

FINANCE COMMITTEE

DRAFT BUDGET 2014-15

SUBMISSION FROM HEALTH AND SOCIAL CARE ALLIANCE SCOTLAND AND VOLUNTARY ACTION SCOTLAND

1. A key message from the third sector over recent years has been the divergence between a strong political drive for radical shifts in policy and investment and the experience locally. The consistent message, reflected in the Christie agenda and frequently by Scottish Ministers, is the need to shift power and resources to communities, re-direct efforts and budgets towards prevention and focus on outcomes. The extent to which this is reflected locally remains limited, a point made clearly by the Scottish Parliament's Local Government Committee in its recent report on Public Service Reform. Power largely continues to lie with statutory agencies, the bulk of investment continues to be made 'downstream' in traditional services and the potential contribution of the third sector remains significantly larger than its influence and resourcing allow it to make.

2. There are however some signs of progress that can be built upon and significant opportunities to bring national rhetoric and local reality closer together.

3. In considering the 2014-15 Scottish Budget we would make the following points:

Public Service Reform

4. Across all initiatives related to reforming public services we **must keep the focus on the impact on people themselves**. Too often we revert to viewing services as ends in themselves, rather than being there to enable the human rights of all of Scotland's citizens. Issues of structures, budgets and organisational interests – while important and complex – must not be allowed to take priority over outcomes.

5. The third sector makes a significant contribution to the health and wellbeing of Scotland's people and communities. The **Self Management Fund is one example of the impact that can be achieved by investing directly into the sector**, supporting organisations and individuals to lead innovation and develop effective, high value for money asset-based approaches, often in partnership with statutory sector health and social care. Another example is the ALLIANCE's partnership with the Joint Improvement Team to develop third sector preventative and capacity building activity, including through the role of faith communities (for example Dementia Cafes run in churches) and promotion of 'active ageing' in Scotland and internationally.

6. The Scottish Government Route Map to the 2020 Vision for Health and Social Care reflects an important development in thinking from simply 'shifting the balance of care' to also **'shifting the balance of power'**. Investment in the Person-centred Health and Care Programme will help to drive this and a small, strategic investment will be required beyond the life of that programme so that momentum is maintained and progress continued.

7. TSIs report that the **Reshaping Care for Older People (RCOP) Change Fund has been an important catalyst** for building strategic relationships between the third and statutory sector locally. It has not always been easy but has enabled many areas to tackle the challenging issues of partnership working and move beyond some of the barriers to its effectiveness. Scottish Government investment should better recognise the role of TSIs as part of the long term infrastructure that will enable change activity to be embedded and difficult relationship building work to progress, helping to change local cultures.

8. **Integration of health and social care offers a key driver towards the Christie public service reform agenda.** The third sector will be key to ensuring a shift in investment and approach and must, along with users of support and services, share power with statutory partners. The foundation of the Change Fund must be built upon with **TSIs appropriately resourced and supported to ensure strategic representation of the third sector locally.** There is anecdotal feedback from TSIs that the sector is being given more opportunity – as a result of the public service reform agenda – to work collaboratively with the statutory sector at strategic level. TSIs can and do provide an effective partner to the third sector and public sector in public service reform but are inadequately resourced to fulfil this role. The wider sector must be properly resourced to enable effective participation in local decision making, particularly in the context of locality planning where organisations may be stretched across several localities

9. The contents of the **Community Empowerment and Renewal Bill**, and how its implementation is resourced and supported, will be another key plank of ensuring effective participation of the third sector as well as of people who use support and services.

There is **significant concern about the lack of disinvestment** over the lifetime of the RCOP Change Fund and the likelihood of new approaches being lost when it comes to an end. It is not safe to assume that approaches that are demonstrably impacting upon prevention/shifting the balance of care will be mainstreamed once the Change Fund monies end. **TSIs would welcome Scottish Government guidance to local partnerships on this.**

10. There is also concern that the current economic climate means decisions about (RCOP) Change Fund **spend and reinvestment of under-spend are to a certain extent driven by the need to prop up existing service provision** so that it is maintained rather than driving the change agenda. Some statutory sector investment decisions are also being made with incomplete information about the full cost of the service. This lack of real cost information means that wise investment decisions will require luck as well as analysis and insight.

