Social Care (Self-directive Support) (Scotland) Bill

Consumer Focus Scotland

1. Are you generally in favour of the Bill and its provisions?

The Bill makes legislative provisions relating to the arranging of care and support in order to provide a range of choices to individuals as to how they are to be provided with their support. The three general principles that underpin the Bill are involvement, informed choice and collaboration.

Consumer Focus Scotland uses a set of standard consumer principles or tests to highlight consumers’ interests and identify where and why consumer detriment might occur. These principles or tests include key factors such as choice, access, information, fairness, safety, representation and redress. We are therefore supportive of the general principles underpinning the Bill. For the purpose of this question we have focused on the Bill’s principles of choice and involvement, and on fairness.

Choice and involvement

Through this Bill it is intended that individuals are provided with a range of options as to how they meet their assessed needs, and that local authorities should facilitate genuine and informed choice for the individual. Although the principle of choice here is referring to choice with regards to the choice between different options for self-directed support (as outlined in the Bill as options 1-4), we would argue that choice is equally as applicable - or perhaps even more important - within the different options. As examples, the following points from the Bill’s Policy Memorandum support this attitude.

- **All forms of self-directed support, including the direct payment, should be flexible and be able to be utilised in any way provided they meet the agreed outcomes and assessed needs set out in the individual’s care and support plan.** (Sections 10 and 13-14: Direct Payments).
- **Local authorities must have the necessary discretion in order to allow practitioners the freedom and flexibility that they need to develop creative, empowering solutions for individuals.** (Sections 10 and 13-14: Direct Payments).
- **It allows individuals to integrate their care and support into their social and private lives and maximise their opportunity to achieve independent living.** (Effects on Human Rights).

In order for individuals to meet their agreed outcomes they need to be involved in deciding what their choices and options could be, and informed about all the benefits these choices and options can bring them. Using attendance at a lunch club as an example, an older person could be informed that the value of attendance is much greater than just the nutritional content of the food on offer. Many older people interviewed in our research highly valued lunch clubs as an opportunity for getting out and meeting people, others value the opportunities they provide to get involved and take part in their local area.
Older people using food services welcome, value and rely upon them. However, our research found choice of food services to be limited, and that information about the services was not readily available. In order to facilitate a genuine choice in food services for people living at home we have recommended that, working with other key partners, the Scottish Government and local authorities should:

- **Establish a clear strategic priority, and effectively carry forward plans, to provide a baseline range of food services for older people living at home.** Consult with consumers on what a baseline range of food services should consist of. In order to deliver services of the future in quite a different way from how they have been delivered in the past, a clear engagement process is needed to find out what type of improved health and wellbeing outcomes older people see for themselves.

- **Ensure higher priority for funding for voluntary and community organisations providing food services for older people living at home in Scotland.** Ensuring that communities have the capacity to provide care and support for their people as they get older, and making community infrastructure and organisations more resilient, will be central to achieving the Scottish Government’s stated desire to shift resources from institutional to community settings.

Small amounts of funding can often make food services for older people viable. Community Food and Health (Scotland) have recently provided ‘microfunding’ (one-off funding of up to £1500) for 20 community and voluntary organisations to develop activities that use food to promote health and wellbeing for older people. Work underway includes: a new lunch club; volunteer befrienders cooking with sheltered housing residents; and an information gathering event to consider how older people can influence the local provision of food currently being considered through the relevant Change Fund. These projects encourage engagement, involvement and innovation in services.

The benefits of funding such community-based services were recently touched upon as part of the integration of health and social care discussions, for example, “currently people are offered services that do not suit them, which are delivered at a time and in a way that does not help them. If the value of the service is £150 per week, we can see that that amount of money can go an awfully long way towards keeping people engaged with more natural, community-based and creative support.”

Alongside our work on food services for older people living at home, further case study material was gathered from six lunch clubs. As part of this publication Perth and Kinross Healthy Communities Collaborative were highlighted as an example of where substantial outcomes can be achieved for relatively small inputs. They have produced a logic model for their lunch clubs,

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and this lists long term outcomes in terms of improved health and well being in later life and reduction in health inequalities across their project areas. Although initial development support was needed to set this up, the group now requires minimal ongoing support and is run by a group of older volunteers. It is important that the impact of preventative services is properly monitored and reported against relevant national indicators, outcomes and targets.

**Fairness**

The standards of care that we want for older people are the same for everyone, regardless of where they live in the country. While we recognise that it is important to find out what a local area views as its needs, and to jointly define how these needs will be met, it is important that no consumer is unfairly discriminated against because of their physical location.

We found variation across the country in the food services available for older people living at home, with 13 local authorities providing only one type of food service and another single local authority providing five types of food service. This kind of variation can be found in social care services in general, and was recently highlighted by Audit Scotland, “the activity and expenditure on social care services differ markedly between council areas. For example, the number of people receiving home care per 1,000 population varies from just under nine in Aberdeen City and Aberdeenshire to over 20 in Eilean Siar, Shetland and South Ayrshire”.

5. Are you satisfied with the provisions relating to the provision of information and advice, together with those concerning the support that should be offered to those who may have difficulty in making an informed decision?

Consumer Focus Scotland welcomes the recognition that *good quality advice and information services are an essential component in helping people to take greater control*. As with our response to question one, we would again like to highlight the importance of providing information about the range of options that can be considered to meet an individual’s care and support needs. Local information provision is important, and was found to be lacking, and we therefore call on the Scottish Government and local authorities to:

- **Support the development and dissemination of local information on food services available to older people.** This should be done through existing channels such as the Care Information Scotland service and the Age Scotland telephone helpline. This should also be done through any new channels for public service information, such as the forthcoming DirectScot portal. This information must also be made available in places where consumers are likely to visit, such as libraries, community centres and GP surgeries.\(^4\)

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\(^4\) Audit Scotland. 2012. *Commissioning social care.*
Appropriate, up-to-date information on entitlement to, and the availability of, food services for older people living at home is essential.

11. Do you have any comments on any other provisions contained in the Bill that you wish to raise with the Committee?

Improving outcomes for older consumers requires a joined-up approach across a range of local authority services, such as housing and social work, working with community and voluntary organisations and working with other public services. Older consumers must be fully and meaningfully consulted and involved in the implementation of the Bill, and their views must have a demonstrable impact on final decisions and outcomes.

One area which would benefit from such consultation is that of procurement and commissioning of services for older people. Anecdotal evidence, and testimony from older people involved in our work, suggests that frozen meals services are replacing hot meal services. This is a decision that is unpopular and does not reflect the opinions and preferences of the older people using the service - hot meal deliveries are often a source of social contact and reassurance for isolated older people and their families.

Consumer Focus Scotland
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