



REPORT TO: MORAY COUNCIL ON 15 SEPTEMBER 2021

SUBJECT: THE INDEPENDENT REVIEW OF ADULT SOCIAL CARE & NATIONAL CARE SERVICE CONSULTATION

BY: CHIEF EXECUTIVE, MORAY COUNCIL AND CHIEF OFFICER, HEALTH AND SOCIAL CARE MORAY

1. REASON FOR REPORT

- 1.1 To inform the Council of the current situation with respect to the Independent Review of Adult Social Care (IRASC) and the consultation on establishing a National Care Service (NCS), and for the Council to consider how it will respond to the consultation.

2. RECOMMENDATION

- 2.1 **It is recommended that the Council consider and note the content of this report on the IRASC and NCS consultation and give consideration on how a Council response will be formulated. 4.16 in the paper suggests one approach that the Council might take.**

3. BACKGROUND

- 3.1 The Independent Review of Adult Social Care published its report in early February 2021. The review was commissioned by the Scottish Government and was independently chaired by Derek Feeley who was supported by an expert panel.
- 3.2 Between September and December 2020, the review team met with and listened to the views of over one thousand people, including many unpaid carers, as well as supported people and members of the social care workforce. This evidence formed the basis for the 53 recommendations in the final report.
- 3.3 The review defines the purpose and vision of social care as:

‘Everyone in Scotland will get the social care support they need to live their lives as they choose and to be active citizens. We will all work together to promote and ensure human rights, wellbeing, independent living and equity’.
- 3.4 The review sets out an ambitious vision that, if fully implemented, has the potential to transform the lives of people with social care needs, unpaid carers and the wider adult social care sector. Implementation of the review

recommendations will form part of the programme for government for the next election term.

- 3.5 A key recommendation in the IRASC is the formation of a National Care Service for Scotland (NCS). Widespread consultation has now commenced in relation to the creation of the NCS. The consultation period lasts until 2 November 2021 and a dedicated Scottish Government online area has been created at <https://consult.gov.scot/health-and-social-care/a-national-care-service-for-scotland/>

4. KEY MATTERS RELEVANT TO RECOMMENDATION

- 4.1 Important areas addressed within the IRASC include:
- A human rights approach
 - Unpaid carers
 - A new approach to improving outcomes
 - Models of care
 - Commissioning for Public Good
 - Fair Work
 - Finance
 - National Care Service (NCS) & subsequent consultation

A Human rights based approach

- 4.2 Underpinned by Human Rights legislation, the report describes how adult social care should develop to further meet the needs of people in a way that is collaborative, is based on meaningful conversations with emphasis on support delivery where, when and how people want it. It recommends a move away from protracted and repeated assessments to a more efficient asset based approach.

Unpaid Carers

- 4.3 The review acknowledges the role of unpaid carers throughout and also includes a chapter specifically on support for carers. It recognises unpaid carers as the largest group of care providers in Scotland, greater than the health and social care workforce combined and it acknowledges that they must be viewed as equal partners in the provision of care.

A new approach to improving outcomes

- 4.4 The review sets out a new approach to improving outcomes by enabling people to have more choice and control. It highlights a gap between legislative intent and lived experience in many cases. This includes self-directed support, which has not been implemented consistently across Scotland, leading to patchy service provision and the ambitions of self-directed support falling far short of their original intentions. The review calls for the experience and implementation of self-directed support to be improved by going back to the original principles of putting people's needs, rights and preferences at the heart of decision making.

Models of Care

- 4.5 The review sets out ways in which we need to build on the models of care already being delivered, including:
- The need to reduce the use of institutional and residential care. Rather than support being delivered through institutional care people should be supported in their own homes and communities. This includes models such as extra-care housing and shared lives, as well as providing early support to enable people to stay in their own homes;
 - Making better use of adaptations and technology;
 - Ensuring that people who use services and unpaid carers are at the heart of all social care support by involving them better and earlier;
 - Building on community supports;
 - Better partnership working across traditional boundaries of health, social care support and other services such as housing.

Commissioning for public good

- 4.6 The review recognises that the current system for commissioning and procuring services acts as a barrier rather than a support to the development of quality, accessible social care services and therefore needs a radical overhaul. It highlights that procurement methodology and practices have increasingly driven and occasionally undermined commissioning decisions where price and competitive market environment, characterised by competitive tendering between providers, dominates.

Fair work and the workforce

- 4.7 The review sets out the need to improve the pay, conditions and experience of the social care workforce. It draws heavily on the Fair Work Convention report "Fair Work in Scotland's Social Care Sector". It suggests that the recommendations from the Fair Work Convention should be fully implemented, and that national minimum terms and conditions as a key component for commissioning and procurement by Integration Joint Boards should be put in place.

Finance

- 4.8 The review concludes that social care is currently not funded in a way which is sustainable or supports transformation of services. It acknowledges a need for significant additional investment in social care. The total bill for the proposals in the review comes in at an extra £660 million a year. Additional investment is recommended in several areas. These include enabling more people to access social care at an earlier stage, before they reach crisis; implementing the Fair Work Convention and removing charges for non-residential social care support. In addition, the review recommends increasing the financial support for free personal and nursing care for self-funders and re-opening the Independent Living Fund, as well as directing funds to preparing for our ageing population. Support for carers is specifically mentioned as an area that needs more funding, with the recommendation that the 'National Care Service should also increase investment in a range of respite provision including options for non-residential respite, and for short breaks.' It does not recommend a specific approach to funding but suggests different ways to raise money through taxation.