11. Some third sector activity is most effectively supported through small grants. TSIs report that many areas have created small grants funds using underspend Change Fund money but that there remains a shortage of this type of funding. This shortage is likely to worsen after the Change Fund ends. The Self Management Fund also provides many examples of how small grants can unlock capacity and enable creative, inexpensive and effective approaches to supporting people and communities to flourish.

12. **The pattern of spend of mainstream health and social care resources must show a change that reflects the move towards prevention and asset-based approaches.**

13. We need a clear approach to quickening the pace towards the change outlined by Christie. **The move to preventative spend has not yet been significant enough and an approach post- Change Fund needs to give the third sector a greater leadership role.** The new Life Changes Trust offers an example of a third-sector led collaboration in which local authorities and the NHS are partners.

14. At a more fundamental level there is concern that the Scottish Government's vision for health and social care integration may be undermined by **the under resourcing of social care across local authorities.** Analysis compiled by the Coalition of Care and Support Providers in Scotland (CCPS) into hourly rates for non-residential care and support services for adults and older peopleⁱ further reinforce this view. At the same time, many local authorities are further tightening **eligibility criteria** for social care servicesⁱⁱ, leading to the loss of vital support for many people who are disabled, older or living with long term conditions across Scotland. This trend poses a significant threat to the drive for prevention.

Welfare Reform

15. Welfare Reform requires a **mix of short-term mitigation of the negative impact on already marginalised groups, and longer-term strategy** on welfare in Scotland post-referendum (whatever the outcome). As part of this there needs to be more **investment in advocacy** for people who will undergo the migration from Disability Living Allowance to Personal Independence Payment. The ALLIANCE, with its members, has developed a strategic proposal to support local capacity and partnership between disability/long term conditions organisations and the advocacy sector. This would represent around £2m annually for a time-limited period and help to protect the rights, health, wellbeing and financial security of many disabled people in Scotland.

Supported Employment

16. The British Association for Supported Employment advocate continuing support for Team Scotland/Scottish Government Procurement Directorate in **maximising opportunities for Scottish Supported Business.** This is an off line group that has been set up by The Scottish Government.

About the ALLIANCE

17. The ALLIANCE is the national third sector intermediary for a range of health and social care organisations, bringing together nearly 400 members.

18. The ALLIANCE's vision is for a Scotland where people of all ages who are disabled or living with long term conditions, and unpaid carers, have a strong voice and enjoy their right to live well, as equal and active citizens, free from discrimination, with support and services that put them at the centre.

19. The ALLIANCE works towards its vision in three main ways; we seek to:

- Ensure people are at the centre, that their voices, expertise and rights drive policy and sit at the heart of design, delivery and improvement of support and services.
- Support transformational change, towards approaches that work with individual and community assets, helping people to stay well, supporting human rights, self management, co-production and independent living.
- Champion and support the third sector as a vital strategic and delivery partner and foster better cross-sector understanding and partnership.

About Voluntary Action Scotland (VAS)

20. Voluntary Action Scotland is the national organisation for local third sector infrastructure.

21. VAS, the Scotland's newest infrastructure organisation, was created in May 2009. It is the membership body for third sector interfaces and their constituent members. Local Third Sector interfaces have now formed across Scotland. The new interface arrangements bring together four key, local infrastructure functions:

- support to voluntary organisations operating in the area, both local and those national organisations that deliver services at the local level;
- support to and promotion of volunteering;
- support and development of social enterprise;
- connection between the Community Planning Partnership and the third sector.

ⁱ Hourly Rates For Care and Support (2012) Coalition of Care and Support Providers In Scotland

ⁱⁱ Commissioning Social Care (2012) Audit Scotland