

# Cosgrove Care

# National Care Service Consultation Response

November 2021

Our submission in response to this consultation is based on views gathered from a range of stakeholders including people we support, family carers, our internal managers, representatives of our Corporate Management Team and our Board. We have also aligned our response with many views represented through consultations with CCPS and the Alliance both of which we are members.

# Overview

We welcome the consultation – it represents a long overdue milestone on the road to reform of adult social care and an unmissable opportunity.

There are significant merits in the redirection of responsibilities and resources between integrated joint boards and local authorities.

We welcome establishment of the social covenant group to underline the importance of embedding the voice of lived experience. We believe this is vitally important to recognising and really ensuring people who use services are in a position where they can influence and take control. People will need support to realise this.

The inaccessibility of the National Care Service consultation document and process was also raised by several in the audience as an issue, who identified a number of barriers that may prevent meaningful and wide-ranging participation from really taking place during the consultation.

We have concerns about the emerging risk of subsuming social into a health delivery model.

The Proposals do not match the ambition set out by the Independent Social Care Review.

We agree with the importance of system culture change recommended by the Review.

We are concerned that the Scottish Government's proposals lack a coherent change model and the necessary change funding to make this happen.

Focus on structures and practices must not be at the expense of culture and behaviour change.

The proposals in the consultation document fail to articulate how a national care service will put people at the centre, give expression to SDS principles, and enable and empower the workforce which is needed to bring about change.

We whole heartedly support the importance of redirection of resource to early intervention/prevention. (Christie report)

There is a lack of clarity about funding mechanisms and the scale of investment required to deliver effective change- particularly around culture.

There is insufficient focus on coproduction in design and delivery with those supported by social care as underlined by the Review. Indeed the layout of the consultation document and the time scales for return were prohibitive for many people who use services and their families to access appropriately. The on line response format highlighted the inaccessibility of the process and the questionnaire was restrictive and leading in places.

There is the absence of a Scottish approach to service design in the proposed approach.

There is a need to focus on ongoing priorities and continuous improvement – commissioning, Fair Work agenda.

Important points were raised about the meaning and value of social care and support, both within the National Care Service consultation document and at a societal level.

There seems to be "something unexamined about the language of 'care' in the National Care Service consultation document" that appears "to have a paternalistic undertone, at odds with what is being proposed by the National Care Service." The gendered nature of care work was also mentioned as one of the main reasons care work continues to be undervalued – something that proponents of the care economy have urged needs to be addressed to even out inequalities in the social care sector.

It is important to think about support, and move away from the deficit model often used when talking about service provision. We all need support in our lives; we need to ask what will the National Care Service mean in terms of the fundamental things that all people want in their lives?

The National Care Service is an opportunity to put the "social back into social care". The radical reform proposed by the National Care Service offers the potential to embed more positive language to the sphere of social care and social work, following assets based, person centred, and human rights based approaches. Centring the concept of reciprocity in the discussion is fundamental to achieve this vision, in which investment is not only devolved to services and infrastructure but also to communities and the relationships that exist within them.

# Accessing Care and Support

There was a range of views around the best way to access care and support based on views that the current system is complicated and confusing and varied across Local Authority areas. Several stakeholders whom we consulted were of the view that clear information should be widely available on the point of access and should take into consideration digital exclusion for many. Therefore, both a National phone Helpline clearly advertised via public information augmented by local drop in centres (including evening and weekends) in facilities widely used by community members is the favoured view.

# Co-ordination of Care and Support

Views were varied however a common theme is the importance of any lead professional to have the necessary knowledge and insight of the individual and their circumstances and a relationship based approach.

A lead professional who co-ordinates care and support based on knowledge and insight, and liaises with relevant others involved would be the preferred option, however this approach would need to be resourced properly in relation to the capacity of any lead professionals.

A local community /voluntary organisation taking on this role would need to be resourced appropriately and have sole purpose for this aim.

#### Support Planning

Planning support is critical and should be based on quality conversations with the individual at the centre and their significant others.

Experienced voluntary sector organisations would be well placed if resourced appropriately, however some held the view that social workers with the necessary time to assist with support planning would be beneficial based on their knowledge of the individual and involvement in their care and support.

Of central importance is that all support planning is based strongly on the principles of choice and control for each individual.

There was consensus that support planning should be centred around outcomes to live a good life, but the detail of a good support plan is also important as long as tasks identified do not detract from outcomes and lifestyle ambitions.

There was concern that light touch conversations would not be suffice to look beyond what people are presenting or experiencing, and therefore everyone should be entitled to the same quality of conversations to explore outcomes and importantly preventative support.

Support planning should then allow for more detail around significant levels of need for example; people who have more complex needs and conditions.

Advocacy services have the potential to play an important role in support planning particularly so where there is conflict of opinion or support required for self-expression.

Getting It Right for Everyone National Practice model would be welcomed as a single planning process involving relevant people if data is recorded and used appropriately. The concept of information moving *with* people is appealing and would avoid the well documented experience of people having to tell their story multiple times to multiple people in the current system.

# Rights to breaks from caring

Carers we consulted with are of the view that there should be a baseline entitlement for all carers, who can then choose whether or not to access this at any point in their caring journey. Rights for carers and a baseline entitlement should then be augmented (as a hybrid) with personalised need provision for those who require a tailored approach to ensure that support and rights to breaks from caring are in line with individual circumstances.