A National Care Service for Scotland

4.9 One of the most radical changes recommended by the review is the development of a National Care Service (NCS). This would operate as a new body to oversee social care, similar to how the National Health Service oversees health, described as enabling social care to have a more equal footing with health care. As part of this proposed new structure responsibilities would shift from local authorities to national government, with a new Minister being appointed to oversee social care. The role of the NCS would include:

- Overseeing commissioning and procurement, which is how local authorities currently develop some social care services. The review recommends that the NCS should set national standards while Integration Authorities should be responsible for commissioning and procurement at a local level, as well as being responsible for GP contracts;
- The NCS would lead on workforce development, including improvement programmes to raise standards;
- For people whose needs are highly complex, their social care provision would be overseen by the NCS;
- The NCS and NHS would both develop a set of joint outcome measures, which would set the standards for health and social care;
- The Care Inspectorate and Scottish Social Services Council would be part of the NCS, allowing the NCS to play a role in the inspection of services and the regulation of the social care workforce;
- The NCS would address gaps in social care in relation to workforce planning, data and research, IT and service planning.

Consultation on establishing a National Care Service (NCS)

4.10 The Scottish Government has commenced a widespread consultation into the development of the NCS, running until 18th October 2021. The consultation document goes into areas which the IRASC didn't cover in terms of the future development of IJBs and the delegation of services. For example, it asserts that all children's and justice services should be delegated and delivered as part of the NCS.

4.11 The consultation document is lengthy and contains approximately 100 questions, seeking feedback in relation to the following themes:

- Improving care for people
- The National Care Service and
- The scope of the NCS
- Reformed Integration Boards
- Commissioning of Services
- Regulation
- Valuing people who work in Social Care

Community Health and Social Care Boards

4.12 The IRASC recommends that Integration Authorities, created under the Public Bodies (Joint Working) (Scotland) Act 2014, should be reformed to take full responsibility for the commissioning and procurement of adult social care support locally, accountable directly to the Scottish Government as part of the National Care Service.

4.13 A further development in the consultation document is the proposal that IJBs should reform into Community Health and Social Care Boards (CHSCBs) which would become the sole local delivery bodies for health and social care. CHSCBs would be accountable directly to ministers, funded by the NCS and aligned with local authority boundaries. The consultation document asks for consideration that CHSCBs become employing authorities, with the Chief Officer roles becoming Chief Executives in their own right, reporting to the Chief Executive of the NCS). As well as authority for planning, commissioning and procurement, it is proposed that management of the GP contract also sits with CHCBs.

Reactions and Early Actions

4.14 How has the IRASC report landed:

- COSLA and SOLACE endorse principles of empowering people, valuing the workforce and embedding a human rights approach to social care.
- Concern at the recommendation to remove accountability for social care from local government and give to Scottish Ministers
- Review is strongly supported by Disability Groups, Carers organisations, third sector providers and Scottish Care – including creation of NCS.
- Health and Social Care Scotland (Chief Officers' network) agreed to work collaboratively to work on areas of 'common ground', though some areas have expressed a degree of concern as to how certain aspects of the review findings will sit alongside a locally governed approach.

4.15 Further reaction since the consultation launch:

- COSLA has released a strong response and expressed concerns over implications of the NCS consultation focus, describing it as being significantly at odds with how local government functions in Scotland. Concern was expressed by COSLA in relation to 'departures' from the IRASC itself in relation to elements of the consultation document which were not features of the IRASC report.
- Concerns have been expressed as to the length of time available to consult, which is a shorter time frame than the Scottish Government's own guidelines in relation to consultation on major service change.

Framework for responding to the consultation

4.16 There may be particular areas that the Council wish to explore in arriving at an agreed response, or set of responses, to particular parts of the consultation. A facilitated session could be one approach to allow all views to be captured.

The framework to elicit responses might be framed around some key statements.

1. Any national care service must be locally empowered and reflect the needs of our communities.
2. Reform should be guided by evidence.
3. Reform should ensure that we empower citizens and communities in the planning and delivery of social care services.

4. Nationally agreed standards could helpfully improve outcomes across health and social care.

5. SUMMARY OF IMPLICATIONS

(a) Corporate Plan and 10 Year Plan (Local Outcomes Improvement Plan (LOIP)) and Moray Integration Joint Board Strategic Plan “Moray Partners in Care 2019 – 2029”

This links to Outcome 7 of the Strategic Commissioning Plan “Partners in Care” – People using health and social care services are safe from harm.

(b) Policy and Legal

Social Work (Scotland) Act 1968; Carers (Scotland) Act 2016

(c) Financial implications

None directly associated with this report.

(d) Risk Implications and Mitigation

None directly associated with this report.

(e) Staffing Implications

None directly associated with this report.

(f) Property

None directly associated with this report.

(g) Equalities/Socio Economic Impact

There is no requirement for an equality impact assessment because there is no change to policy required as a result of this report.

(h) Consultations

Consultations have been undertaken with the following staff who are in agreement with the content of this report where it relates to their area of responsibility:

Health & Social Care Moray Senior Management Team

6. CONCLUSION

6.1 The Adult Social Care Review is a document of complex change for adult social care. The early indicators are that many aspects have widespread support however there is much detail to be worked through with multiple stakeholders.

6.2 The consultation in relation to the formation of a National Care Service is eliciting strong and diverse opinion, and widespread engagement with the consultation is encouraged in order to convey the range and volume of feedback being generated.

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Background Papers:

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