist expertise where this is in their best interests, while those organisations in turn signpost unpaid carers to the Carers Centre where appropriate. In the statutory sector, our principal partners are Social Work and Education Services, together with the Argyll & Bute Health & Social Care Partnership's Carers Act Officer and Young Carers & Child Poverty Officer. These relationships are vital to the effective co-ordination of support and to promoting the interests of unpaid carers.

The Charity is a member of the Carers Trust network, whose principal purpose is to support local carer organisations, strengthen services for unpaid carers, share learning and good practice, and influence national policy and practice on carers' rights and support across the UK,

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

including through its Scotland network. Membership also carries an expectation of continuous improvement and adherence to recognised quality standards. In that context, the Charity was the first carers centre in Scotland to achieve the Carers Trust Excellence for Carers Quality Standard Award in 2022 and, in 2025, became the first to secure re-accreditation, providing independent recognition of the quality, sustainability and effectiveness of the services it offers to unpaid carers. Although we are one of the smaller Carers Trust members in Scotland, we are a respected voice within the wider network. We were one of only three Carers Centres in Scotland invited by the Trust to participate in a UK-wide Carer Money Matters Programme in 2024 and 2025, which reflected the confidence placed in the Charity, as a high-performing and dependable organisation to work with.

During the year, the wider policy context for carers in Scotland also continued to evolve. Plans by the Scottish Government to establish a National Care Service, following the 2021 Independent Review of Adult Social Care, were scaled back significantly, after facing sustained opposition in the Scottish Parliament. What ultimately emerged was the Care Reform (Scotland) Act 2025, which retained a number of important measures relevant to unpaid carers, most notably a new right to breaks from caring, and provision for timescales to be set for the preparation of Adult Carer Support Plans and Young Carer Statements. While these changes are potentially significant and were widely welcomed in principle, much will depend on the regulations, guidance and funding arrangements still to be developed, and the Management Committee will continue to monitor their implications closely.

Another evolving issue with potential implications for the Charity is the future of the current integration arrangements in Argyll & Bute. During the year, Argyll & Bute Council and NHS Highland, with the support of the Scottish Government and COSLA, explored options for replacing the existing Integration Joint Board model with a form of Single Authority Model. Nationally, the policy aim is to improve health and care outcomes through earlier intervention, reduced duplication and more co-ordinated planning for fragile rural services, with particular relevance for remote and island communities such as Argyll & Bute. This work reflects a wider strand of public service reform aimed at strengthening place-based planning, improving long-term sustainability and bringing decision-making closer to local communities

In Argyll & Bute, the options under consideration include building on the existing Integration Authority framework through a more empowered local board, moving towards a single strategic authority partnership, or developing a hybrid approach that combines elements of both. While no final decision or implementation timetable have been announced, it is possible that some structural change could begin to emerge during 2026/27. For the Charity, this is relevant because any reconfiguration of local governance and commissioning arrangements may, in time, alter the framework within which services for unpaid carers are planned, commissioned and delivered.

The Management Committee has been preparing 3-year Business Plans for the Charity for many years and this tries to forecast what might lie ahead during that time frame, which is usually a reasonable period for most charities. We try not to be caught by surprise, however, with the turbulence in our operating environment, what the future holds has become more uncertain and difficult to predict. What is clear, is that Scotland's health and social care system is creaking under the weight of unprecedented demand pressures and despite this forming the largest element of the Scottish Government's budget, the Integration Joint Boards are struggling to sustain services, due to funding gaps and rising service costs. This has driven a major push towards structural reform, to move away from acute hospital care towards

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

community-based prevention, but ongoing financial constraints remain a persistent challenge as the Boards try to transition to a more sustainable position.

The Charity has adopted an outcomes-based approach to evaluating the impact of the services it provides to the health and wellbeing of carers. This takes account of the prevailing political, economic and social policy landscape, and aims to meet the needs and personal outcomes identified by our adult and young carers. It was important for the Management Committee to know if the outcomes are being effectively pursued and to assist measure performance, a set of indicators has been developed for each of 6 carer outcomes. These detailed certain actions or activities to be undertaken, which are designed to ensure compliance, sustainability or some form of improvement/new development. Collectively, the Indicators should evidence whether or not the outcomes are being progressed as planned, therefore, these had to be specific, measurable, achievable, time bound and realistic.

The Charity has to collect and hold performance data to report back to its funders, including the Integration Joint Board. It has suitable arrangements in place to do that, in terms of the success or otherwise of reaching milestones, in respect of its Governance, Financial and Organisational Objectives and meeting targets in relation to its Operational Objectives. Quarterly Business Plan Monitoring Reports are presented to the Management Committee during the course of the year to allow the Trustees to monitor progress and make any adjustments considered necessary. The Committee evaluates the performance of the Charity against the 6 Carer Outcomes at the end of each financial year, including for 2025/26. Whilst not all of the milestones were reached or targets met, the Committee concluded that all the Outcomes had been effectively pursued by the Charity, despite the challenging operating environment.

The Trustees are grateful to all who contributed financially or by other means to our work in 2025/26, the officers we work closely with from the Health & Social Care Partnership, other partner organisations, funding bodies, individual donors, fundraisers and the many others who believe in and support our charitable purposes. Most of all we wish to thank our carers for continuing to have confidence that we are pursuing their best interests and the trust they have in our leadership of the Charity.

We have successfully navigated the complexities and uncertainties presented in 2025/26, absorbing the shocks and turbulence encountered along the way and steered a steady course. We know that 2026/27 will be more challenging, as the financial difficulties of the Integration Joint Board continue and has compelled it to cut our already frozen budget for 2026/27 by close to 15%, which will compel the Charity to reduce the number of staff employed and the services it can deliver. However, the Board has provided some transitional funding to cover redundancy costs and other impacts of the reduction.

As with previous hurdles and impediments, the Trustees and Manager will do their utmost to ensure the Charity remains sustainable, albeit this will mean seeking further support from our volunteers, and may impact on the level of services we will be able to provide in 2026/27.



Sir William Rae
Chairperson

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

PART 1 - TRUSTEES' REPORT

SECTION 1 - REFERENCE AND ADMINISTRATIVE

Charity Name:	Helensburgh & Lomond Carers SCIO
Charity Registration number:	SC033382
Address:	Lomond House 29 Lomond Street Helensburgh G84 7PW
Telephone No.	01436 673444
Email:	hello@hlcc.org.uk
Website	www.hlcc.org.uk

Management Committee

William Rae	Chairperson
John McLean	Vice-Chairperson
Jean Walker	Secretary
Michael Blair	Treasurer
Iain Birrell	
Patricia Collins	
Antony Davey B.E.M.	
Sarah Drummond	
Fiona MacNeil	
Michelle Ridge	
Susan Salmon	

Former Trustee

Catherine Law	(Retired as a Trustee at the AMM on 23 September 2025)

Staff

Sharon Blenkinsop	Manager
Leeanne Devenny	Team Leader – Adult Carers Service
Christine MacTaggart	Carers Support Worker – Adult Carers Service
Alison Fletcher	Carers Support Worker – Adult Carers Service
Ashley McVey	Carers Support Worker – Adult Carers Service
Ashley Rae Bolton	Team Leader - Young Carers Service
Stacey Sinclair	Carers Support Worker – Young Carers Service
Jan Conaghan	Carers Support Worker – Young Carers Service
Keira Reilly	Assistant Carers Support Worker – Young Carers Service
Elaine McGregor	Income and Energy Support Worker

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Kayleigh Cavana	Business Administrator
Caroline Swain	Office Administrator

Bankers

Bank of Scotland
Nationwide Building Society, 118a High Street, Dumbarton

Bookkeeper

Accrue Bookkeeping Services, Helensburgh.

Accountants

Wbg Services LLP, 168 Bath Street, Glasgow.

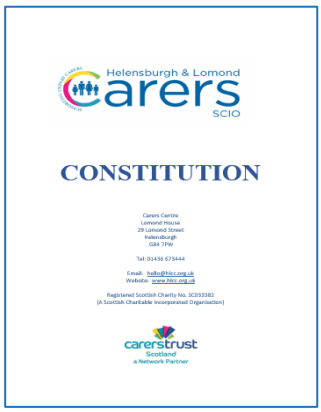
Insurance Brokers

Arthur J Gallagher & Co., Spectrum Building, 55 Blythswood Street, Glasgow

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

SECTION 2 - GOVERNANCE

Constitution



The Charity is a Scottish Charitable Incorporated Organisation (SCIO), first entered on the Scottish Charity Register by the Office of the Scottish Charity Regulator (OSCR) on 30 March 2012. It replaced the former Helensburgh & Lomond Carers, a Charitable Association, which was formed on 3 November 2000 and dissolved on 5 April 2012. The Charity is governed by its Constitution, which is reviewed annually by the trustees to ensure it remains fit for purpose. It was last updated, by means of a Special Resolution, at the Annual Members Meeting held on 23 September 2025, and adopted from 1 October 2025. A copy was submitted to OSCR and it is posted on the Charity's website **www.hlcc.org.uk**

Charitable Purposes

The Objects set out in the Constitution describe the charitable purposes, and these are to promote, for the benefit of carers:

(a) the relief of those in need by reason of age, ill-health, disability, financial hardship or other disadvantage by providing information, advice and support services within the area defined as Helensburgh and Lomond;

(b) the advancement of the education of the general public, influential individuals and relevant organisations on matters relating to the social welfare of carers;

(c) the advancement of citizenship through volunteering in the delivery of services, and

(d) any other purpose that may reasonably be regarded as analogous to any of the preceding objects.

Mission

The Charity believes unpaid carers should be able to participate in normal activities and live their lives in ways that maximise feelings of choice and control and encompass their social, physical and emotional needs, no matter their age, circumstances or where they reside. Their caring commitments and responsibilities can present barriers or challenges to this and it benefits society as a whole, if they receive the support needed to ensure they have a safe, acceptable and stimulating experience of life. Whilst it is not solely the responsibility of the Charity to provide that support and deliver the interventions required, its Mission is:

"To make a positive difference to the lives of unpaid carers."

Carer Definition

The term 'carer' in the Constitution and Mission refers to ***'someone, who, without payment, provides or intends to provide help and support to a partner, child, relative, friend or neighbour, who could not manage without their help due to age, physical or mental illness, addiction or disability.'*** This definition embraces all unpaid carers, but to assist the design and

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

delivery of appropriate services, the Charity places those registered into the following age groups:

Young Carers	Young Adult Carers	Adult Carers
Under 18	Over 18 but under 24	Aged 24+

Members

Membership of the Charity is open to all carers and former carers and any individual aged 16 or over who supports the purposes of the organisation. Those who wish to become members require to apply to the Management Committee and pay a non-recurring membership fee of £2.00. Applications for associate membership can be made by any statutory or non-statutory body or at the invitation of the Management Committee and do not attract a membership fee. The details of those who become members are recorded in a Members Register.

Members are entitled to attend and participate in the annual and any special members' meetings; propose resolutions (subject to certain conditions); vote for or against any resolution; stand for election as a trustee, and receive copies of the Newsletters published by the Charity. Associate members act as advisers to the Management Committee and can attend members' meetings, but have no voting powers. Membership alone does not enable access to the services provided by the Charity. Access to such services is restricted to unpaid carers and a limited number of former carers.

There is no requirement for carers to be members to access services, but they are encouraged to apply for membership to give them a sense of ownership and an opportunity to become actively engaged in the oversight and the running of the organisation. As a consequence, most of the registered members of the Charity on 31 March 2026 were carers or former carers.

At 31 March 2026, there were 241 Members on the Members Register.

Election of Trustees



Under the terms of the Constitution, the Charity is in the hands of a Management Committee, comprising a Chairperson, Vice Chairperson, Secretary and Treasurer, and up to 11 ordinary members. The members of the Committee are elected by the ordinary members at an Annual Members Meeting (AMM) or can be appointed or co-opted onto the Committee between AMMs. On taking up appointment, they become the Charity's trustees and assume all the duties and responsibilities this role entails.

Collectively, the trustees are the guardians of the Charity's purpose and they exercise general control of the administration of the organisation, including directing the strategy, maintaining financial oversight, taking responsibility for its resources and ensuring the Charity stays within the terms of the Constitution and the law. The Constitution states that trustees must retire after serving for a period of two years, but those retiring are eligible for re-election. However, it is the practice for all but one of the trustees to stand down at each AMM, leaving a trustee in post to conduct the election process. On 1 April 2025 there were 12 trustees serving on the Management Committee.

At 31 March 2026 there were 11 trustees serving on the Management Committee and 8 were carers or former carers

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

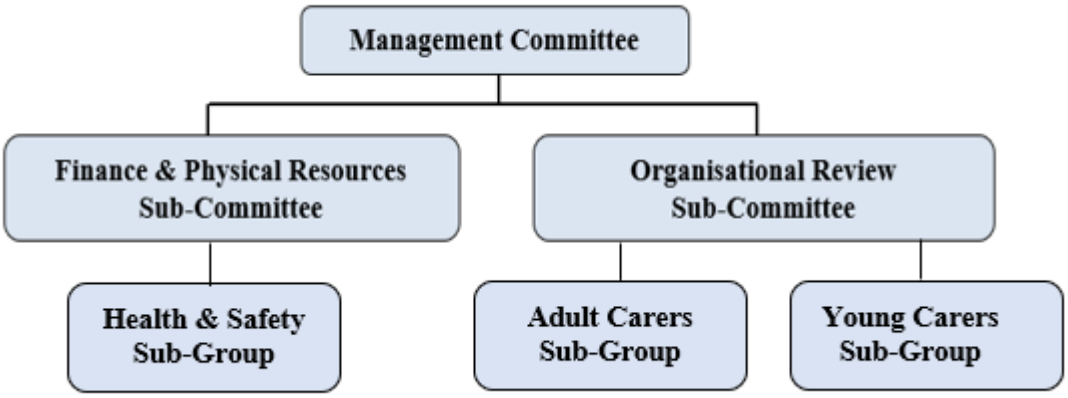
At the AMM held on 23 September 2025, with the exception of the Chairperson, all 11 of the other trustees retired, but 10 stood for re-election. There were no new nominations to act as a trustee, and proposals to re-elect the 10 members standing for re-election were unanimously passed by the members present. The Charity's Constitution allows up to 15 trustees to be appointed, but there were no further changes to the membership of the Management Committee between then and 31 March 2026. This meant there were 4 trustee vacancies at the end of 2025/26. Of the 11 trustees in post at 31 March 2026, 6 were female and 5 were male and 8 were carers or former carers. The names of all who served as trustees during 2024/25 are listed on page 6 of this Report. On 1 April 2026, the Management Committee filled one of the vacancies by appointing Fiona Howard, who is an unpaid carer and long term member of the Charity, as a trustee.

Office Bearers

It is the normal practice for the trustees to appoint the Office Bearers at the first meeting of the Management Committee following the AMM. That took place at the meeting held on 29 October 2025, when the Chairperson, Vice-Chairperson, Treasurer and Secretary were all reappointed. At the same meeting, the membership of the Sub-Committees was agreed, and Michael Blair was reappointed Chairperson of the Finance & Physical Resources Sub-Committee and John McLean was reappointed Chairperson of the Organisational Review Sub-Committee. The Annual Programme of Meetings for 2025/26 was also approved and subsequently circulated to interested parties.

Governance Framework

The structure, remit and terms of reference of the Management Committee and Sub-Committees are reviewed annually, and this exercise was initiated by the Management Committee at its meeting on 29 October 2025. The trustees were content the committee structure remained fit for purpose, and the current structure is shown in the following chart:



Trustee meetings are generally held on a 6 weekly cycle, with the Sub-Committees' meeting between each Management Committee meeting. All are minuted and the Sub-Committees operate to work plans, in the form of Action Logs, which are reported back to and closely monitored by the Management Committee. The Sub-Groups meet at least on a quarterly basis and report back to their parent Sub-Committees.

Remits and Terms of Reference

The 2025 review of the remit and terms of reference of the Management Committee and Sub-Committees' resulted in minor adjustments being approved, which related to changes in legislation, amendments to the Charity's Scheme of Delegation, and a specific responsibility

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

placed on the Management Committee to ensure there are reasonable and proportionate security measures in place to reduce the risk from cyber-crime. The main functions of each are briefly described as follows:

Management Committee

Has overall control of the strategic direction, policies and procedures, organisational structures and management of the administration of the Charity, and is ultimately accountable for all the organisation's activities. It ensures the Charity operates within the terms of the Constitution and stated Charitable Objects, complies with any restrictions placed on financial grants and donations and meets relevant legal requirements. The Committee was chaired by William Rae and, under the terms of the Constitution, it is required to meet at least 6 times a year. It held 8 meetings in 2025/26.

Finance & Physical Resources Sub-Committee

Has responsibility for ensuring the Charity develops, documents and adopts sound financial management procedures and controls and meets its legal obligations in relation to the maintenance of accounts, fund-raising, banking arrangements, investments, reserves, physical assets, expenditure and internal audit, as well as health & safety matters. The Sub-Committee was chaired by the Treasurer, Michael Blair, and the Charity's Bookkeeper, Anna Riding, from Accrue Bookkeeping Services, also attended its meetings. The Sub-Committee met on 8 occasions during 2025/26.

Organisational Review Sub-Committee

Has responsibility for reviewing the Charity's current policies, practices and structures and identifying any changes considered necessary to improve the effective and efficient use of the resources available, to ensure the services delivered best meet the needs of carers. This includes matters relating to the recruitment of staff and volunteers, personnel issues, quality assurance, reviews of policies and procedures, risk and performance management, in order to improve the standard of internal processes and the quality of services provided by the Charity to carers. The Sub-Committee was chaired by the Vice-Chairperson, John MacLean, and it met on 7 occasions during 2025/26.

Sub-Groups/Working Groups

The Sub-Committees have the authority to establish sub-groups to review specific matters that fall within their respective remits and the 3 shown in the chart on page 10 were in place at 31 March 2025. From time to time the Management Committee may establish short life working groups and project teams to deal with cross-cutting issues with membership drawn from both Sub-Committees.

Scheme of Delegation

No matter how effectively the Charity may be administered by the Management Committee, it is neither possible nor desirable for the Trustees to have 'hands-on' involvement in every area of

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

the organisation's activities. Whilst the Committee has responsibility and is accountable for the general control and management of the Charity, and certain matters are the sole preserve of the trustees, part of its work needs to be delegated to others if the Objects set out in the Constitution are to be fulfilled.



The Management Committee has approved a Scheme of Delegation which allows certain decisions to be made on behalf of the Charity by individual Trustee Office Bearers, Sub-Committees, the Manager and Staff Team Leaders. This sets out clear limits on matters such as expenditure, authority and decisions that can be made. The overall responsibility and liability for the actions of those exercising delegated authority remains with the Management Committee, therefore, systems are in place for those exercising delegated powers to report back to the Committee as and when this is considered appropriate. The Scheme of Delegation is reviewed annually and was last updated on 25 June 2025.

Business Planning

One of the main responsibilities of the Management Committee is to determine the Charity's overall Aims, Objectives and future Development Plans and these must support the Charitable Objects set out in the Constitution, as well as sit within the legal framework governing Scottish Registered Charities. To make its intentions clear, the Committee prepares a 3 year Business Plan, which provides a route map of the direction of travel, detailing the Outcomes the Charity is endeavouring to secure for carers in Helensburgh and Lomond, in order to make a positive difference to their lives. The Plan is rolled forward by a year each year and was updated in 2025/26 to set out the Aims and Objectives to be pursued over the following 3 years. The Plan was prepared in consultation with carers and partner organisations, taking account of contractual obligations, as well as the national and local priorities of the statutory authorities.

There were various opportunities for ensuring the views of carers helped shape the Aims and Objectives set out in the Business Plan, including:



- the majority of **the trustees** are carers or former carers and are well placed to represent the views of carers in developing the strategies, policies and objectives;
- the **staff** and **volunteers** have day-to-day contact with carers and, through this regular dialogue, working for carers, they develop a knowledge and understanding of what interventions work best and which services carers consider to be of greatest value;
- the views of **partner organisations** are fed into the Management Committee directly or indirectly and there are good lines of communication with others who provide services to carers, including Argyll and Bute Council, NHS Highland, as well as the Argyll & Bute Health & Social Care Partnership, and
- consultation with **unpaid carers** through the preparation of adult carer support plans or young carer statements, surveys, focus groups, case studies, evaluations of services, face-to-face meetings etc.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

The Business Plan was prepared by the Organisational Review Sub-Committee and approved by the Management Committee at its meeting on 14 May 2025. A copy was published on the Charity's website.

Argyll & Bute Health and Social Care Partnership



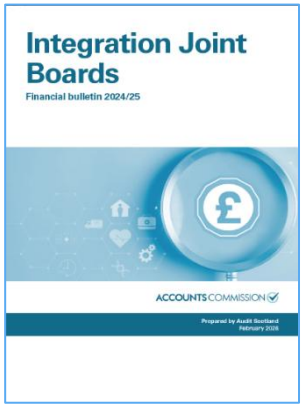
The Charity's key partner in supporting carers is the Argyll & Bute Health and Social Care Partnership (HSCP), established by NHS Highland and Argyll & Bute Council, to integrate health and social care services for Argyll and Bute. The Partnership is governed by an Integration Joint Board, which has responsibility for planning, resourcing and overseeing the operational delivery of the integrated services. The Board approved the HSCP's Joint Strategic Plan for 2022-25, which set out its Priorities and Commissioning Intentions over the 3 years and this included a commitment to work with carers as partners in the care of their loved ones. It makes reference to the National Health and Wellbeing Outcome for carers and states that its Strategic Objective is to **"Support unpaid carers, to reduce the impact of their caring role on their own health and wellbeing."** The Strategy also sets out the HSCP's Vision, which is that **"People in Argyll & Bute will live longer healthier independent lives,"** and its high level priorities are:



- prevention, early intervention and enablement;
- choice, control and innovation;
- living well and active citizenship, and
- community co-production.

The HSCP's Joint Strategic Commissioning Strategy for 2022/2025, sits alongside the Joint Strategic Plan. It is utilised for reviews of all contracts, to assess and forecast current and future needs and the linking of investment in services to meet those needs, as well as providing market messages for providers.

It was intended to combine both these documents into a single publication when they were updated for 2025-2030, but the Board approved the HSCP's request to extend the priorities of the existing Strategic Plan and Commissioning Strategy for 12 months to March 2026. This was attributed to the fact that the Partnership was not operating on a financially sustainable basis. The changing policy environment, potential increased risk, and financial pressures had created a great deal of uncertainty. The delay would allow the Partnership to identify services that are not sustainable in their current model and look at other delivery options. The Board agreed it is important the combined Plan and Strategy sets out priorities that are realistic; align with staffing and financial resources and enable honest and transparent engagement with the communities it serves.



The need for change was reinforced by the Accounts Commission, which published a Financial Bulletin in February 2026 on its audit of the financial performance of the 30 Integration Joint Boards in Scotland. This warned that the Boards, together with their NHS and local authority partners, **must urgently take decision on where to redesign, reduce or discontinue services.** Increasing demand, rising costs and a growing number of people with long-term complex needs are placing mounting financial pressures on IJBs. The boards have reached a critical

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

point; with a significant risk they will become financially unsustainable within the next 12 to 24 months. Alongside savings and using reserves, Integration Joint Boards have been relying on substantial additional funding from their partners in the NHS and local authorities. The Boards need to plan their finances more realistically to reduce this reliance, as health boards and councils face their own significant financial pressures.

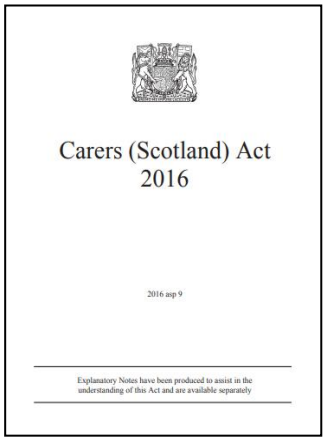
Single Authority Model



A matter that may have implications for the future of the Integration Joint Board is the consideration currently being given by Argyll & Bute Council, NHS Highland, COSLA and the Scottish Government to a proposal to move to a Single Authority Model of integration, currently adopted in the Highland Council area. In March 2026, a joint update was issued by the Scottish Government and COSLA on the progress made. This stated that the policy aim is to improve health and care outcomes by supporting earlier intervention, reducing duplication across functions, and enabling more co-ordinated planning for fragile rural services. In remote and island contexts, these opportunities are critical to the long-term sustainability of public services and to equity of access. Single Authority Models are intended to support preventative, place-based strategic planning and the delivery of key public services in a way that better meets local need and promotes long-term financial sustainability.

At present, two other local authorities, Orkney and the Western Isles, are also considering adoption of the Single Authority Model. However, Argyll & Bute Council, NHS Highland and their partners have submitted an update on work undertaken to assess two shortlisted options: a 'Further Empowered Local Board' and a 'Single Authority Partnership.' Both options would build on the existing Integration Authority arrangements by identifying additional public service functions over which decision-making responsibility could be exercised and/or by designating a single organisation to assume the strategic lead role for the partnership.

Whilst these proposals remain subject to further refinement, they are being supported by both the Government and COSLA. The update indicated that the development of Memorandums of Understanding, or other forms of written agreement, will be explored where local leaders can demonstrate that such arrangements would enable them to proceed with greater confidence in developing and implementing ambitious reforms. No timetable has yet been announced for implementation; however, it is evident that some structural changes could begin during 2026/27, with potential implications for the landscape in which services for carers operate.


Carers (Scotland) Act 2016

2016 asp 9

Explanatory Notes have been produced to assist in the understanding of this Act and are available separately

Carers (Scotland) Act 2016

An important function of the Board is to ensure the duties and responsibilities placed on local authorities and health boards by the Carers (Scotland) Act 2016, which came into effect on 1 April 2018, are being met. This includes jointly preparing and publishing a local **Carers Strategy** setting out plans for identifying adult and young carers and offering them an adult carer support plan or young carer statement; to assess any support needs (if any) they may require to achieve their personal outcomes. There is also a duty to establish an **Eligibility Criteria** that makes clear which needs are considered eligible needs and therefore support **must** be provided and any other

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

needs where support **may** be provided. The types of support are dependent on the nature of their caring situation and the impact the identified needs might have on a carer's ability to continue in their caring role. One of the other documents that had to be prepared and published is a **Short Break Services Statement** providing information about the short break services available in Scotland for carers and cared-for persons.

Following consultation with unpaid carers and the managers of the carers centres in Argyll & Bute, the Health and Social Care Partnership's Carers Act Officer and Young Carers and Child Poverty Officer, prepared the 3 key policy documents required to comply with the provisions of the Act. The Integration Joint Board approved the documents and these were adopted and published. There is a requirement for all 3 to be reviewed and, where necessary, updated at least every 3 years. The Carers Strategy was last updated in 2023/24, but the others have remained unchanged. The current versions are shown as follows:

The 2024-2027 **Carers' Strategy** is constructed around the following key outcomes:

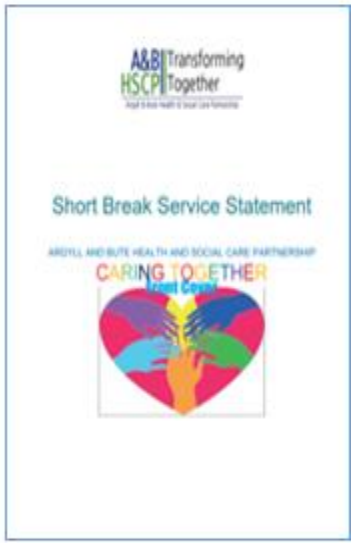
- All carers are identified at the earliest opportunity and offered support to assist them in their caring roles.
- Young carers are supported with their caring roles and enabled to be children and young people first.
- Carers will have access to advice, information and support services to improve their overall health and wellbeing and enjoy a life alongside their caring roles.
- Carers have access to information and advice about their rights and entitlements to ensure they are free from disadvantage or discrimination in relation to their caring roles.

The Strategy, which was approved by the Integration Joint Board, sets out 31 areas for action designed to achieve the above outcomes and the organisations contracted to provide services for unpaid carers in Argyll & Bute are supporting these actions.

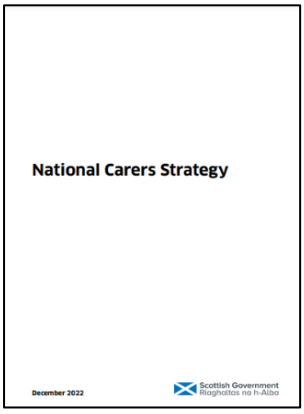
The **Eligibility Criteria** uses a Priority Risk Matrix, with 5 categories of risk, ranging from none to critical impact, and an associated table of risk factors, which practitioners can use to determine whether the needs of the carer cross the eligibility threshold, between needs that **may** be supported and needs that **must** be supported. The current threshold for Argyll & Bute is restricted to the top tier of the Matrix, which means that carers are only referred for statutory support if their caring role is having a critical impact on their health and wellbeing.







Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

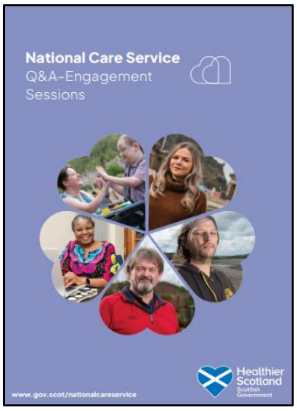


In December 2022, the Scottish Government published its **National Carers Strategy** for Scotland, setting out a range of actions to ensure unpaid carers are supported in a joined up and cohesive way. The key themes of the Strategy intend to put the individual carer at the centre and focus on the following 5 aspects of unpaid carer support:

- living with COVID-19;
- recognising, valuing and involving carers;
- health and social care support;
- social and financial inclusion, and
- young carers.

The Government asked that the Integration Authorities in Scotland reflect the priorities of the National Strategy in the next updates of their local carers strategies.

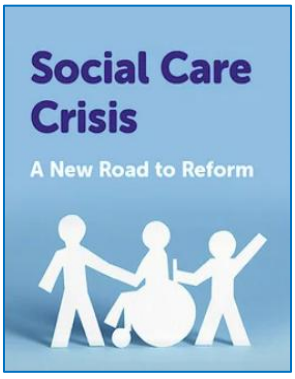
National Care Service



In February 2021, the findings of an Independent Review of Adult Social Care in Scotland, commissioned by the Scottish Government, were published. The key recommendations were that the Integration Authorities be restructured and replaced by Care Boards, and that a National Care Service be established, to drive improvements, ensure strategic integration with the National Health Service, to set national standards, terms and conditions, and to bring national oversight and accountability to a vital part of Scotland's social fabric. The Review also highlighted the increasing pressures on carers and local carers services and recommended that carers be provided with more consistent support to carry out their caring roles and that taking a break and respite should be viewed as integral to carer support.



The Scottish Government indicated it would act on the findings, and on 20 June 2022 it introduced to the Scottish Parliament the National Care Service (Scotland) Bill, proposing the establishment of a National Care Service. This would transfer responsibility for social care from local authorities to this new Service, in order to improve the quality and consistency of social care services in Scotland. The aim was to have the service fully functioning by the end of the Parliamentary term in May 2026.



It transpired that, during its passage through the Scottish Parliament, when the Bill was being examined by the Parliament's Committees, some of its provisions faced significant opposition and the Government was compelled make substantial changes to the original proposals. On 23 January 2025, Maree Todd, the Minister for Social Care, Mental Wellbeing and Sport, announced in a statement to the Scottish Parliament that much of what was contained in Part 1 of the of Bill, which related to structural reforms, would be dropped. However, other key proposals contained in Parts 2 and 3 would continue to be developed and others progressed without legislation needing to be put in place.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

The Minister also said the Scottish Government would form a non-statutory Advisory Board made up of people with lived experience of social care, social care workers, care providers, trades union, the NHS and local government to provide guidance and drive forward improvements within the sector.

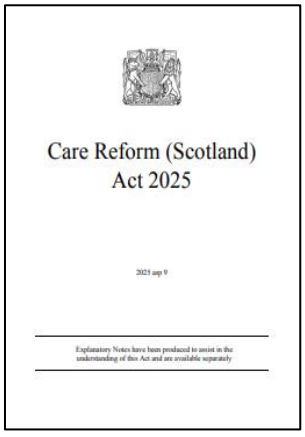
On presenting the Government's amendments to the Parliament's Health, Social Care and Sport Committee for consideration, the Minister said it remained committed to delivering the Scottish national care service, and strengthening national oversight and support remained a priority. In addition, the Government will proceed with publishing a co-designed Charter of Rights and Responsibilities, independent of the Bill and a revised programme to improve complaint services will be developed and delivered.



One of the amendments was to change the title of the Bill to the Care Reform (Scotland) Bill, and importantly, the original proposal to modify the Carers (Scotland) Act 2016, to compel local authorities to include in an assessment of an adult and young carers, their ability to take breaks from their caring role, was retained. Where a carer is unable to take sufficient breaks, the local authority must identify the need for support to enable them to take sufficient breaks in their Adult Carers Support Plan or Young Carers Statement. In its State of Caring Survey 2025, Carers Scotland found that just 13% of carers reported being able to access breaks using formal break services in the previous year.

Care Reform (Scotland) Act 2025

The Bill was approved by the Scottish Parliament on 10 June 2025, secured Royal Assent on 22 July 2025 and is titled the Care Reform (Scotland) Act 2025. However, most of its provisions require Scottish Ministers to prepare regulations to establish commencement dates and provide guidance to how the Act should be implemented, and whilst that work has commenced, it will take time to complete. There are provisions in the Act that allow Ministers to make changes to the Public Contracts (Scotland) Regulation 2015, relating to the commissioning of services, which have implications for the Integration Authorities when contracting services for unpaid carers. Section 9 of the Act states that Ministers must use regulations to prescribe exact timescales for preparing adult carer support plans.


Care Reform (Scotland) Act 2025

2025 asp 9

Explanatory Notes have been produced to assist in the understanding of this Act and are available separately

The Act will change the way services for unpaid carers are planned, commissioned, designed and delivered. Whilst the introduction of a statutory right to short breaks for unpaid carers who need this support was widely supported and welcomed, further information is awaited on how this is to be funded and the additional workload for service providers requires to be addressed. The Management Committee is monitoring this situation closely.

Carers Act Funding

The Scottish Government provided additional funding to local authorities to support the implementation of the Carers (Scotland) Act over 5 years, commencing in 2018/19 and ending in 2022/23. The funding was passed each year to the respective Integration Authorities, which had control over how this was spent and, by the end of the 5 years, this represented an increase of £88.4m. A condition attached to the funding was that it had to be treated as being additional

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

and not a substitute for the local authority's expenditure on carers services in 2017/18, which was the year before the Act came into effect. For Argyll & Bute, the baseline figure was £1,131m and the 5 annual increases, together with an element for inflation over that period more than doubled the baseline figure and meant the Integration Joint Board had control of £2.7m to support unpaid carers in 2022/23. Whilst the annual increases came to an end in 2022/23, the funding became part of the Scottish Government's annual allocation to local authorities for social care and is subject to subsequent inflationary uplifts.

The application of this funding became a contentious issue between the Scottish Government and the Convention of Scottish Local Authorities (COSLA). Government Minsters were aware that much of this funding had not reached carers and they urged local authorities, and those integration authorities that commission services, to ensure these resources were allocated in full to provide the support carers desperately needed, but that did not happen. COSLA responded to the effect that the full £88.4m was allocated to the respective integration authorities across Scotland to enable local areas to meet their wide-ranging statutory duties under the Carers Act. They argued that carers support relies on a much wider health and social care infrastructure than set out in the Carers (Scotland) Act and, with the significant cuts experienced by local government and the public sector, the impacts were being felt across all parts of the social care system.



This meant there were shortfalls in the funding that reached unpaid carers across Scotland in the way the Scottish Government intended. Carers centres and the National Carer Organisations made representations to the relevant authorities, at a national and local level, but to no effect. Given the continued financial pressures on the Integration Authorities across Scotland, there is no realistic prospect of that shortfall being put right. It is therefore important that, when implementing the provisions relating to unpaid carers in the Care (Reform) Scotland Act 2025, the Scottish Government carefully considers how to ensure any additional funding achieves its intended purposes.