# **Complaints**

There is consensus that the provision of a Charter of Rights and Responsibilities is crucial to ensure people using care and support services understand their rights and who holds responsibility. There are mixed views on whether people would feel comfortable complaining to the person or organisation first but this should be available as an option in addition to an independent single point of contact for complaints should this be preferable.

Information about Advocacy services is of extreme importance to ensure people have the support should they require it to make their voices heard. Of equal importance is clear information about the process of any complaint and communication on progress with the complainant.

Structure and Focus

There is a concern about the capacity and capability of Scottish Government to deliver the scale of reform proposed.

There is a concern about the capacity of the reformed IJBs as proposed and lack of understanding of operational delivery.

There are concerns that new structures would be top heavy, centralised and bureaucratic. Some localised systems can work well. Imposed centralised system could be damaging

New structures will take a lot of resources, concerns around use of public pound detracting from front line services.

There is the potential for a system which is over centralised, disjointed and fragmented and loses local responsiveness and creativity.

The proposed governance arrangements at national and local level seem insufficiently robust or inclusive.

There is a tendency towards command and control model (absence of national board as recommended by the review).

There is an insufficient focus on enabling local flexibility (especially in absence of radical change to commissioning)

There is a mix of views about the merits of extending the scope of a national care service beyond adult social care.

There are both opportunities and threats to extending the scope but concern exists around a lack of prior consultation and lack of detail or transparency about other options

We recognise that there are benefits to integrating delivery for people across the life course but lack of clarity about alignment to existing/ongoing strategy, policy, delivery other areas e.g. The Promise, Housing 2040

Another key point which emerged was about the uniqueness and diversity of experiences that people who access social care services (and the people who support them) have. Concerns were raised about the potential impacts of a centralised approach, both in terms of how criteria and assessments will be managed under the National Care Service and the extent to which local circumstances will be taken into proper consideration when planning, commissioning, and procuring care.

#### Commissioning and Procurement

Proposals are insufficiently radical to bring about transformational change.

Ethical commissioning will make no difference in the absence of changes to procurement policy and practice.

There is a need for a shift away from price-based competition and competitive tendering to make any real impact.

National standards will only be effective if there is real change in terms of culture and behaviour.

Shifting responsibilities without changes to commissioning practice will mean more of the same.

### **Digital and Data**

Development of national care service provides opportunity to embed digital in social care.

We agree with the need for a common set of data standards and streamlined data sharing.

We need greater insight on why data is collected, purpose it serves and perceptions of data quality.

We need better utilisation of data to understand outcomes.

A cultural shift is required to embrace improved use of data and digital particularly among frontline staff and support to do this.

Need for improved funding for digital within contractual arrangements.

#### **Regulation and Improvement**

There is the concern that recent valuable work done by Care Inspectorate and providers on quality improvement frameworks may be lost.

Enforcement and intervention are sometimes necessary but need to be combined with focus on improvement and avoidance of service withdrawal.

More detail needed on market oversight role to fully facilitate views on this.

The proposals do not address the long standing issue of service registration categories.

There is no mention of Care Inspectorate's strategic inspection power.

There is a need for joined up proposals on standards and regulation otherwise there will be an undue burden.

#### Workforce

Key issues: the need for a coherent and equitable pay policy for all social care workers

Improved pay, terms and conditions; better access to training and development and linked progression; better workforce representation.

No benefit to be had from compelling employers to adhere to codes of practise not supported by a robust improvement framework.

National approach must respond to local need and support flexibility based on local demographics.

The value of the social care workforce and the significant role of the third sector in local delivery must be recognised and fully supported.

NCS should use workforce planning data to identify training and development needs and allocate funding accordingly

Training and development should be delivered by an independent function

#### Key Areas for workforce consideration:

Feeling valued and rewarded

Learning and development

Career progression

Investment in specialist services

# **Additional points**

The first point is that the consultation paper does not make it clear how the National Care Service at national level and the proposed CHSCBs interact. This needs to be described more clearly. We believe the inclusion of all IJB/CHSCB members as voting members is welcome.

The second point relates specifically to Q70 in the online response. The Commissioning proposals are disappointing in that they do not reflect several of the proposals in the Independent Review. For example, no mention is made of a shift from competition to collaboration and a mutually supportive network of organisations (recs 33 and 40). Also, there is insufficient emphasis on outcome-based commissioning (rec 39). The Structure of Standards and processes will hopefully address these issues, but it would have been good to see more commitment to these important paradigm shifts in the consultation paper.

The third point relates to Q87 to which the answer should be no. Firstly, it should be a mandatory requirement for contracts that the contractor meets fair work requirements, not an "opt-in". But more importantly, payment to care providers must reflect the fair work requirements, including rates of pay and funding for training and development. Without these commitments, it is hard to see that there would be a genuine national care service.

There is a view that a statutory commissioning framework could address many of the good points made by the Independent review without the need for a whole new centralised beast.

On implementation by 2026, we are very keen that charities our size will have access to transformation funding to help support the vital role we have to play.

Our final summarising point is echoed in the following quote:

# 'Social care should be celebrated for its sophistication and all the parts of people's lives that it touches. It is something that we all will touch at some point in our lives, something that seems to find everyone.'

Sara Redmond, Director of Development and Improvement, the ALLIANCE

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