

# **Written submission from East Dunbartonshire Health and Social Care Partnership on the Care Home Services (Visits to and by Care Home Residents) (Scotland) Regulations 2026, 9 February 2026**

Health Social Care and Sport Committee Call for Evidence

**Question 1 – Regulation 2 states that the care provider must identify at least one individual as an Essential Care Supporter. Does this regulation provide/guarantee friends and relatives appropriate involvement in the process of identifying an Essential Care Supporter?**

The concept of an Essential Care Supporter is potentially a positive step for care home residents. Regulation 2 may provide (although not guarantee) involvement of friends and relatives but the burden of weighing the views of friends/relatives/legal representatives appears to lie with care home staff without guidance or reference to appropriate legislative frameworks such as the AWI Act. The regulation also appears to assume that care homes have awareness of and a way of managing all family dynamics or conflicting views.

**Question 2 – Regulation 3 covers the right to visits in general. Does this regulation adequately describe what ‘facilitation’ of visiting does or does not entail?**

No – reading this regulation it does not seem clear what “facilitating an external visit” might entail. If regulation 3b states the care home does not have to provide outings or pay someone else to do so, then what are they “facilitating” in terms of external visits?

**Question 3 – Do you think that the regulations around suspension of visiting (Regulations 4 and 5) provide adequate assurance to residents and their loved ones that they will have the right to continue to care for and visit**

## **residents in the event of a suspension of visiting? For example, during an outbreak of infection?**

These regulations may provide some assurance, specifically regulation 5. However, much of the language is open to interpretation such as 5(a)(i)(bb): “undergone (or begun to undergo) a significant deterioration in physical or mental condition,” and how would there be resolution if there are differing views of provider and Essential Care Supporter, for example?

## **Question 4 – Do you think the duty to review decisions to suspend on receipt of a valid request is clear and appropriate?**

It seems reasonably clear although there does not appear to be independent oversight of the review.

## **Question 5 – Do you think that the notification processes are appropriate and proportionate?**

Yes

## **Question 6 – Do you have any comment on the regulations from an international human rights perspective?**

As we move in Scotland and elsewhere towards supported decision-making rather than substitute decision-making, perhaps there could be more emphasis on supporting the resident to make the decision about their Essential Care Supporter. Question 1 asks about the involvement of family and friends but perhaps more comprehensive guidance is required about supporting the individual’s rights to make such a decision. However, this can potentially require time and resources, such as advocacy, which may feel onerous to providers.