Commissioned Services for Unpaid Carers



When the responsibility for supporting adult carers was delegated to the Argyll & Bute Integration Joint Board on 1 April 2016, it initially contributed to the costs of carer services by repeatedly extending the 2015/16 Joint Service Contract the Charity had with Argyll & Bute Council and NHS Highland. However, following a commissioning exercise carried out in 2019 by Argyll & Bute Council on behalf of the Board, this Charity was awarded a new contract for providing carer services within Helensburgh & Lomond, commencing on 1 January 2020 to 31 March 2023. Prior to the expiry of that contract the Council, undertook a further commissioning exercise, and the Charity was awarded another contract for the period 1 April 2023 to 31 March 2025, with an option to extend this for a further year to 31 March 2026.

A significant element to these contractual arrangements was that their value was non-negotiable, but determined each year by the Board. However, this was reviewed annually and the Charity received supplementary payments from the Board for specific projects, and some were embedded in the contract value the following year. The annual reviews also considered inflationary pressures and any increase in workload, and whilst the Board was not obliged to reflect these factors in the contract value, the value did increase each year from 2019/20 to 2024/25.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

The Board did exercise the option to extend the contract to 31 March 2026, but on that occasion kept the value at the same level as 2024/25, as it was compelled to make savings in order to approve a balanced budget for the Health & Social Care Partnership. This presented a number of financial challenges for the Charity, as the UK Government decided to increase the Employers National Insurance contributions from April 2025, at the same time as cost of living pressures were pushing up staff salary and other overhead costs, and the number of carers seeking support continued to rise. However, the Charity managed to navigate its way through these financial constraints and was able to meet the costs of all its commitments, without reducing staff numbers or the support offered to unpaid carers in 2025/26.

It was intended the Board would conduct another commissioning exercise, before 31 March 2026, however, because of uncertainties about the sustainability of the Health & Social Care Partnership, and how the Care (Reform) Scotland Act 2025 was going to impact on services for unpaid carers, it was agreed by the Board and the charities it commissioned to deliver these services, that the best option was to extend the existing contract for a further 12 months to 31 March 2027.

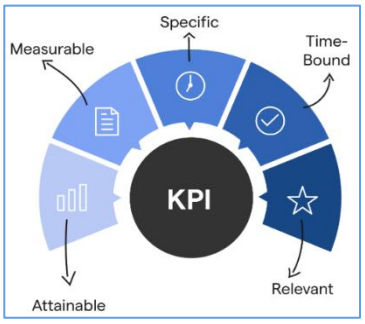
That decision was made before the value of the extended contract was decided by the Board, but it transpired it did not do that until it met on 25 March 2026. The service providers had been alerted to the possibility of the value of their contracts being significantly cut by the Board and that proved to be the case. Whilst the financial impact on the providers varied, this Charity saw the value of its contract for 2026/27 drop by £51,900 from the 2024/25 value, which is a cut of nearly 15%. However, the Board did make some funding available to assist the providers transition to the lower levels of funding, given that the cuts were not confirmed until 4 working days before the start of the next financial year.

The Charity had a contingency plan in place to respond to a cut on this scale, which involved making two members of staff redundant, thereby reducing the staff complement from 12 to 10. This has created capacity issues for the Charity to address in 2026/27.

Monitoring and Measuring Performance

It is important for the Management Committee to monitor the performance of the Charity to ensure it is effectively pursuing its Aims, Objectives and Outcomes, as set out in the current Business Plan.

To assist monitor and measure performance, each of the Objectives has a set of **Key Performance Indicators** (KPIs), detailing certain actions and interventions to be taken, which are designed to ensure compliance, sustainability or some form of improvement/new development. Collectively, the KPIs should evidence whether an Objective is being effectively pursued, therefore, these have to be specific, measurable, time bound, relevant and achievable. Some KPIs are measured by an assessment of whether annual milestones have been reached and others by numeric targets. The Organisational Review Sub-Committee prepares a quarterly Business Plan Monitoring Report for the Management Committee to keep members updated on the progress made and any adjustments that might be required to keep the Plan on track.



The KPIs for 2025/26 were reviewed and updated by the Management Committee before the start of that financial year. As there had been a surge in the number of new carers identified in

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

each of the previous 2 years, it compelled the Charity to adapt its plans to try and cope with the expected rising level of demand for services and the capacity issues this created for the Staff Team.

Risk Management

The Charity's Risk Management Policy was prepared to ensure the management of risk is seen as a positive activity that facilitates good decision making, exploits opportunities and safeguards the achievement of the Charity's Aims and Objectives. Staff and volunteers are trained to ensure that risk assessments are carried out for all operational activities and events involving carers, either organised by them or commissioned from an external service provider. There are also arrangements in place for assessing and minimising any health and safety and environmental risks within the carers centre and other premises and places used for the delivery of services. As part of their governance responsibilities, the trustees monitor and seek to avoid or mitigate any potential financial and compliance risks, that could threaten the viability and sustainability of the Charity.



The Charity's Strategic Risk Register covers governance, operational, financial, external and compliance risks, as recommended by the Charity Commission for England and Wales, which is supported by the Office of the Scottish Charity Regulator. The Register is updated on a quarterly basis and submitted to the Management Committee to allow the trustees to consider the progress made on mitigating actions listed in the Register. On 31 March 2026, there were 69 identified and assessed risks on the Register, placed in the following risk categories:

Risk Type	Low	Medium	High	Very High	Total
Governance	5	6	1	0	12
Operational	6	15	2	0	23
Financial	17	5	2	0	24
Environmental/External	0	5	1	0	6
Compliance	0	4	0	0	4
Totals	**28**	**35**	**6**	**0**	**69**

The 6 High Risks shown in the above table related to:

Risk Category	Risk
Governance	Disruption to normal governance arrangements due to the impact of a serious incident or event.
Operational	Incidents and disasters, such as pandemic illnesses, weather or fire related damage to Lomond House preventing or disrupting the continuity of the delivery of services by the Charity.
	The Health & Social Care Partnership is unable to fully discharge it responsibilities to those who require social care support, as well as their carers, due to staff shortages and/or financial constraints.
Financial	Dependence on individual source of income, namely the contract with the Integration Joint Board.
	The Charity is unable to fulfil its charitable purposes due to significant reductions in the value of its contract with the Integration Joint Board.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Environmental/External	Impact of Government economic policies, legislation or regulation on voluntary giving and the activities undertaken or role of third sector organisations.

At the start of 2025/26, 34 Actions were agreed by the Management Committee to control or mitigate the risks during the year and progress was monitored through quarterly update reports. At 31 March 2026, 29 Actions had been completed, 1 was ongoing and, whilst some progress was made, 4 were not completed, primarily because of factors out with the control of the Charity.

Quality Assurance Accreditation

As part of its ongoing commitment to continuous improvement, the Charity has endeavoured to operate to recognised quality standards. In 2013, it was first accredited under the Practical Quality Assurance System for Small Organisations, which set out the standards carer centres must meet to be a member of the Carers Trust Network. This accreditation was renewed in 2017, but the Trust subsequently developed its own quality assurance accreditation, called the Carers Trust Excellence for Carers Quality Standard Award. In June 2022, the Charity was the first Carers Centre in Scotland to achieve this Award, and 3 years later it was the first to be re-accredited. The Charity will continue to strive for further improvements in the quality of services it offers carers in the years ahead.

Partnerships



One of the Charity's Operating Principles includes a commitment to promote partnership and joint working arrangements within Argyll and Bute. It cannot provide all of the services a carer might require, as some are the responsibility of statutory or third sector/voluntary organisations and others are shared across a number of different bodies. It is important the Charity does not attempt to replicate services that are already being delivered effectively to carers in Helensburgh and Lomond by some other organisation and there are forms of support carers require that others may be better placed to deliver.

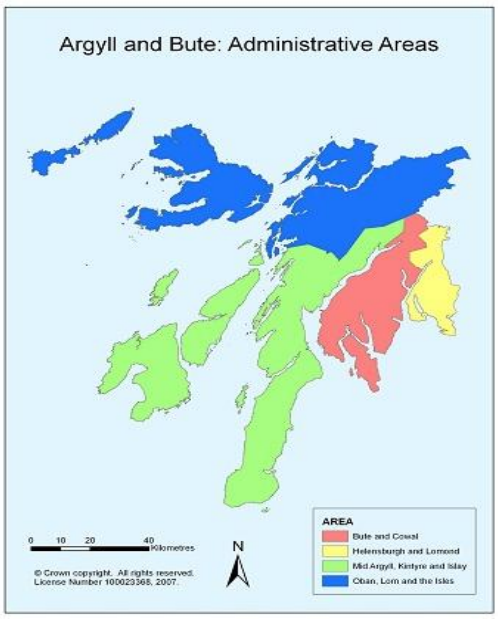
There are well established arrangements and processes for those organisations with such responsibilities to work together for the benefit of carers. The Charity has long standing and mutually beneficial relationships with the locally based Social Work Staff, GP Practices, District Nurses, Schools, Third Sector Interface, Welfare Rights Services, Citizens Advice Bureau, Alzheimer Scotland, Age Scotland, Jean's Bothy, Grey Matters, Helensburgh Community Hub, Lomond & Argyll Advocacy Service, Enable, Red Cross, MS Society, Centre 81, Housing Associations, ALIenergy, the Ocean Youth Trust, Jobcentre Plus and Private Care Sector providers, to name but a few.

One of the legacies from the pandemic and cost of living crisis is that it compelled much greater collaboration and joint working between the statutory and third sector partners operating in Helensburgh & Lomond, and these strengthened relationships have continued to prove beneficial to them and the wider community. However, the current economic climate risks a return to a more siloed way of working, as organisations understandably focus on protecting their own services and financial sustainability. Maintaining and strengthening these relationships will be essential if the wider system is to continue delivering positive outcomes for carers.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Argyll & Bute Joint Working Partnership

The Charity works closely with the 5 other providers of support for unpaid carers in Argyll & Bute since it was established. The Chairs of the respective Boards or Management Committees of each of these charities formed the Argyll & Bute Joint Working Partnership. The Partnership meets regularly to consider matters of shared interest in the services and support offered to unpaid carers and, from time to time, meets with the officers of the Health & Social Care Partnership. The other members are:



- The Dochas Centre, Lochgilphead
- MYADS Lochgilphead
- North Argyll Carers Centre, Oban
- Crossroads North Argyll, Oban
- Crossroads Caring for Carers, Dunoon

The Dochas Centre and the Mid Argyll Youth Development Services (MYADS) cover Mid Argyll, Kintyre and the Isles; North Argyll Carers Centre and Crossroads North Argyll jointly occupy the Carers Centre in Oban and cover Oban, Lorn and the Isles, and Crossroads Caring for Carers, covers Bute and Cowal.

The Carers Trust Scotland

The Charity is a Network Member of the Carers Trust, which is an umbrella organisation supporting a number of carers centres across the UK and care providers in England and Wales. Members pay an annual subscription as a contribution towards the running costs of the organisation. The Trust is a charity in its own right, with a Board of Trustees, but to reflect differences in the membership and types of support offered, each of the nations within the UK has its own Network, with an overseeing Advisory Board, comprising trustees and managers from the member organisations, as well as independent members appointed by the Trust. Membership of the Scotland Network is open to organisations supporting unpaid adult and/or young carers and the Trust has offices and staff located in Glasgow, which is where the Director for Scotland is based.

In Scotland, the Trust engages with policy makers to pursue the interests of unpaid carers and facilitates meetings of trustees and managers from carers centres that are members of the Scotland Network to discuss national issues impacting on the role of carers. It employs a Network Development Manager Scotland and a Policy and External Affairs Manager, who keep members updated on policy and legislative developments. There are also lead officers who represent specific aspects that apply to adult and young carers at a national level.

The Trust organises and runs training courses and learning events for trustees and staff, promotes the sharing of knowledge and experience between centres and publishes regular bulletins to keep members updated on emerging issues. The Trust can also provide advice and guidance on a wide range of topics to assist the day-to-day running of carer centres, including legal and employment matters. Its core costs in Scotland are largely funded by the Scottish Government, but it does attract financial support from various other bodies and individuals to help develop projects aimed at benefiting carers. Whilst much of this is used for large projects, member

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

organisations can apply for grants from the Trust to support local initiatives or individual grants for adult and young carers, and this Charity has been a regular recipient of these funds to benefit carers in Helensburgh and Lomond.

National Carer Organisations in Scotland

The Carers Trust Scotland is one of 7 National Carer Organisations (NCOs) in Scotland, who work together to share knowledge and experience, and by focusing their collective efforts on achieving improvements on behalf of unpaid carers in Scotland. The other members are:

Coalition of Carers in Scotland: the Charity is also a member of the Coalition of Carers in Scotland, which exists to advance the voice of carers, by facilitating carer engagement and bringing carers and local care organisations together with decision makers at a national and local level. It conducts research and prepares briefing papers on topics, focusing on achieving improvements in areas of policy and practice relating to carers, and also organises campaigns to promote the interests of carers.

Carers Scotland: is part of Carers UK and provides information and advice for carers and professionals on issues such as carers' benefits, community care and services for carers. It publishes leaflets, booklets and newsletters to provide accurate and up-to-date information on self-advocacy, policy changes, conducts research and provides training.

Crossroads Caring Scotland: is one of Scotland's leading voluntary sector providers of support for carers and their families, helping people to live independently at home.

Minority Ethnic Carers of People Project: works in partnership with carers, the voluntary and statutory sectors to actively challenge and dismantle barriers that deny Black and Minority Ethnic carers access to health, social work and other social care services.

Shared Care Scotland: has a vision for a Scotland where every unpaid carer can live a full and balanced life, with the assistance they need to take regular, quality breaks from the demands of their caring routines. Its mission focuses on improving the quality, choice and availability of short breaks and respite care across Scotland. It maintains an online directory of short break services and manages the Short Breaks Fund on behalf of the Scottish Government, providing grants to third sector organisations to support unpaid carers to take a break.

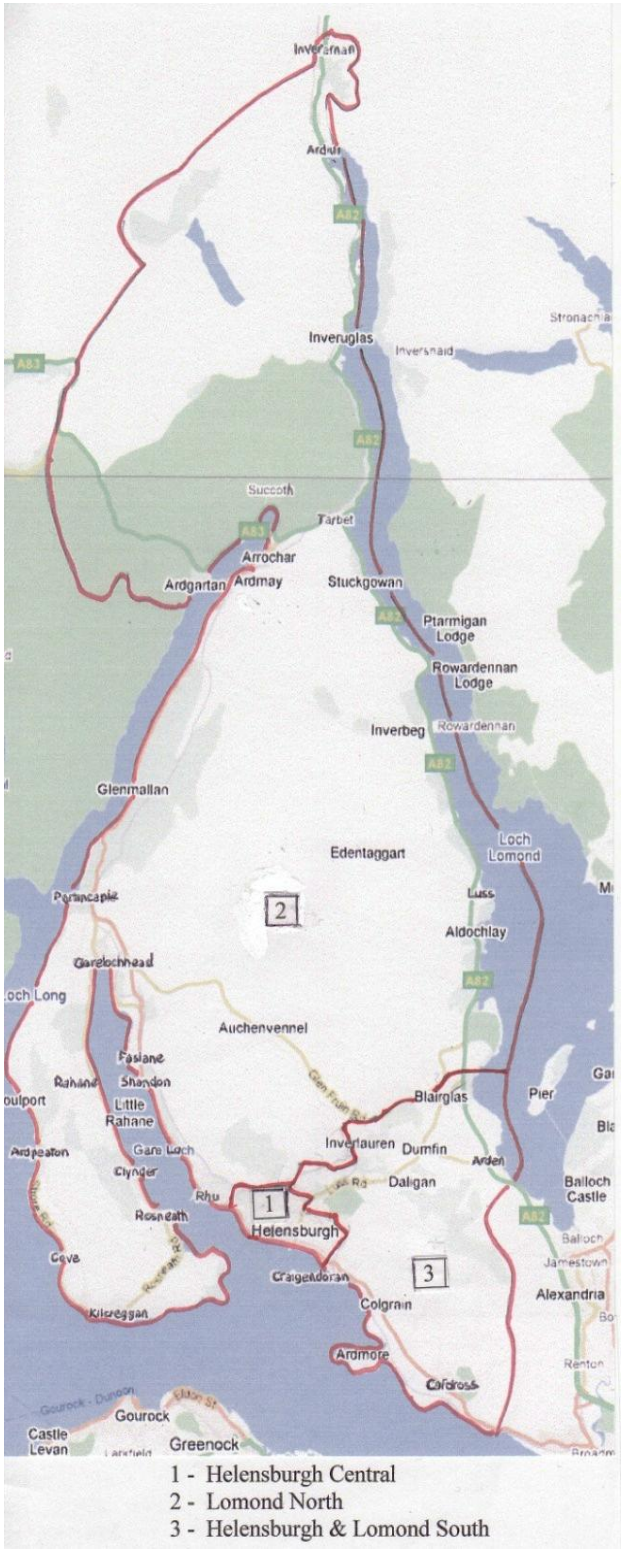
The Scottish Young Carers Services Alliance; is a network of young carers services across Scotland, hosted by the Carers Trust Scotland and funded by the Scottish Government. Its membership comprises 51 organisations providing direct support for young carers.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

SECTION 3 - OPERATIONAL AREA

Area of Operation

The Charity operates within Helensburgh and Lomond, which is one of four administrative districts formed in Argyll & Bute when local government in Scotland was restructured in 1996. It covers a relatively large geographic expanse extending to over 366 sq. kilometres, of which more than half is rural hinterland and stretches from the top of Loch Lomond just beyond the small village of Inverarnan in the north, to Cardross in the south, and from the 'Rest and be thankful' in the west across to Luss in the east. It has three multi-member electoral wards, (See side panel) namely Helensburgh Central, Helensburgh and Lomond South and Lomond North and has a resident population of around 26,260 people (National Records Scotland Mid-2024 Estimates).



1 - Helensburgh Central
2 - Lomond North
3 - Helensburgh & Lomond South

Helensburgh Central is the smallest ward but, with a population of 9,660, it has the highest concentration of residents, as well as being the main centre for business, commerce, public administration and services for the area. The town of Helensburgh has well utilised rail and road links with Glasgow, Oban, Fort William and beyond.

Lomond North has the largest land mass of the three electoral wards. The resident population of 8,760 people live in small towns, villages and settlements situated close to the shorelines of Loch Lomond, the Gare Loch and Loch Long. The ward contains large mountainous and forested tracts of land, particularly between Loch Long and Loch Lomond and to the north and west of Arrochar. These areas are sparsely populated, but a significant feature is that it houses HM Naval Base Clyde, which encompasses several sites, the primary two being at Faslane on the shores of the Gare Loch and Coulport beside Loch Long.

The resident population of 7,840 people in the **Helensburgh and Lomond South** ward live to the north and east sides of Helensburgh, in the village of Cardross and several smaller settlements running alongside the River Clyde and Loch Lomond. The topography is less mountainous than Lomond North, but it has large tracts of moorland and forestry, with a few scattered and remote farms and houses.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Population/Demographics

The Mid-2024 NRS population estimates indicated that Scotland's population reached a record high of 5,546,900, and that it is ageing rapidly. Over 1 in 5 people (20.5%) were aged 65 and over, a significant rise of 16.2% from two decades before. There has also been a marked decline in the proportion of children aged 0-15, due to a falling birth rate and, for the ninth consecutive year, deaths exceeded births, which made inward migration the sole driver of the population increase.

Argyll & Bute is the second largest local authority area in Scotland and has been described as the most geographically diverse area within the UK. Whilst it forms almost 9% of the total land mass, it is the third most sparsely populated local authority in Scotland, and its 87,810 population accounts for 1.58% of the Scottish total. Only five of the 32 Scottish local authority areas have smaller populations.

The NRS Mid-2024 estimated population of Argyll & Bute was 87,690

Argyll & Bute also has the second highest proportion of residents in Scotland aged 65 and over and they made up around 27.73% of the total population, compared to 20.5% for Scotland as a whole. Conversely, it had the lowest proportion of those under 16 years of age, which is 13.89% of the total population, compared to the Scottish average of 16%. The 16 to 64 age group represented 58.38% of the population.

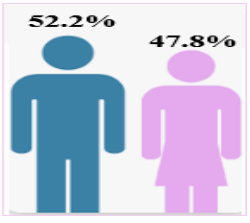
The estimated population of Helensburgh & Lomond was 26,260

The NRS Mid-2024 Estimates show that Helensburgh & Lomond had a population of 26,260 and a slightly younger age profile, compared to the rest of Argyll & Bute. This is largely due to a higher proportion of working-age adults, and whilst it also faces an ageing demographic, it has a lower percentage of residents aged 65 and over and a higher percentage in the 16-64 bracket.

The NRS Mid-2024 Population Estimates are shown in the following table:

Age profile	Helensburgh & Lomond	Argyll & Bute	Scotland
0-15	3,729 (14.2%)	12,180 (13.89%)	898,609 (16.2%)
16-64	16,334 (62.2%)	51,193 (58.38%)	3,511,162 (63.3%)
65+	6,197 (23.6%)	24,317 (27.73%)	1,137,129 (20.5%)
Totals	**26,260**	**87,690**	**5,546,900**

The estimated gender split for Argyll & Bute was 50.1% females and 49.9% males, however, that differed from the percentages for Helensburgh & Lomond, where there were more males (52.2%) than females (47.8%). This higher percentage of males is attributed to the large number of male navy personnel based at HMNB Clyde (Faslane), in the Lomond North area. The all Scotland percentages are 51.4% females and 48.6% males.



Argyll & Bute is one of 5 local authority areas in Scotland, where the population declined between mid-years 2023 and 2024, and the fall of 0.31%, was the highest percentage loss in Scotland. This continued the steady decline in the population over the past two decades, and projections indicate it could drop by a further 6% by mid-2028. This is driven by a combination of demographic and socio-economic factors. As it has one of the oldest populations in Scotland, this leads to a natural decrease, where deaths consistently exceed the number of births. There has also been a significant exodus of young people and working-age adults and, in some areas,

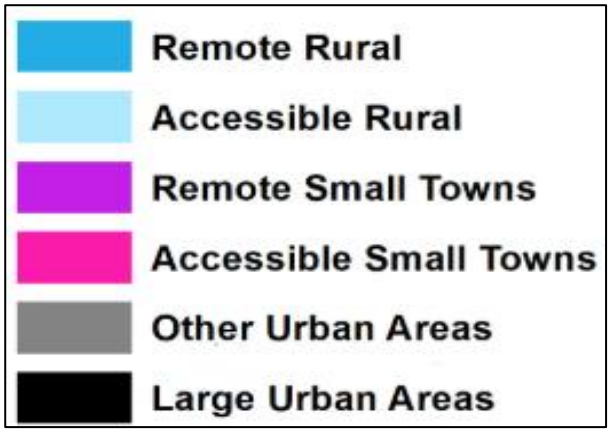
Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

the lack of affordable housing is a critical barrier to retaining and attracting working-age households.

This decline is not uniform across the region and some areas, particularly remote islands, have seen a sharper exodus. However, unlike the rest of Argyll & Bute, Helensburgh is a primary commuter town for Glasgow, which helps buffer it against the more severe depopulation seen in remote, rural and island communities and, whilst still a decrease from some historical peaks, there are signs the population is stabilising. This can partly be attributed to an influx of naval staff and their families, as a result of Faslane becoming the UK's single submarine base in 2025.

Accessibility - Urban/Rural Classification

Around 78% of the population of Argyll & Bute live in rural/remote areas, which is one of the highest proportions in mainland Scotland. The Scottish Government's 6-fold Urban/ Rural Classification provides a consistent way of defining urban and rural areas, and is based on 2 main criteria of population and accessibility.



Argyll & Bute is predominantly classified as rural, with 47.2% of its population living in rural areas (43% remote rural and 4.2% accessible rural). Key settlements like Oban and Dunoon are categorised as "Remote Small Towns," while Helensburgh is considered an "Accessible Rural." Approximately 17.5% of the population of Argyll & Bute live on the 25 inhabited islands, which include Bute, Mull, Islay and Tiree.

Accessibility is calculated using the drive time between urban, rural and remote areas. Accessible rural areas are defined as settlements of less than 3,000 people within a 30 minute drive time from the centre of a settlement with a population of 10,000 or more. Remote areas are settlements of less than 3,000 people with a drive time between 30 and 60 minutes and defined as being very remote if the drive time is more than 60 minutes. The largest settlement in Argyll & Bute is Helensburgh, with a population of over 16,000.

Most of the settlements in Helensburgh & Lomond are classified as being Accessible Rural, with the exception of parts of the multi-member wards of Helensburgh Central and Helensburgh and Lomond South. which are classified as being Other Urban Areas and Garelochhead in Lomond North, which is described as an Accessible Small Town.

Whilst living in a rural community offers many advantages, for those with economic or physical mobility difficulties, there can be disadvantages, compared to their urban counterparts. In particular there are often obstacles to accessing services, due to limited or no local provision or the increased costs in time and transport.

There can also be considerable variability in the availability of housing and services between different rural areas, between different services and between different social groups, but the overall picture is of under-provision. Some people living in rural areas experience barriers to accessing welfare services, education, well paid employment and life chances generally. This is contributing to the population decline.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Access to Services

It can be difficult for many people living in Lomond North and the rural parts of Helensburgh and Lomond South to reach relevant statutory and voluntary support services, because of the distances involved and limited public transport available. For example, the return journey between Helensburgh and Inverarnan is 53.8 miles, Arrochar it is 37.4 miles and Kilcreggan it is 32.2 miles and journey times can become extended because the roads network passes through challenging terrain.

Access is the underpinning issue - access to services, support, information, transport links, employment, education, learning and training - the list is endless and it affects all aspects of life. For young people it can mean travelling long distances to school, sports and recreational facilities; limited interaction with their peer groups; problems finding routes into employment and a lack of nearby support services. These difficulties can be exacerbated for both adult and young people if they are acting as unpaid carers and are constrained by their caring responsibilities. Some cannot leave the person they care for unattended for any significant length of time, which often makes it difficult for them to step away from their caring responsibilities to attend to their own personal health, social and welfare needs.

It is important the service delivery model adopted by the Charity enhances access to support for carers who find it difficult to travel to the Carers Centre in Helensburgh. Whilst digital engagement is an important element of this, face-to-face contact through home visits or using local venues to meet and deliver services in the more rural and remote parts of the operational area has proved to be much more effective. The Charity has sustained access to its services through its outreach work in 2025/26 and while it aimed to develop this further, capacity issues have made that difficult to achieve.



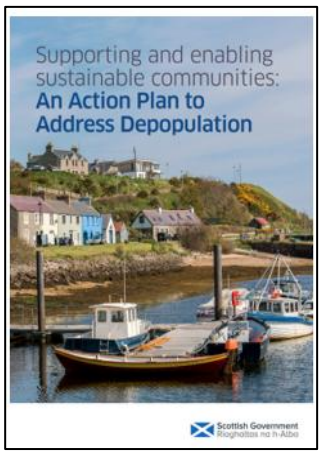
In 2022/23, the Charity extended its outreach work by establishing an operational base in a Community Centre, in Garelochhead, with a hall, gym, youth project, cafeteria and community garden. This is run by Route 81, which is a Youth and Community Enterprise, operating from Centre 81 in Garelochhead, which is also a charity. This has proved to be a highly successful partnership with unpaid carers in the Lomond North area able to use its facilities to access a range of services provided by both organisations, as well as joint events and activities.



In 2025/26 the Charity entered into an agreement with the Cove Sailing Club, which had recently been refurbished, to use its facilities for meetings, events and delivery of services. This has helped extend the reach of the Charity and to identify hidden carers living in the rural parts of Helensburgh & Lomond. The support of Route 81 and the Sailing Club is greatly appreciated.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Scottish Government's Depopulation Action Plan



Population levels and demography are important for Argyll and Bute, as this heavily influences the funding the local authority receives from both the UK and Scottish Governments and impacts on investment decisions from the private sector. The NRS Mid-2024 population estimates identified 5 council areas experiencing a population decline, and this included Argyll & Bute. They are predominately in the west coast and peripheral rural areas of Scotland. In areas where the population is rising, this is due to greater inward-migration than outward-migration.

The Scottish Government has established a Ministerial Taskforce to take forward a Depopulation Action Plan to address the challenges of population attraction and retention in communities facing population decline. This aims to support people to live, work and raise families in the places affected – many of which are rural and island areas. The factors that lead to depopulation are complex and interdependent, and every place is affected differently. It is acknowledged there is no quick fix to these population challenges, and housing, employment, critical infrastructure, talent attraction and migration are all central to the challenge.

The Scottish Government considered the Plan, which was published in February 2024, to be the first phase of the necessary work to address depopulation. A Depopulation Delivery Group is taking forward a second phase to oversee delivery of this Plan and set out its future work to be overseen by a Ministerial Taskforce. There is an acknowledgement that local leadership that takes a place based approach can make the biggest impact on attracting and retaining economically active people in communities. Growing the population is, therefore, a key priority for Argyll & Bute Council.

In March 2025, the Scottish and UK governments signed a £70 million investment programme with the Council to deliver vital economic growth for the area. This 10-year Rural Growth Deal will see the Scottish and UK Governments each contributing £25 million to the programme, and the Council and its partners providing at least £20 million of match funding. The programme is designed to deliver at least 300 additional jobs, training opportunities for more than 6,000 people, support for business growth, new housing and workers accommodation, and attract more than 70,000 additional visitors to the area every year. The deal has reached its implementation phase, with 12 projects targeted at tackling the area's declining population through investment in housing and economic infrastructure. A Settlement Project Support Officer has been employed by the Council to take this forward.



The first project is the restoration and refurbishment of the Rothesay Pavilion on the Isle of Bute and is being followed by redeveloping the existing Kintyre Sea Sports Centre in Campbeltown, to respond to the increasing demand for a wide variety of water sports. A Business Skills Support Programme is being taken forward across Argyll & Bute led by Highlands and Islands Enterprise. A number of STEM hubs have been established, while others are in development to support local skills in Science, Technology, Engineering, and Mathematics.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Developments in the Helensburgh & Lomond area being supported by the Rural Growth Deal include a new £5 million Clyde Engineering and Innovation Centre to provide modern commercial accommodation and collaborative space for defence supply chain businesses, enabling innovation, job creation and local economic growth; a West Coast UAV Logistics and Training Hub, to take forward the research and development of unmanned aerial vehicle technologies, and to provide housing and worker accommodation to support a growing population and business sectors.

Employment and the Economy



The Argyll & Bute economy is predominantly service-based, and the key sectors are public administration and health, tourism, food and drink, clean energy, and land and sea-based industries such as agriculture, forestry, fishing and aquaculture. Manufacturing and finance account for a relatively small share of the workforce in the region. Over 87% of jobs are in the service sector, but this is influenced by the declining working-age population, which is creating recruitment challenges.

Whilst the unemployment rate of 3.5% for those aged 16 and above remains lower than the Scottish average, the region faces an economic inactivity rate for those aged 16-64 of 29.5%, which is notably higher than national levels. People are classed as "economically inactive" if they are not in employment, but do not meet the criteria for being unemployed. This means they have not been seeking work within the previous 4 weeks or were unable to start work within the following 2 weeks. Common reasons include being retired, looking after the home or family, caring for a family member or friend, or being temporarily or long-term sick and disabled. Despite this, the percentage of the population claiming unemployment benefits is comparatively low.

The local labour market is characterised by high levels of self-employment, which at 13.2% is significantly higher than the Scottish Average of 8.7%. Argyll & Bute Council is the largest employer in the region, employing around 4,500 people. NHS Highland covers both the Highland and Argyll and Bute areas, with over 10,700 employees, including around 1,600 working in Argyll & Bute. The Clyde Naval Base at Faslane is the largest single-site employer in Scotland and a major source of jobs for the Argyll and Bute workforce.



Tourism is the largest private sector employer, but it is dominated by small businesses, rather than a single large firm. Agriculture, Forestry, Fishing, and Aquaculture employ a significantly higher proportion than the Scottish average

Employers face persistent challenges in attracting and retaining staff, particularly in remote and island communities. Shortages are reported across public services (including doctors, teachers and social workers) and in private sector roles such as qualified chefs, engineers, technicians and those with advanced digital skills. These challenges are linked to the area's demographic profile and are compounded by practical barriers such as limited affordable housing, restricted childcare provision and transport connectivity.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

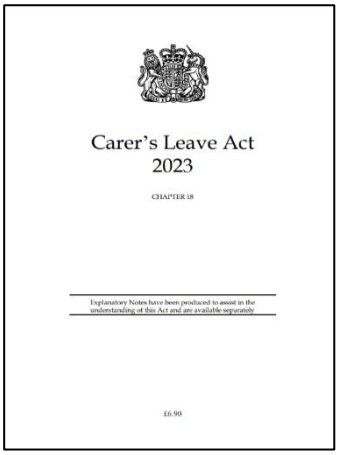
Social Care Employment



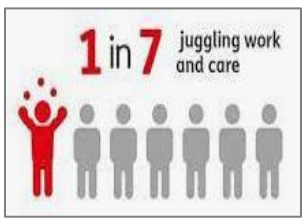
Employment within the Social Care Sector in Argyll & Bute is currently constrained by significant financial shortfalls, which have compelled the Integration Joint Board to approve severe cost-cutting measures. There are high vacancy rates, and a persistent inability to recruit to fill both qualified social work posts, and care-at-home positions. Over 50% of support service staff are over the age of 55, with a high number of employees in nursing and social care approaching retirement in the next few years. The Board commissions small independent providers to deliver certain services, but some are also struggling to recruit staff, often leading to them handing back care-at-home contracts, which further limits capacity. The high cost of living, coupled with lower pay brackets for some social care roles, affects worker retention and availability.

All of this has left staff facing increasing workloads, higher caseloads, and increased out-of-hours work due to resource shortages. There are relatively high rates of absence within the workforce, due to anxiety, stress, and depression, with these remaining top reasons for absence.
Coupled with the cuts made to the funding of the providers of support for unpaid carers for 2026/27, the foregoing is placing additional pressures on carers and those they care for, as well as the wider health and social care services. Whilst this is acknowledged by the Board, it argues that without additional funding from the Scottish Government for Social Care, the situation will continue to deteriorate.

Unpaid Carers in Employment


Carer's Leave Act
2023
CHAPTER 18
Explanatory Notes have been produced to assist in the understanding of this Act and are available separately
£6.90

There is a growing workforce of unpaid carers in Scotland, which seems to be invisible to some employers, or is disregarded by them. Many have found it difficult to secure or remain in employment, as this may require employers to make adjustments to their terms and conditions to allow them to attend to their caring responsibilities. The Carers Leave Act 2023 came into effect on 6 April 2024 and provided working carers with a statutory right to take a week's unpaid leave to attend to their caring responsibilities, by amending the Employment Rights Act 1996. This applies across the UK and whilst the impact of this has not fully been assessed, Carers UK conducted a survey at the start of 2025, which indicated the Act has led to a significant increase in the percentage of employers who have a specific dedicated carer's leave policy in place. Few employers indicated they had challenges with the implementation of the Act, but several commented that the unpaid element was a barrier to accessing carers leave.



Carers UK has estimated that around 1 in 7 of the working age population of Scotland juggle paid employment with caring. This equates to around 2,300 people who live in Helensburgh & Lomond. Having an opportunity to work is an important part of life and, for carers, it often represents a lifeline financially, but also as an important part of having a life alongside caring. However, balancing work with care is extremely challenging and many carers find this impossible and have to give up employment or reduce their working hours. The Report found that 12% of working carers said their physical health was bad or very bad and 22% said the same of their mental health.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Although the Carer's Leave Act is a positive step in the right direction, the unpaid nature of the legislation is problematic and presents a barrier to many carers being able to utilise it – for example, employees with low incomes often cannot afford to take unpaid carer's leave from work. Carers UK, supported by the National Carers Organisations in Scotland, have called on the UK Government to extend the Act by introducing a statutory right to paid carer's leave. It has responded positively to this and the Department for Business and Trade is conducting a review, that includes examining models for paid carer's leave. A public consultation is expected to open in 2026, with the review set to conclude by Autumn 2026.

