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Dear Karen

Institutionalisation and Independent Living for Disabled People in Scotland

Thank you for your correspondence dated 9 May 2025 regarding your inquiry into the institutionalisation and independent living for disabled people; and the Scottish Human Rights Commission '*Tick Tock: A Human Rights Assessment of Progress from Institutionalisation to Independent Living in Scotland*' Report. I am writing on behalf of myself and the Minister for Social Care, Mental Wellbeing and Sport to provide a further detailed response to the Committee's questions.

The Scottish Government is firmly committed to ensuring that people have informed choice and control about how social care support is provided to them, and that their needs, rights and preferences are at the heart of the decision-making process. As you will be aware, work has been underway for some time to address many of the concerns raised within your inquiry. We would like to take this opportunity to provide responses to each of the questions raised in turn.

What steps is the Scottish Government taking to accelerate progress towards fully realising the right to independent living for disabled people in Scotland?

Since the integration of health and social care, overall responsibility for the planning and delivery of housing adaptations, and for developing services to improve outcomes for people who require adaptations, lies with Integration Joint Boards (IJBs) through powers and budgets delegated from local authorities. Most Scottish Government funding for local authorities is provided by means of a block grant, and not ringfenced.

The Scottish Government has also continued to provide support to help 85 Registered Social Landlords (RSLs) meet their responsibilities to deliver housing adaptations to disabled tenants through the RSL Adaptations Programme. The budget for this programme for 2025-26 is £20.9 million and the over-arching aim of this programme is to provide funding for

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housing adaptations to support RSL tenants to live safely and independently in their own home for as long as they choose to do so. We have also committed to undertake a review of the current housing adaptations system, which will make recommendations on how best to improve and streamline the system and better target resources.

How is the Government addressing the barriers to effective implementation of SDS to ensure individuals have greater control over their support?

The Scottish Government is working alongside COSLA and others to drive improvements in the delivery of SDS at a local level, through the jointly published <u>Self-Directed Support</u> <u>Improvement Plan 2023-27</u>. The plan, co-produced with the SDS National Collaboration, sets out the priority activities for statutory, third and independent sectors to focus their improvement work. It is supported by updated <u>Statutory Guidance</u> and a <u>Framework of Standards</u>, making clear the expectations of local authorities in the provision of care and support, to drive consistency in the practice and delivery of SDS. The actions detailed in the plan are intended to drive improvements in the delivery of SDS nationally, taking into consideration the "golden threads" and dependencies of the plan, which include human rights and other key social care legislation. The Improvement Plan states that improvement in social care support should be person-centred or person-led and reflecting human rights as expressed in the SDS Act 2013 and other related legislation and guidance.

To ensure continued access to SDS advice, independent advocacy, brokerage and preventative support for individuals across Scotland, we relaunched the Support in the Right Direction programme (SiRD) in April 2024 for a further 3 years. This independent support is integral to social care, ensuring individuals and their carers can make informed decisions about their support and how it is delivered, enabling them to live independently and meet their personal outcomes.

In 2022 the SDS statutory guidance was updated to give further information on human rights and a human rights-based approach in relation to the delivery of social care. SDS, alongside many other policies, is intended to support, promote and protect people's human rights and, through access to independent living, support people's participation in Scotland's social, political and civic life.

The guidance makes it clear that local authorities have a responsibility to take steps to provide the relevant training, support and processes each function needs to be able to take a person-centred and human rights-based approach to fulfilling the duties described in the Social Care (Self-directed Support) Act 2013.

In addition to this ongoing SDS improvement work, the National Care Service (NCS) Advisory Board will enhance national support and oversight, and drive improvements in social work, social care and community health services. Over the next two years, the NCS Advisory Board will have a key role in identifying and addressing further needs within the system. We expect the consistent and high-quality implementation of SDS legislation, ensuring people have availability to all the options they are entitled to, to be a key area of interest to the NCS Advisory Board.

What measures are being considered to expand accessible and affordable housing for disabled people?

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We want disabled people in Scotland to have choice, dignity and freedom to access suitable homes, to enable them to participate as full and equal citizens. We are all too aware that disabled people may struggle to find housing that meets their needs and are taking steps to mitigate this.

