

Adult social care reform for Scotland – discussion paper

SCVO response to COSLA and Scottish Government

17 October 2018

This paper is now: Final draft

Our position

SCVO welcomes the discussion on reforming adult social care.

Third sector must be a key participant in this discussion

The proposed National programme of support must be based on the National Performance Framework and be transparent, participative and accountable.

SCVO supports the People-led Policy Group alongside wider participation opportunities

SCVO outlines a 'community directed support' approach to reforming adult social care.

Our response

Introduction

SCVO welcomes Scottish Government and COSLA's joint discussion paper on reforming adult social care and shares the concerns about the projected growth in demand.

The paper needs to be published online, rather than simply emailed to selected stakeholders for response. We note that CCPS has made the paper available through its [website](#), but this should not be the sole channel for wider engagement.

We believe the health and care system is currently chronically under-resourced and under-valued, and total system change is required to tackle the significant challenges with the way care is planned, delivered and resourced.

SCVO notes that 40,500 people work in social care through the third sector ([SSSC official statistics](#)), so the third sector must be part of this discussion. In addition, 788,000 unpaid

carers ([Scottish Government 2017](#)) who ease the burden on services are supported by third sector organisations across the country, while advice services such as CABs are facing increasing demand from people living in in-work poverty who are employed in social care, often in precarious work.

Response to specific proposals

Proposition in discussion paper	Our analysis	Our recommendations
National programme of support	<p>This looks to us as an attempt to bring together several existing initiatives under a single oversight mechanism.</p> <p>The opportunity here is to provide a common framework for the various initiatives that can ensure that a shared set of principles and purpose, and that the various health and care standards, strategies and programmes mutually reinforce each other.</p>	<p>The national programme is a welcome knitting together of existing initiatives but must be framed appropriately, within the National Performance Framework and Sustainable Development Goals.</p> <p>The programme also needs to be participative, transparent and accountable if it is to secure public trust and engagement.</p>
'People-led Policy Group'	<p>It is essential that the programme engages with those directly affected by health and care support.</p> <p>This group of 20-50 people will be a useful sounding board for policy development but should not be the sole channel for engagement with the wider public.</p>	<p>We support the Inclusion Scotland-led People-led Policy Group.</p> <p>We also recommend clear and accessible channels for wider participation in the development of policy.</p>
Refreshed implementation plan for Self-directed support	<p>The take-up and engagement with self-directed support has not been a success for various reasons now rehearsed extensively.</p>	<p>See below for our proposals for reforming adult social care</p>

Mansfield Traquair Centre, 15 Mansfield Place, Edinburgh EH3 6BB
 Tel: 0131 474 8000 • Web: www.scvo.org.uk • SCVO Information Service: 0800 169 0022.

<p>Commissioning and procurement of health and social care services</p>	<p>We believe the current model of commissioning services is broken and needs to be turned on its head. It is currently too top-down, over-emphasises medical models of support needs and measures the wrong outputs.</p> <p>The current approach to procurement treats purchasing services for people in the same way as purchasing ‘things’ for consumption which simply dehumanises individuals. People are not commodities.</p> <p>As well as the impact on the beneficiaries of services, the impact on the workforce in commissioned services is bleak. There is a drive to the lowest possible cost in terms of pay and conditions, working patterns are far from “family-friendly” and there is a growing shift to precarious work such as zero hours or nominal contracts. This impacts negatively on recruitment and retention and on well-being. In-work poverty is growing in the care sector and there is a sharp contrast between health and social care, and between in-house public sector and commissioned third or private sector workers.</p>	<p>We expect the Fair Work Convention to report in the near future on fair work in social care and will likely support its recommendations.</p> <p>We recommend that the current approach to commissioning and procuring care services be regarded as a failed experiment (David Behan, Care Quality Commission) and abandoned in favour of a completely new approach, developed collaboratively with the people using the services and frontline workers.</p>
---	--	--

Mansfield Traquair Centre, 15 Mansfield Place, Edinburgh EH3 6BB
Tel: 0131 474 8000 • Web: www.scvo.org.uk • SCVO Information Service: 0800 169 0022.

Our proposals for reforming adult social care

The key to reforming adult social care, is to base it on human rights and empowering people to direct their own support.

Our big idea is to revive the offer of self-directed support, by linking it more closely with investing in community development approaches, which we have called community-directed support.

The ideas we present in this section have been openly developed at <https://communitydirectedsupport.miraheze.org>. Please visit that site for more details on our analysis and propositions, and the evidence it is based on.

<p>Funding and sustainability of community-directed support</p>	<p>Social care support should be viewed as an infrastructure investment in the social and economic wellbeing and development of society as a whole. Rather than viewing social care as a drain on public resources, we believe social care should be viewed as a positive, human rights-based contributor to a thriving society. Sustainably funding community interventions is an aspect of this shift in thinking.</p>
<p>Investment in community infrastructure</p>	<p>Government, local authorities and communities themselves must be aware that growing community capacity takes time, and this is not a "quick-win".</p> <p>This investment would mean longer-term funding for local community organisations and anchor organisations, investment in community hubs and empowering communities to be part of the decisions taken in their local area. Investing in community infrastructure, such as public places, places where people meet informally, and services that can facilitate access to places to meet can help to build more resilient communities and collective wellbeing.</p> <p>While it would require investment, this would pay dividends in the medium to long term in reducing the burden on public services and allowing them to focus on the "high tariff" needs of people and families.</p>
<p>Shared vision and understanding</p>	<p>We need a shared understanding among communities who recognise their potential but also within Scottish Government, Health and Social Care partnerships to recognise the viability and importance of community organisations and their contribution to health and social care, and to individual wellbeing.</p>
<p>Empower people to take control of their</p>	<p>For self-directed support to work there needs to be the capacity for peer support, sharing best practice examples and enabling</p>

Mansfield Traquair Centre, 15 Mansfield Place, Edinburgh EH3 6BB
 Tel: 0131 474 8000 • Web: www.scvo.org.uk • SCVO Information Service: 0800 169 0022.