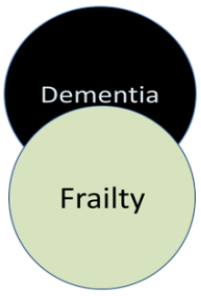
In the meantime, efforts continue to encourage employers in Scotland to engage with the Carer Positive Employer recognition scheme which is sponsored by the Scottish Government and operated by Carers Scotland. Those already accredited employers represent around half a million employees in Scotland.

General Health



The age profile of Helensburgh and Lomond has a bearing on the health of residents, the number who will be carers, the type of services required, the availability of economically active people to deliver them, and the overall sustainability of communities in the longer term. As the proportion of older people is growing, it can reasonably be anticipated this will generate a corresponding rise in the demand for age related health and social care services and in the number of people who have to take on additional caring responsibilities for family and friends. This will result in an increase in the number of unpaid carers living in the area.

The most recent Locality Profile of Helensburgh and Lomond, published by Public Health Scotland in March 2023, indicated that the average life expectancy of males living in Helensburgh and Lomond was 80.2 years and for females it was 82.6 years. This compares with the average life expectancy of 77.8 years for males and 82.0 years for females resident in Argyll & Bute. The all Scotland averages were 76.6 years for males and 80.8 years for females. As life expectancy has improved, the number of people living to older ages with chronic diseases and long-term conditions has increased. As people age, the number with at least one long-term condition increases and, for those under the age of 65, it is 1.1 in every 10 people. This rises to 4.2 in every 10 people aged 65 to 74, 6.2 in 10 people aged 75 to 84, and 7.7 in 10 people over 85.



The Locality Profile estimated that there were 1,124 people aged 60 and over in Helensburgh and Lomond diagnosed as having dementia and frailty, which are major causes of disability and dependency among older people. Frailty is a state of health and is related to the aging process. It refers to a person's mental and physical vulnerability and ability to recover from changes in health resulting from relatively minor injury and illness. Being able to identify and assess dementia and frailty allows early intervention to increase independence, slow progression and reduce the risk of adverse outcomes.

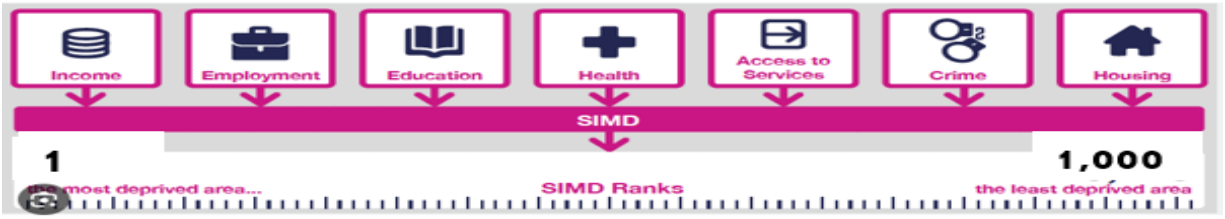
Deprivation Data Zones

Public Health Scotland believe that health inequalities are the systematic, avoidable and health outcomes reflecting unfair differences and are driven by the unequal distribution of income, wealth and power, which shapes the social determinants of health such as education,

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

employment, housing and community environments. Area deprivation is measured by the Scottish Index of Multiple Deprivation (SIMD) which ranks Scotland's data zones, small geographical areas designed to have relatively similar population sizes and characteristics, from most to least deprived based on seven domains: income, employment, education, health, housing, crime, and access to services.

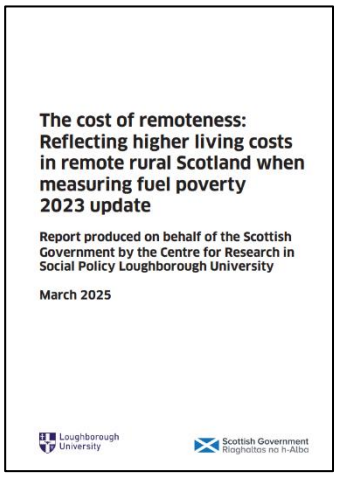
The data zones are geographic areas with a population of between 500 and 1,000 people. There are also intermediate data zones, which cover a larger population and area. These were updated following the 2022 Census and there are now 7,392 Data Zones covering the whole of Scotland. The Scottish Government has indicated it will produce an updated version of the Index towards the end of 2026.



Data zones are widely used across the public sector for planning purposes and they form the basis of the Scottish Index of Multiple Deprivation (SIMD), which ranks all data zones by the factors referred to above. Based on these rankings, each data zone is given an overall deprivation quintile, ranging from 1 to 5, with 1 being the most deprived and 5 the least deprived.

The most recent update of the Index was in 2024 and this divided Argyll & Bute into 125 data zones. This indicated that 52 (42%) of these data zones are among the 20% most geographically access-deprived in Scotland and 13-14 are considered to be in the 20% most overall or income-deprived areas in Scotland. There are 36 data zones within Helensburgh & Lomond, and 2 in Helensburgh Centre and East are ranked within the 15% most deprived in Scotland, with 1 among the top 5.0% most deprived. Approximately 7.3% to 7.6% of the population of Helensburgh & Lomond live in the 20% most deprived data zones in Scotland and 33% live in the 20% least deprived data zones. It is of note that the analysis of the Carers Census for 2023-24 highlighted that 15% of young carers lived in areas with the most deprived ranking in the SIMD, while 5% lived in areas with the least deprived SIMD ranking.

Cost of living in Rural Communities in Scotland


The cost of remoteness: Reflecting higher living costs in remote rural Scotland when measuring fuel poverty 2023 update

Report produced on behalf of the Scottish Government by the Centre for Research in Social Policy Loughborough University

March 2025

Loughborough University

Scottish Government Riaghaltas na h-Alba

The Scottish Government commissioned the Centre for Research in Social Policy, at Loughborough University, to undertake research in remote rural Scotland to identify what income is needed for a minimum socially acceptable standard of living in these areas, and to determine where there were different and/or additional needs and costs compared to urban UK. This compared weekly budgets for those living in urban areas of the UK with those living in remote rural Scotland. This sets out what the UK public agree households need in order not just to survive, but to live with dignity. The first report was published in 2021 and the University produced updated income benchmarks for a range of household types in 2023, and these formed the baseline used to calculate uplifts for the Scottish fuel poverty payments.

The update indicated that families with children living in remote mainland areas, would require to uplift their income by 15% to reach the benchmark figure and for islands it was 14%. For

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

working-age (based on the average of single and couple) the uplift on the mainland would be 27% and 32% on an island and for pensioners, it would be 22% on the mainland and 25% on an island. Whilst household energy costs were a considerable concern, the main budget area that contributed most to the remote rural uplift from the 2021 figures was additional transport costs, which accounted for about three quarters of the difference, as these were over twice as high as for UK urban areas. It is the case that around 57% of households in Argyll & Bute are not connected to mains gas. The Report subsequently led to a range of Scottish fuel poverty grants and energy support schemes, with additional funding for rural and island homes and specific targeting of fuel-poor households.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

SECTION 4 - CARERS PROFILE

Carers in Scotland



It has always been extremely difficult to estimate the number of unpaid carers there are in Scotland, as there is no central system for identifying them. Numerous surveys have been carried out over the years by the Scottish Government and National Carers Organisations to measure the prevalence, but for reasons related to the methodologies adopted, the scope and scale of the exercise, and the way questions were posed, each produced different answers. It is also the case the carer population is not static, but constantly changing with a proportion transitioning in and out of caring each year. However, it is generally accepted the number fluctuates between 700,000 and 800,000.



To try and provide a more reliable estimate, the Scottish Government commissioned an analysis of the different sources of data relating to the prevalence of unpaid care, and the results were first published in 2015 in a Report titled **'Scotland's Carers**.' This provided one of the most detailed pictures of the caring population ever produced, covering issues like gender, carers' health, employment and deprivation. At that time, it estimated there were 730,000 adult carers, which was 17% of the Scottish population aged 16 or over and 29,000 young carers, which was 4% of those aged 4-15.



For a number of years, the Scottish Government relied on these estimates for policy purposes, but in 2020 and again in 2025, it updated the headline figures from that Report. The primary data source for the updates was the Scottish Health Survey estimates between 2019-2023; however, when this was considered alongside the Census data from 2022, there were conflicting estimates between both sources, due to differences in the methodology, the questions asked and the survey formats. The Scottish Health Survey is a sample survey and generally reports higher carer numbers by using trained interviewers to probe for low-level care. The Census uses self-reporting, which often misses lower-level care, leading to potential underreporting. Whilst the 2022 Census reported that 13% of adults aged 16+ in Scotland were providing unpaid care, an increase from the 2011 Census of 11%, the Scottish Health Survey estimates indicated that 15% of adults aged 16+ in Scotland provided unpaid care, a decrease from 17% in 2012-2013. In addition, the Scottish Health Survey has consistently estimated that 4% of the child population (aged 4-15) provide care.



The 2024 update of the Scottish Health Survey was published in June 2026 and it estimated there were 722,000 unpaid carers in Scotland, which was 13.0% of the population that year. This estimated there were 699,000 adult carers aged 18+ in Scotland mid-year 2024, and 23,000 young carers aged 4-17. The significant differences between these surveys and the Census, about the number of unpaid carers show why it is necessary to be cautious when using these estimates, due to their distinctly different approaches.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Over the past five years, those services supporting unpaid carers have seen demand surge following the 2020 pandemic and the subsequent cost of living crisis. While there are indications that the number of new carers coming forward is beginning to slow, the Scottish Government's original assumptions about the impact of the Carers (Scotland) Act 2016 anticipated a "steady state" being reached around five years after implementation (roughly 2022–2023). Under that model, the caseload would peak and then stabilise, with new carers broadly replacing those whose caring role ends. Although more recent evidence suggests that demand has continued to increase, driven by factors such as the aging population and the growing complexity of needs, the original assumptions underpinning the 2016 Act explicitly projected a high but stable long-term level of need. Whilst that peak may be reached at some point, research and surveys often cited by or conducted on behalf of the Scottish Government, frequently highlight that a large, but often varied, proportion of carers still face barriers in accessing support.

Age Profile of Scotland

The Scottish National Records Office Mid-2024 Population Estimates, released on 14 August 2025, show that the total population of Scotland was 5,546,900. This was an increase of 43,100 from the previous year, and is the largest single-year increase in Scotland's population in at least 76 years. Migration was the main driver of that population growth and this table breaks that down to show the number who were pre-school age, school age, working age and retirement age and older. The retirement age is based on those over 65.

Population and Age Profile of Argyll & Bute and Helensburgh & Lomond

Age profile	Argyll & Bute	Helensburgh & Lomond
0-4	3,171	951
5-17	10,869	3,296
18-65	49,725	15,578
66+	23,925	7,177
Totals	**87,690**	**26,260**

The population of Argyll & Bute was estimated to be 87,690 in the Mid-Year 2024 Estimates, and Helensburgh & Lomond made up 26,260 (30%) of the Argyll & Bute total. Using these population figures, and overlaying them on the 2025 update of 'Scotland's Carers,' it is possible to provide a reasonable approximation of the number of adult and young carers thought to be living in Argyll & Bute and Helensburgh and Lomond.

Estimated number of unpaid carers in Argyll & Bute and Helensburgh & Lomond

Estimating the number of carers has to take account of the Carers (Scotland) Act 2016 definition, that a young carer is someone aged 5 to 17 years of age. The 2025 update of 'Scotland's Carers' estimated that around 4% of the population in that age group are acting as unpaid young carers, and between 13.8%-15.2% of those aged 18 and above are unpaid adult carers. By applying the 4% of those aged 4-15 and the mid-point for adult of 14.5% to the population of Argyll & Bute and Helensburgh and Lomond, the estimated number of adult and young carers is shown in the following Table:

Area	Young Carers Aged 5 to 17	Adult Carers Aged 18+	Totals
Argyll & Bute	435	10,680	**11,115**
Helensburgh & Lomond	132	3,300	**3,432**

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

As these estimates do not reflect the uneven population density across Argyll & Bute, the above figures should be regarded as indicative. However, it is clear the number of young carers is under estimated, using the Scotland's Carers formula, as at 31 March 2026, there were 3,789 unpaid carers registered with the commissioned carers services in Argyll & Bute and this comprised, 2,967 adult carers and 822 young carers.

Carers Register



The Charity has maintained a confidential Carers Register for adult and young carers for many years to record the personal details and circumstances of carers who turn to the organisation seeking information, advice and support. If a carer does not wish their details registered or shared with other providers, they will not be denied services. Former carers remain on the Register for a period (normally 12 months) after their caring role comes to an end. During that period, they will receive 'transitional' support as appropriate to their individual needs and circumstances. After 12 months, their records are transferred to an archive file. Some will find themselves acting as carers again at later stages of their life and they can be reinstated on the appropriate Register.

The number of carers on the register is not static; individuals move in and out of caring roles depending on their circumstances and the needs of the person they support. Some provide care for a short period, while others do so over many years. Most young carers do not continue in a caring role when they complete their education and move into adulthood; however, some do and transfer to the Adult Carers Register. Carers do not always inform the Carers Centre when they cease to be active, so periodic audits are required to confirm ongoing caring status. As a result, the reported total number of registered carers needs to be updated from time to time to ensure the statistics remain accurate.

The Charity conducted a full audit towards the end of 2025/26, and the following Table shows the total number of active carers in Helensburgh & Lomond, who were on the Carers Registers on 31 March 2026:

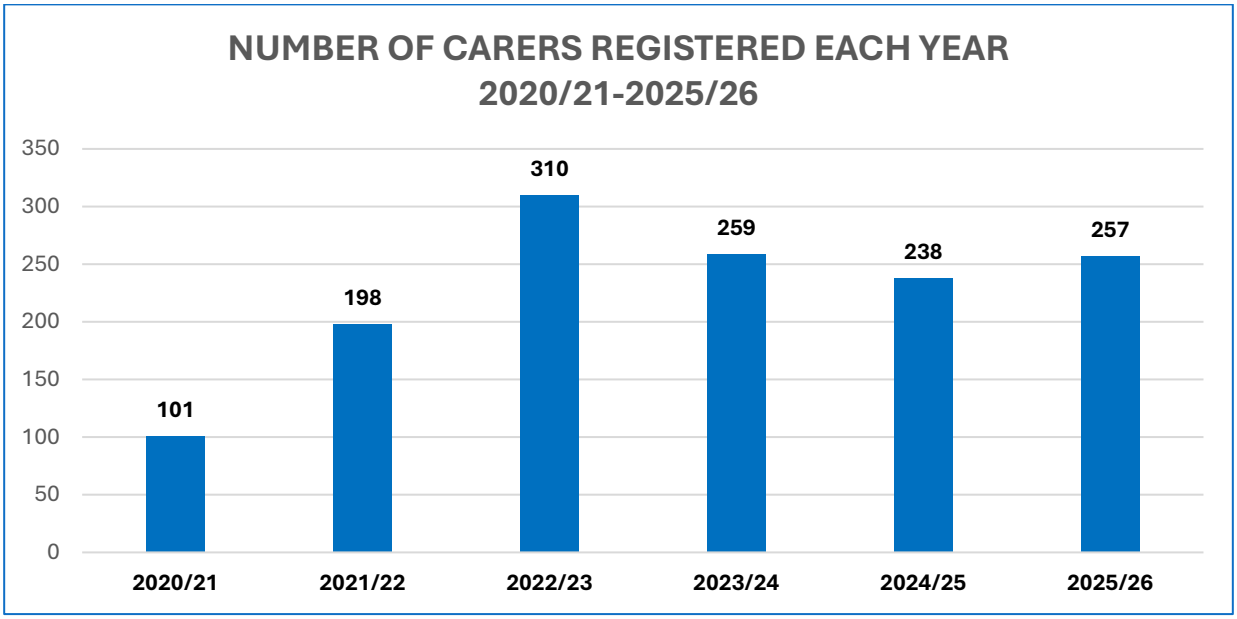
Total Number of Carers Registered at 31 March 2026

Young Carers Aged 5 to 17	Adult Carers Age 18+	Total
334	1,162	**1,496**

It is notable that in the 3 financial years prior to the pandemic, the number of new carers identified by and registered with this Charity averaged 105 per year. In 2020/21, when the pandemic was at its hight, the number registered fell slightly to 101, but the following year, as the pandemic restrictions were easing, there was a surge in these numbers and 198 new carers were registered, which represented an 88% increase compared to the previous 3 year average. In 2022/23 a second surge occurred, which was attributed to a combination of the ongoing fallout from the pandemic and cost of living crisis, which resulted in 310 new carers being registered, which was a 56.5% increase from the previous financial year. In 2023/24 the number registered started to fall, with 259 new carers being identified and registered. In 2024/25 it dropped again to 238, but in 2025/26 it increased slightly to 257.

The changing pattern of new carer registrations over the past 6 years is shown in this table:

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF



Hidden Carers



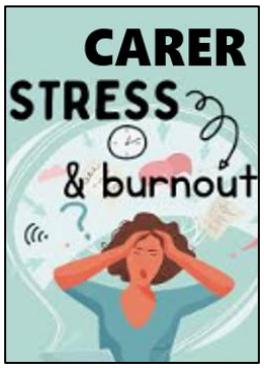
The Charity has an excellent working relationship with the schools in Helensburgh & Lomond, and all have appointed a member of staff to act as the Young Carers Champion. This has made it much easier to identify young carers, and the number registered at 31 March 2026 totalled 334. It is identifying adult carers that presents the greatest challenge and, based on the latest carer population estimates, around 64% of unpaid adult carers in the area are unknown to the Charity and they may not be accessing information, advice or assistance that would help support them in their caring role.



There are many reasons why these carers remain 'hidden' including not recognising themselves as carers, reluctance to involve external services in what may be seen as a sensitive family matter, and a lack of awareness that support is available. For some, the caring role develops gradually and becomes embedded in everyday life, so it is viewed as part of normal family responsibilities rather than as "caring." In other cases, stigma, concerns about confidentiality, fear of judgement, or uncertainty about eligibility can deter individuals from coming forward. Practical barriers, such as limited time, transport difficulties, digital exclusion, or competing work and family commitments, can also make it harder to seek help.

It is also the case that not all carers feel they need or want support, particularly when the caring burden is relatively light, time-limited, or manageable alongside other responsibilities. However, caring responsibilities can increase unexpectedly, for example following a deterioration in the cared-for person's health, a hospital admission, changes to formal care arrangements, or a breakdown in wider family support. As a result, many carers do not engage with services until a crisis point is reached, either because the carer's own health and wellbeing is affected, the cared-for person's needs intensify, or day-to-day coping becomes difficult. This can lead to later identification and missed opportunities for early intervention, planning, and preventative support.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF



Carers UK published a Research Report titled 'Missing Out,' which was based on a Survey of unpaid adult carers from across the UK, to examine their experiences. The key finding was that the majority of carers take years to recognise their caring role. In Scotland, 56% took over a year and 26% took over 5 years to identify as carers. It was also found that some groups of carers, such as parent carers, mental health carers and carers who live more than 2 hours away from the person they care for, take longer than average to identify their role. Many carers wait until they are reaching 'burnout' before seeking help and, in most cases, this could have been prevented if they had been identified earlier.

The Scottish Government's National Carers Strategy aims to change the way care and support services are designed and delivered, with a focus on prevention and early intervention, when a caring role may be less intensive. The identification of 'hidden' or less visible unpaid carers is critical to enable them to access the information and support that is available and that will continue to be central to much of the operational activity the Charity has planned for the next 3 years.

Scotland's Carers Census

Following the implementation of the Carers (Scotland) Act in 2018, the Scottish Government conducted an annual Carers Census to collect information it uses, along with the Convention of Scottish Local Authorities (COSLA), Health and Social Care Partnerships, Local Authorities and other stakeholders, to monitor the take up of carer services. This involved collecting baseline information from local authorities and carers centres for 2017/18 and live data annually from 1 April 2018. The analysis of this information was intended to help stakeholders understand what difference the Act was making to the lives of carers across Scotland, and inform discussions between the Scottish Government and COSLA on future funding to support carers.

Carers Count

Carers Age Groups	
5-17	29%
18-64	45%
64+	26%

The Census only captured information relating to unpaid carers who were receiving some form of support; therefore, it does not provide the full picture. However, the most recent Analysis Report was for 2023/24 and that showed that 58% of the carers included in the Census were adults aged between 18 to 64 and 26% were 65 and over. Young carers made up 29% of those identified, which is a much higher percentage than Government estimates of the young carer population. This may simply indicate that carer support services are reaching a greater proportion of young carers than adult carers. Female carers outweigh male carers in all age groups, with the most pronounced difference being seen in the working age carer group – where 80% of carers aged between 18 and 64 were female. This is consistent with previous findings based on the total carer population, which suggested that females of working age are more likely to provide unpaid care than working age males.

A deprivation effect for unpaid carers supported by local services was noted, however, this was greater for young carers. In 2023-24, 15% of young carers lived in areas within the most deprived Scottish Index of Multiple Deprivation (SIMD) decile, while 5% lived in areas within the least deprived SIMD decile.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

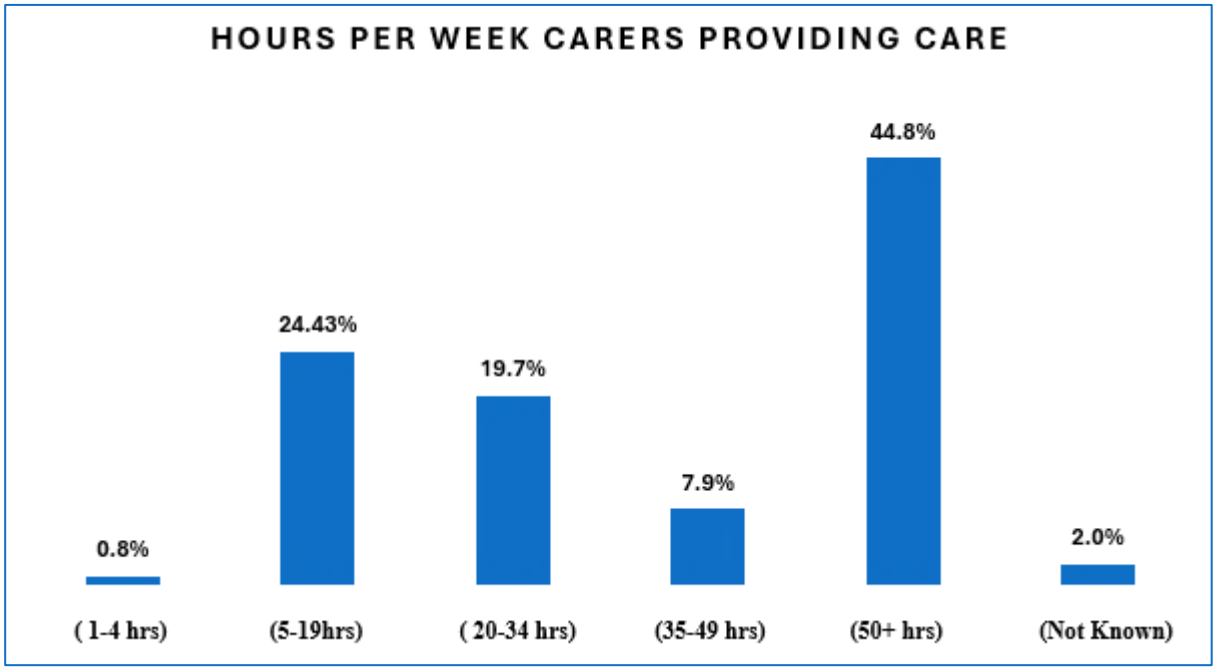
Carers Census Profile of Carers in Helensburgh & Lomond

The Scottish Government has decided to change the Carers Census from an annual schedule to a biennial exercise, but it was paused for 2024/25 to allow officials to carry out an extensive review to try and improve the data quality, as gathering accurate figures on unpaid carers from local authorities and carer centres has been difficult. A number have missed deadlines for various reasons, often leading to undercounts or gaps in regional coverage. This work should help councils update their internal IT systems, so they all record information in the same way, and the collection of data for 2025/26, will commence in the Autumn of 2026.

The 2023/24 Census Report published national percentages of the carers registered and receiving support. This included grouping carers into age bands and it was possible to compare the national percentages with this Charity's Census submission, which shows that 29% of the registered carers were young carers under 18, 45% were adults aged between 18 to 64, 26% were over 64. It was of note that a significantly lower percentage of working age people and a higher percentage of older people and young people were providing care in Helensburgh & Lomond compared to the Scottish averages. As with the Scottish figures, the percentage of female carers in Helensburgh & Lomond was higher than male carers, however females represented 69%, which is lower than the Scottish average of 80%.

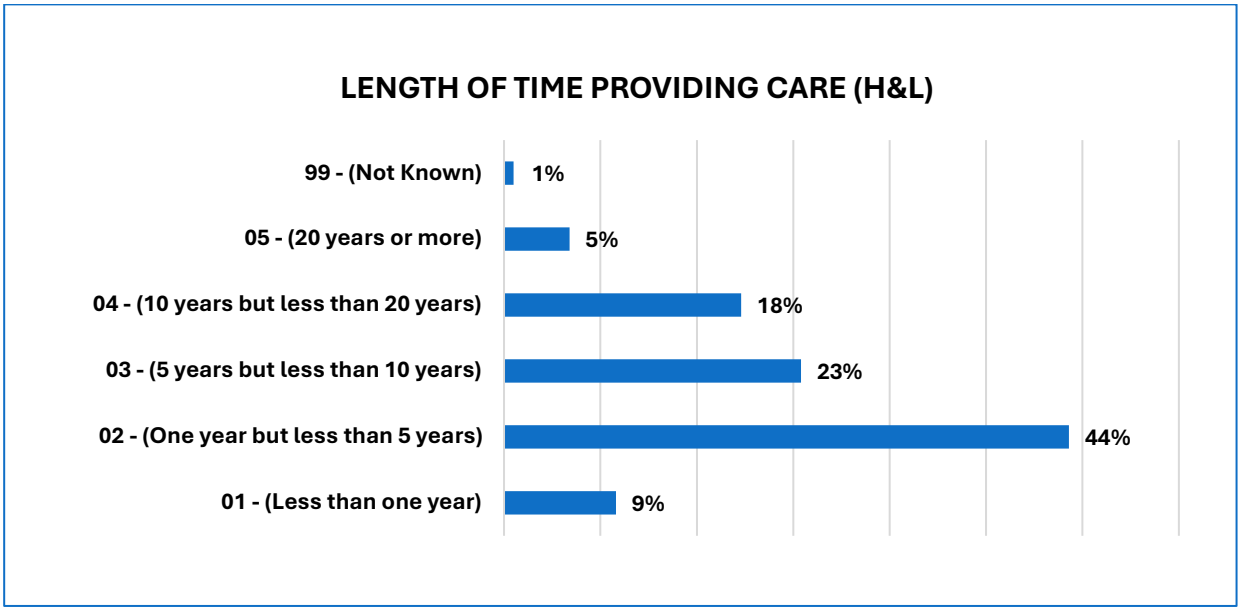
The Charity has collected the data required for the 2025/26 Census and this is useful in updating the profile of unpaid carers in Helensburgh & Lomond.

The Census collects information about the intensity of care provided and the 2023/24 Report showed that 56% of adult carers spend an average of 50+ hours per week providing care, 26% provided care for 20 to 49 hours per week and 18% for up to 19 hours per week. The corresponding 2025/26 figures for Helensburgh & Lomond are shown in the following Chart:

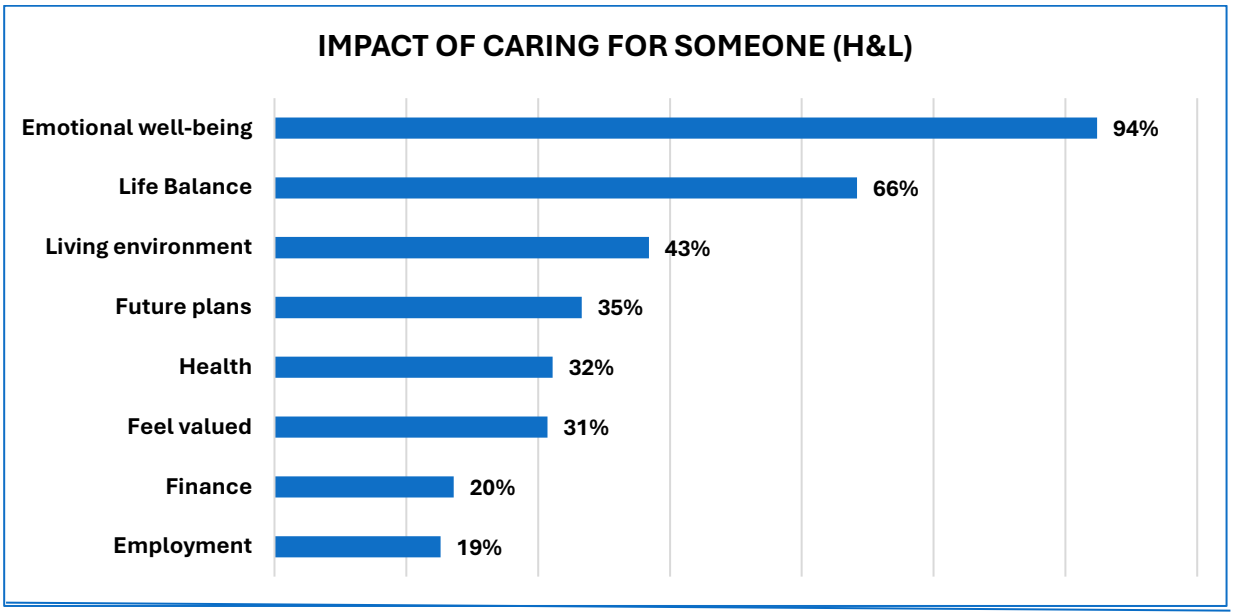


The length of time a carer had been providing care was included in the Charity's submission to the previous Census, but no information about this was included in the Census Report. However, for Helensburgh and Lomond, the figures for 2025/26 are shown in the following Chart:

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

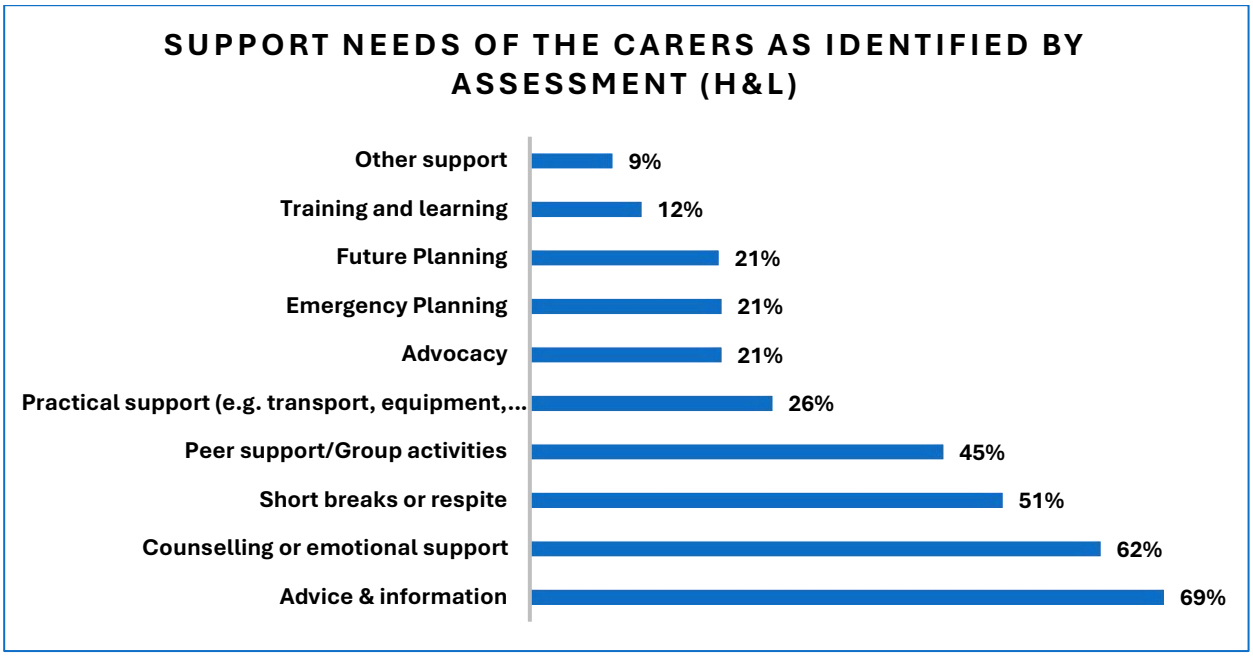


Providing care and support can have multiple impacts, both positive and negative on a carer's life. The information gathered by the Census indicated that the most commonly reported negative impact was on carers' Emotional Wellbeing, this being reported for 86% of adult carers (an increase from 79% in 2022-23) and 91% of young carers (up from 89% in 2022-23). This was followed by impacts on carers' life balance, which was recorded for 85% of adult carers (compared to 75% the previous year) and 67% of young carers (an increase from 59% in 2022-23). This closely matched 2025/26 percentages of the impacts on carers in Helensburgh & Lomond, as shown in this Chart:



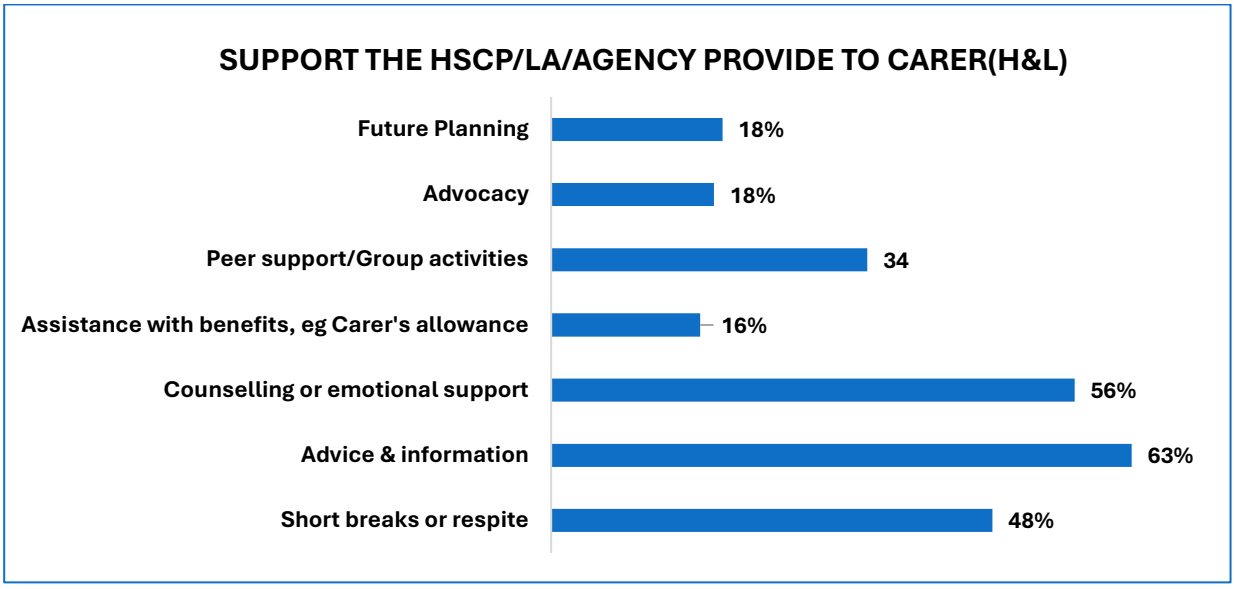
The most commonly reported support need of carers in Helensburgh & Lomond, identified in an Adult Carers Assessment or Young Carers Statement, was Advice & Information, which was the same as the Census data, however, this was followed by Short Breaks or Respite in the Census, whereas in Helensburgh and Lomond it was Counselling or emotional support. Short breaks or respite was the third most common support need in Helensburgh and Lomond in 2025/26, then Peer support/Group Activities. These are listed in the following Chart:

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF



Carers may be provided with multiple types of support in order to both meet their own needs, and to help support them in their caring role. The Census indicated that 40% of carers were provided with short breaks or respite, which was the same proportion as in 2022-23. The proportion of carers provided with advice and information decreased in the most recent Census, from 79% in 2022-23 to 72% of carers in 2023- 24. The data suggested there were differences in the support provided to adult carers compared to young carers, as young carers were more likely to be provided with short breaks or respite (55% compared to 37% of adult carers) and peer support and group activities (50% compared to 16% of adult carers). Conversely, adult carers were more likely to be provided with advice and information (75% compared to 59% of young carers in 2023-24).