It is the statutory responsibility of local authorities through their Local Housing Strategy to determine the appropriate housing required in their area, informed by a Housing Need and Demand Assessment. This includes identifying the need, current supply and required deliver of specialist provision housing nlocally. Where Local Housing Strategies identify a strategic requirement for a particular type of home, including wheelchair accessible housing, projects to support delivery of these homes are expected to be included in local authority Strategic Housing Investment Plans for delivery through the Affordable Housing Supply Programme (which has flexible grant funding arrangements which ensure that specialist housing provision, which is identified by local authorities as a priority, can be supported).

In 2025-26 we are investing £768 million in the Affordable Housing Supply Programme (AHSP). This investment will help contribute towards our target of delivering 110,000 affordable homes by 2032. The Affordable Housing Supply Programme helps provide homes for social rent, for mid-market rent and for low-cost home ownership. These homes can take various forms including; new build homes, rehabilitation projects, conversions and off-the-shelf purchases of both new and second-hand homes.

Local authorities are also required to include a wheelchair accessible housing target in their Local Housing Strategy. There has been good progress and, from information gathered from 2025-30 Strategic Housing Investment Plans and from Local Housing Strategies, 31 of 32 local authorities have in place wheelchair housing targets for affordable housing.

Housing to 2040, Scotland's long-term national housing strategy, committed to developing and introducing an all-tenure Scottish Accessible Homes Standard. Within Housing to 2040, we also reaffirmed our commitment to review the Housing for Varying Needs design guide which, although well-regarded and still considered to be a good design benchmark, was produced in 1998.

We remain committed to introducing these changes and, during the second half of 2023, we consulted on proposals to enhance the accessibility, adaptability and usability of Scotland's homes. The analysis of the responses to the consultation is now being considered, which will help inform our next steps.

How does the Government plan to tackle the resource and workforce challenges in social care to ensure sustainability and quality of service provision?

We appreciate the significant pressures on the social care workforce, and we must work together to further strengthen and protect this workforce. We acknowledge that sustained actions are required from planning for and attracting into the workforce through to support and development of our existing workforce.

The Scottish Government's <u>National Workforce Strategy for Health and Social Care</u>, jointly developed with COSLA, was published on 11 March 2022. The Strategy shares our vision for a sustainable, skilled workforce with attractive career choices and fair work where all are

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respected and valued for the work they do. It looks at the whole workforce journey and how we can plan for, attract, train, employ and nurture our Health and Social Care Workforce.

The differing landscapes of Scotland's communities deepens these challenges and officials work with partners to develop solutions that will unlock capacity in the workforce and alleviate pressures through national and local projects. Local authorities and Health and Social

Care Partnerships undertake their own workforce planning arrangements, ensuring they take full account of the need to have safe and sustainable numbers of staff. The Strategy expressly commits to increasing our understanding of demographic change in demand for services. It details actions we will take to further understand how we can use this information to achieve a more sustainable, skilled workforce and how we can make Health and Social careers, at all levels, more attractive.

The Strategy recognises that although we have seen continued growth in our workforce, we know that increasing the workforce alone will not deliver the services the people of Scotland need now and will need into the future.

The Health and Care (Staffing) (Scotland) Act 2019 commenced on April 2024. The aim of the Act is to be an enabler of high-quality care and improved outcomes for service users in both health and care services by helping to ensure appropriate staffing. The legislation does not prescribe minimum staffing levels or fixed ratios and does not advocate a 'one size fits all' ratio, which would be inflexible to local needs, based on a fixed point in time, and not consistently reflective of workforce, service user needs, or dependencies.

The legislation recognises the importance of an evidence-based approach to workforce planning, founded on the needs of the patient or service user and the wellbeing of staff to contribute to the planning of the workload both locally and nationally. Implementation of the Health and Care (Staffing) Act will support consistent and robust analysis of the workload associated with patient and service user need, and support real time assessment of staffing to ensure safety and efficiency. This will be achieved through the duty on local and integrated authorities to comply with Act requirements when planning or securing provision of care services.

The Scottish Government is not a social care employer and does not make planning decisions for employers or Local Authorities regarding staffing and staff allocation. Officials are working with partners including Care Inspectorate, COSLA, and analysts to support the Act implementation and develop robust and simple processes to ensure we have a consistent and efficient approach to ministerial compliance.

What actions are being taken to improve coherence between legal and policy frameworks to enhance rights protections?

Mental health legislation in Scotland is based on rights and principles which provides for rigorous safeguards in respect of individuals' human rights where compulsory treatment is necessary. Safeguards include a right to independent advocacy and an efficient and independent Mental Health Tribunal which grants and reviews orders for compulsory treatment. Effective and up to date mental health legislation plays a vital role in ensuring the rights of everyone are respected, protected and fulfilled.