<p>own lives through community directed support</p>	<p>people to communicate with each other about what works and what doesn't work. Bringing people together to discuss options, experiences and possibilities is extremely powerful and can play an important role in empowering individuals:</p> <p>The Glasgow Disability Alliance found that peer support made all the difference to participants of their Future Visions project as this provided individuals with a new social network, showed they weren't alone and that others had overcome similar issues. This idea of the "power of we" was motivational, giving individuals support and role models.</p> <p>In the SCDC and Glasgow Centre for Population Health work on animating assets, storytelling was an important part, enabling people to share experiences, ambitions and make connections. These stories were also viewed as helping individuals to understand their local community and challenge perceptions.</p> <p>This kind of activity not only helps people in their immediate situations but builds skills and confidence for their wider lives.</p>
<p>Empower people and communities through consultation processes and participation in services</p>	<p>A wider point on empowerment is a focus on empowering people and communities to participate and have their voices heard through designing their own services.</p> <p>A good example is Recovery Café projects. In these models, through building skills and confidence, individuals are able to move from being recipients of services to delivering and supporting others.</p> <p>Participatory budgeting can also help by building people's trust in their services as a result of directing the spend on interventions that affect them directly.</p> <p>For example, South Ayrshire have held 'decision days' and a marketplace approach to PB while Edinburgh Voluntary Organisation's Council, operated a Change Fund participatory budget project as part of its delivery of the 'Reshaping Care for Older People' programme. However, there is also potential to use PB to consult with communities, to empower individuals and give community initiatives the opportunity to access funding.</p>
<p>Community spaces and community hubs</p>	<p>Using trusted community organisations, hubs and anchors can help to reach people who would typically face additional barriers to accessing health and care services.</p>

Mansfield Traquair Centre, 15 Mansfield Place, Edinburgh EH3 6BB
Tel: 0131 474 8000 • Web: www.scvo.org.uk • SCVO Information Service: 0800 169 0022.

	<p>One such group is older men who are engaged in various third sector interventions which have an impact on health and wellbeing such as the Men's Shed Movement, Care and Repair or programmes such as Big Hearts Community Trust.</p>
<p>Building relationships with existing community groups and public sector infrastructure</p>	<p>Community services can be fragmented and poorly coordinated so that they are not well integrated with other services in the community, leading to duplication and gaps in service provision.</p> <p>A question is how people can discover what's happening in their area in terms of information support and self-directed support options.</p> <p>There is also a role for health and social care partnerships and third sector interfaces to map local interventions. Another important option is to bring people and organisations together via online and face-to-face networks where they can share experiences, stories and empower each other. Some pioneering work has been done by Carr Gorn Housing Association in this area.</p>
<p>Empower people to take control of their own health and care</p>	<p>Self-directed support focuses on people being able to take control of their own health as far as possible and future models of community-based care should also stem from this ambition.</p> <p>For self-directed support to work there needs to be the capacity for peer support, sharing best practice examples and enabling people to communicate with each other about what works and what doesn't work.</p>

About us

The Scottish Council for Voluntary Organisations (SCVO) is the national body representing the third sector. There are over 45,000 voluntary organisations in Scotland involving around 138,000 paid staff and approximately 1.3 million volunteers. The sector manages an income of £5.3 billion.

SCVO works in partnership with the third sector in Scotland to advance our shared values and interests. We have over 1,900 members who range from individuals and grassroots groups, to Scotland-wide organisations and intermediary bodies.

Mansfield Traquair Centre, 15 Mansfield Place, Edinburgh EH3 6BB
 Tel: 0131 474 8000 • Web: www.scvo.org.uk • SCVO Information Service: 0800 169 0022.

As the only inclusive representative umbrella organisation for the sector SCVO:

- has the largest Scotland-wide membership from the sector – our 1,900 members include charities, community groups, social enterprises and voluntary organisations of all shapes and sizes
 - our governance and membership structures are democratic and accountable - with an elected board and policy committee from the sector, we are managed by the sector, for the sector
 - brings together organisations and networks connecting across the whole of Scotland
 - SCVO works to support people to take voluntary action to help themselves and others, and to bring about social change.
-
- Further details about SCVO can be found at www.scvo.org.uk.

Contact

Ruchir Shah

Scottish Council for Voluntary Organisations,
Mansfield Traquair Centre,
15 Mansfield Place, Edinburgh EH3 6BB

Email: politicalengagement@scvo.org.uk

Tel: 0131 474 8000

Web: www.scvo.org.uk

Mansfield Traquair Centre, 15 Mansfield Place, Edinburgh EH3 6BB
Tel: 0131 474 8000 • Web: www.scvo.org.uk • SCVO Information Service: 0800 169 0022.