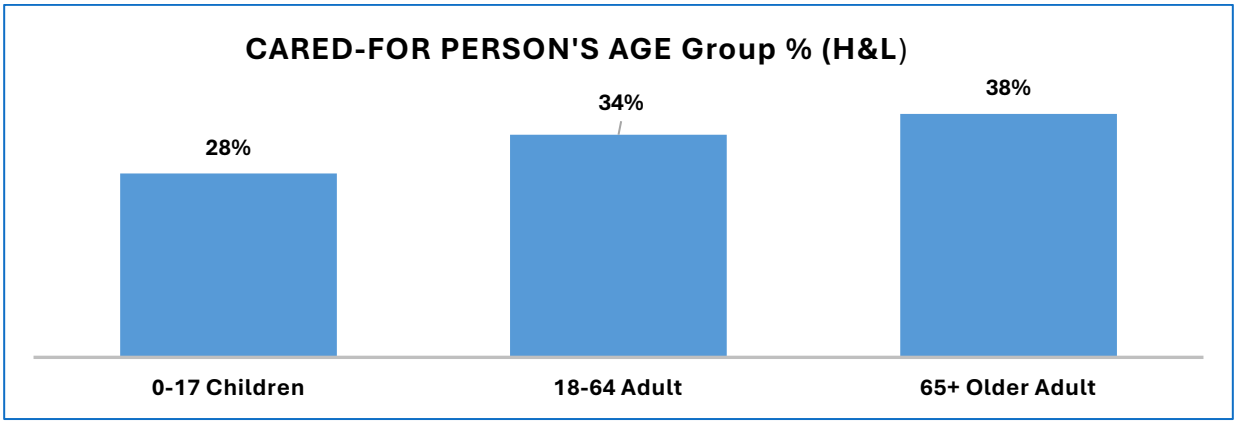
The 2025/26 data for Helensburgh & Lomond showed that 63% of carers received advice and information, 56% accessed counselling or emotional support, 48% accessed short breaks, and 34% participated in peer support/group activities. This is shown in the following chart:



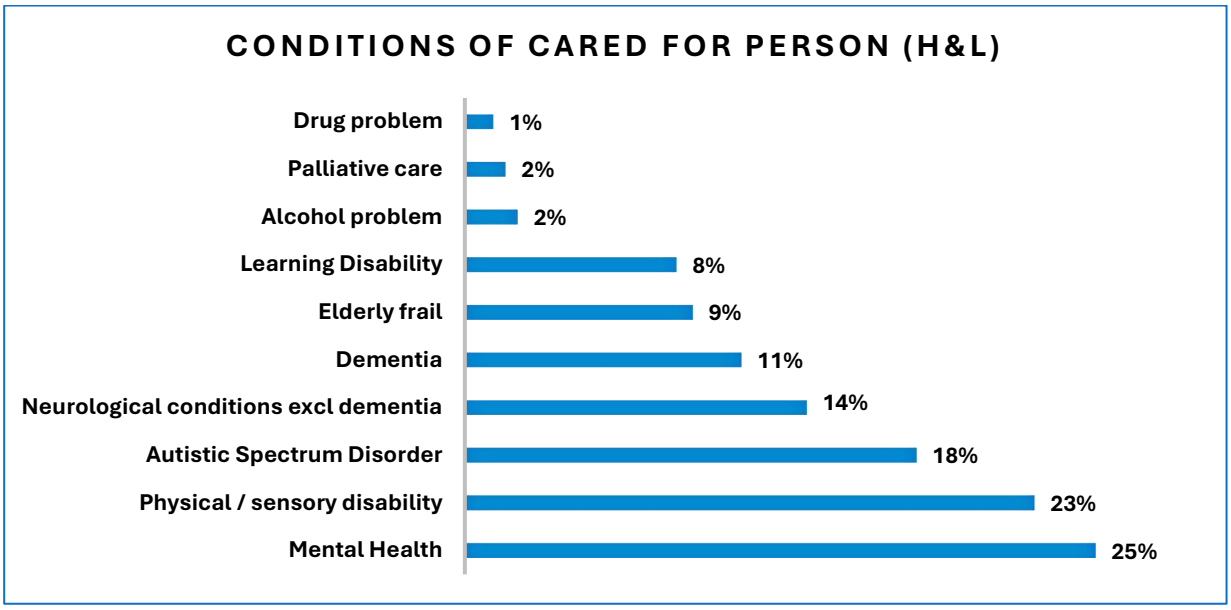
Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Profile of Cared-for Persons

The relationship between unpaid carers and the people they care for can be complex. Carers can provide care to more than one person and cared-for people can receive care from more than one carer. The 2023-24 Census showed that 24% of cared-for people were children, 27% were working age adults and 40% were older people aged 65+. This was very similar to previous years. The 2025/26 percentages for Helensburgh & Lomond are shown in this Chart:

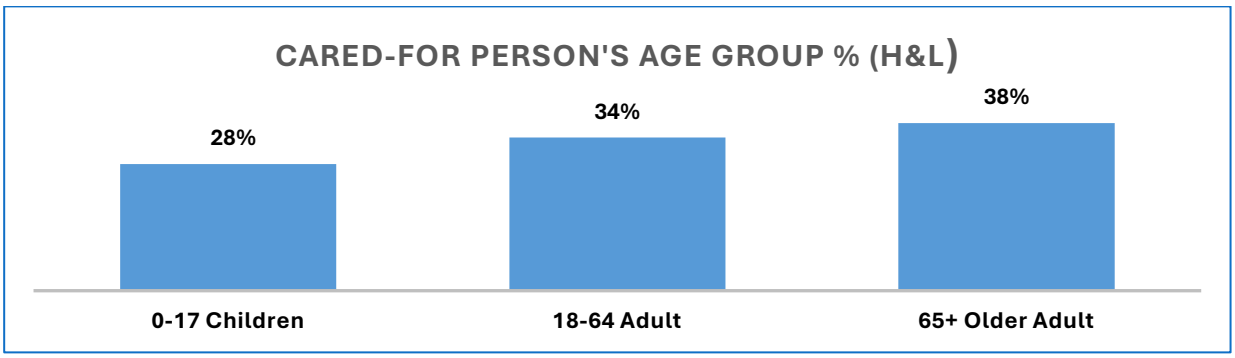


Cared-for people can have more than one condition, but for the purposes of the 2023-24 Census, the analysis was of the main client group for each cared for person. The most common main client group for children receiving care was Autism Spectrum Disorder (42%), which was a 9% increase from the previous year. For adult cared-for people, the main client group was Dementia (19%) followed by Physical/Sensory Disability (13%). The 2025/26 percentages for Helensburgh & Lomond are shown in the following Chart:



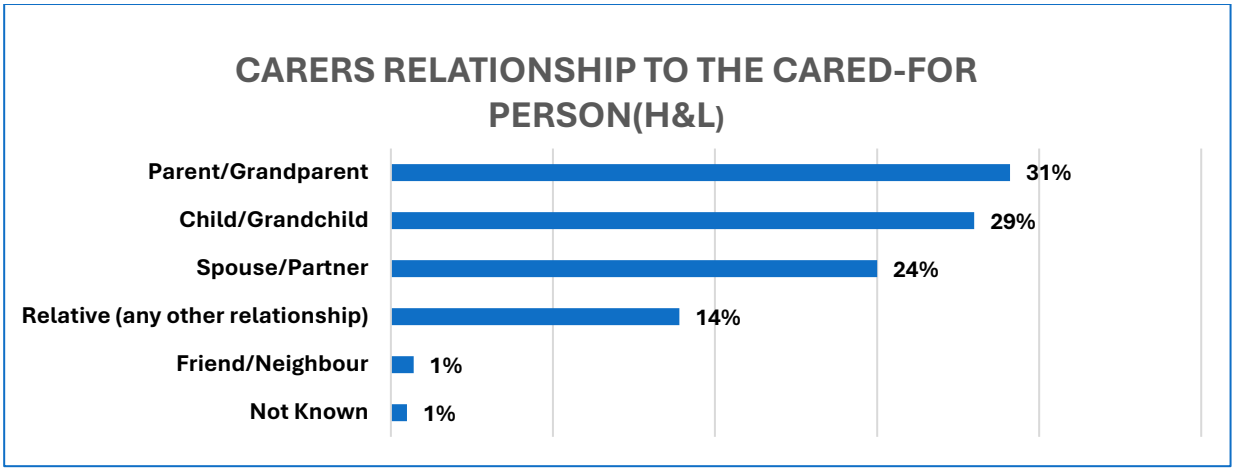
There was a fairly similar proportion of adult male and female cared-for people in the Census Report, which were 45% male and 46% female. This differed for children, as 59% were male and 29% were female. The 2025/26 figures for Helensburgh & Lomond showed that 30% of the cared-for were male and 70% were female. The next chart shows the percentage of those being cared for in Helensburgh and Lomond by age groups:

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF



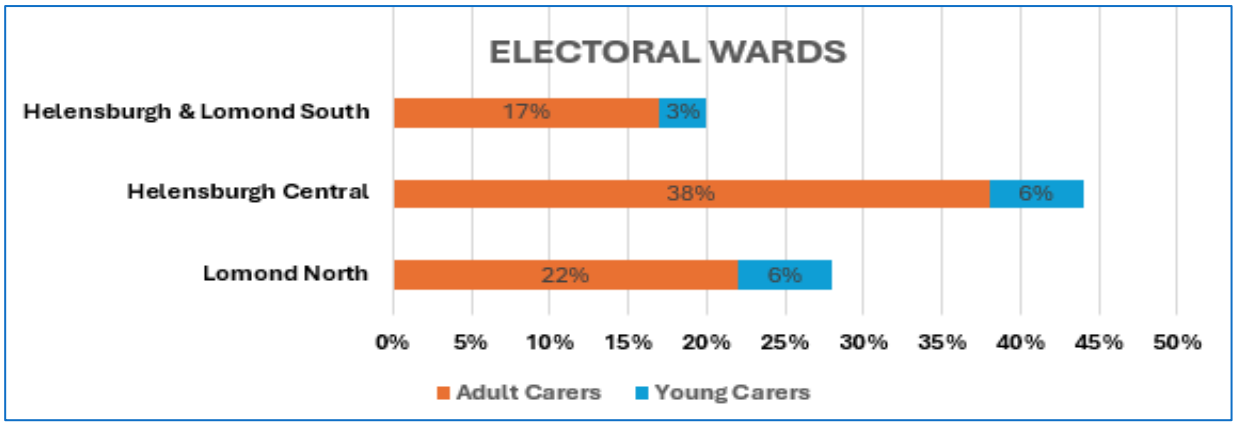
The Census Report states that the higher proportion of boys being cared-for may be because the most common client group of children cared-for by an unpaid carer was Autism Spectrum Disorder (37%), which is more commonly diagnosed in boys than in girls.

In Helensburgh & Lomond, 73% of unpaid carers lived with the cared-for person and the carer's relationship to the cared-for person is shown in the following Chart:



Geographic Location of Unpaid Carers

The Charity records the postcode of all carers registered, which enables the number of carers resident in the 3 Electoral Wards in Helensburgh & Lomond to be mapped. Whilst this is constantly changing, as carers transition in and out of their caring roles, it does help identify locations where the number of carers registered is low compared to other similar locations. This is helpful in targeting efforts to find hidden carers. The following chart shows the number of adult and young carers living in each Ward, but excludes 7% of adults and 1% of young carers who do not reside in Helensburgh & Lomond, but care for someone who does.



Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Impact of Caring



The Charity's purpose compels it to focus on and address the negative aspects of caring, but it is important to recognise there are positive sides to the role and it can be a rewarding experience for both the carers and cared for person(s). It can also have a positive effect on the carer's wellbeing, family life and friendships, as well as mental health through the development of self-esteem and confidence. There is some evidence to suggest that their sense of wellbeing increases for those who provide up to 4 hours care per week. Caring can, therefore, be a positive contributing factor towards wellbeing, providing it is balanced with other activities.

There is also a large body of research which highlights negative consequences for the health and wellbeing of unpaid carers. Most carers in Argyll & Bute are middle-aged or older and it is projected that older carers will provide more very intense care in the years ahead, mainly looking after a spouse in the same household. The impact of caring differs from individual to individual and, for some groupings, the burdens are heavier. This includes:

- socially or geographically isolated carers who have sole responsibility for supporting a disabled/older person;
- carers who are caring for people with complex needs;
- carers who do not know about potential sources of services/support, or where the person they are caring for refuses to use these;
- cases where the care recipient has behavioural problems;
- cases where there is a history of conflict between the carer and the care recipient;
- carers of people who are assessed as not being eligible for services;
- carers from ethnic minority groups, who may be unaware of services/support; be unable to access these; or find them culturally inappropriate, and
- carers who are themselves elderly or have health problems of their own.

All these factors will shape carers' experiences and the impact this has on their general health and wellbeing.

Data Collection

At present, reliable social care data at both national and local authority level continues to lag significantly behind health data. While publications from the Scottish Government, including *Scotland's Carers*, the *Scottish Health Survey* and the 2023/24 *Carers Census,* together offer a broad picture of unpaid care in Scotland, inconsistencies in data collection and methodology continue to produce conflicting estimates. This is not a new problem, and meaningful improvement is long overdue. The Scottish Government's review of the Carers Census must now deliver a clear step change in the quality, consistency and usefulness of the data collected. All organisations providing services for unpaid carers have a direct stake in this and would benefit from access to more robust and reliable data.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

SECTION 5 - SUPPORT FOR UNPAID CARERS

Supporting Carers

There is a need to support carers wherever they are on the caring spectrum, but particularly those providing higher levels of care over a prolonged period. They are the carers most likely to experience physical and psychological health problems, as well as the detrimental financial impact that caring can bring. The purpose of any assistance or support provided should therefore be to reduce or mitigate these negative effects on the carer and promote their own health and wellbeing. In this way the carer may be able to continue to provide the care and this, in turn, will contribute to a reduction in the number of admissions to institutional care.

Information and Advice



Many carers entering into their role feel unprepared for the new tasks involved. Some believe their role has been imposed on them and that little information is provided about how to care for the person. Others have reported they wanted to provide care, but felt their inexperience made day-to-day life more difficult as they adjusted to their role. Carers worried about some of the small practical things and felt that their anxieties were compounded by a lack of information provided to them.

The Carers (Scotland) Act 2016 placed a statutory duty on each local authority to establish and maintain, or ensure the establishment and maintenance of, an information and advice service for relevant carers. This is particularly important at the outset of caring, when many are new to the role, as well as when there are changes in their caring situation. This should be timely, specific and provided by organisations with specialist knowledge on caring. The information and advice that carers have found particularly helpful includes:

- being told about the caring implications when an individual is diagnosed with a long term condition;
- how to navigate the complexity of the health and social care systems;
- their eligibility for benefits;
- legal advice on employment rights or obtaining "Power of Attorney;"
- information on support groups, short breaks and training on coping skills, and
- how to deal with the difficult and challenging behaviour related to the cared-for person's condition.

The statutory requirement under the Carers Act extends beyond the above list and states that carers must be able to access information and advice, particularly about the following:

- their rights, including those set out in the Carers' Charter;
- income maximisation
- education and training
- advocacy
- health and wellbeing (including counselling)
- short breaks;
- bereavement support following the death of a cared-for person, and

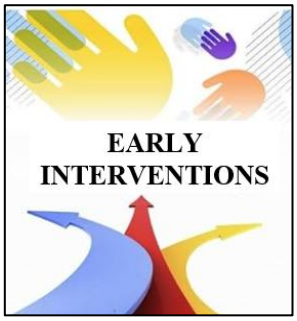
Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

- emergency care and future care planning.

In the associated Scottish Government Guidance to the Act, it states that accessibility includes, among other factors, consideration of the carer's:

- Digital competence and equipment;
- Mobility;
- Rurality;
- Level of understanding.

Interventions



The range of interventions to support carers includes therapy, counselling, stress management, relaxation and behavioural management skills and specialist support, such as addressing financial worries. These can reduce depression and the sense of hopelessness in the first few months of caring and have a positive impact on the carer's mental health. Carers particularly value short breaks and options of various forms of respite from their caring role, and whilst ensuring these have a positive impact is complex, these forms of support have been found to be beneficial. Ensuring that the cared for person's needs are being met can ease the burdens placed on the carer. However, while the interests of the carer and cared for person can be shared and coincide, they can also differ and even be in conflict. It is therefore essential that their respective needs are assessed and addressed separately.

Determining Carers' Needs

The contractual arrangements between this Charity and Argyll & Bute Integration Joint Board specify that all adult carers identified must be offered information and advice, as well as an opportunity to have an Adult Carers Support Plan prepared. Young carers are offered an opportunity to have a Young Carers Statement prepared. Both processes involve a support worker engaging in a conversation with the carer to allow them to determine what outcomes they wish to secure. This allows the carer to be more involved in designing their own support plans to achieve their desired outcomes. If handled well, the process can be beneficial to carers and provide them with emotional support by recognising the contribution they are making and giving them the opportunity to talk through their role. The final version of the Plan or Statement has to be signed off by the carer concerned and these provide the basis for the delivery of further information and advice and access to the support services they require.



The Charity aims to offer an appointment to have a Support Plan or Statement completed within 5 working days of them first being identified and registered. When this has been signed off by the carer, arrangements are then made for any support or services identified in the Plan or Statement to be provided and monitored by a named member of staff. There is a requirement for the Plan or Statement to be reviewed every 6 months by the support worker or, where this offer has been declined, to offer this option again to the carer. However, meeting this requirement is difficult for the Charity to achieve, due to capacity issues, and that will not improve in 2026/27 because of a reduction in the number of staff it can afford to employ.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Local Eligibility Criteria

The Carers (Scotland) Act 2016 requires the needs identified in an Adult Carer Support Plan and Young Carer Statement to be defined as being either 'eligible' needs, which **must** be supported by the statutory authorities and 'other needs,' which **may** be supported. In Argyll & Bute, the threshold for statutory support is set out in the Local Eligibility Criteria, referred to in Section 2 of this Report. This states that carers who have a Plan or Statement prepared will reach the threshold where their caring role is assessed as having a critical or substantial impact on their health or wellbeing, requiring high level, specialist interventions. However, the Eligibility Criteria also recognises the importance of investing in appropriate anticipatory, preventative mainstream support, including the services provided by the local carers centres, to avoid carers reaching the point when their caring responsibilities are making a critical or substantial negative impact on their lives.

The National Carers Strategy, published by the Scottish Government in December 2022, includes a commitment to overhaul the current mechanism of eligibility criteria, which would mean changing the way care and support services are designed and delivered. It wants the focus to be on the support people need, not on eligibility, and prevention will be prioritised, to ensure that people can move easily between different types of care and support as their needs change. Whilst there have been a number of consultations with interested parties on changes to the eligibility criteria, the reality is that few local authorities have modified their eligibility criteria to reflect the 2022 Carers Strategy. They have retained the discretion to set their own threshold criteria based on local budgets and demand. As a result, different criteria operate across Scotland, but few are investing in early intervention and preventative measures, and most only provide support when a carer reaches a full crisis point.

Short Breaks and Respite Care



Caring can seem to many carers to be a remorseless task, in that it is never ending or improving. Whilst most carers accept this situation, in the interests of their own health and wellbeing, it is important they do have an opportunity to take a break from their responsibilities. The National Carers Strategy highlights the fact that access to personalised, flexible short breaks can make a real difference for carers and states:

> "It is vital that carers are able to take breaks from their caring responsibilities, especially for the mental health benefits they provide and the opportunity for people to recharge their batteries. This can help to sustain caring relationships and enable carers to have more of a life of their own. Breaks need to be accessible throughout the caring role and be a positive experience for both the carer and cared-for person. Making sure all carers are able to take regular breaks from caring is key to building a resilient and sustainable caring relationship."

The Carers (Scotland) Act 2016 required each local authority to prepare and publish a Short Breaks Statement containing information about the short breaks services available in Scotland for carers and cared-for persons. The Scottish Government has provided grant funding to carers centres for a number of years, through Shared Care Scotland, to meet the costs of short breaks for both adult and young carers and local authorities have individual arrangements for meeting or contributing to the costs of respite breaks for carers and cared-for persons. The Fund is split into the following four programmes administered by Shared Care Scotland and the Family Fund to provide preventative breaks for carers alongside (and not in place of) statutory support under the Carers Act:

SHARED CARE SCOTLAND

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

- *Better Breaks* and *Creative Breaks* programmes provide 12-month grants to third sector organisations to develop and deliver short breaks projects;
- *Time to Live* provides micro grants, to help carers fund short breaks, and
- *Better Break* provides direct grants to carers of disabled children and young people to support personalised short breaks.

There are challenges in ensuring that carers can benefit from these options, particularly securing respite services for the cared for person, to allow their carer to take a break. Short breaks are less likely to be options where the cared for person is reluctant to go into residential care, even for a short period, or is unhappy with someone else providing the care they require. Day care and other provisions can provide an effective short respite from caring responsibilities and are more likely to be accepted by the carer and cared-for person than residential care. However, in many parts of Scotland, these types of services are limited or are reducing due to public sector finance limitations and private sector costs can be prohibitive. This option also reduces when specialist support is required or there is some deterioration in the health of the cared for person.

At the end of 2023/24, Cornerstone, which provided respite care services for people in Helensburgh and Lomond with a variety of conditions, including learning disabilities, physical disabilities, autism and complex care, closed, as its contract with Argyll & Bute Integration Joint Board was not renewed. Similarly, Ardlui House, in Charlotte Street, Helensburgh, which was run by Sense Scotland, also closed on 31 March 2024, due to mounting financial losses. This purpose built facility has provided a short break service for children and young people with complex needs, up to the age of 24, for many years. The loss of these services was a major blow to parent carers as there are no alternative providers operating in the Helensburgh & Lomond area that will enable them to take short breaks from their caring responsibilities.

As a result a number of parents formed a group called Parents for Change and, as well as lobbying local politicians and officials for the restoration of these services, they started what is called 'Sunday Funday' events, held in Centre 81 in Garelochhead. This is entirely run by the parents and it provides an opportunity for those children and young adults to meet together for play and entertainment. Whilst the Group has been unsuccessful in restoring the lost services, the Sunday Funday events have proved to be a huge success. The Charity has provided support to the Parents for Change Group as best it could throughout 2025/26.

Short breaks are vitally important for carers and those that have benefited from them have had an opportunity to recharge their batteries. However, taking advantages of the breaks can prove elusive for various reasons and many people struggle to find suitable breaks.

Care Reform (Scotland) Act 2025



The Scottish Government's Care Reform (Scotland) Act 2025 includes provisions to modify the Carers (Scotland) Act 2016, in relation to the need for adult and young carers to take sufficient breaks from their caring responsibilities. This means that each carers support plan or young carers statement, must identify, as a personal outcome, whether or not the carer is able to take sufficient breaks. If they are not, the responsible local authority must identify the need for support to enable the carer to take sufficient breaks.

However, the Act's main provisions cannot be implemented until Scottish Ministers produce Regulations and statutory guidance on how these are to be interpreted. It will also have financial

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

and capacity issues for the Integration Authorities and service providers to address, as they cannot charge carers any fees for arranging these breaks.

Scottish Ministers launched a public consultation on the rights to breaks from 27 February to 22 May 2026, which invited unpaid carers, local councils, and sector organisations to share their views on how the new legal rights should be managed and delivered in everyday practice. The areas covered were:

- defining a "Sufficient Break" to gather views on how to set a clear, national standard so that local authorities assess carers' needs consistently;
- setting fixed timescales for local authorities to prepare Adult Carer Support Plans and Young Carers Statements;
- deciding what types of respite care and support should qualify as an official break from caring.

The feedback will be analysed by the Scottish Government to assist them write the final rules for implementing the new legal rights for unpaid carers.

Argyll & Bute Fair Access and Threshold of Care Policy



Between July and August 2025, Argyll and Bute Health and Social Care Partnership conducted a consultation to gather the views of communities, staff, providers and carers on a proposed savings measure involving the introduction of a cap on the level of care delivered to individuals eligible for Care at Home services. A report was submitted to the Integration Joint Board at its meeting on 17 September 2025, setting out the consultation feedback and recommending the introduction of a 'threshold of care' to limit paid care to 25 hours per week. Following discussion, the Board approved the measure, but set the limit at 28 hours per week.

This change was presented as a fair and proportionate policy response to help the Health and Social Care Partnership deliver services within the staffing and budget resources available, while prioritising those with the greatest need and promoting greater fairness in access to care across Argyll and Bute. It was acknowledged that exceptions might be required in certain circumstances, and the Partnership committed to working with affected individuals and their families to discuss the range of alternative options available to them.

Ultimately, the introduction of a threshold does not remove the need for support; it simply redistributes responsibility away from the public authority and onto unpaid carers and family members. In practice, where assessed need continues beyond the capped level of provision, the shortfall must be met elsewhere, most often by those closest to the individual requiring care. Far from resolving pressure within the system, the policy risks transferring it into the home, placing unpaid carers under increasing emotional, physical and financial strain, and leaving families to bear the consequences of unmet need.

This wider pressure on families is compounded by a severe shortage of independent providers able to deliver Care at Home packages to those who are eligible, with some commissioned services already being withdrawn as providers hand back contracts or close altogether. Rural operating costs, low pay and persistent recruitment difficulties have made the delivery of care at home increasingly unviable. More broadly, the public funding available to providers has not kept pace with the true cost of delivering these services. The result is a growing reliance on unpaid carers to fill the gaps, increasing the risk of exhaustion and burnout.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

SECTION 6 - STAFFING AND VOLUNTEERS

Funding Sources - Staff Costs

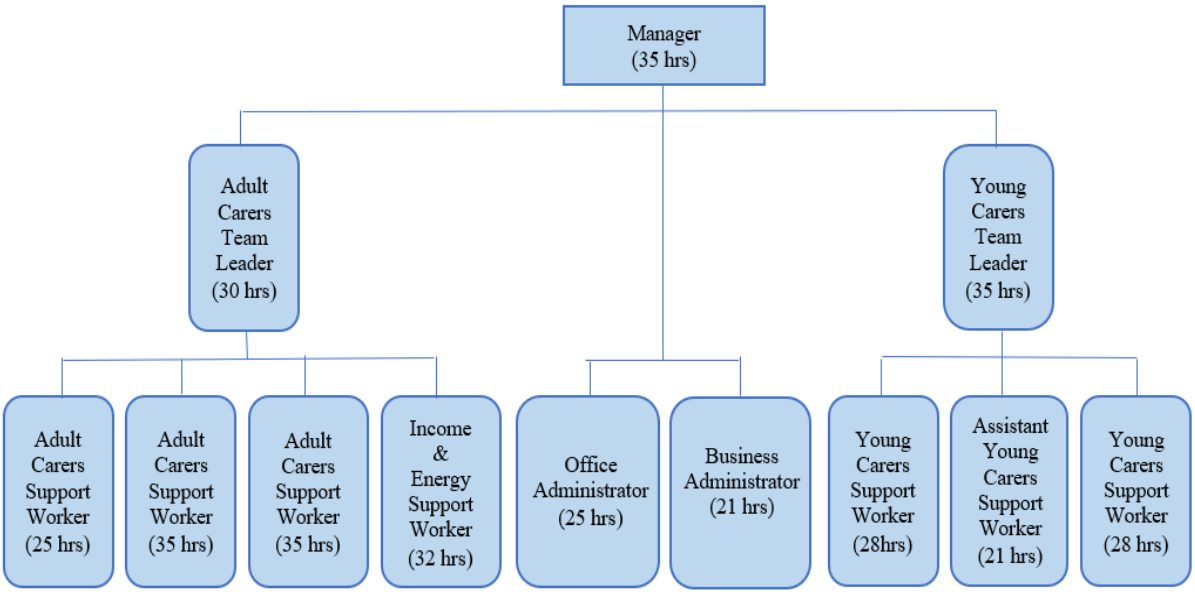
As outlined in Section 4 of this Report, it is estimated there are around 3,300 adults providing care for someone in Helensburgh & Lomond. At 31 March 2026, the number of adult carers registered with the Charity reached 1,162, which represents around 35% of that number. The Scottish Government policy is to offer support to all unpaid carers, but to do that in Helensburgh & Lomond, more has to be done to identify hidden carers and to ensure the Charity has the capacity to support them.

Whilst there are still young carers who are not known to the Charity or statutory authorities, this is becoming less of an issue for those still in education, because of the increased efforts being made in schools to identify them and ensure they can access the support that is available. At 31 March 2026, there were 334 young carers registered, which exceeds the current estimates, based on the Scotland's Carers formula. However, it is more challenging to identify adult carers, which is an ongoing priority for the Charity.

The growth in the number of adult carers being registered over the past few years has stretched the capacity of the Adult Team and, if the increase in registrations continues at or around the same rate, it will prove impossible to sustain the same level of support. The Management Committee had hoped to be able to secure funds in 2025/26 to recruit an additional Adult Carer Support Worker to help address the workload pressures this created for the existing staff, however, efforts to raise the money through grant funding applications in 2025/26 were unsuccessful.

Staffing Structure in 2025/26

At 1 April 2025, there were 12 staff employed, and that remained unchanged through to 31 March 2026, as shown in this chart:



The 4 full-time and 8 part-time posts worked a total of 350 hours per week, which is equivalent to 10 full-time posts.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

The number of staff the Charity can employ is dependent on the income it receives from the contract it has with the Argyll & Bute Integration Joint Board for the delivery of carer services, and the grants it is able to secure to pursue particular projects and initiatives. This is supplemented by monies raised from donations and fundraising activities. Whilst, in 2025/26, most of the posts were either fully of partly funded by the contract, the costs of some individual posts were met by a combination of different funds. Although the number of staff employed has fluctuated over the years, staff numbers remained stable throughout 2025/26.



Unfortunately, the above level of staffing cannot be sustained into 2026/27, as a consequence of a reduction in the value of the Integration Joint Board Contract. This has compelled the Charity to reduce its expenditure by making 2 staff posts redundant, and reducing the hours of another post. Whilst efforts will be made in 2026/27 to secure external funding to try and restore some of the lost capacity, that will be challenging in the current financial climate.

The Charity will endeavour to lessen the impact on the remaining staff by making greater use of digital systems and emerging AI-enabled services. These tools are expected to streamline routine administrative tasks, improve access to information, and support more efficient service delivery, thereby helping to reduce workload pressures and maintain support for carers despite the loss of posts. This approach will not compromise face-to-face engagement with carers, which will remain an essential part of the Charity's service and support model.

Staff Remuneration



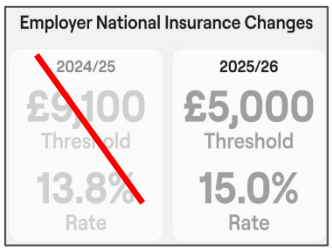
The Charity has outsourced the administration of its payroll to Glasgow Council for the Voluntary Sector, which provides services for third-sector organisations. Staff salary costs represented around 60% of the Charity's total expenditure in 2025/26. The Charity operates a spinal column point pay structure for salary administration, with each post mapped to an appropriate point on the scale. Placement on the scale is informed by job evaluation, which is undertaken to determine the relative value of each new post to the organisation, or where there has been a material change to the duties and responsibilities of an existing post. In order to respond to inflationary pressures and support staff retention, Contracts of Employment are matched to pay movements agreed through the Scottish Joint Council (SJC) Scheme of Salaries and Conditions of Service for Local Government Employees. These national negotiations have resulted in either flat-rate or percentage uplifts, and on occasions have covered both single-year and two-year settlements. Although the Charity's spinal column points differ from those used by local authorities, the structure allows the Charity to apply equivalent salary adjustments in a consistent and proportionate manner.



Maintaining salary levels broadly in line with inflation is an important element of the Charity's employment approach. It helps to preserve the real value of pay, supports the recruitment and retention of skilled employees, and contributes to workforce stability in a sector where pay levels have traditionally been under pressure. In turn, this assists the Charity to sustain service quality, protect organisational capacity and reduce the operational and financial costs associated with high staff turnover, recruitment and induction, which has been a particular problem for other employers in Argyll & Bute.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Increase in Employers National Insurance Contributions



From 6 April 2025 the UK Government increased the rate of Employer's National Insurance Contributions from 13.8% to 15%. The level at which employers' start paying NICs was also reduced from £9,100 to £5,000 per year. To assist small organisations offset the increased NIC cost, the Employment Allowance, which helps eligible employers reduce their NIC liability, including this Charity, increased from £5,000 to £10,500.

Despite the increase in the Employment Allowance, the changes significantly increased this Charity's pay bill for 2025/26, as well as consequential increases in what it had to pay for bought in services. Given that it had no means of passing this additional cost on, and the Argyll & Bute Integration Joint Board was unable to meet this increase for the providers of services it had commissioned, this directly impacted on the support this and other charities operating in Argyll & Bute could offer to their beneficiaries.

The impact of these increases was compounded by the contract the Charity had with the Joint Board for 2025/26 being frozen at the same level as 2024/25, again because of the financial difficulties it was facing.

Staff Pensions

The Charity has always made a contribution to staff pensions, but following changes to the pension rules included in the Pensions Act 2008, all employers require to give employees the option to join a Workplace Pension Scheme. With certain exceptions, this meant that staff who met the relevant age and income requirements had to be automatically enrolled into the Scheme, albeit they could subsequently opt out. A Workplace Pension Scheme was established with Aviva on 1 February 2017 and all the staff then employed by the Charity and those employed after that date, who met the criteria, were automatically enrolled as members of the Scheme.

Under the terms of the legislation, both the employer and employee contributions were increased on a phased basis, with the levelling off point being reached on 6 April 2019. The employer contribution had to be not less than 4.0% of the employee's basic salary costs and the employee had to contribute at least 5.0%. The Charity has been contributing 4.0% to staff pensions for many years, with the staff also contributing 5.0% or more, dependent upon their financial circumstances. At 31 March 2026, all 12 of the staff employed were members of the Scheme.