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We are committed to look at how we can update and modernise our mental health and capacity legislation to better reflect international human rights standards. We have progressed or completed the majority of the actions and milestones set out in the initial delivery plan under the Mental Health and Capacity Reform Programme. These are positive steps towards our vision to enable people to live well, with choice and control over their own lives, care and treatment.

We believe a staged approach to reform is correct as it recognises the pressure on budgets and services, and the challenges of delivering further change at a time when there is significant wider transformation across the health and social care sectors. At this time, we are focussing efforts on what can be achieved firstly through possible legislative reform by working closely with stakeholders and those involved in other areas of change across health and social care.

We recognise the concerns of many people with a learning disability, autistic people and organisations who advocate for or on behalf of them. We are currently undertaking work to consider who should be included in the scope of the Mental Health Act and what changes might be needed to better reflect developing human rights standards.

The Scottish Government remains committed to protecting, promoting and advancing human rights in Scotland, and to introducing a Human Rights Bill in the next parliamentary session, subject to the outcome of the 2026 election. We will use the remainder of the session to work collaboratively with stakeholders to further develop and refine proposals for the Human Rights Bill. We will also continue to develop and deliver activities aimed at embedding human rights awareness and practices in our public services, preparing for eventual Bill introduction and commencement. Before the summer recess we will publish a discussion paper to support constructive engagement with stakeholders.

The Bill will seek to incorporate four international human rights treaties into Scots law, including the International Convention on Economic, Social and Cultural Rights (ICESCR) and the Convention on the Rights of Persons with Disabilities (CRPD), within devolved competence. ICESCR contains the right to the highest attainable standard of physical and mental health and the right to adequate housing. The proposals would mean that for the first time in our domestic legal framework, duty bearers would be required to comply with the ICESCR rights and actively consider the CRPD (and other group protection treaty) rights in the Bill. An Equality Duty is also proposed to require duty bearers to consider how to deliver ICESCR rights in the Bill in a non-discriminatory way. CRPD will inform what that looks like for disabled people.

Through our engagement with disabled peoples' organisations, we have heard strong views that the Bill needs to offer stronger protections for the rights of disabled people. We recognise the importance of the right to living independently for disabled people and as we continue to refine our proposals for the Bill, we want to explore what more may be possible in relation to incorporating CRPD rights. It is important that the Bill is clear, accessible and workable within devolved competence, so that it can be effectively implemented.

How is the Government ensuring that the voices of disabled people, particularly those with lived experience, are meaningfully involved in decision-making processes?

The Scottish Government is committed to designing and delivering services with those with lived experience and we understand the importance of putting lived experience at the heart

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of our programmes to ensure it embodies human rights principles and delivers the needs of people and not the system. There is a range of activity that is taking place to ensure the voices of disabled people are meaningfully involved in decision-making processes.

As of April 2025, 2141 people have participated in co-design activities for the NCS and we have listened to more than 1800 people who attended the NCS Regional and National Forums. We are also working with third sector organisations to hear from a range of seldom heard voices including with people with learning disabilities or experience of homelessness. This sustained engagement has provided invaluable insight into what is currently done well and how we can improve social care for everyone in Scotland. It is crucial we continue to ensure the people who use or work in the social care, social work and community healthcare service are at the heart of our reforms.

This approach has informed the development of the NCS Advisory Board, which is an important step forward for the NCS and wider social care reform. The Board will help drive improvement and make sure services are consistent, fair, and high-quality across Scotland by exploring issues and making recommendations for improvements across the sector. Membership of the Interim Board is diverse, including people with lived experience of accessing care services, unpaid carers, those who work in the sector, care providers, the NHS and local government. Work is now under way to develop and deliver a fair and open recruitment process for those with lived experience for the Board.

As mentioned, there is a range of activity that is taking place across Scottish Government some of which have been referenced throughout this response, and we hope that the example of the NCS Advisory Board shows our commitment to co-design and including lived experience voices.

Thank you again for writing to us about the inquiry and we hope our response is helpful in setting out approach and work underway in Scotland. Going forward we will continue to work with you to monitor progress on equity and equality within health and social care, as we acknowledge there is more work to be done to fully address the concerns.

Yours sincerely

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MAREE TODD

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