Contracted Services

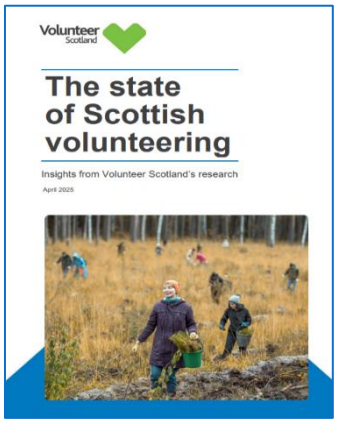
The Charity contracts with other organisations and individuals to provide a range of services and support for both adult and young carers. These contracts are documented, as considered appropriate to the nature of the services being provided, which includes counselling, holistic and cognitive behavioural therapy, specialist fitness training, therapeutic and relaxation support by professionally qualified providers. These helping hands contribute greatly to the support offered to unpaid carers. For young carers, the Charity engages a range of organisations to provide outdoor and adventure activities, which can involve short residential stays.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Sessional Workers

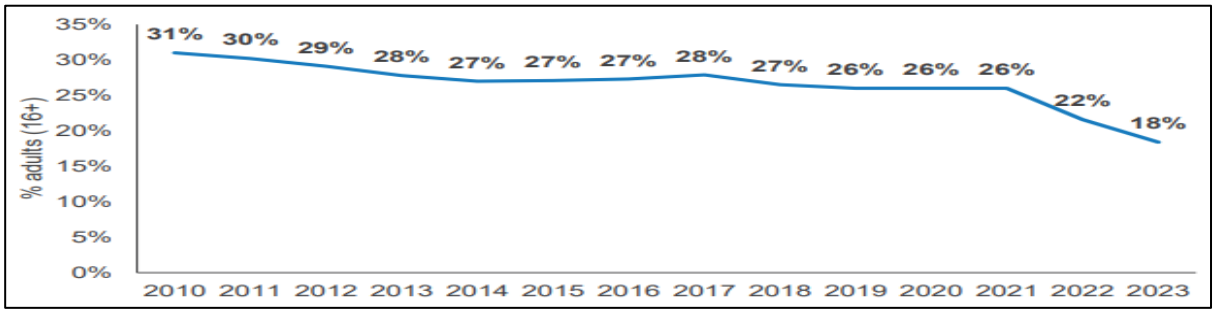
The Charity regularly engages self-employed sessional workers to provide specific services for carers. This is largely to support young carers, in relation to larger scale events and activities, but occasionally to provide similar support for adult carers. The sessional workers are required to sign a Standard Terms of Agreement, to comply with the Charity's Sessional Workers Policy, which includes being a member of the Protection of Vulnerable Groups Scheme (PVG).

Volunteers



In April 2025, Volunteer Scotland published a Report titled 'The State of Scottish Volunteering,' based on research and analysis it and a number of partner organisations had conducted. This centred on data from the 2022 and 2023 annual Scottish Household Survey, which highlighted that formal volunteering participation is in decline. In 2023 only 18% of Scottish adults volunteered with a group or organisation, which was the lowest rate ever recorded in this Survey.

Volunteer Scotland described this decline as a crisis, that can be attributed to fewer people coming forward to volunteer and people having less time to volunteer. Volunteer fatigue and burnout were also factors, as well as volunteer apathy because of an extended period of instability and insecurity, often resulting from a series of interconnected or cascading crises. The pandemic and cost of living crisis were seen as key factors in this. The decline in volunteer participation coincides with a time of increased demand for Third Sector Organisations. With fewer volunteers to draw upon to meet this demand, many of these organisations will struggle to maintain vital services. The decline is illustrated in the following chart, which shows how the number of volunteers has fallen since 2010:



In September 2025, the Scottish Government published the key findings of the 2024 Scottish Household Survey and, unexpectedly, this showed an upturn in the downward trend. It was found that 25% of Scottish adults volunteered that year. This took the number close to the 26% seen before the pandemic. Volunteer Scotland welcomed the increase and hoped that it marked "the beginning of recovery," but cautioned around the unequal nature of this recovery. The data showed that the gaps in volunteer participation have widened between people living with a disability and those without, people living in Scotland's most and least deprived communities and those in the lowest and highest income brackets.

The development of volunteering is one of the Charity's Charitable Objects set out in its Constitution, and this has delivered tangible benefits for carers and staff, as well as the individuals themselves. Volunteers and individual carers undertake a wide range of administrative tasks, provide support at social events and activities, and help organise fundraising

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

events. They are utilised for various roles in relation to young carers, including assisting staff at outings, events, weekend breaks and acting as tutors for homework study groups. There has always been a turnover of volunteers each year, with some standing down and new volunteers being recruited. At 31 March 2026, excluding the Trustees, the Charity had 13 volunteers registered and 17 informal volunteers, who are supporters willing to assist at events and activities, as and when required.

Volunteers contribute greatly to the work of the Charity and, given the reduction in staff numbers in 2026/27, it is essential this continues. The Charity has appointed one of its Volunteers, Susan Thomson, as the Volunteer Co-ordinator, and she is working with the Manager to identify new opportunities for volunteers to assist the Charity support unpaid carers and in the recruitment of new volunteers.

Student Work Experience Placements



The Charity regularly provides work practice placements for university students and trainees pursuing a career in social care or health related services. In 2025/26, Ian Cameron, who was first placed with the Charity in 2024/25, completed his counselling qualification, and Caroline Reilly, who is in the final stages qualifying as a counsellor, has been with the Charity since May 2025. She is due to qualify at the end of May 2026, but has been providing 3 counselling sessions for carers a week, and she will continue to provide these sessions when she has qualified.



The Charity also had Rachel Lamb and Sarah Ward, two third year Occupational Therapy students from Glasgow Caledonian University on 7 week placements in 2025/26. They required to make two interventions, one with the Young Carers Team and the other with the Adult Carers, as part of their placement and both integrated well with the Staff Teams. The interventions looked at breaking down a young carers role into hours, which allowed the young carers to fully understand their caring role. The adult intervention delivered an Occupational Therapy Focus Group, which consisted of them gaining an understanding of the complex jobs each of the carers undertakes and they were then able to offer suggestions such as fatigue management, a good sleep routine and the importance of rest. The students commented that the placement had enabled them to look at an occupational therapy role for the full family, rather than just from a cared-for perspective.

The Charity has agreed to provide a placement for final year Social Work student at Stirling University in 2026/27 and for another final year placement for a student who is training to be a counsellor. Glasgow Caledonian University also hopes to be able to place further Occupational Therapy students with the Charity.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

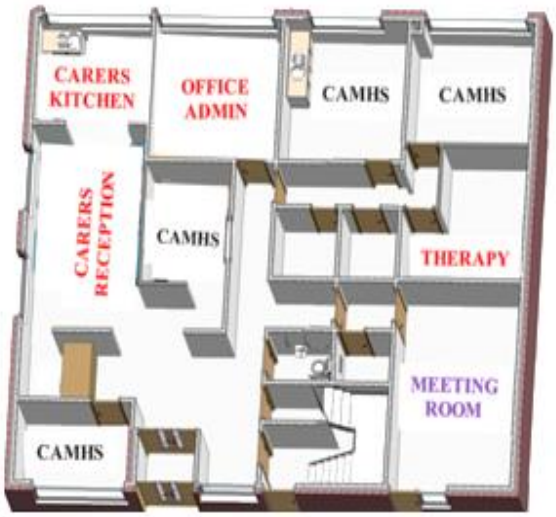
SECTION 7 - ACCOMMODATION AND FACILITIES

Lomond House

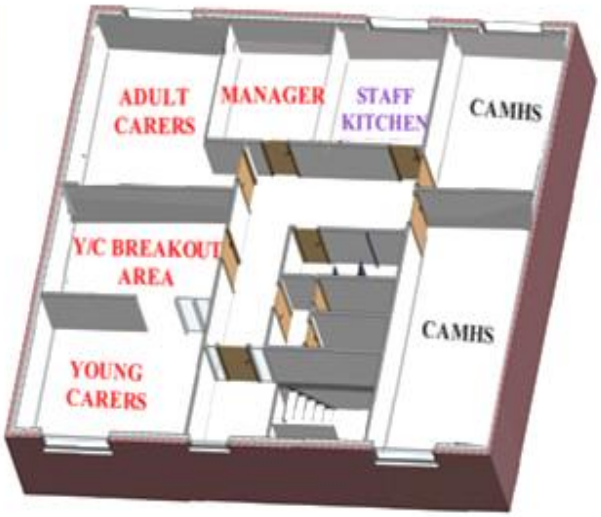

Lomond House

The Carers Centre is located in Lomond House, Lomond Street, Helensburgh, and this has served as the Charity's operational and administrative base since February 2016. The building is owned and leased from NHS Highland and shared with its Children & Adolescent Mental Health Services (CAMHS). Whilst each service has its own designated rooms, the remaining spaces are communal. The accommodation extends over two floors, with the main entrance having a ramp to facilitate disabled access. The total floor space is 355.10 square metres and the Charity occupies 145.2 square metres of dedicated space and CAMHS has 99.3 square metres, with 110.6 square meters being shared spaces. This means the Charity has 59.38% of the dedicated space and CAMHS has 40.61%, and these percentages are used to distribute the costs of the shared space.

The following layouts illustrate how the building is configured and floorspace allocated, with the dedicated accommodation occupied by the Charity shown in red print and the CAMHS accommodation in black print. The corridors, meeting room and storage areas are shared.



GROUND FLOOR



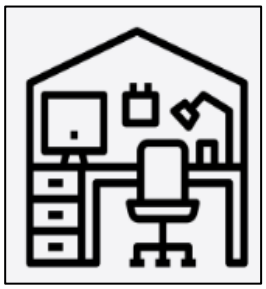
FIRST FLOOR

There are 5 parking bays for visitors at the front of Lomond House, including 1 accessible parking space.

The building is maintained and serviced by NHS Highland, but is managed by the Argyll & Bute Health & Social Care Partnership. The Charity's leasing costs contribute to the general upkeep, cleaning, utilities etc., based on the proportion of floor space occupied. The Charity is not VAT registered and cannot recover the proportion of the leasing costs attributed to this tax. As a Registered Scottish Charity, there is no liability for Business Rates.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Review of Accommodation Requirements



The Charity's Finance & Physical Resources Sub-Committee has responsibility for the oversight of property related issues and it periodically reviews the accommodation provided at Lomond House, to consider if this is still meeting current requirements; if these requirements are likely to change over the next 3-5 years, and if the leasing costs are proportionate and likely to be affordable over the next 5 years. These reviews have consistently highlighted that staff and many carers would prefer the Carers Centre to be located in or closer to Helensburgh town centre, where it might be more visible and accessible. However, the Sub-Committee has concluded it is unrealistic to believe suitable alternative accommodation, closer to the town centre, could be found at an affordable cost. There are alternative options for raising the Charity's visibility by working with partner organisations that have premises in the town centre.

In recent years, the number of staff employed by CAMHS has significantly increased, and whilst both occupants co-operate in trying to accommodate each other's use of the shared spaces, the building is not large enough to meet the growing level of CAMHS clients. It has a pressing need for additional space and discussion are ongoing between CAMHS and NHS Highland's Estates Department to try and find a solution that will better meet its requirements. However, Lomond House continues to meet the accommodation needs of the Charity, and, taking account of the reduction of its staff, at the start of 2026/27, is likely to continue to do so for the foreseeable future.

Outreach Bases

The Charity has had a long and mutually beneficial relationship with Route 81, which is a Youth and Community Enterprise, operating from Centre 81 in Garelochhead. This is a former outdoor centre, which was refurbished to provide a sports hall, seminar rooms, kitchen, a dedicated youth hub and hostel and it hosts a wide range of events and activities for the local community. The Charity has regularly used these facilities for events and activities, particularly for young carers and between 2014-2016, one of its Young Carer Support Workers was permanently based there to provide outreach services. However, financial pressures prevented that arrangement continuing.

In September 2022, the Charity re-established Centre 81 as an outreach operational base by hiring part of its facilities. The Adult Carers Team use this on a Thursday of each week to meet with adult carers, hold events and activities, as well as for providing holistic therapies and counselling sessions. The Young Carers Team use the Centre on an ad hoc basis, when they make use of the facilities in the youth hub. This has improved the access to services for carers living in the Lomond North area and there have been many spin-off benefits.

In 2025/26 the Charity entered into an agreement with the Cove Sailing Club, which had recently been refurbished, to use its facilities for meetings, events and delivery of services. This has helped extend the reach of the Charity and to identify hidden carers living in the rural parts of Helensburgh & Lomond.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Health & Safety



The Finance & Physical Resources Sub-Committee has long maintained a Health & Safety Sub-Group to assist discharge its responsibilities for overseeing the arrangements put in place by the Charity to protect people from injury, illness or other harm as a result of its undertakings. The Group's main purpose is to ensure the statutory requirements of Health & Safety and Fire Safety legislation are being adhered to by the Charity, and ensure the Sub-Committee is aware of and prepared for new and emerging health and safety risks and legislative developments. All of the Charity's staff are first aid trained and, dependent on their responsibilities, are also risk assessment trained to identify, assess, manage and monitor significant hazards and risks. In addition, a number also hold food hygiene certificates.

The Sub-Group conducts reviews of policies and working practices, as well as any adverse events or work-induced ill health, to prevent or reduce occurrences. It ensures that fire safety and first aid equipment have been tested or replaced when required; that tests of the alarm systems and portable appliance equipment owned by the Charity in Lomond House are being carried out on a regular basis and that evacuation exercises, in the event of a fire or incident, are conducted along with the staff of the CAMHS Team.

The Sub-Group meets quarterly and in 2025/26 one of its reviews, was a re-examination of the in-car equipment required by staff and volunteers when transporting young carers to events and activities in their own vehicles. This looked at the booster seats for those aged 5-12, first aid kits, fire extinguisher for use in vehicle and in-cab cameras, and resulted in the purchase of additional equipment and changes to working practices. There were also a number of maintenance issues, repairs and replacement of fittings in Lomond House, which were reported to and dealt with by NHS Highland's Estates Department.

Information Technology and Digital Communications



The Charity has maintained a 3-Year ICT Strategy for many years, which sits alongside its Business Plan and is updated regularly to ensure the hardware and software were properly maintained, future-proof and secure. All the staff have their own laptop computers, which can be plugged into docking stations on their desks in the Carers Centre and linked into larger keyboards and screens. They also have mobile phones that are connected to their lap-tops to allow them to access data and update this as and when required.

In reviewing the ICT Strategy at the end of 2024/25, the Charity's Organisational Review Sub-Committee was content that it had robust, flexible, resilient, secure and cost-effective infrastructure and systems platforms in place, and there were arrangements to replace or update hardware and software, as and when required. It concluded that the focus needed to move away from the hardware and software to how the Charity utilises this infrastructure to communicate, interact and build relationships and make connections online.

The Sub-Committee decided to prepare a Digital Strategy to replace the ICT Strategy, which will incorporate communications, video productions, live streaming, data analysis and the use of artificial intelligence. A separate Marketing Strategy will also be prepared, which focuses on

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

utilising digital platforms to increase awareness of the support the Charity can provide to unpaid carers and also to assist fundraising. The intention was to work on the new Strategies in 2025/26, and whilst draft versions were prepared, these became sidelined because the Charity was the target of a criminal cyber-attack.

Cyber-Attack



The attack occurred on the evening of 27 May 2025, and this compromised its Microsoft Office 365 account and resulted in staff being locked out of all the Microsoft products. It did not impact on the separate software systems that hold the details of the carers registered with the Charity, nor its financial information.

When this was discovered the following morning, the staff responded by isolating systems, alerting stakeholders and a priority was given to alerting the Bank and Building Society that hold the Charity's funds, to put a temporary freeze on the accounts to prevent withdrawals, with the exception of Direct Debits and Standing Orders, until further checks were made. It transpired there were no losses from any of the accounts, but all the passwords were changed. Communication with Microsoft and regulatory bodies was initiated, including notifying the Information Commissioners Office, and Police Scotland's Cybercrime Investigation Team.

As Microsoft could not restore its systems until the extent of the attack could be identified, it was necessary to put in place contingency arrangements to allow staff to continue to have access to IT communications. The Charity was greatly assisted in this by Nigel Swain, one of its volunteers, who engaged with Microsoft, and reconfigured the Charity's IT hardware to allow temporary access to Charitylog and other internet and social media platforms. This greatly assisted staff maintain business continuity until Microsoft was able to restore the system, which was not until 18 June 2025.

It transpired that Microsoft found how the attackers had been able to access its software and confirm there was no loss of the data held. The attack was focused on the Charity's email address, which they managed to access on their fifth attempt. This allowed them to replace the email address with various other addresses, which appeared to be in Singapore and Bangladesh, to send out crypto currency related emails. Nigel was then able to clear all the Charity's laptops, to ensure none were compromised by the attack, and he also included some additional security measures to prevent any other hackers from using the same route into the Microsoft software. Microsoft subsequently strengthened the security measures for the 365 account, and the Charity moved its data on to this when it was released.

When word of the attack was circulated to partner organisations, the Charity was approached by many of them offering assistance and advice, which was greatly appreciated. The officers of Police Scotland's Cyber Crime Investigation Team, and the Cyber and Fraud Centre Scotland, were particularly helpful, and said the Charity's staff did all the right things in responding to the incident. They also offered and subsequently provided a training session to assist them to identify spam emails, as well as other steps that could be taken to reduce the risk of a similar attack happening again. However, they did warn that no software system is 100% secure and highlighted the importance of being prepared if it happened again. The 'hackers' responsible for the attack have not been identified.

Under the oversight of the Finance & Physical Resources Sub-Committee, the Charity's Manager and staff have introduced a number of other measures to strengthen security and an application has been submitted to secure Cyber Essentials accreditation.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Computer Hardware and Software



The Charity's computers have Microsoft Office 365 Pro installed with Windows 11, which is a cloud based system, avoiding the need to store any data on servers in the Carers Centre. The Microsoft Teams part of the Office 365 suite, provides staff with a communications platform, combining workplace chat and video meeting facilities, which is a great asset when they are working away from the Carers Centre or from home. The Charity pays for the Microsoft software, by subscription, which reduces the risk of obsolescence in future years and places much of the responsibility for protecting the security and backup of the data with the providers.

The Charity uses the Xero Accounting System, which is cloud based and can be accessible remotely. The Xero System was considered a better fit for managing the Charity's finances moving forward, as it is more attuned to the needs of charities than the previous Sage system. The subscription costs were also substantially lower. The Charity's Bookkeeper was trained by the Accountants in the installation, structuring and use of the software, when it was first brought into use for managing the accounts on 1 April 2024, and it is meeting the Charity's needs.

The carers database is held on a system called Charitylog, which is now being used by most of the carers centres that are members of the Carers Trust and all of the Centres in Argyll & Bute. Charitylog is also cloud based and none of the hardware or software running this is physically located in the carers centre and it can be accessed from any location. This provides a very robust, flexible and secure on-line solution for processing information and data, as well as generating management reports and statistics. The analysis of the statistical information held about carers is increasingly informing the Charity's planning processes and the Charity intends to develop this further to provide a more detailed profile of unpaid carers in Helensburgh & Lomond, including their caring roles. The Charitylog system has greater analytical capability than the previous system, which will help improve or extend services, identify hidden carers and determine staff training and development requirements.

The Charity has its own domain name for its email and website. The website has links to the Facebook, Instagram, Twitter Accounts, as well as YouTube channels to expand the social networking options available to enable carers to digitally access information and advice and help raise the visibility of the Charity. The Charity added the Zoom cloud based software platform to enable on-line video chat-group services with both young and adult carers and these were extensively used in 2024/25 by carers, as well as by trustees and staff when participating in a wide range of meetings. These social networking tools provided key reference points when carers were seeking information, advice and guidance, during the pandemic and have become embedded in the communication systems employed by the Charity.





The Charity launched its new website in April 2025, which was developed and designed in collaboration with a contractor, who also dealt with the migration of the previous site from WordPress to Squarespace, a platform known for its user-friendly interface, excellent design options, and seamless integration of various functions. The redesign focused on

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

improving aesthetics, incorporating higher-quality photography and ensuring it is easily navigable for all users. The aim was to make the site more engaging and informative, but to restrict the content to make it as manageable as possible. A member of staff was trained on how to update the site, but she is assisted by a volunteer in relation to more technical updates. The feedback from carers about the site has been positive and it is serving its function well.



The Charity's telephone and broadband services were switched away from landline to the BT Cloud system for small businesses in 2022. These operate over a digital network and are integrated with the Charity's computer systems as well as the mobile and desktop telephones.

Scotland's Digital Health and Care Strategy

The Scottish Government and COSLA published their first delivery plan for Scotland's Digital Health and Care Strategy in November 2022, and this set out the practical measures it intended to implement to support NHS Health Boards, Health & Social Care Partnerships, local authorities, primary care, social work and housing and care providers to offer new or improved digital services, with better systems, infrastructure and improved access. The aims of the Strategy are:



1. Citizens have access to, and greater control over, their own health and care data – as well as access to the digital information, tools and services they need to help maintain and improve their health and wellbeing.

2 Health and care services are built on people-centred, safe, secure and ethical digital foundations which allow staff to record, access and share relevant information across the health and care system, and feel confident in their use of digital technology, in order to improve the delivery of care.

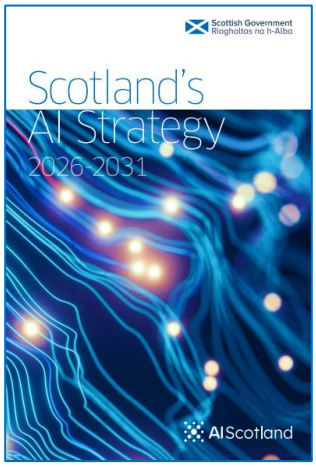
3 Health and care planners, researchers and innovators have secure access to the data they need in order to increase the efficiency of our health and care systems and develop new and improved ways of working

Updates of the delivery plan are published annually and progress is being made, particularly in health related services. The 2025/26 update of the Delivery Plan describes activities supporting Health Boards, local authorities, Health and Social Care Partnerships, primary care, social care, social work and care providers. This focused on expanding remote treatments, rolling out new digital patient portals, improving operating theatre efficiency, and tackling digital exclusion. The Strategy also hit key milestones to ease pressure on front-line NHS Services. A key aim of the Plan is delivering improved access, supporting a shift to care delivered at home or in the community, and enabling preventative care.

There is an acknowledgement in the Plan of the rapidly increasing use of AI in health and social care services and the Strategy gives a commitment to consider AI based tools in an ethical and transparent way. AI policy and innovation colleagues across the UK have been working to develop bespoke guidance for health and social care settings and agree how to best utilise the opportunities AI offers in supporting people and services.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Scotland's AI Strategy – 2026-2031



In March 2026, the Scottish Government published Scotland's AI Strategy 2026-2031, which sets out its ambition to harness AI responsibly, for the benefit of everyone. It focuses on supporting sustainable growth and strengthening public services while ensuring that Scotland remains competitive in an ever evolving global landscape. In doing so, it builds on Scotland's established commitment to the responsible use of AI and shows how it will keep pace with, and prosper as a result of, rapidly changing global technologies and markets. Artificial Intelligence is reshaping economies, industries and public services around the world. It is revolutionising the way people live and work. It is both a disruptor and an extraordinary opportunity and demands a new perspective on the role of innovation and technology in driving economic success.

The Strategy includes a set of outcomes that encapsulate a vision for Scotland in which the responsible use of AI delivers sustainable value to people, places and organisations across the country. It sets out actions to take forward to ensure the outcomes can be delivered at scale. It intends to achieve this through the use of a new model, the 'AI Stack,' which describes a series of 'layers' in which action must be taken to ensure an effective response to the challenges and opportunities ahead. Delivery of the Strategy will be driven by AI Scotland, a new National Transformation Programme led by the Scottish Government and a consortium of partners.

Some critics and industry analysts argue that the Strategy is heavily aspirational and there are gaps in several key areas where it falls short. The main concerns are the lack of concrete funding; there are no key performance indicators, there is a focus on process over action, which leaves the tech sector without clear, measurable targets. The reality is that the use of AI for businesses and other organisations, including charities, cannot wait for the Government to provide all the answers and funding. They need to embrace AI immediately, or risk being left behind by those in their sectors already using AI tools to boost productivity, reduce administrative costs, and personalise services. By focusing on practical, small-scale AI use, they will immediately improve productivity or solve operational problems.



Within Argyll & Bute, many charities are facing declining public funding in real terms alongside increasing operational demands and costs. AI adoption would allow most many third sector organisations to do more with less, by automating administrative tasks, such as grant and report writing, social media management, and inquiries from beneficiaries, without inflating their headcount. It is the case that public services across Scotland, including the Integration Authorities, either have in place or are working on a Digital Strategy/Plan, and this Charity has also been developing its plans to extend digital services, as an added option to what can already be offered to carers in Helensburgh & Lomond.

Artificial Intelligence



This Charity recognises that the speed of digital technology developments and the emergence of new AI tools will accelerate in 2026/27, and the years beyond, and it must try and keep pace with the challenges and opportunities this will bring. The Management

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Committee first started to explore the potential AI might offer in supporting unpaid carers in 2024/25, and found that carers centres in England and Wales were already using AI Apps to improve administrative processes. While finance to purchase these systems will always be an issue, the Charity hopes to be able to introduce AI tools to help mitigate the staff reductions in 2026/27, by reducing the time they have to commit to administrative functions.

It is essential that charities do not adopt AI tools without first obtaining appropriate advice, assurance and governance oversight. The potential benefits of innovation must be weighed carefully against the overriding duty to safeguard beneficiaries from harm. They must be mindful that there are many people in Scotland who face some form of digital exclusion due to lack of access, skills, or affordability. If charities move to offer digital-only services, they risk abandoning the most vulnerable service users, such as the elderly, financially struggling, or those with disabilities.



In August 2024, the Accounts Commission published a report highlighting that not enough was being done to make sure people can get online and help the one in six Scottish adults who lack the digital skills now needed for everyday life. Some people are being left behind because they cannot use or access these services, and the report urged public bodies to do more to support people to use digital tools in a way that benefits them and makes sure they can access the services they need. Whilst local authorities and third sector organisations in Scotland are taking steps to address digital exclusion, significant financial pressures have forced them to significantly reduce direct investment.

Although AI can improve efficiency and extend reach, premature or poorly governed implementation creates unacceptable risks and may result in serious unintended consequences. As AI becomes increasingly embedded in the delivery of services, charities should ensure they are equipped to use it safely, lawfully and responsibly rather than seeking to avoid it altogether. This requires a clear understanding of the risks of error, bias and unfairness, particularly where AI systems are trained on historical data that may reflect existing inequalities. Under no circumstances should AI be permitted to make final decisions about an individual's eligibility for help, support or assistance.



Charities must prepare for a future where AI is embedded across systems, processes and ways of working, including in contexts where early intervention and preventative action may be required, to protect beneficiaries from harm or disadvantage. This Charity will keep developments in AI adoption under active review and assess whether relevant approaches are suitable for application and affordable in Helensburgh & Lomond. Any use of AI must remain fully aligned with Scottish Health and Social Care Policy, applicable legislation and the Charity's governance responsibilities, and supports trustees, staff and volunteers in the proper management, administration and oversight of the organisation. When implemented responsibly, and subject to effective safeguards, AI may also strengthen the Charity's ability to deliver timely, appropriate and innovative services tailored to meet the individual needs of unpaid carers.

Charities should view AI as a powerful co-pilot, not an autopilot. While it speeds up repetitive tasks, unmanaged use risks losing human empathy and public trust. It is a tool to be guided, never a dictator to be followed. Trustees remain legally accountable, so they must establish clear guardrails to ensure humans always drive its mission, values, and final decisions.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Asset Management

The Charity does not own land, buildings, vehicles or stock, but it must hold a record of any tangible, physical items purchased or acquired for use for a period of more than one year to assist it pursue its charitable purpose, such as furniture and equipment, and these are recorded in the Office Inventory.



It is also necessary to differentiate between items the Charity has purchased or acquired in a particular year that have no significant value or will quickly lose their value, which can be classified as an annual expense, from those higher value items it intends to retain for some time, which are classified as assets. The purchase of the items classified as annual expenses is included in the Profit and Loss Account section of the Charity's statutory accounts, but the value of those classified as assets will be included in the Balance Sheet. The Management Committee has set £500 as the minimum value below which the items concerned are simply regarded as an annual expense. Items valued at £500 or more are regarded as fixed assets and, in addition to being recorded in the Office Inventory, they are recorded in an Asset Register maintained on the Xero financial management system by the Charity's Bookkeeper.

For accounting purposes, it is necessary to assess the expected useful economic life of each fixed asset, which will determine the rate of depreciation of the assets held each year. The gradual reduction of the value of the assets held at the end of each financial year will be transferred to the Profit and Loss Account in the statutory accounts, as well as reducing the net book value shown in the Balance Sheet. When these depreciate to a value of less that £20, they are treated as having no further economic value for accounting purposes, but if they have been well maintained, they may still have a functional value for the Charity. If the items are written off, but not disposed of, it is still necessary for them to be retained on the Office Inventory, until such time as they are no longer needed or require to be replaced.

Insurance Cover



The Trustees have responsibility for safeguarding the assets of the Charity from loss or damage; taking such care as is reasonable to ensure that carers and other visitors to the Carers Centre and those accessing services elsewhere will be kept safe and, as an employer, a duty to protect the health, safety and welfare of its staff and volunteers. NHS Highland owns and has responsibility for any building insurance required for Lomond House. In 2025 the Charity changed its Insurance Broker and moved to the Gallagher Charity Scheme, which offered a Commercial Combined Policy with different providers, which included the Royal and Sun Alliance, American International Group Inc., ARAG plc, which covered Employers Liability Insurance; Public Liability Insurance; Professional Indemnity Insurance, Trustee Liability and Personal Accident insurance in relation to its staff and volunteers; Legal Expenses, and Personal Accident cover.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

SECTION 8 - STRATEGIC PRIORITIES

Carer Outcomes

The Charity has adopted an outcomes-based approach to evaluating the impact of the services it provides on the health and wellbeing of carers. This aims to meet the needs and personal outcomes identified by carers in contrast to services where the content and/or form of delivery are standardised or determined by others. The Management Committee has focused on what adult and young carers living in Helensburgh and Lomond have indicated matters most to them by designing a set of 6 Carer Outcomes it is constantly striving to achieve.

The Outcomes are that carers agree:

- the Charity understands the nature and scale of their caring role and personal circumstances, has listened to and taken full account of what they had to say when decisions affecting them were being made, valued their expertise as carers and engaged with them in a respectful and dignified manner;
- the information, advice and support provided by the Charity has given them a better understanding of their rights and entitlements, how to access financial support and assistance, as well as independent advocacy and legal advice when required;
- the range and quality of services and support offered by or secured through the Charity are accessible, consistent and preventative and are meeting their needs and personal outcomes, enabling them to continue in their caring role;
- the support and assistance offered by or secured through the Charity has helped them to enjoy a life alongside caring, reduced any sense of social isolation, enabled them to pursue outside interests and feel part of their local community and wider society;
- the Charity has supported them to look after their own mental and physical health, reduced any stress, anxiety or other negative issues impacting on their general wellbeing arising from their caring role, and
- young carers have been supported by the Charity and protected from caring roles that are inappropriate or have negative impacts on their family, education or social lives.

The Carer Outcomes are evaluated to determine if these are being actively pursued by using quantitative and qualitative information and data collected from adult carers over the course of the year in question. Separate evaluation measures have been developed for young carers and serve a similar purpose

Business Plans

The support the Charity provides to carers has to be viewed against the prevailing political, economic and social policy landscape. In updating its Business Plan for 2025/26 – 2027/28, the Management Committee was guided by both local and national policies and priorities, insofar as these were complementary to the Charity's Objects. The Committee reviewed the commitments made for 2024/25 and deleted the Key Performance Indicators (KPIs), Milestones and Targets that were fully achieved or were no longer considered necessary; updated and restated those that continued to be pursued in 2025/26, and added new Outcomes, KPIs, Milestones and Targets to reflect developments and plans that extend into future years.

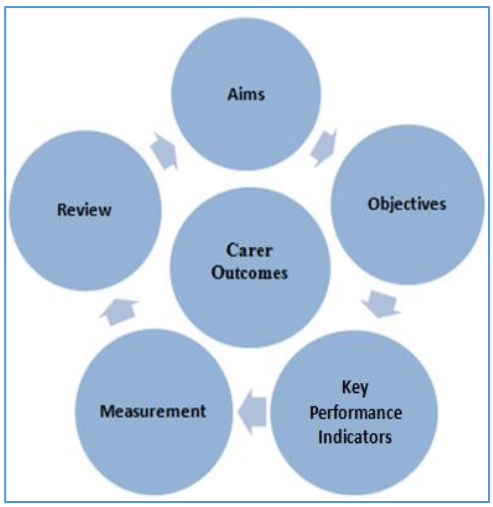


Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Account was also taken of legislative changes, key policy initiatives, information and advice that impacted directly or indirectly on the operations of the Charity, including:

- Carers (Recognition and Services) Act, 1995;
- The Community Care and Health (Scotland) Act 2002;
- Single Outcome Agreements and National Performance Framework;
- Reshaping Care for Older People Programme 2011-2021;
- Social Care (Self Directed Support)(Scotland) Act 2013;
- The Public Bodies (Joint Working)(Scotland) Act 2014;
- National Health and Social Carer Outcomes for Scotland;
- Carers' Charter;
- The Carers (Scotland) Act 2016;
- Social Security (Scotland) Act 2018;
- General Data Protection Regulation and Data Protection Act 2018;
- Disclosure (Scotland) Act 2020;
- Independent Review of Adult Social Care in Scotland 2021;
- National Carers Strategy 2022;
- Argyll & Bute Children and Young People's Service Plan 2023-26;
- Carers Leave Act 2023;
- Charities (Regulation and Administration)(Scotland) Act 2023;
- United Nations Convention on the Rights of the Child (Incorporation)(Scotland) Act 2024,
- Argyll & Bute Carers' Strategy 2024-2027
- Care Reform (Scotland) Act 2025; and
- Argyll & Bute Health and Social Care Partnership's Joint Strategic Plan 2026 -2031.

Planning Cycle



The Aims and Objectives in the Business Plan detailed the types of support and activities the Charity intended to pursue in 2025/26-2027/28 to achieve the 6 Carer Outcomes. These had to be in furtherance of the Objects set out in the Constitution, as well as its Mission, Values and Operating Principles. It also took account of the terms and conditions associated with the Contract the Charity has with Argyll & Bute Integration Joint Board for the delivery of carer services in 2025/26, the value of which had been frozen at the 2024/25 level. The Plan included KPIs to allow progress to be measured and monitored. The planning process operates on an annual cycle, built around the Carer Outcomes.

Aims

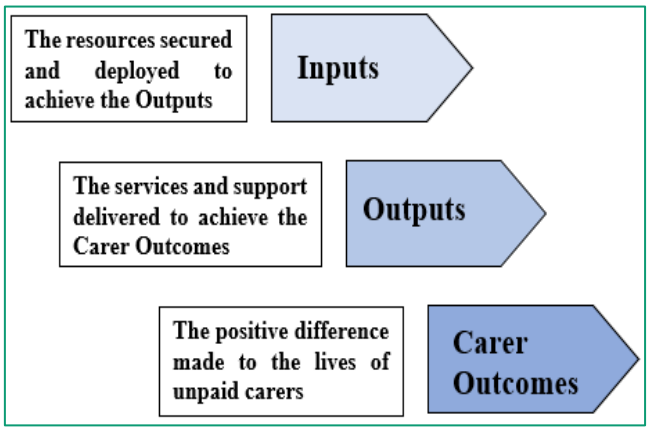
The 6 Aims are to identify and support unpaid carers in Helensburgh and Lomond by:

- offering them the opportunity to have an adult carer support plan or young carer statement completed, to help identify their individual needs and personal outcomes;
- providing information, advice and access to services to assist manage their caring role and reduce the risk of them reaching a crisis point;

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

- ensuring the support offered is accessible, consistent and preventative, whilst protecting the young and vulnerable from inappropriate caring roles;
- ensuring they are free from disadvantage or discrimination related to their caring role, by making them aware of their rights and entitlements, including financial support, legal advice and independent advocacy when required;
- promoting their mental and physical health and wellbeing, enabling them to enjoy a life alongside their caring responsibilities, including opportunities to pursue their own interests, further education or employment, and
- promoting the recognition of carers as 'equal partners in care,' whose views must be taken into account by health and social care professionals when assessing the needs and making decisions about services for a person they care for.

Objectives



The Aims state what the organisation wants to do to help achieve the Carer Outcomes, but lack the specifics to allow progress to be measured and monitored. These were, therefore, underpinned by 4 broad Objectives, which spelled out what the Charity needed to do in pursuit of the Aims set out in the Business Plan. The Objectives were separated into sections that dealt with the **Inputs** (Governance, Financial and Organisational) to ensure it had the capacity and capability to deliver the **Outputs (operational)**, which were the services and support delivered that would ultimately achieve the **Carer Outcomes**.

The Objectives for 2025/26 were:

Inputs

Governance: To ensure the Charity complies with all legal requirements, acts in a manner that is consistent with its Constitution and Objects, is run properly in the interest of carers and that the overall direction and development are set through clear strategic planning and risk management.
Finance: To discharge the Charity's fiduciary duties and manage the financial resources and tangible assets with due care and diligence to ensure compliance with financial regulations and help sustain and develop the organisation in the best interests of unpaid carers.
Organisational: To establish appropriate organisational structures, policies and procedures to enable the Charity to plan and function effectively, recruit trustees, staff and volunteers to support activities, meet quality standards, monitor performance and ensure the organisation is being efficiently run and managed.

Outputs

Operational: To establish, deliver and develop an accessible range of information, advice and support services that meet the needs and personal outcomes of unpaid carers, are valued by them and make a positive difference to their lives.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Key Performance Indicators



It was important for the Management Committee to know if the Objectives were being effectively pursued in 2025/26 and contributing to the achievement of the Aims and Carer Outcomes. To assist measure performance, a set of KPIs was developed for each Objective. These detailed certain actions or activities to be undertaken, which were designed to ensure compliance, sustainability or some form of improvement/new development.

Collectively, the KPIs should evidence whether or not an Objective has been progressed as planned, therefore, these had to be specific, measurable, achievable, time bound and realistic. The KPIs for the Governance, Financial and Organisational Objectives were measured by an assessment of whether or not annual **Milestones** had been reached.



The Indicators for the Operational Objectives for 2025/26 were measured by establishing if annual numeric **Targets** had been met. The Manager had arrangements in place to collect the performance data in respect of the services provided. This is combined with information about the progress towards achieving the milestones in Quarterly Business Plan Monitoring Reports, which were presented to the Management Committee during the course of the year to allow the trustees to monitor progress and make any adjustments considered necessary.



Evaluation



It is important the Charity captures and evaluates feedback from carers about their experience of the services provided to help determine if these are having the expected impact and are meeting their personal needs. The methods adopted for collecting this information have taken various forms over the years and usually made provision for gathering outcome data funders require as a condition of contractual or grant allocations. Statistical information was also recorded to help assess or measure whether the Milestones and Targets, which underpin the Objectives, have been met.



The Management Committee has adopted a 'mixed method' approach to evaluations, which draws from both quantitative and qualitative data sources. Ordinarily, at the end of each financial year it appoints an Assessment Panel to review the Charity's performance over that year. The Panel examines the Business Plan statistics, feedback from separate focus groups for adult and young carers, carers support plans and young carer statements, case studies, reports on each of the services provided on the activities undertaken over the course of the year and relevant supplementary evidence pertinent to the period concerned. This allows the Panel to then consider the data and information against each of the Carer Outcomes, and to come to a collective view on whether or not this is sufficient to conclude each of them has been effectively pursued. This has to take account of the available staff resources, as well as its income streams Section 9 of this Report outlines, and the services delivered in 2025/26. Section 10 provides further information about the Objectives, Performance Indicators, Milestones and Targets pursued in 2025/26, as well as the outcome of the Evaluation.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Carers Census

As mentioned in Section 4 of this Report, in 2018/19 the Scottish Government initiated a 5-year Carers Census to measure the impact of the Carers (Scotland) Act and the take up of support services by unpaid carers. Carers centres and local authorities were asked to collect the data and submit this for each financial year; to assist the Government and other stakeholders understand what difference the Act is making to the lives of carers in Scotland. The most recent return was for 2023/24, which was submitted October 2024 and a report on the analysis was published in December 2024. Some carers centres and local authorities have been unable to provide all the data requested, which meant there has always been an undercount of the actual number of carers being supported by local services.

The Scottish Government paused the Census for 2024/25 to allow more extensive user engagement and improvement work to improve the quality and utility of the census data. It was also decided to move this onto a bi-annual cycle, commencing with the census returns for 2025-26, which will be collected from August 2026. It should be noted that some of the data this Charity will submit for the 2025/26 census can also be found in Section 4 of this Report.

National Health and Wellbeing Outcomes

The National Performance Framework is used in Scotland to measure collective performance and societal wellbeing. It provides a shared vision and purpose, mapping out specific National Outcomes and utilising a set of measurable National Indicators to evaluate collective societal wellbeing, equality and environmental sustainability. The National Indicators help understand if Scotland is moving in the right direction towards the Outcomes.

There are currently 11 National Outcomes, which are broad, aspirational ambitions describing the kind of Scotland people want to live in and these are embedded in the Community Empowerment (Scotland) Act 2015. One of these is the Health Outcome, which is a measurable change in a person's physical or mental health status that results from a healthcare intervention, lifestyle, or support service. This is underpinned at governmental level, by a set of 9 standardised National Health and Wellbeing Outcomes, which apply to integrated health and social care. One of these relates to services for unpaid carers, which states:

> ***"People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and wellbeing"***

Each of the Integration Authorities must publish an Annual Performance Report, detailing how well local services have performed against the Health and Wellbeing Outcomes and Public Health Scotland releases annual rates and trends for each Integration Authority area and for Scotland as a whole. In relation to the outcome for unpaid carers, Argyll & Bute consistently outperforms both the Scottish National average and other comparator local authorities.

The Scottish Government has recently reviewed and prepared an updated version of the National Performance Framework to make it fit for purpose in the 21 century. This includes introducing a separate National Outcome on Care, which explicitly recognises and seeks to better value all forms of care, including the vital work done by unpaid carers. This is being considered by the Parliamentary Committees, but has not yet been presented as a Bill to change the current legislation. The timeline and implementation depend on broader legislative reforms, but there may be some movement on this in 2026/27.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

SECTION 9- SERVICE DELIVERY

The Diverse Roles of Unpaid Carers

Carers can be of all ages and come from all walks of life. The demands placed on them will differ, dependent on their personal situation and circumstance, the complexity of the cared for person's needs and the number of hours they have to commit to the role. The type of care required by the cared for person can mean the level of support provided is initially low and gradually increases. However, for some carers this starts off high and does not ease during their lifetime.

Becoming an Unpaid Carer



Becoming an unpaid carer means providing sustained support to a child, parent, sibling, partner, friend or other relative who requires help because of illness, disability, mental health difficulties or age-related frailty. Taking up this role is usually not a momentary decision, but a gradual realisation that providing what started as ordinary family support has become a long-term necessity. This often follows a major change in the health or circumstances of someone close to them. The point at which a person accepts this, is often characterised by mixed and sometimes contradictory emotions, and alongside grief, carers commonly report anxiety and stress.

They may worry about whether they are capable of meeting the other person's needs, how long the caring role will continue, and how caring will affect employment, finances, education and other family relationships. Research on carers' wellbeing consistently links caring with higher levels of psychological distress, especially when care is intensive or provided within close family relationships. Feelings of guilt are also common. Carers may feel guilty if they become resentful, tired or overwhelmed, or if they believe they are not doing enough. At the same time, many carers describe providing care as love, duty, commitment and a sense of meaning. For some, caring strengthens emotional bonds and produces pride in being able to support someone important to them.

Women have a higher likelihood of becoming unpaid carers, because caring responsibilities are shaped not only by individual family circumstances, but also by wider social structures and gender norms. They are also more likely to occupy intensive 'sandwich' roles in which they support both dependent children and older relatives. Statistical evidence suggests that women have a 50% chance of becoming an unpaid carer by the age of 46 and, overall, they face a 70% chance of taking on a caring role during their lifetime. Men reach the 50% likelihood threshold later, by the age of 57 and, overall, they face a 60% lifetime chance of becoming an unpaid carer.

The NHS plays a primary role in identifying a patient's need for long-term care, particularly during hospital discharge planning, and is legally and procedurally required to inform patients and their families about the support options available to them. In Scotland, the NHS works collaboratively with local GP Practices and Health and Social Care Partnership's Social Work Teams to manage the transition from hospital to community-based care. Understandably, many of those new carers are focused on the support for the person they have to care for and are not aware of the support that is available to them from their local carers centre or do not believe they need or would benefit from that support.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

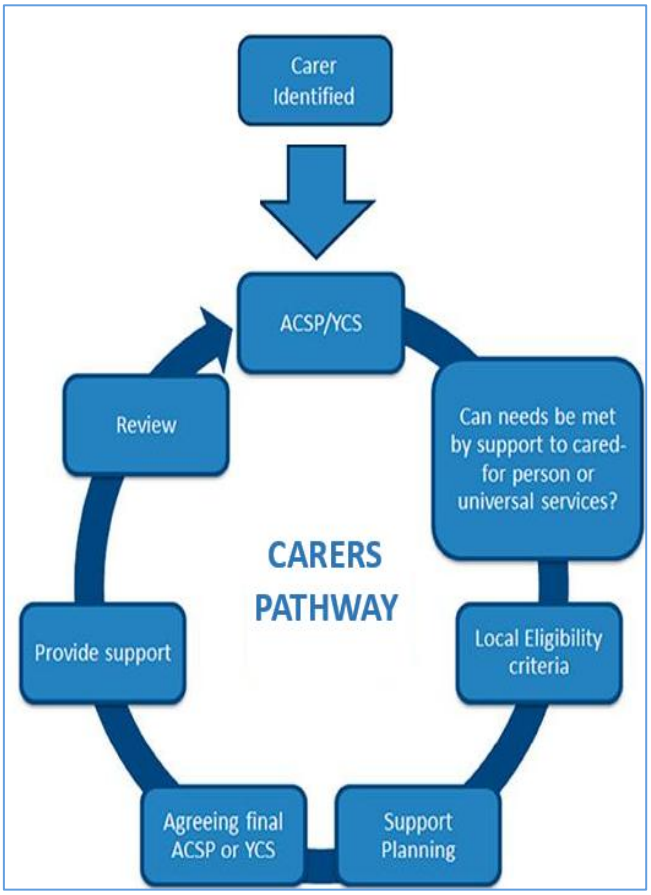
Early Identification and Intervention

The early stages of caring can be particularly difficult and stressful for new carers, and early identification and intervention by a carers' support organisation can be both beneficial and cost-effective. Section 4 of this report highlights that many unpaid carers remain 'hidden' for years because they do not recognise themselves as carers, are unaware that support is available, or feel they do not need advice or assistance, particularly when the caring burden is still relatively light.

This creates a significant barrier to accessing financial, practical and emotional support that could help to reduce the impact of caring on their physical and mental health. Early identification also has important preventative benefits, in that it enables new carers to access timely information, advice and support, before their situation reaches crisis point. Proactive identification is essential if services are to offer the right support at the right time and reduce unmet need among unpaid carers.

Carers Pathway

This Charity puts a great deal of effort into identifying hidden carers by raising awareness of the services it can offer through leaflets, posters, newsletters, local newspapers, social media, presentations to community based groups/organisations and participating in public events. It also has referral pathways in place with partner organisations. However, word of mouth from a carer who has utilised the services available to another who has not, is the most effective way of attracting new carers. This is particularly important because many carers can feel unsure about coming forward, and may be hesitant to fully disclose their true feelings about their caring role or the impact it is having on their own wellbeing and personal circumstances. Building trust between the carer and the Carers Centre is therefore essential, as it helps create a safe and supportive environment in which carers feel listened to, understood and more able to speak openly about the difficulties they are experiencing.



Once someone self-identifies as an unpaid carer to the Charity, or is referred by one of its partners, this puts them on the first step of the Carers Pathway, prescribed by the provisions of the Carers (Scotland) Act 2016. At this stage, the development of a trusting relationship with the Carers Centre is especially important. Many carers may initially minimise their situation or be reluctant to talk about the emotional, physical or practical challenges they are facing. By taking time to build rapport and trust, the Charity can support carers to feel more comfortable sharing the realities of their caring role, enabling a fuller understanding of their needs and allowing the right support to be offered at the earliest possible stage.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Registered Carers



At 31 March 2026, there were **1,496** active unpaid carers registered with the Charity, with 1,162 adult carers and 334 young carers. This excludes 10 adults who ceased to be carers within the previous 12 months, but still had access to certain services. Of these totals, there were **174** adults and **83** young people identified as carers and registered in 2025/26, which was an increase from the previous year when 151 adult carers and 81 young carers were registered for the first time. This was the first increase seen since 2022/23 when 310 new registrations were recorded, which was the highest ever in a single year by the Charity, and largely reflected the increased pressures on carers arising from the cost of living crisis in that year. However, this dropped from that peak in 2023/24 and 2024/25.

Adult Carers Support Plans



Under the provisions of the Carers (Scotland) Act 2016, there is a statutory requirement to offer all adult unpaid carers an opportunity to have an Adult Carer Support Plan (ACSP) completed and the Charity is contracted by Argyll & Bute Integration Joint Board to prepare these with carers. Once registered, an Adult Carer Support Worker meets with carers who wish to take up this offer, at the Carers Centre, their home or another suitable location, to discuss their circumstances and the nature of their caring responsibilities. This helps the Support Worker to:

- identify their personal outcomes and any needs that must be addressed if these are to be achieved;
- determine if any identified needs meet the substantial/critical threshold in the Eligibility Criteria, for referral to Health & Social Care Partners for appropriate support;
- establish what types and levels of care they are willing and able to provide;
- identify current and potential risks to their health and wellbeing because of their caring role;
- assess whether their caring role is sustainable, and
- the level and types of support they require, if any, to sustain their caring role.

The foregoing provides the main content of the ACSP, which must be agreed with the carer before it is completed, as well as the support to be put in place. The carer will be provided with a copy of the Plan, and whilst contact will be maintained with them to ensure the support provided is meeting their needs, there is a requirement for all ACSPs to be reviewed and, where necessary, updated on a 6 monthly basis. In 2025/26, there were **160** ACSPs completed and **73** reviewed.

Young Carers Statements



Young carers are also covered by the Carers (Scotland) Act, in a similar way to adult carers, in that there is a statutory duty to offer them an opportunity to have what is called a Young Carers Statement (YCS) completed. This follows the same process adopted for adult carers, in that once registered, a Young Carers Support Worker will meet with the young carer and complete the YCS. This can be recorded by the Support Worker on a form used for this

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

purpose. There is a reluctance on the part of some young carers to agree to a Statement being prepared and to try and overcome this, a Young Carers App was introduced in Argyll & Bute by the Health & Social Care Partnership. This was to enable them to provide the information required themselves through the App. However, whilst the number of Statements being completed across Argyll & Bute has increased, this was not because of the App, but greater involvement by the providers of young carers services in local schools. In the circumstances, the use of the App was discontinued in 2025/26.

The Eligibility Criteria applies to young carers in the same way as adult carers, in relation to accessing statutory support by Health & Social Care partners. However, it is not necessary for them to reach this threshold to be able to access the services provided by the Charity. During 2025/26, there were **29** Young Carers Statements completed and **46** reviews were carried out.

Eligibility Criteria

As described in Section 2 of this Report, the Argyll & Bute Eligibility Criteria is based on a Priority Risk Matrix, which uses the following indicators as areas where the impact of caring could put at risk a carer's ability to continue in their caring role:

Health & Wellbeing	Relationships	Living Environment	Employment & Training	Finance	Life Balance	Future Planning

The indicators will not always exist in isolation from one another and there may be a 'multiplier' effect when two or more indicators overlap or interact. Each of these areas is assessed against the following 5 categories of risk:

No Impact	Indicates that there are no quality of life issues resulting from the caring situation and at this moment there is no need for support or advice.
Low Impact	Indicates that there may be some quality of life issues but low risk to a carer's capacity for independence or health and wellbeing. There may be a need for universal and/or preventative support or advice.
Moderate Impact	Indicates that there is some risk to a carer's capacity for independent living and health and wellbeing. This may call for provision of some health and social care services.
----------(Eligibility threshold)----------	
Substantial Impact	Indicates that there is a major risk to a carer's capacity for independent living and health and wellbeing. Likely to require urgent provision from health and social care services.
Critical Impact	Indicates that there are significant risks to a carer's capacity for independent living and health and wellbeing. Likely to require immediate provision from health and social care services.

DUTY The Carers Act places a **duty** on local authorities to provide support to carers with any 'eligible' needs, as defined in the local Eligibility Criteria, and in this context 'eligible' means where a caring role is having a **Critical or Substantial** impact on the carer and high level, specialist interventions are required.

POWER Local authorities have the **power** to provide support to carers whose needs do not cross the eligibility threshold, but not a duty to do so. However, the Argyll & Bute Eligibility Criteria acknowledges the importance of investing

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

in appropriate anticipatory, preventative mainstream support, including the services provided by the local carers centres, to avoid carers reaching the point where their caring responsibilities are making a critical or substantial impact on their health or wellbeing.

In 2025/26 there were **51** Adult Carers Support Plans or Reviews of existing Plans assessed by the Charity's staff as meeting the Eligibility Criteria threshold. With the approval of the carers concerned, these were submitted to the Social Work Department for consideration of statutory support. Irrespective of the outcome, the carers were still able to access services provided directly by or through the Charity. This includes being offered assistance to prepare an Emergency Care Plan and Future Care Plan.

Emergency Care Planning

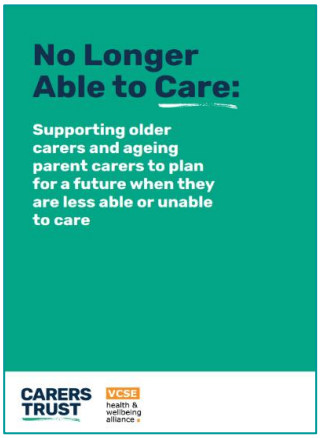


Carers are just as likely as anyone else to have their life disrupted by illness, accident, personal crisis or events and this may unexpectedly result in them being separated from the cared-for person for a short or longer-term period. If the carer plans for this possibility in advance, it:

- provides peace of mind for both them and the person they care for;
- ensures the relevant people have all the necessary information to step into their caring role temporarily, and
- identifies resources for an emergency when informal networks cannot be relied on.

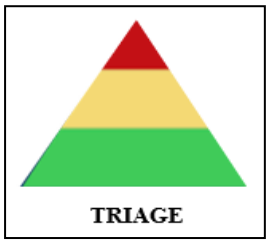
A requirement of the Carers Act is that all carers are offered information and advice on preparing an Emergency Care Plan for the person they care for and a total of **110** adult carers took this up in 2025/26.

Future Care Planning



The Carers Act also highlights the importance of carers giving consideration to the longer-term implications for their caring role if the cared for person's physical or mental condition is likely to deteriorate. This may involve legal issues relating to powers of attorney, guardianships, living wills, housing issues, pension, taxation implications etc. There is also a need to give thought to the provision of continuing support for the cared for person, when the carer is no longer able to provide the necessary level of care, because of illness, old age, a change in their circumstances and, in some cases, their own death. These can be sensitive and difficult issues for carers to deal with, but in 2025/26, the Charity provided **105** adult carers with advice on how to prepare a Future Care Plan.

Welfare / Health Checks



A priority task introduced by the Charity during the COVID-19 pandemic, was to make telephone contact with every adult and young carer registered on the Charity's database to carry out a welfare/ health check to reassure them support was still available if their health or wellbeing had deteriorated, or their caring role had changed in some way. These contacts were risk based, by adopting a triage approach, designed to identify and categorise carers who required an urgent

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

intervention; carers with needs that required to be addressed as soon as practicable, and those who were coping reasonably well with the situation.

The triage arrangements proved very successful and ensured those carers with the greatest identified needs were afforded priority in receiving support. The calls also provided a degree of reassurance to carers that the Charity was there to listen to any concern they had and would continue to be available for them to turn to when they needed help. As expected, these checks did identify additional support needs and generated follow up work/referrals. Knowing that staff they trusted were only a phone call away, was very much appreciated by carers and helped them feel supported. It was decided that staff should continue to make these welfare calls on a regular basis and, in 2025/26 a total of **3,028** contacts were made with adult carers in Helensburgh & Lomond, and **1,958** with young carers.

Information and Advice



A carer's journey is unlikely to be smooth, but constantly changing and the types of information and advice they require will vary at different stages of their caring journey. Some will transition in and out of caring roles, dependent on the health and circumstances of the person they care for, whilst others will find themselves supporting different family members or friends during the course of their lifetime. There will be periods when the demands placed on carers reach intense levels, which can prove harmful to their own health and wellbeing. The provision of good quality, appropriate, and timely information and advice to carers is therefore essential, and can assist them with decision making in relation to their caring role and help avoid any pitfalls that might lie ahead. This has the dual benefits of improving the health and wellbeing of carers and those they care-for, and reduces the risk of crisis interventions being necessary at a later date. It also fulfils an obligation placed on local authorities by the Carers Act, to establish and maintain an information and advice service, covering a range of mandatory areas for carers either resident or caring for someone in their respective areas.



The Charity has established **36** outlets across Helensburgh and Lomond for the distribution of posters and leaflets and some of these have been reproduced on waiting rooms screens in GP Practices and elsewhere, which all contain information for carers. In 2025/26, there were **258** articles about the Charity published in local newspapers or social media and **4** editions of its own Newsletters/Young Carers Bulletins were circulated to all registered carers and partners, which also carried a range of information and advice for carers.

During events organised in 2025/26, to mark Carers' Week, Carers Rights Day and Young Carers Action Day, there were **16** separate sessions held with invited speakers from different organisations to make carers aware of their statutory rights and entitlements and the services available within the local community. While these were useful for drawing attention to specific or general caring issues, their main aims were to encourage carers, particularly those unknown to the Charity, to contact the Carers Centre to make further enquiries.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF



Over the years, the Charity's staff have tailored the information and advice offered to carers to respond to the day-to-day challenges they are likely to encounter and changes to their individual circumstances or caring situation. It is important to communicate this in a personalised and empathetic way that best suits the carer and gives them the confidence to continue to seek assistance and guidance, whenever they require clarification or help related to their caring responsibilities. This was most evident during the COVID-19 pandemic, when face to face meetings were restricted, and again with the cost of living crisis, when some carers felt uncomfortable disclosing financial difficulties. It is also important that when staff meet with individual carers to discuss their personal situation, it is at a location suitable to the carer and, in 2025/26, there were **215** occasions when adult carers and **203** occasions when young carers were visited at locations out-with the Carers Centre.



The types of information and advice carers may require covers a diverse and wide range of topics, including matters relating to housing, benefits, income tax, power of attorney, debt management, access to facilities, health services, hospital discharge arrangements, how to apply for grants or fill in forms etc. and, in particular, to help them secure the services and social welfare support they are entitled to receive from statutory bodies. In 2025/26 there were **2,573** occasions when adult carers and **339** occasions when young carers were provided with personalised advice and guidance that addressed their needs. There were **445** occasions when adult and young carers were given advice about income maximisation, and **6** carers were provided with advice on how they could be involved in the hospital discharge arrangements for a cared-for person. Staff also supported **4** carers in relation to the provision of palliative and end of life care and **50** were provided with information about access to bereavement support.

Signposting



The Charity is not a 'fount of all knowledge' and staff will signpost carers to local partner organisations that have a particular understanding or expertise in relation to the information or advice a carer is seeking. However, signposting by itself is often ineffective at providing the information and advice a carer actually needs and this has to start with a conversation between the carer and a Support Worker to ensure they have a good understanding of what they are looking for and are then introduced or directly referred to the right information source. During 2025/26, **292** adult carers were referred to a local partner for advice or support.

Advocacy



Whilst some carers only seek advice on what steps to take, others require further assistance and this can involve the staff intervening on their behalf in ongoing disputes or representing the carer's interests by making direct contact with the statutory agencies to try and secure some form of resolution. The Charity is well placed to do this, because of the regular contact and good working relationship it has with other organisations, particularly Social Work and Education services. This is described as informal 'advocacy' as it falls short of representing carers in a legal environment.

The Charity can also refer carers to other organisations that provide free, independent, confidential and impartial advocacy services, and this became essential when the cost of living

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

increases started to impact on them. The Charity was able to introduce carers to the right organisation to help them pursue the specific issues they were trying to resolve. This included Argyll & Bute Council's Welfare Rights Service, Lomond Advocacy Service, VoiceAbility, which focuses on Social Security Scotland benefits system, Forces Children Scotland, which supports children and young people from armed forces and veteran families, and the Citizens Advice Bureau, which provides a wide range of advocacy support.

Citizens Advice Bureau

Most of the local third sector service providers have seen a significant increase in demand since 2022/23 and some became so overloaded they required to introduce waiting lists to manage the number of people looking for help, particularly in relation to debt and bills. All the providers have a close working relationship with the Citizens Advice Bureau and when the number of carers referred to them started to mount, the Health & Social Care Partnership funded the Bureau to commit a member of staff to deal with unpaid carers issues, including dedicating one day a month to meet with carers at each of the 4 Carers Centre in Argyll & Bute to provide advocacy support. The demand for advocacy services remained high in 2025/26 and working with the Charity's staff enable **124** carers to access advocacy support.

Legal Advice

The Charity is fortunate to have the support of Jacqueline Tainsh, Senior Solicitor from MCM Solicitors, Glasgow, who holds a monthly surgery for carers at Lomond House. Her aim is to give carers access to free legal information and assistance in the supportive environment of the Carers Centre. Most carers, who have enlisted Jacqueline's advice, wish to arrange Power of Attorney or Guardianship for both younger people with disabilities and older family members who are having memory problems. Carers are also anxious to know how care home placements are arranged and the costs of care. In 2025/26 Jacqueline provided legal advice to **119** carers

Carer Money Matters Programme

In 2024, the Carers Trust asked the Charity to participate in the above Programme, which aims to provide information and support to carers on ways to increase their household income and, in particular, ensure they have access to affordable energy solutions. This was a UK wide pilot and the Charity was one of the three carers centres in Scotland invited to participate. The Programme was being funded through the Carers Trust by a consortium of national gas distribution networks, including Scottish Gas, which is part of the British Gas network covering Scotland and parts of England and Wales. The Management Committee agreed to participate and this allowed an Income and Energy Support Worker to be employed to work with the Adult Carers Team and lead the Programme.

The Programme with the Carers Trust commenced in September 2024 and ran until April 2026, when other funders stepped in to provide a new programme, and the offer of similar support commenced. It was known that many carers, who are struggling to make ends meet, were hesitant to open up about their financial concerns, choosing to carry the burden alone, to shield this from those they care-for. It took some time for carers to come to trust the Support Worker, but as she was one of the staff employed by the Carers Centre this helped give them the confidence to confide in her and ask for help.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

The Support Worker provided as much direct support for carers as possible, through workshops, wellbeing days and coffee mornings, which created a welcoming space where carers could access vital information, financial advice, and energy-saving support. She also organised focus groups for carers, which allowed for in-depth discussions and provided valuable insights into their priorities and concerns. Developing relationships with key organisations operating in Helensburgh & Lomond was also an important feature of her work and she was in regular contact with Home Energy Scotland, the Argyll & Bute Home Energy Efficiency Project and ALI Energy, who have requested further collaboration because of the positive referrals they received through participating in her workshops.

The funding for the Programme allowed the Support Worker to distribute emergency grants for food and electricity, while offering individualised support to help carers reassess their finances. She encourages creative budgeting by exploring how existing benefits might better support both the carer and cared for, and where appropriate, promote wider family or community support networks.

In the 19 months in post, working with the partner organisations, the Support Worker supported **338** carers in various ways to increase their income and reduce their energy costs. This included benefit checks, emergency grants, debt advice, and energy efficiency advice. Taking account of those who were missing out on the state benefits available or paying too much for their energy costs, it is estimated that the combined potential additional income and savings totalled **£1,250,577**, which was an incredible sum and showed how important it was for this work to continue. The Charity's Manager succeeded in securing grant funding from the Robertson Trust and the Scottish Gas Network, which has allowed this to continue. There is little doubt that the model adopted for this Programme in Helensburgh & Lomond has been successful and could be replicated in other areas



Health and Wellbeing

The Charity's Mission is "***To make a positive difference to the lives of unpaid carers***" and it has learned that, no matter their caring role or circumstances, focusing on improving their general health and wellbeing, can have a huge impact in improving their overall quality of life and self-esteem. Carers often neglect their own self-care because of the demands placed upon them and many suffer in silence with high levels of stress and exhaustion. Over an extended period, this can lead to burnout, when they have difficulty maintaining the levels of care they provide.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF



The Charity well understands how demanding, both physically and mentally, the day-to-day challenges carers face and it offers a range of services designed to support their health and wellbeing. Part of this is recognising when a carer should be advised to consult their Primary Health Care Team and **19** adult carers and **1** young carer were given this advice in 2025/26. The staff are in regular contact with the GP Practices in Helensburgh & Lomond.

In 2025/26, there were **93** articles published in the Charity's Newsletters, website and social media platforms to promote healthy lifestyles and to encourage carers to participate in a range of events and activities designed to improve their mental or physical health or wellbeing.

Programmes of Activities and Events

At the start of each financial year, it is the practice of the Manager to work with the members of the respective Adult Carers and Young Carers Staff Teams to prepare separate programmes of activities and events for adult and young carers. This takes account of the assured funding streams that will be available, with room to accommodate other activities should further income be secured. The programmes are reviewed and adjusted by the Teams as the year unfolds to reflect feedback and suggestions by adult and young carers.

The short term aim of the programmes is to address the immediate physical and mental health issues that carers can experience and enable them to develop longer term coping strategies, which will help sustain their caring role and reduce any feelings of being isolated. They include therapeutic services as well as providing carers opportunities to engage in activities they enjoy, pursue their personal goals and develop and maintain new social connections. This should also help them to make informed decisions about their caring responsibilities to ensure these do not get out of balance and prevent them living a fulfilling life alongside caring.

The following paragraphs highlight just some of the activities from the programmes delivered for adult and young carers in 2025/26:

Holistic Therapies

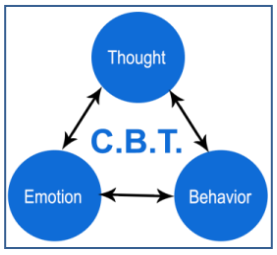
Carers often suffer stress-related conditions and, at times feel ill, anxious or exhausted because of their caring role. For many, their preferred option for a short break is to have a 45 minute holistic therapy massage by a qualified therapist to provide some relief from their day-to-day responsibilities, allowing them to relax and ease their aches and pains and to 'recharge their batteries,' in a comfortable and safe environment. A series of these therapy sessions is often offered to new carers, as part of their Adult Carers Support Plan, as many are desperately in need of some 'me time' to think through and recalibrate their caring role.

Importantly, the sessions bring carers into contact with the staff, who are able to listen to their problems and concerns, on a one-to-one basis, and offer advice and access to other appropriate services. The therapies are delivered in the Carers Centre in Helensburgh, Centre 81 in Garelochhead and, more recently in Cove Sailing Club. There has always been a huge demand by carers for these treatments, but as was the case for other services, this escalated during the financial crisis. The high demand for this service continued into 2025/26 and **572** individual therapy sessions were provided to carers during the year.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Other popular relaxation options to take carers away from their day-to-day responsibilities, included Mindfulness sessions run by staff on a weekly basis over Zoom, to help them focus on relaxing, using breathing exercises, gentle stretching and other mindfulness techniques and Chair Yoga and Tai Chi weekly sessions held in Helensburgh Parish Church Hall, to help improve concentration and strength, as well as boosting mood and reducing stress.

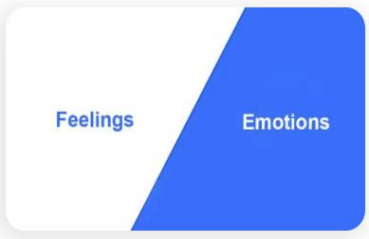
Counselling/Cognitive Behavioural Therapy Services



When staff identify that a carer would benefit from professional counselling or CBT to help them cope with the stresses and strains of their responsibilities, they are referred to a confidential counselling service provider. The Charity has engaged a number of independent counsellors to support carers and in 2025/26, there were **185** CBT sessions and **469** counselling sessions, including bereavement counselling, for adult carers. Some of these took place on-line, but most were in person at the Carers Centre or other locations suitable to the carer.

Emotional and Peer Group Support

Some carers may feel angry or guilty because of the changes to their life as a result of their caring role or are upset, because of the changes to their relationship with the person they care for. Often they feel very alone and isolated and these feelings can be worsened when combined with other effects of caring, such as tiredness, financial pressures or frustration when trying to obtain appropriate levels of support for the person they care for.



All these emotions are understandable, but it is important carers acknowledge these feelings and look for ways to both help themselves and to find support from others. The Charity supports carers in this situation by engaging with them in a non-judgemental and confidential way, that makes them feel free to talk about any aspect of their caring role. The Support Workers provide a listening ear and encourage carers to talk about their thoughts and feelings, so that these are not 'bottled up,' and together, work out the best way to help them through what is usually just a difficult stage of their caring journey.



During 2025/26 staff provided emotional support on **2,723** occasions for adult carers and **1,245** occasions for young carers. The Charity also recognises the value of peer group support which allows carers to talk about their emotions and share their feelings with other carers in a similar situation and how they manage to cope. Some of this support can be provided by participating in social events and activities or at condition specific group meetings. In 2025/26, there were **1,715** occasions when adult carers accessed Peer Support Group sessions and **1,122** occasions for young carers.

Activities and Short Breaks

Carers are encouraged to drop-in to the Carers Centre at any time if they feel the need to step away from their caring role for a short period for any reason and there is always a 'duty member of staff,' available to speak with them over a cup of tea. This can be when there is an organised event at the Centre, such as a coffee morning, meeting of the 'Bookworm Group,' or Craft and Natter Group being held in the reception area, but they are always made to feel welcome. On average,



Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

61 carers each month utilised this drop-in service in 2025/26 and another **206** per month were there to access a service or activity

It is essential carers can access breaks from their caring role and it is important these suit their needs and circumstances. The programmes of activities for 2025/26 offered a wide range of health and wellbeing activities and social events, in addition to those already mentioned above. This includes walking groups, gym sessions, dancing, swimming, outings, theatre trips, coffee mornings, afternoon teas, cinema, a pottery workshop etc. In 2025/26 there were **2,676** occasions when adult carers participated in a social event or activity and **596** occasions for young carers, and **117** of these were organised in the outreach areas of Helensburgh & Lomond.

The demand for carers to be able to take an overnight short break away from home, has always been high and this option is very dependent on the Charity being able to secure the funding to meet the costs involved. In 2025/26 additional funding was secured from Shared Care Scotland and other funders, which allowed **134** adult carers and **75** young carers to access a break involving an overnight stay away from home.

Activities for Young Carers

The Charity has been providing support services for young carers since 2012 and while there have been set-backs at times, due to funding issues, which resulted in the loss of staff and a reduction in what could be offered, by 2025/26 these had largely been overcome. This was only made possible by continued funding by the National Lottery, which has been a long term supporter of young carers in Helensburgh & Lomond, as well as funding from BBC's Children In Need. There is now a greater recognition of the impact that supporting a parent, siblings or other family members has on the personal development of young carers and the importance of them having some 'me time' to be able to be care-free and do what other children and young people can do and often take for granted.



For a number of years, the Charity has received funding from Shared Care Scotland to provide short breaks for carers and programmes of activities, which have made a significant impact on what, not only this Charity, but other organisations supporting young carers have been able to provide. This will continue in 2026/27 and is making a big difference to the general wellbeing of young carers.

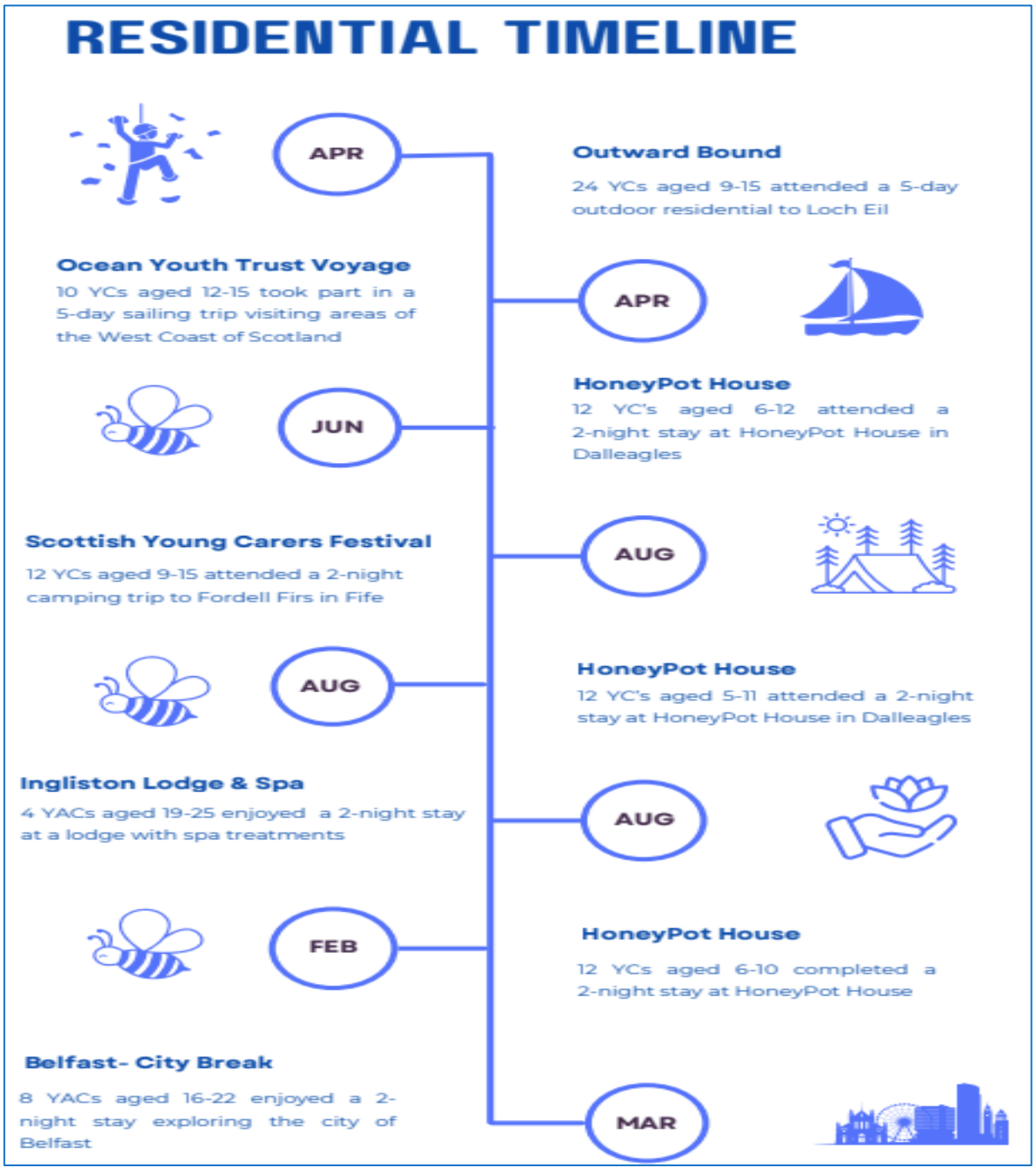
At the start of 2025/26, the Charity had 376 young carers registered, which was the highest number since the services for young carers were initiated. However, at 31 March 2026, despite the fact that there were 83 new young carers during the course of the year, the total number registered had fallen to 334. Whilst this excludes a number who have transitioned to being adult carers, this drop does illustrate that the 'turnover' of young carers is much higher than for adult carers. The high number of young carers identified can be attributed to the identification of young carers in the schools within Helensburgh & Lomond and by Social Work, as well as the commitment of the staff in the Young Carers Team to work closely with teaching and social work staff in providing the necessary support. The Young Carers Staff deliver young

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

carers awareness raising sessions to statutory and third sector partners and they did this on **18** occasions in 2025/26.

A priority for everyone should be to support the wellbeing of children and young people by offering the right help at the right time from the right people. The Charity's staff receive Child Protection and Safeguarding training and ensure that young carers are protected from inappropriate caring roles. There were **9** separate instances in 2025/26 when it was necessary for staff to implement Child Protection processes and involve Social Work in relation to one or more young carers in these households.

In addition to being able to access some of the services available to adult carers, the Programme of activities prepared by the Young Carers Team for 2025/26 was extensive. Most of the recreational activities, which provided young carers with a break from their caring roles, took place during school holiday periods.



Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

In 2025/26 the Charity provided 8 residential opportunities for young carers/young adult carers, ranging in age from 5-25. A total of 81 young carers attended these overnight short breaks ranging from camping on the East Coast, sailing on the West Coast, exploring the city of Belfast, relaxing at a spa retreat and enjoying outdoor adventures in the Highlands. All were oversubscribed, which shows how much these breaks mean to young people, but the limitations of the funding available, meant that some missed out on the opportunity to attend.

These experiences provide young carers with a valuable opportunity to take an uninterrupted break from their caring responsibilities, allowing them to relax and recharge. Many engage in new challenges and had to overcome personal fears, which strengthen their resilience and enhance their ability to cope with future difficulties. They also develop positive peer relationships, building a supportive network, and enjoy the freedom to simply be a child or young person without added responsibilities. As a result, participants often experience notable improvements in both their physical and emotional wellbeing.

Day Trips/Activities

The Young Carers Team delivered a total of 23 individual day trips and 10 activities that took part on a regular basis i.e. weekly or in blocks which resulted in over 450 attendees. These included water sports, safari park, swimming, spa retreat, bowling, go-karting, the theatre, trampoline park, theme park and much more. There is a well-established Young Adult Carers group who meet monthly either at the Carers Centre or out for an activity, and our Young Carers sewing group 'Stitch Squad' continues to meet fortnightly.

Service Benefits for Carers

The services provided by the Charity for adult and young carers are all intended to support in some way their health and wellbeing and make a contribution to achieving the Carer Outcomes referred to in Section 8 and 10 of this Report. They also reflect the outcomes that funders are seeking under the terms and conditions of grants and the contract with the Argyll & Bute Integration Joint Board. The following quotes from a young carer, a parents and a support worker illustrate the impact services for young carers are having on their general wellbeing:

Young Carer

"I really enjoyed coming away with young carers as I got a break from the responsibilities I have at home. It was really nice to spend time with my friends."

Parent

"I just wanted to say thank you for everything you have done for my family since I've been so unwell - it's made an unbelievable difference to our lives"

Parent

"Getting away, having fun and laughing with friends has really boosted his confidence, so I really do hope you know how much this means to me."

Parent

"Thank you for all the support you give to my girls, that's not just your job, that's you being your true, amazing self and going above and beyond to support them in what's been such a difficult time"

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Young Carer Support Worker

"Providing these opportunities for our YCs is amazing as they get so much from it. They step outside their comfort zone and challenge themselves to new experiences overcoming fears and reaching 'heights' they never thought possible. It was great to see them work together as a team, supporting each other through the ups and downs of the activities and to see so many new friendships formed."

Comments from Adult Carers:

"The carers centre has been a lifeline for me. I couldn't continue caring without their help and support. They do so much."

Men's Group

" Being in the men's group has been great. It's good to talk with other men about my caring role and just talk about manly things."

"I enjoy both the nights in the carers centre and the days out that are planned for us."

"Meeting new and old members has been a good way of mixing with people I normally might not have met if I hadn't joined the group."

"I always feel welcome and valued. I value the peer support, opportunities to try new hobbies and meet new people"

Carers Money Matters Project

" I was drowning in debt and to ashamed to tell anyone. Elaine didn't judge me for a second. She helped me apply for support, spoke to the right people, and made a plan that I could manage. She gave me hope again."

"When everything around me was falling apart, Elaine was the one steady thing I could rely on. She didn't just guide me through the chaos – she held the pieces together until I could breathe again."

"I will never forget the moment the engineer said the new boiler was fitted. I felt this rush of safety I hadn't felt in years. Elaine made that happen. She didn't stop until me and my husband had the dignity of a warm home."

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

SECTION 10 - PERFORMANCE

As described in Section 8 of this Report, the Business Plan for 2025/26-2027/28 set out the Objectives to be pursued over the 3-year period to ensure the Carer Outcomes are actively pursued. These were categorised under the headings of Governance, Financial, Organisational and Operational. The Objectives were not intended to be achieved in a single year but, to assist monitor progress each year, the Plan listed Key Performance Indicators, to be measured against annual Milestones, Targets or Outcomes.

Milestones

The following Table shows the Milestones for the Governance, Financial and Organisational Objectives for 2025/26 and describes the progress made:

GOVERNANCE		
Milestones	**Progress Made**	
The Business Plans for 2025/26 are pursued and performance monitored.	The Business Plan for 2025/26.was focused on sustaining existing services, but it did include 2 developments to take forward during the year. Firstly, to recruit an additional part-time Adult Carer Support Worker, to help deal with capacity issues and support outreach work. Whilst the lack of funding has not enabled a new post to be established, outreach services have been expanded with a new outreach base established in Cove and funding secured to assist outreach work in Cardross. **Not fully Reached.**	X
The Charity's Strategic Risk Register is reviewed on a quarterly basis and updated, as necessary.	The Risk Register was updated quarterly and presented to the Management Committee for consideration of approval. **Reached.**	√
The Constitution is reviewed and, if considered necessary, updated.	The Constitution was reviewed and an updated version 7 was presented to the 2025 AMM and passed. It came into effect on 1 October 2025. **Reached.**	√
New trustees are recruited to fill any vacancies on the Management Committee.	At 31 March 2026, the Charity had 11 trustees, and the maximum number is 15. A new trustee was appointed, but not until 1 April 2026. **Not Reached.**	X
The Charity complies with all legal requirements and guidance issued by OSCR.	The Chairperson is the Charity's compliance officer and he keeps all legal requirements under review to ensure these were being met. There were no instances in 2025/26 when the Charity failed to comply with legal requirements. **Reached.**	√

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

The annual cycle of reviews of all the Charity's Policies & Procedures is continued.	The 2025/26 cycle of reviews was completed by the Organisational Review Sub-Committee. **Reached.**	√
Re-accreditation under the Carers Trust Quality Assurance Award is secured by the Charity.	The re-accreditation was achieved and confirmed early in October 2025. **Reached.**	√
The contractual terms and conditions arising from the contract with the Integration Joint Board are monitored to ensure these are being met.	The terms and conditions had not changed from the previous year and were complied with. **Reached.**	√
Discussions to be held with representatives of the Integration Joint Board, and preparations made to tender for a new contract for the delivery of services to unpaid carers, commencing 1 April 2026.	During the year, the focus of discussions moved from a commissioning exercise for services beyond 31 March 2026 to another extension of the contract. This is largely because of recent changes to legislation, which are expected to come into effect in 2026/27. This made writing a new contract problematic. An added difficulty was the financial status of the Integration Joint Board, which was looking to reduce expenditure on commissioned services. A contract extension up to 31 March 2027 was awarded. **Reached.**	√
FINANCIAL		
To address the consequences of the value of the Contract with the Integration Joint Board not being increased for 2025/26 to reflect inflation, other inescapable costs and capacity issues arising from the increasing number of carers registered.	Discussions were ongoing with the officers of the Health & Social Care Partnership (HSCP), and the Council's Contracts Section, throughout the year, with a view to changing the contractual arrangements to make them more collaborative. The HSCP is not resistant to this, but taking this forward became more complex because of the new legislation referred to in the previous Milestone. In the interim, efforts made to attract income from other sources secured sufficient funding to maintain services until the end of the financial year. **Reached.**	√
To seek to supplement the value of the Contract for 2025/26 by securing grant funding and other fundraising activities to sustain services for carers.	The Manager was successful in securing additional grant income in 2025/26 to allow the Charity to supplement the value of the Contract. **Reached.**	√
The financial stability and sustainability of the Charity is maintained by the prudent management and monitoring of financial resources and tangible assets.	The Charity was able to produce a balanced budget for 2025/26 which was presented to the Management Committee on 06.08.25 and approved. The Charity remained in a financially stable position throughout 2025/26. **Reached.**	√

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Sufficient funding is secured to meet the costs of sustaining services, planned developments and all other financial liabilities in 2025/26.	The Charity secured sufficient funding to meet all its financial liabilities for 2025/26. **Reached.**	√
Opportunities are identified to enable funding to be secured to help meet the costs of services in 2026/27.	The Manager addressed this by securing grant funding that either rolls into 2026/27 or starts from 1 April 2026. She kept the Finance & Physical Resources Sub-Committee updated in this regard. **Reached.**	√
The Reserves Strategy for 2025/26 is reviewed and reassessed for 2026/27.	This was a task for the Finance & Physical Resources Sub-Committee, and it presented a Reserves Strategy for 2026/27 to the Management Committee on 11 February 2026, which was approved**. Reached.**	√
An annual programme of internal audits of specific areas of expenditure is prepared and conducted to ensure best value is being achieved.	The Treasurer developed an internal audit programme for 2025/26 and included reviewing data security issues, the new Code of Fundraising, and changes made in the use of Equals Cards. These were all completed and the findings reported to the Management Committee. **Reached.**	√
ORGANISATIONAL		
To work with the officers of the Health & Social Care Partnership to deliver the outcomes in the Argyll & Bute Carers' Strategy 2024/2027 and support the commitments made to unpaid carers.	The Manager worked very closely with the HSCP's Carers Act Officer and Young Carers and Child Poverty Officer throughout 2025/26 to contribute to the delivery of the commitments made in the Carers Strategy to unpaid carers. **Reached.**	√
To increase the current staffing levels and employ an additional Adult Carer Support Worker, subject to external funding being secured.	This was dependent on the income secured for 2025/26 and the outcome of grant applications. However, efforts to secure funding for another member for the Adult Team proved unsuccessful. **Not Reached.**	X
To develop the Charity's analytical capability to improve planning and performance by investing in staff training, analytical tools, including artificial intelligence platforms.	This had to wait for the new Charitylog software, which now holds carers data, to bed in and for staff to become comfortable with the changes this has introduced. There are some add-ons to the software that may assist to analyse the data held and a Council statistician has offered to assist with advice and guidance. It will be necessary to continue to invest in this system to achieve the outcomes the Management Committee is looking for. **Not Reached.**	X

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Carers have ready access to appropriate, relevant and up to date information and advice to assist them in their caring roles, which meets the requirements of the Carers (Scotland) Act 2016.	This is a core task for the Charity and access was improved by the development of the outreach services and the introduction of a new website. This work will continue to be expanded in 2026/27 to identify more hidden carers who may benefit from the information and advice, but not know it is available. **Reached.**	√
Services at the outreach base in Garelochhead continue to be developed and outreach services across Helensburgh & Lomond are expanded.	Working with Route 81 at Garelochhead continues and has been well received by carers. A new outreach base was established at Cove Sailing Club, which has also proved to be a very successful project and it will continue to be developed in 2026/27. **Reached.**	√
All services and supports for adult and young carers delivered in 2024/25 are sustained and developed in 2025/26.	This was achieved. **Reached.**	√
The number and range of services that can be accessed by carers digitally is increased.	This proved difficult to move forward because of staff capacity issues. However, staff continued to do the best they could to raise awareness of the service in rural areas and support the carers identified. **Not Reached.**	X
The ongoing programme of training for Staff, Volunteers and Trustees is maintained.	The training of staff is a priority for the Management Committee and every effort was made to maintain this for staff, volunteers and trustees. **Reached.**	√
Efforts to maintain a high profile of carers issues and the work of the Charity in the area are continued.	The Charity has been successful in maintaining a high visibility and the legislative changes made this year to provide carers with a statutory right to a break, has helped raise their profile in this area and elsewhere. **Reached.**	√

Operational Objective: Indicators and Targets

The Operational Objective had 6 underpinning Indicators in 2025/26, which were translated into a programme of activities and actions with numeric targets. The targets were agreed between the Organisational Review Sub-Committee and the Manager and these are shown as follows, together with the actual figures achieved:

1	Options are developed and pursued to raise awareness of the work of the Charity in order to increase the number of adult and young carers identified and offered appropriate support to help them manage the challenges of their caring role.

Targets:	**Target**	**Actual**
No. of outlets established for distribution of posters and leaflets in Helensburgh and Lomond or where such material appears on screens in waiting areas.	30	**36**

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

No. of articles/posts about the work of the Charity published in local newspapers or social media.	220	**258**
No. of presentations made to local community-based groups/organisations on the work of the Charity to raise awareness of the support available to carers.	30	**20**
No. of awareness raising presentations delivered to staff and volunteers from other organisations relating to carers issues.	30	**11**
No. of carers registered during the year who were referred to the Charity by partner organisations.		
Adult Carers	90	**55**
Young Carers	65	**26**
No. of carers registered during the year		
Adult Carers	210	**174**
Young Carers	65	**83**
No. of carers offered either an Adult Carer Support Plan or Young Carer Statement during the year.		
Adult Carers	250	**180**
Young Carers	75	**97**
No. of Adult Carer Support Plans completed.	170	**160**
No. of Young Carer Statements completed.	50	**29**
No. of carers registered with the Charity.		
Adult Carers (including young adult carers aged 18-24)	1,300	**1,162**
Young Carers (aged 5-17)	400	**334**
No. of ex-carers currently registered with the Charity who continue to be able to access support services for a further 12 months after their caring role ends.	35	**10**

2	Relevant and usable information, advice, training and support is offered to carers to assist them in their caring role, improve their understanding of their rights and entitlements, enable them to access financial support and assistance, as well as independent advocacy and legal advice when required, to ensure they are free from disadvantage or discrimination.

Targets:	**Target**	**Actual**
Percentage of information leaflets maintained by the Charity on the rights and entitlements of unpaid carers that are reviewed and, if necessary, updated annually.	100%	**100%**
The number of training/information/personal development sessions attended by staff to ensure they are kept up to date on national developments relating to carers and have the skills and appropriate experience to deliver services that meet quality standards.	80	**38**
No. of articles about the rights and entitlements of carers included in the Newsletter/Website/Social Media platforms.	55	**77**
No. of editions of the Newsletter/Bulletins published and circulated to all registered carers, ex-carers and partners.	4	**4**
No. of events organised to promote the rights and entitlements of carers during the annual Carers' Week, Carers Rights Day and Young Carers Action Day.	7	**16**

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

No. of occasions carers provided with personalised information, advice and guidance.		
Adult Carers	2,000	**2,573**
Young Carers	300	**339**
No. of carers provided with advice on how to prepare an Emergency Care Plan for the person they care-for.		
Adult Carers	180	**110**
Young Carers	10	**71**
No of carers provided with advice and assistance to complete a Future Care Plan.		
Adult Carers	180	**105**
Young Carers	8	**0**
No. of carers given advice about Self Directed Support	90	**23**
No. of carers given advice about income maximisation.		
Adult Carers	170	**443**
Young Carers	25	**2**
No. of carers referred or signposted to Welfare Rights Officer, Social Security Scotland, Citizens Advice Bureau or Housing Association for advice/support.	220	**292**
No. of carers who accessed informal advocacy support to help them pursue their rights and entitlements during the year.		
Adult Carers	160	**92**
Young Carers	20	**31**
No. of carers provided with free legal advice on issues such as Power of Attorney or Guardianship etc.	100	**119**
No. of carers offered advice on how they can be involved in the hospital discharge arrangements for cared-for persons.	30	**6**
No. of carers supported in providing palliative and end of life care	15	**4**
No. of carers provided with information about access to bereavement support.	25	**50**

3	Young and vulnerable carers are supported and protected from inappropriate caring roles, enabling them to be children and young people first and are given the chance to develop and reach their full potential.

Targets:	**Target**	**Actual**
No. of young carers awareness raising sessions delivered to statutory and third sector partners.	20	**18**
No. of partner organisations in Helensburgh & Lomond working with the Charity to support young carers.	20	**17**
The percentage of the young carers registered who access the support and services available during the year.	80%	**76%**
No. of young carers who participated in homework study and other activities organised by the Charity to assist their academic learning.	15	**13**

4	The mental and physical health and wellbeing of adult, vulnerable and young carers is supported by enabling them to access or be signposted to appropriate medical advice, counselling or therapeutic services, as well as breaks from their caring role, and by conducting regular welfare checks to ensure their needs have not changed.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Targets:	Target	Actual
Total number of Welfare Contacts made to carers to check on their health and wellbeing.		
Adult Carers	2,300	**3,028**
Young Carers	1,200	**1,958**
No. of Adult Carer Support Plans reviewed.	200	**73**
No. of Young Carer Statements reviewed.	50	**46**
No. of carers advised to consult Primary Health Care Team.		
Adult Carers	50	**19**
Young Carers	20	**1**
No. of instances carers participated in healthy lifestyle and therapeutic activities organised by the Charity to improve their mental or physical health or wellbeing.		
Adult Carers	2,200	**2,098**
Young Carers	500	**729**
No. of instances carers have participated in Peer Support Group Sessions.		
Adult Carers	1,100	**1,715**
Young Carers	550	**1,122**
No. of articles relating to healthy lifestyles published in the Charity's Newsletter/Website/Social Media platforms	55	**93**
No. of facilitated Carers Focus Group meetings held.		
Adult Carers	8	**6**
Young Carers	6	**4**
No. of instances carers given emotional support.		
Adult Carers	2,800	**2,723**
Young Carers	850	**1,245**
No. of individual Holistic Therapy sessions provided	550	**416**
No. of individual CBT sessions provided.	50	**174**
No. of individual counselling sessions provided for adult carers, including bereavement counselling.	350	**357**
No. of instances carers accessed social activity short breaks of under 12 hours.		
Adult Carers	1,550	**2,525**
Young Carers	850	**1,280**
No. of carers who accessed a short break involving an overnight stay away from home.		
Adult Carers	80	**124**
Young Carers	60	**75**

5	Carers are supported to enjoy a life alongside their caring responsibilities by providing access to social and recreational events and activities organised by the Charity or by signposting them to the support offered by others that might assist them to pursue interests, hobbies and any personal development or employment opportunities.

Targets:	Target	Actual
Average No. of carers who visit the Centre each month to access a service or activity.	200	**206**

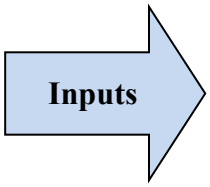
Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Average No. of carers who utilise the drop-in service each month.	120	**61**
No. of instances carers have participated in social events and activities organised by the Charity.		
Adult Carers	2,200	**2,676**
Young Carers	270	**596**
No. of visits to meet with individual carers out-with the Carers Centre.		
Adult Carers	300	**215**
Young Carers	170	**203**
No. of Training events organised for carers		
Adult Carers	2	**5**
Young Carers	2	**2**
No. of events and activities organised for carers in outreach areas.		
Adult Carers	65	**107**
Young Carers	60	**10**
No. of carers who received one-to-one advice designed to improve their education, training or employment opportunities.		
Adult Carers	5	**4**
Young Carers	30	**16**

6	The knowledge and expertise of carers and former carers is respected and valued by the Charity and they are encouraged to become members, to get involved in the governance of the organisation or as a volunteer, and to participate in consultation and evaluation exercises when services are being planned, designed or reviewed.

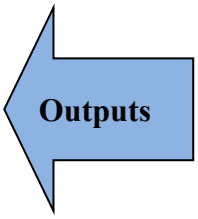
Targets:	**Target**	**Actual**
Percentage of the total membership of the Charity who are carers or former carers.	75%	**87%**
Percentage of the trustees serving on the Charity's Management Committee who are carers or former carers.	80%	**83%**
No. of carers or former carers who act in a voluntary capacity for the benefit of carers with the Charity.	30	**28**
No. of consultation exercises involving carers to quality assure the existing services offered by the Charity or assist with the design of any new services.	5	**3**
No. of individual carers who have been provided with an opportunity to meet face to face with local or national politicians or policy makers.	15	**9**

Measuring Progress against the Objectives



The Governance, Financial and Organisational Objectives outlined above, largely relate to the resources secured and deployed by the Charity and represent the **Inputs** referred to in Section 8 of this Report. Progress was measured by the success or otherwise of reaching the **Milestones** described. Of the 25 milestones listed, 20 were considered by the Management Committee to have been reached, and 5 were not reached and were continued into 2025/26.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF



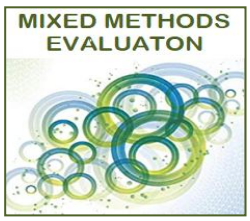
The Operational Objectives relate to the services and support delivered to achieve the Aims and Carer Outcomes and represent the **Outputs** referred to in Section 8. Progress was measured against specific **Targets** and some were split between young and adult carers. In these dual targets, if one was not met, the target was only considered to have been met if the combined actual total of adults and young carers exceeded the combined target total. Of the 55 targets listed, 37 were considered to have been met or exceeded and 18 were not met.



At the year end, the trustees reviewed the results with the Manager and agreed that the 5 **Milestones** had largely not been achieved because of funding and capacity constraints. When the **Targets** for 2025/26 were set, neither the Organisational Review Sub-Committee nor the Manager had anticipated that the contract funding would be frozen, and this affected the delivery of some services. Despite this challenging financial context, the uptake of health and wellbeing services increased significantly. A total of 174 new adult carers and 83 young carers were identified, bringing the total number of active registered carers to 1,496, and many of the other targets were exceeded by a considerable margin. Of the 18 targets that were not met, most were demand-led or depended on referrals to partner organisations. In light of these circumstances, the Management Committee considered the Staff Team's performance commendable.

Evaluating Carer Outcomes

Whilst the Management Committee can gauge the performance of the Charity using the foregoing results and other information gathered during the year, demonstrating the impact of the preventative work it does is challenging, as it is always difficult to prove that a crisis for carers has been averted. The Charity works with a large number of carers, many of whom seek support on a one-off or episodic basis, and it is harder to capture evidence from transient interactions, compared to those that are planned and regular.



Ultimately, it is carers who are best placed to judge the Charity's performance and whether this is making a positive difference to their lives. It is therefore important to create both formal and informal opportunities for them to comment and express their views about their experience of the services provided. During 2025/26 the Staff Team contacted adult and young carers on 4,986 occasions to check on their welfare, to ensure they were feeling supported, that the Charity was meeting their needs and to identify any areas for improvement. There were also 10 facilitated focus group sessions with both adult and young carers to explore carer related topics. The feedback about the work of the Charity was extremely positive, and carers overwhelmingly expressed the view that the support provided was meeting their needs.

As described in Section 8 of this Report, the Management Committee has adopted a mixed methods approach to evaluating the impact of the Charity's work, which combines qualitative and quantitative information and data collected from carers by various means. This allows information from different sources to be compared and crosschecked, which increases the validity and credibility of the findings.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

The Management Committee appointed four trustees and one independent member to the Evaluation Panel. The Panel reviewed the evidence presented by the Manager, who provided her interpretation of the findings and responded to questions. This enabled the Panel to scrutinise the data and information against each of the 6 Carer Outcomes and reach a collective judgement on whether sufficient progress had been made during 2025/26.

The Evaluation Panel was satisfied that the evaluation process was robust and sufficient evidence had been provided to assess the Charity's performance. The Panel acknowledged that 2025/26 had been another challenging year for staff, including the management of a cyber-attack and other complex situations. In the Manager's absence, Panel members considered and reached agreement on the validity, reliability and attribution of the evidence presented for each Outcome. The Panel concluded that the documentary and statistical evidence, supported by case studies and the Manager's responses to a wide range of questions, was sufficient to demonstrate that all six Outcomes had been actively and effectively pursued in 2025/26. The Panel was particularly impressed by the exceptional efforts of staff in relation to Outcomes 3 and 4, which made a clear positive contribution to improving the lives of unpaid adult and young carers in Helensburgh and Lomond.

The Carer Outcomes for 2025/26 were:

Unpaid Carers in Helensburgh & Lomond agree:		
1	The Charity understands the nature and scale of their caring role and personal circumstances, has listened to and taken full account of what they had to say when decisions affecting them were being made, valued their expertise as carers and engaged with them in a respectful and dignified manner.	√
2	The information, advice and support provided by the Charity has given them a better understanding of their rights and entitlements, how to access financial support and assistance, as well as independent advocacy and legal advice when required.	√
3	The range and quality of services and support offered by or secured through the Charity are accessible, consistent and preventative; reducing the risks of them reaching a crisis point, and are meeting their needs and personal outcomes, enabling them to continue in their caring role.	√
4	The support and assistance offered by or secured through the Charity has helped them to enjoy a life alongside caring, reduced any sense of social isolation, enabled them to pursue education, training or employment opportunities, other outside interests and feel part of their local community and wider society.	√
5	The Charity has supported them to look after their own mental and physical health and reduce any stress, anxiety or other negative issues impacting on their general wellbeing arising from their caring role.	√
6	Young carers have been supported by the Charity and protected from caring roles that are inappropriate or have negative impacts on their family, education or social lives.	√

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

SECTION 11 - FINANCE AND FUNDING

Preparing the Budget Estimates

The Charity's Business Plan for 2025/26-2027/28 provided the framework for the preparation of the detailed annual Budget Estimates. The Plan described what the organisation aimed to achieve over the course of the year, the likely costs involved and the levels of income required to meet these costs. The Provisional Estimates for 2025/26 were prepared by the Charity's Finance & Physical Resources Sub-Committee, which reviewed the:

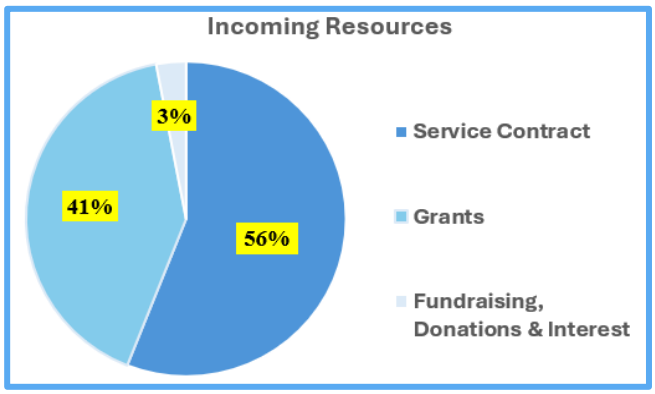
- budget outturn for 2024/25 to identify any variances between the actual operating costs and the budget estimates;
- level of any restricted and unrestricted balances that remained to be carried forward into 2025/26;
- impact of any likely increase/decrease costs of continuing existing services into 2025/26;
- anticipated levels of income for 2025/26;
- anticipated levels of expenditure to be incurred in pursuing the Objectives set out in the Business Plan for 2025/26;
- level of Reserves that required to be carried forward into 2025/26, and
- gaps between planned expenditure and the level of income likely to be secured.

These were presented to a meeting of the Management Committee on 19 February 2025, for information purposes, and an updated version was considered and approved by the Committee when it met on 2 April 2025. The Sub-Committee closely tracked the actual performance against the Estimates at subsequent meetings, through monthly budget monitoring reports provided by the Charity's Bookkeeper, and the Treasurer reported on the financial position at each Management Committee meeting. Based on the Treasurer's advice about actual or projected variances in income and expenditure, adjustments were made to the Estimates over the course of the year to ensure these were founded on the best information available and accurately reflected the Charity's financial position.

Balances Brought Forward

The balances brought forward from 2025/26 into 2026/27 totalled £156,009. This was made up of £135.203 in Unrestricted funds and £20,806 in Restricted funds.

Incoming Resources



The Charity secured **£**645,639 in income from a range of sources in 2025/26. The largest proportion came from the Service Contract it has with Argyll & Bute Integration Joint Board, which represented 56% of the total. Grants accounted for 41% of the income, with 47% provided by statutory and 53% by non-statutory bodies. Fundraising events and activities, donations from supporters, plus Interest on cash deposits, represented the other 3%. Income increased by £75,998 compared to the previous financial year.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

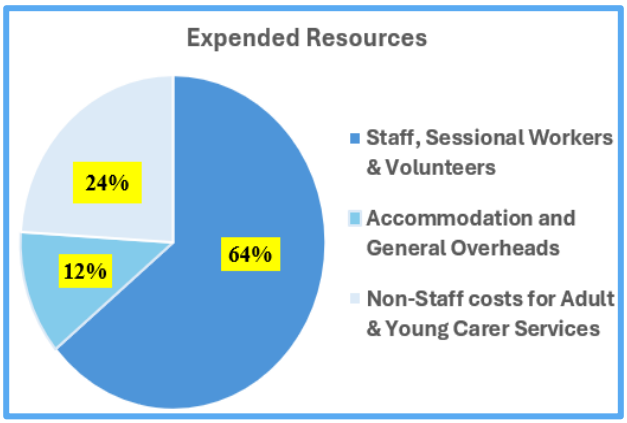
The income came from the following sources:

Service Contract	Grants	Fundraising Activities	Donations & Gift Aid	Interest on cash deposits	Total
£ 359,450	£ 265,975	£ 2,213	£ 15,051	£ 2,950	**£ 645,639**

*Excludes deferred grant income of £54,000 received in 2025/26, but under the terms to be used to meet costs in 2026/27.

Expended Resources

Expenditure in 2025/26 totalled £635,850 which was £51,727 higher than the previous financial year. The Charity delivers services to adult and young carers through its staff, paid sessional workers and volunteers and the costs involved in this represented 64% of the total spend in 2025/26. Overheads for leasing and running the carers centre and general administration of the organisation, took up 12% of the costs incurred. Non-Staff costs associated with payments the Charity made to other providers for services, activities and facilities for adult and young carers equated to 24% of the total expenditure.



Staff, Sessional Workers & Volunteers	Accommodation and General Overheads	Non-Staff costs for Adult & Young Carers Services	Total
£ 406,272	£ 79,626	£ 149,952	**£ 635,850**

These were related to the following activities:

Salaries, Pensions, Sessional Workers, Staff Recruitment, Staff and Volunteer Travel & Training.	Fundraising costs, Payroll Admin, Insurances, Leasing + servicing of carers centre, Utilities, Telephone/ Broadband, Maintenance and Replacement, Print/ Stationery/Postage, Marketing/Petty Cash, Subscriptions, Miscellaneous costs, Professional Fees, Governance costs, Bank charges, Depreciation	Social, Recreational and Physical Activity Programmes, a wide range of Short Breaks, Therapies, Cognitive Behavioural Therapy, Counselling, Respite, , Training and Learning events and courses, Homework Study Groups, venue hire and transport costs for trips, cost of living welfare support.

Fixed Assets

The Fixed Assets owned by the Charity are in the form of furniture and equipment and any such purchases or acquisitions during the course of a year are not capitalised if the cost price is less than £500. At 31 March 2025, the net book value of the Assets held was £3,408 and during the

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

year a laptop computer was purchased at a cost of £757. Depreciation over the year was calculated at £1,424 and the net book value, at 31 March 2026 was £2,741.

Closing Balances

The fund balances brought forward from 2024/25 into 2025/26 totalled £156,009. When the Income received in 2025/26 of £645,639 was added and expenditure for the year of £635,850 was deducted, it left a closing balance of £165,798 at 31 March 2026.

Restricted and Unrestricted Funds

The Charity's accounting processes separate funds that are subject to restrictions on their expenditure imposed by the donor from unrestricted funds that are available for use at the discretion of the trustees. This is achieved by maintaining an Unrestricted Account and a Restricted Account and the £180,491 balances brought forward from 2024/25 into 2025/26, comprised £180,476 in unrestricted funds and £15 in restricted funds. At 31 March 2026, the closing balance of £165,798 was made up of £107, 093 in unrestricted funds and £58,705 in restricted funds. These funds were carried forward into the 2026/27 Accounts.

Reserves



As at 31 March 2025, the Charity held unrestricted balances of £180,476, of which £73,000 was designated as Operational and Contingency Reserves. These reserves had increased year on year to reflect the risks and liabilities faced by the Charity, as well as inflationary pressures. The increases were funded from a range of unrestricted income sources, including general donations, fundraising income, Gift Aid, bank interest and income from the Charity's contract with Argyll and Bute Integration Joint Board.

The Operational Reserve is held to meet unforeseen financial commitments or shortfalls in income, enable the Charity to commit its own resources in support of grant applications, and manage short-term cash-flow pressures. The Contingency Reserve is held to meet financial liabilities should the Charity be required to cease operating for any reason. The level of reserves held is informed by a detailed needs assessment undertaken towards the end of each financial year by the Finance and Physical Resources Sub-Committee, in accordance with the Charity's Reserves Policy. The Sub-Committee prepares a Reserves Strategy, including recommendations on the sums to be held, for consideration and approval by the Management Committee.

At 1 April 2025, the Charity held £25,000 in the Operational Reserve and £48,000 in the Contingency Reserve. It subsequently transferred £7,000 from unrestricted balances brought forward from 2024/25 to increase the Contingency Reserve to £55,000, in line with the Reserves Strategy for 2025/26, which was approved by the Management Committee on 21 January 2025. This transfer was primarily intended to meet the increased potential liability for staff redundancies arising from higher salary costs and an increase in qualifying years of service. As a result, total reserves held at the start of 2025/26 amounted to £80,000.

Towards the end of 2025/26, the Management Committee was advised that the Integration Joint Board was under severe financial pressure and required to make significant budget savings for 2026/27. One of a number of options presented to the Board was to reduce the value of contracts for commissioned services by up to 15%. In response, the Management Committee asked the Finance and Physical Resources Sub-Committee to review the reserves held. The Sub-

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Committee subsequently recommended, as a precautionary measure against a worst-case scenario, that £11,000 be transferred from the Operational Reserve to the Contingency Reserve. This would strengthen the Contingency Reserve in the event that the severity of any funding reduction required the Charity to make a number of staff redundant. The Management Committee approved this recommendation. As a result, at 31 March 2026 total reserves remained at £80,000, but the Operational Reserve reduced to £14,000 and the Contingency Reserve increased to £66,000.

At its meeting on 25 March 2026, Argyll and Bute Integration Joint Board approved a number of budget cuts for 2026/27, including reductions to the value of contracts for several commissioned services, including this Charity. Whilst this did result in staff redundancies at the start of 2026/27, the Board provided transitional funding to cover the first quarter of the financial year, which met the redundancy and associated final salary costs.

Fuller details of the Charity's financial transactions during 2025/26 can be found in Part 2 of this Report at Section 12 - Financial Statements.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

PART 2 - FINANCIAL STATEMENTS

SECTION 12 - FINANCIAL STATEMENTS

Trustees' responsibilities in relation to the financial statements

The Charity's Trustees are responsible for preparing a Trustees' Annual Report and Financial Statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice). The law applicable to charities in Scotland requires the Charity's Trustees to prepare financial statements for each year which give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, of the Charity for that period. In preparing the financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the applicable Charities SORP;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in business.

The Trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the Charity and to enable them to ensure that the financial statements comply with the Charities and Trustee Investment (Scotland) Act 2005, the Charity Accounts (Scotland) Regulations 2006 (as amended), and the provisions of the constitution. They are also responsible for safeguarding the assets of the Charity and taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustees are responsible for the maintenance and integrity of the charity and financial information included on the charity's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

This Report has been prepared in accordance with the Statement of Recommended Practice: applicable to charities preparing their accounts in accordance with the Financial Reporting Standard Applicable in the UK and Republic of Ireland (FRS 102).

Approved by the Trustees and signed on their behalf by:

Signed by:
William Rae
A92C2FA3ED364EC...

Name: Sir William Rae (Chairperson) Date: 17 August 2026

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

INDEPENDENT AUDITORS' REPORT TO THE TRUSTEES OF HELENSBURGH & LOMOND CARERS SCIO FOR THE YEAR ENDED 31 MARCH 2026

Independent Auditor's Report to the Trustees of Helensburgh & Lomond Carers SCIO

Opinion

We have audited the financial statements of Helensburgh & Lomond Carers SCIO (the 'charity') for the year ended 31 March 2026 which comprise the Statement of Financial Activities, the Balance Sheet and notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland* (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the charity's affairs as at 31 March 2026, and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Charities and Trustee Investment (Scotland) Act 2005 and regulation 8 of the Charities Accounts (Scotland) Regulations 2006.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the auditor responsibilities for the audit of the financial statements section of our report. We are independent of the charity in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the charity's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the trustees with respect to going concern are described in the relevant sections of this report.

Other information

The other information comprises the information included in the trustees' annual report[4], other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information. Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

INDEPENDENT AUDITORS' REPORT TO THE TRUSTEES OF HELENSBURGH & LOMOND CARERS SCIO FOR THE YEAR ENDED 31 MARCH 2026

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters in relation to which the Charities Accounts (Scotland) Regulations 2006 requires us to report to you if, in our opinion:

- the information given in the trustees' report is inconsistent in any material respect with the financial statements; or
- proper accounting records have not been kept; or
- the financial statements are not in agreement with the accounting records; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement set out on page 115, the trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the charity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charity or to cease operations, or have no realistic alternative but to do so.

Auditor responsibilities for the audit of the financial statements

We have been appointed as auditor under section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and report in accordance with the Act and relevant regulations made or having effect thereunder.

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

Extent to which the audit was considered capable of detecting irregularities including fraud

We identify and assess the risks of material misstatement of the accounts, whether due to fraud or error, and then design and perform audit procedures response to those risks, including obtaining audit evidence that is sufficient and appropriate to provide a basis for our opinion.

In identifying and assessing the risks or material misstatements in respect of irregularities, including fraud and non-compliance with laws and regulations we considered the following;

- The nature of the charity, the environment in which it operates and the control procedures implemented by management and the trustees; and
- Our enquiries of management and trustees about their identification and assessment of the risks of irregularities. Based on our understanding of the charity and the sector in which it operates, we identified that the principal risks of non-compliance with laws and regulations related to, but were not limited to;

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

- Regulations and legislation pertinent to the charity's operations

We considered the extent to which non-compliance might have a material impact on the accounts. We also considered those laws and regulations which have a direct impact on the preparation of the accounts, such as the Charities and Trustee Investment (Scotland) Act 2005, and the Charities Accounts (Scotland) Regulations (as amended) 2006. We evaluated management and trustees' incentives and opportunities for fraudulent manipulation of the accounts and determined that the principal risks were related to;

- Posting inappropriate journal entries

Audit response to the risks identified;

Our procedures to respond to the risks identified included the following;

- Gaining an understanding of the legal and regulatory framework applicable to the charity and the sector in which it operates;
- Reviewing account disclosures and testing to supporting documentation to assess compliance with provisions of relevant laws and regulations described as having a direct effect on the accounts;
- Enquiring of management concerning actual and potential litigation and claims;
- Reading minutes of meetings of those charged with governance;
- In addressing the risk of fraud as a result of management override of controls, testing the appropriateness of journal entries and other adjustments; and, evaluating rationale of any significant transactions that are unusual or outside the normal course of operations.
- Testing journal entries and other adjustments, with a focus on areas such as income, fixed assets, debtors, and creditors, to identify any indications of management override of controls or material misstatements. We have tested journals in the following areas:
    - Duplicate journal entries
    - Journals containing suspicious words or phrases
    - Journals that do not balance

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the accounts or non-compliance with regulation. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the accounts, as we will be less likely to become aware of instances of non-compliance. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: https://www.frc.org.uk/library/standards-codes-policy/audit-assurance-and-ethics/auditors-responsibilities-for-the-audit. This description forms part of our auditor's report.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

INDEPENDENT AUDITORS' REPORT TO THE TRUSTEES OF HELENSBURGH & LOMOND CARERS SCIO FOR THE YEAR ENDED 31 MARCH 2026

Use of our report

This report is made solely to the charity's trustees, as a body, in accordance with Regulation 10 of the Charities Accounts (Scotland) Regulations 2006. Our audit work has been undertaken so that we might state to the charity's trustees those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity and the charity's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Signed by:
Wbg (Audit) Limited
2A4E408DA5B14D1...

Alexander Hogg CA
Senior Statutory Auditor
For and on behalf of Wbg (Audit) Limited, Statutory Auditor

168 Bath Street
Glasgow
G2 4TP

Date: 17 August 2026

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

HELENSBURGH AND LOMOND CARERS SCIO
STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDING 31 MARCH 2026

(Including an Income and Expenditure account)

	Note	Unrestricted Funds 2026 £	Restricted Funds 2026 £	Total Funds 2026 £	*Unrestricted Funds 2025 £*	*Restricted Funds 2025 £*	*Total Funds 2025 £*
Income and endowments from:							
Donations and legacies	**4**	15,051	-	**15,051**	7,444	-	**7,444**
Charitable activities	**5**	359,450	265,975	**625,425**	366,627	190,046	**556,673**
Other trading activities	**6**	2,213	-	**2,213**	1,685	-	**1,685**
Investments	**7**	2,950	-	**2,950**	3,839	-	**3,839**
Total Income		379,664	265,975	**645,639**	379,595	190,046	**569,641**
Expenditure on:							
Charitable activities	**9**	432,713	203,137	**635,850**	424,868	169,255	**594,123**
Total Expenditure		432,713	203,137	**635,850**	424,868	169,255	**594,123**
Net (expenditure)/income		(53,049)	62,383	**9,789**	(45,273)	20,791	**(24,482)**
Transfers between funds		-	-	**-**	-	-	**-**
Net movement in funds		(53,049)	62,383	**9,789**	(45,273)	20,791	**(24,482)**
Funds reconciliation							
Total Funds brought forward	**17**	135,203	20,806	**156,009**	180,476	15	**180,491**
Total Funds carried forward	**17**	82,154	83,644	**165,798**	135,203	20,806	**156,009**

The Statement of Financial Activities includes all gains and losses recognised in the year.

All income and expenditure derive from continuing activities.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

HELENSBURGH AND LOMOND CARERS SCIO

BALANCE SHEET AS AT 31 MARCH 2026

	Note	Total Funds 2026 £	Total Funds 2025 £
***Fixed assets*:**			
Tangible assets	**13**	2,741	3,408
Total Fixed Assets		2,741	3,408
Current assets:			
Debtors	**14**	18,812	21,682
Cash at bank and in hand	**20**	216,368	174,773
Total Current Assets		235,180	196,455
***Liabilities*:**			
Creditors falling due within one year	**15**	(72,123)	(43,854)
Net Current assets		163,057	152,601
Net assets		165,798	156,009
The funds of the charity:			
Restricted funds	**17**	82,154	20,806
Unrestricted funds	**17**	83,644	135,203
Total charity funds		165,798	156,009

Approved by the trustees and signed on their behalf by:

Signed: Signed by: William Rae A92C2FA3ED364EC...

Name: William Rae

Position: Chairperson

Date: 17 August 2026

Signed: Signed by: F4EC3D4E449C482...

Name: Michael Blair

Position: Treasurer

Date: 17 August 2026

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

HELENSBURGH AND LOMOND CARERS SCIO

STATEMENT OF CASH FLOWS FOR YEAR ENDING 31 MARCH 2026

	Note	2026 £	2025 £
***Cash flows from operating activities*:**			
Net cash provided by/(used in) operating activities	**19**	42,352	(1,353)
***Cash flows from investing activities*:**			
Purchase of plant and machinery	**13**	(757)	(683)
Net cash (used in) investing activities		(757)	(683)
Change in cash and cash equivalents in the year		41,595	(2,036)
Cash and cash equivalents brought forward	**20**	174,773	176,809
Cash and cash equivalents carried forward	**20**	216,368	174,773

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

HELENSBURGH AND LOMOND CARERS SCIO

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

1. Accounting Policies

(a) **Basis of preparation and assessment of going concern**
The accounts (financial statements) have been prepared under the historical cost convention with items recognised at cost or transaction value unless otherwise stated in the relevant note(s) to these accounts.

The financial statements have been prepared in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019) and the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006.

The charity constitutes a public benefit entity as defined by FRS 102.

The trustees consider that there are no material uncertainties about the charity's ability to continue as a going concern.

The financial statements are prepared in sterling, which is the functional currency of the charity. Monetary amounts in these financial statements are rounded to the nearest £.

(b) **Funds structure**
Unrestricted income funds comprise those funds which the trustees are free to use for any purpose in furtherance of the charitable objects. Unrestricted funds include designated funds where the trustees, at their discretion, have created funds for specific purposes.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by the donor or trust deed, or through the terms of an appeal.

Further details of each fund are disclosed in note 17.

(c) **Income recognition**
Income is recognised once the charity has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably.

Donations are recognised when the SCIO has been notified in writing of both the amount and settlement date. In the event that a donation is subject to conditions that require a level of performance before the charity is entitled to the funds, the income is deferred and not recognised until either those conditions are fully met, or the fulfilment of those conditions is wholly within the control of the charity and it is probable that those conditions will be fulfilled in the reporting period.

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is normally upon notification of the interest paid or payable by the bank.

(c) **Income recognition (continued)**
Income from government and other grants, whether 'capital' or 'revenue' grants, is recognised when the charity has entitlement to the funds, any performance conditions attached to the grants have been met, it is probable that the income will be received and the amount can be measured reliably and is not deferred.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

1. Accounting Policies (continued)

Income received in advance of the provision of a specified service is deferred until the criteria for income recognition are met.

(d) **Expenditure recognition**
Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that settlement will be required and the amount of the obligation can be measured reliably.

All expenditure is accounted for on an accruals basis. All expenses including support costs and governance costs are allocated or apportioned to the applicable expenditure headings. For more information on this attribution refer to note (e) below.

- Expenditure on charitable activities includes expenditure undertaken to further the purposes of the charity and their associated support costs.

Irrecoverable VAT is charged as a cost against the activity for which the expenditure is incurred.

(e) **Allocation of governance costs**
Governance costs have been allocated to the cost of charitable activities.

(f) **Tangible fixed assets and depreciation**
All assets costing more than £500 are capitalised and valued at historical cost. Depreciation is charged as follows:

	Basis
Equipment	20% Straight Line

(g) **Debtors**
Trade and other debtors are recognised at the settlement amount due after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

(h) **Cash at bank and in hand**
Cash at bank and cash in hand includes cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

(i) **Creditors and provisions**
Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

(j) **Employee Benefits**
The costs of short-term employee benefits are recognised as a liability and an expense, unless those costs are required to be recognised as part of the cost of stock or fixed assets.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

1. Accounting Policies (continued)

The cost of any unused holiday entitlement is recognised in the period in which the employee's services are received.

Termination benefits are recognised immediately as an expense when the charity is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

(k) **Pensions**
The charity paid contributions of 4% into employee's pension schemes. Details of the contributions are included within note 10.

Employees of the charity are entitled to join a defined contribution 'money purchase' scheme. The charity contribution is restricted to the contributions disclosed in note 10. There were no outstanding contributions at the year end. The costs of the defined contribution scheme are included within the costs of charitable activities.

The money purchase plan is managed by Aviva and the plan invests the contributions made by the employee and employer in an investment fund to build up over the term of the plan. The pension fund is then converted into a pension upon the employee's normal retirement age which is defined as when they are eligible for a state pension. The charity has no liability beyond making its contributions and paying across the deductions for the employee's contributions.

(l) **Operating leases**
The charity classifies the lease of plant and equipment as operating leases; the title to the equipment remains with the lessor. Rental charges for property are charged on a straight-line basis over the term of the lease.

(m) **Financial instruments**
The charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value.

(n) **Judgements and key sources of estimation uncertainty**
In the application of the charity's accounting policies, the Trustees are required to make judgements, estimates and assumptions about the carrying amount of assets and liabilities that are not readily apparent from other sources.

(n) **Judgements and key sources of estimation uncertainty (continued)**
The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates. The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised, if the revision affects only that period, or in the period of the revision and future periods if the revision affects both current and future periods.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

1. Accounting Policies (continued)

The trustees are satisfied that the accounting policies are appropriate and applied consistently. Key sources of estimation/judgement have been applied as follows;

Estimate/Judgement	Basis of estimation/judgement
Depreciation of fixed assets	Fixed assets are depreciated and amortised over the useful life of the asset. The useful lives of fixed assets are based on the knowledge of the operations team, with reference to assets expected life cycle.
Impairment of fixed assets	The directors determine whether there are indicators of impairment of the tangible assets. Factors taken into consideration in reaching such a decision include the economic viability and expected future financial performance of the asset.

(o) **Taxation**
The SCIO is a charity within the meaning of Section 467 of the Corporation Tax Act 2010. Accordingly, the charity is potentially exempt from taxation in respect of income or capital gains received within categories covered by Chapter 3 of Part 11 of the Corporation Tax Act 2010 and section 256 of the Taxation of Chargeable Gains Act 1992 to the extent that such income or gains are applied for charitable purposes only.

2. Legal status of the Charity

The Charity is a registered Scottish Charitable Incorporated Organisation.

3. Related party transactions and trustees' expenses and remuneration

The trustees all give freely their time and expertise without any form of remuneration or other benefit in cash or kind (2025: £nil). No travel expenses were paid to trustees this year (2025: £nil).

No expenses were waived by trustees during the year (2025: £nil).

During the year, no trustee had any personal interest in any contract or transaction entered into by the charity (2025: none).

During the year, a total of £552 in donations were given to the charity by four trustees (2025: £767).

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

HELENSBURGH AND LOMOND CARERS SCIO

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

4. Income from donations and legacies

	2026	2025
	£	£
Donations	13,764	6,721
Gift Aid	1,287	723
	15,051	7,444

5. Income from charitable activities

	2026	2025
	£	£
Grant Income	265,975	190,723
Contractual income	359,450	365,950
	625,425	556,673

6. Other trading income

	2026	2025
	£	£
Fundraising	2,213	1,685
	2,213	1,685

7. Investment income

	2026	2025
	£	£
Interest on cash deposits	2,950	3,839
	2,950	3,839

8. Allocation of governance costs

	2026	2025
	£	£
Non-audit accountancy fees	-	2,793
Audit fees	7,875	7,500
	7,875	10,293

Governance costs have been fully allocated to the cost of charitable activities.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

HELENSBURGH AND LOMOND CARERS SCIO

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

9. Analysis of expenditure on charitable activities

	2026 Carers Services £	2026 Total £	2025 Carers Services £	2025 Total £
Staff costs	403,563	403,563	374,547	374,547
Staff travel	934	934	1,244	1,244
Cleaning, maintenance and equipment	1,141	1,141	391	391
Payroll Admin	2,096	2,096	1,932	1,932
Staff training	1,775	1,775	1,034	1,034
Insurance	1,958	1,958	2,830	2,830
Accommodation rent & service charge	28,146	28,146	26,322	26,322
Telephone, broadband & computer costs	4,921	4,921	4,197	4,197
Printing, postage and stationery	4,717	4,717	4,175	4,175
Accountancy fees	20,294	20,294	16,431	16,431
Bank charges	187	187	147	147
YC Activity costs	12,253	12,253	38,458	38,458
Professional fees	1,896	1,896	3,176	3,176
Young carer activities	1,194	1,194	5,602	5,602
Adult Carers Activity costs	37,607	37,607	57,753	57,753
Marketing	824	824	-	-
SCS TTL micro grant	37,347	37,347	23,288	23,288
Therapies	7,031	7,031	-	-
Computer and Software	4,147	4,147	5,431	5,431
AC and YC Wellbeing costs	39,259	39,259	223	223
Income Maximisation & Fuel Poverty	13,659	13,659	12,361	12,361
Carers Trust Individual Grants	1,602	1,602	2,472	2,472
Depreciation	1,424	1,424	1,816	1,816
Governance costs (note 8)	7,875	7,875	10,293	10,293
	635,850	635,850	594,123	594,123

10. Analysis of staff costs and remuneration of key management personnel

	2026 £	2025 £
Salaries and wages	356,894	336,496
Social security costs	34,273	26,394
Pension costs	12,396	11,657
Total staff costs	403,563	374,547
Key Management Personnel Remuneration	53,502	49,842

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

10. Analysis of staff costs and remuneration of key management personnel (continued)

The charity made contributions totalling £12,396 to employees' personal pension schemes (2025: £11,657). For more information about the pension contributions refer to note 1 (k).

No employees had employee benefits in excess of £60,000 (2025: Nil).

	2026 No.	2025 No.
The average weekly number of persons, by headcount, employed by the charity during the year was:	12	12

11. Net income/(expenditure) for the year

This is stated after charging:	2026 £	2025 £
Depreciation	1,424	1,816
Non-audit accountancy fees	-	2,793
Audit fees	7,875	7,500

12. Government Grants

Income from government grants comprises:

(i) Shared Care Scotland (Scottish Government funded to manage grant payments.)

a) Short Break Fund - Time to Live Micro Grant & Develop and Deliver Grant - £50,290 received during the year (2025: £26,095) for flexible short breaks for carers and to help meet associated development and delivery costs.
b) Wellbeing & Support Grant - £4,738 received during the year (2025: £4,473) to prove support services to carers aimed at improving their wellbeing.
c) Adult Carers You Matter Too Grant - £34,754 received during the year (2025: £26,789) to deliver programme of services and activities for adult carers.
d) Young Carers Laugh Out Loud Grant - £34,264 received during the year (2025: £29,989) to deliver programme of services and activities for young carers.

There are no other forms of Government assistance from which this Charity has directly benefitted. There were no unfulfilled conditions or other contingencies attached to the Government funded grants.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

HELENSBURGH AND LOMOND CARERS SCIO

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

13. Tangible Fixed Assets

	Equipment £	Total £
Cost at 1 April 2025	9,364	9,364
Additions	757	757
Cost at 31 March 2026	10,121	10,121
Depreciation at 1 April 2025	5,956	5,956
Charge for the year	1,424	1,424
Depreciation at 31 March 2026	7,380	7,380
Net book value at 31 March 2026	2,741	2,741
Net book value at 31 March 2025	3,408	3,408

14. Debtors

	2026 £	2025 £
Prepayments	1,623	1,623
Accrued income	-	5,000
Other debtors	15,332	13,234
Trade debtors	1,857	1,825
	18,812	21,682

15. Creditors: amounts falling due within one year

	2026 £	2025 £
Other creditors and accruals	10,256	10,200
Deferred Income (Note 16)	54,000	29,939
Trade Creditors	7,867	3,715
	72,123	43,854

16. Deferred Income

	2026 £	2025 £
Balance as at 1 April 2025	29,939	26,848
Amount released to income	(29,939)	(26,848)
Amount deferred in year	54,000	29,939
Balance as at 31 March 2026	54,000	29,939

Deferred income comprises grant income received in advance.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

HELENSBURGH AND LOMOND CARERS SCIO

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

17. Analysis of charitable funds

2025 Analysis of Fund movements	Balance b/fwd £	Income £	Expenditure £	Transfers £	Fund c/fwd £
Unrestricted funds					
Fixed Assets	4,541	-	(1,816)	683	3,408
Contingency	48,000	-	-	-	48,000
Operational	25,000	-	-	-	25,000
Working Capital	80,000	-	-	(30,000)	50,000
Total designated funds	157,541	-	(1,816)	(29,317)	126,408
General funds	22,935	379,595	(423,052)	29,317	8,795
Total unrestricted funds	180,476	379,595	(424,868)	-	135,203
Restricted funds					
Carers Trust- Young Carers Festival Grant	-	400	(400)	-	-
SCS- Time to live -Develop & Deliver	-	7,456	(7,456)	-	-
SCS - Time to live - Additional Funding Grant	-	4,473	(4,473)	-	-
SCS - Time to Live Micro Grant - Main Grant	-	18,639	(18,639)	-	-
SCS - Adult Carers Me Time Grant 2023/24	-	13,434	(13,434)	-	-
SCS - Adult Carers Me Time Grant 2024/25	-	13,364	(13,364)	-	-
SCS - Young Carers Laugh out Loud Grant 2023/24	-	13,414	(13,414)	-	-
SCS - Young Carers Laugh out Loud Grant 2024/25	-	16,575	(16,575)	-	-
National lottery- Young cares grant	15	-	(15)	-	-
National Lottery - Inspiring Young Carers	-	44,430	(41,663)	-	2,767
Carers Trust – Carers Money Matters Funding	-	40,000	(33,804)	-	6,196
Carers Trust - Young Carers Action Day	-	750	(750)	-	-
Argyll & Bute Council - Yc Child Poverty Fund	-	960	(960)	-	-
Restricted Funds	**15**	**173,895**	**(164,947)**	**-**	**8,963**

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

HELENSBURGH AND LOMOND CARERS SCIO

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

17. Analysis of charitable funds (continued)

2025 Analysis of Fund movements	Balance b/fwd £	Income £	Expenditure £	Transfers £	Fund c/fwd £
Restricted Funds					
Total restricted funds from previous page	**15**	**173,895**	**(164,947)**	**-**	**8,963**
Third Sector Interface - Well Being Fund	-	1,800	(203)	-	1,597
Argyll & Bute Council - Yc Corra Uncrc Fund	-	1,593	(1,593)	-	-
Scottish Families Against Drugs & Alcohol - Grow Your Own Routes Funding	-	5,000	(154)	-	4,846
Carers Trust - C Trust Grant	-	300	(300)	-	-
Carers Trust - C Trust Grant	-	259	(259)	-	-
Carers Trust - C Trust Grant	-	300	(300)	-	-
Carers Trust - C Trust Grant	-	199	(199)	-	-
Carers Trust - C Trust Grant	-	300	(300)	-	-
Carers Trust - C Trust Grant	-	300	(300)	-	-
Carers Trust - C Trust Grant	-	300	(300)	-	-
Carers Trust - Ct Grant	-	400	(400)	-	-
Carers Trust - Ct Grant -	-	400	-	-	400
BBC Children In Need Big Sky	-	5,000	-	-	5,000
Total Restricted funds	15	190,046	(169,255)	-	20,806
TOTAL FUNDS	180,491	569,641	(594,123)	-	156,009

2026 Analysis of Fund movements	Balance b/fwd £	Income £	Expenditure £	Transfers £	Fund c/fwd £
Unrestricted funds					
Fixed Assets	3,408	-	(1,424)	757	2,741
Contingency	48,000	-	-	7,000	55,000
Operational	25,000	-	-	-	25,000
Working Capital	50,000	-	-	(7,000)	43,000
Total designated funds	126,408	-	(1,424)	757	125,741
General funds	8,795	379,664	(431,289)	(757)	(43,587)
Total unrestricted funds	135,203	379,664	(432,713)	-	82,154
Restricted funds					
SCS- Time to live -Develop & Deliver	-	12,749	(12,749)	-	-
Restricted Funds	**-**	**12,749**	**(12,749)**	**-**	**-**

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

HELENSBURGH AND LOMOND CARERS SCIO

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

17. Analysis of charitable funds (continued)

2026 Analysis of Fund movements	Balance b/fwd £	Income £	Expenditure £	Transfers £	Fund c/fwd £
Restricted Funds					
Total restricted funds from previous page	**-**	**12,749**	**(12,749)**	**-**	**-**
SCS - Time to live - Additional Funding Grant	-	4,250	(3,964)	-	286
SCS - Time to Live Micro Grant - Main Grant	-	33,291	(33,291)	-	-
SCS - Young Carers Laugh out Loud Grant	-	50,839	(24,745)	-	26,094
National Lottery - Inspiring Young Carers	2,767	-	-	-	2,767
Carers Trust – Carers Money Matters Funding	6,196	44,000	(47,199)	-	2,997
Third Sector Interface - Well Being Fund	1,597	-	-	-	1,597
Scottish Families Against Drugs & Alcohol - Grow Your Own Routes Funding	4,846	5,000	(2,025)	-	7,821
Carers Trust - CT Grant – LS	400	-	(400)	-	-
BBC Children In Need Big Sky	5,000	-	(3,384)	-	1,616
SCS - AC You Matter Too	-	48,118	(13,135)	-	34,983
AC & YC Mental Health and Well Being Fund	-	4,738	(4,738)	-	-
Another Way Womens Foundation Grant 2026	-	1,000	-	-	1,000
Big Lottery – National Lottery Year 2	-	34,350	(32,304)	-	2,046
Carers Trust IND Grants	-	1,220	(1,220)	-	-
Carers Trust Young Carers Action Day	-	750	(696)	-	54
Cobber Charitable Grant - Cobb	-	21,500	(21,500)	-	-
Argyll & Bute Third Sector Interface- (a) Community Mental Health and Wellbeing Fund - £4,738 received during the year, (2025: £1,800, to support the mental health and wellbeing of adult and young carers.er Counselling Funding 2025-26					
Heart Helensburgh – Your Space Funding	-	1,190	(1,190)	-	-
Heart Helensburgh – Your Space Funding	-	1,230	-	-	1,230
Mitchells Robertson – Miss EC Hendry Charitable Trust	-	1,000	-	-	1,000
NHS Highland – YC Sexual Health Funding	-	750	(597)	-	153
Total Restricted funds	20,806	265,975	(203,137)	-	83,644
TOTAL FUNDS	**156,009**	**645,639**	**(635,850)**	**-**	**165,798**

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

17. Analysis of charitable funds (continued)

a) The unrestricted funds are available to be spent for any of the purposes of the charity.

The designated funds are as follows:

i) The Fixed Assets designated fund represents the net book value of the tangible fixed assets at the year end.

ii) Contingency reserve was established to meet financial liabilities in the event that the charity had to cease operating for any reason.

iii) Operational reserve was established to deal with short term cash-flow problems, generally related to delays in the charity receiving anticipated funding and is based on the Charity's assessed requirements. This is reviewed annually and increased as appropriate.

iv) Working Capital represents funds required to meet salary costs and help sustain services for Adult Carers.

b) The restricted funds are primarily grant payments received from statutory and voluntary funders, which are available to be spent for the purposes of the charity, subject to certain conditions as to their use imposed by the funding body. Such grants contribute to the direct and indirect costs of providing or sustaining specific services and activities designed to support the charity's beneficiaries. Applying for such grants is an ongoing process and funds can be received at any time, with the related expenditure crossing over financial years. Further information about the services and activities concerned can be found in Section 9, Part 1 of this Report.

The income from restricted grant funds was utilised for the following purposes:

(i) Another Way Women's Foundation
(a) 2026 Grant - £1,000 received during the year (2025: £nil), to support the delivery of a short pilot programme consisting of facilitated group sessions with a growth coach and outsourced activities including peer support and shared reflection, confidence and wellbeing workshops, information and signposting and co-production discussions.

(ii) Argyll & Bute Third Sector Interface-
(a) Community Mental Health and Wellbeing Fund - £4,738 received during the year, (2025: £1,800, to support the mental health and wellbeing of adult and young carers.

(iii) BBC Children in Need –
(a) Big Sky Grant - £5,000 was brought forward from the prior year to support young carer activities.

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

(iv) Carers Trust-
- (a) Carers Money Matters Programme - £44,000 received during the year, (2025: £40,000) to address fuel poverty and income maximisation for unpaid carers.
- (b) Young Carers Action Day - £750 received during the year (2025: £750) to support a campaign to promote fair futures for young carers.
- (c) Individual Adult and Young Carers Grants - £1,220 received during the year for 5 unpaid carers, (2025: £2,758).

(vi) Helensburgh Events & Reinvestment Trust-
- (a) Young Space grant - £1,190 received during the year (2025: £nil) to provide Tai Chi, Yoga and Fitness Sessions for adult carers.
- (b) Men Care Too grant - £1,230 received during the year (2025: £nil) to provide activities for adult male carers group.

(vi) National Lottery-
- (a) Improving Lives Fund - £34,350 received during the year (2025: £44,430) for services and activities for young carers.

(vii) NHS Highland Sexual Health Initiative-
- (a) Community Funding Grants for young people: £750 received during the year (2025: £nil) to discuss and offer advice for young adult carers group.

(viii) Miss EC Hendry Charitable Trust –
- (a) Trust Fund - £1,000 received during the year (2025: £nil) to support outreach work in the village of Cardross.

ix) Robertson Trust-
- (a) Grant - £30,000 received during the year (2025: £nil) to address fuel poverty and income maximisation for unpaid carers. This has been deferred to 2026/2027 due to the conditions of the grant.

x) Scottish Families against Drugs and Alcohol-
- (a) Grow Young Own Routes fund - £5,000 received during the year (2025: £5,000) to support young carers living in households with addiction issues.

(xi) Shared Care Scotland-
- (a) Short Break Fund - Time to Live Micro Grant & Develop and Deliver Grant - £46,039 received during the year (2025: £26,095) for flexible short breaks for carers and to help meet associated development and delivery costs and Additional Funding Grant - £4,250 received during the year (2025: £4,473) to prove support services to carers aimed at improving their wellbeing.
- (b) Adult Carers You Matter Too Grant - £34,754 received during the year, and £13,364 deferred from the prior year (2025: £Nil) to deliver programme of services and activities for adult carers.
- (c) Young Carers Laugh Out Loud Grant - £34,264 received during the year, and £16,675 deferred from the prior year (2025: £29,989) to deliver programme of services and activities for young carers.

(xii) Shepherd & Wedderburn LLP -
- (a) 2 separate grants received during the year – the first for £21,500 and the second for £24,000 (which has been deferred to next year) to provide counselling services for unpaid carers

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

HELENSBURGH AND LOMOND CARERS SCIO

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

18. Net assets over funds

	Unrestricted Funds £	Restricted Funds £	Total 2025 £
Fixed assets	3,408	-	3,408
Debtors	16,682	5,000	21,682
Cash at bank and in hand	129,028	45,745	174,773
Current liabilities	(13,915)	(29,939)	(43,854)
	135,203	20,806	156,009

	Unrestricted Funds £	Restricted Funds £	Total 2026 £
Fixed assets	2,741	-	2,741
Debtors	18,812	-	18,812
Cash at bank and in hand	78,724	137,644	216,368
Current liabilities	(18,123)	(54,000)	(72,123)
	82,154	83,644	165,798

19. Reconciliation of net expenditure to net cash flow from operating activities

	2026 £	2025 £
Net income/(expenditure) for the year per the statement of financial activities	9,789	(24,482)
Adjustments for:		
Depreciation charges	1,424	1,186
(Increase)/Decrease in debtors	2,870	14,252
Increase in creditors	28,269	7,061
Net cash provided by operating activities	42,352	(1,353)

20. Analysis of cash and cash equivalents

	2026 £	2025 £
Cash at bank and in hand	216,368	174,773
Total cash and cash equivalents	216,368	174,773

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

21. Operating lease commitments

At the year-end date the charity had outstanding commitments for future minimum lease payments under non-cancellable operating leases, which fall due as follows;

	2026 £	2025 £
Under 1 year	2,760	3,713
	2,760	3,713

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Our Values

- *being accountable for all aspects of the management and operation of the organisation;*
- *respecting and valuing each other and all members, showing an understanding and appreciation of similarities and differences of those with caring responsibilities;*
- *being honourable and trustworthy and always striving to do what is right;*
- *being honest, truthful and open in our interactions with each other and with those who use the services available;*
- *treating everyone in a fair, sensitive and ethical manner;*
- *being conscientious, responsible and dependable, and*
- *working together as a team, making best use of individual skills, abilities, and experiences to achieve the organisation's objectives.*

,

Our Operating Principles

- *maintaining a focus on identifying and supporting carers;*
- *ensuring that carers are recognised as expert partners in care;*
- *ensuring support services provided are shaped by carers' needs;*
- *ensuring support services are provided at no cost to carers;*
- *continuously reviewing the quality of services provided to improve performance;*
- *striving to resolve problems encountered by carers;*
- *providing a strong voice in relation to issues that affect carers;*
- *promoting partnership and joint working arrangements within Argyll and Bute and also with the Network of Carers' Centres across Scotland and the UK that are members of the Carers Trust;*
- *continuously reviewing the performance of the management of the Charity;*
- *valuing the contribution made by trustees, members of staff and volunteers;*
- *investing in the ongoing training and development of trustees, staff and volunteers;*
- *promoting equality of opportunity in all aspects of service delivery and employment, and*
- *recognising and trying to minimise the environmental impact of the Charity's activities.*

Docusign Envelope ID: BF0406AC-98B6-8ED7-808C-8BFD648BFDDF

Helensburgh & Lomond Carers SCIO
Lomond House
29 Lomond Street
Helensburgh
G84 7PW

Tel: 01436 673444
Email: **hello@hlcc.org.uk**
Website: **www.hlcc.org.uk**

Registered Scottish Charity No. SC033382
(A Scottish Charitable Incorporated Organisation)