

Ms Gillian Martin MSP
Convenor
Health, Social Care and Sport Committee
The Scottish Parliament
Edinburgh
EH99 1SP



12 December 2022

Dear Gillian

Follow-up to my attendance at HSCS Committee, 29 November 2022

Thank you for writing to clarify a number of points, following my recent appearance before committee, in advance of your session with the Minister.

I also want to pass on my thanks again to you and the wider committee for the time you spent with various CCPS member organisations last Monday. We hope that you found the discussions on the Bill, and its implications for people using services, as helpful as we did.

In relation to your additional questions, I have answered those that are within the remit of CCPS below.

Strategic planning for services

- How do we ensure that the National Care Service is an ‘investment in society’ rather than a cost to it?
 - It is imperative not to lose the message that social care is already a major investment in society with significant economic value, contributing “over £5.1 billion Gross Value Added (GVA) to the national economy and supports 297,020 jobs” (Enable, *Scotland’s Care Sector: An Economic Driver*, 2021). Community-based not for profit organisations make an enormous contribution to community development and wellbeing.
 - In addition, the NCS must:
 - Ensure full engagement in the NCS, with the voices of all interested parties engaged in decision-making in the work of the NCS from the top down, including the creation of a national care board and clarity about full engagement in local and special care boards. Investment in supporting and acting on the voice of those who are engaged in care and support will build ownership, resilience and effectiveness.

- Focus on ensuring a genuine shift to preventative service to avoid costly crisis intervention wherever possible.
 - Ensure, particularly in the current climate, that maximum available investment is focused on delivery of care and support within communities and families.
 - Be transparent in how allocative investment decisions are being made so that the public are aware of what is and isn't being invested in – and why. This should include duties on ministers to use data and information to set multi-year budgets and national strategic plans – and report on this.
 - Strengthen the responsibility of ministers for delivering Fair Work

- To what extent are social care and support services currently planned and commissioned according to the strategic planning guidance for health and social care integration?
 - Our understanding from providers is that this is variable. We are engaged in a group looking at updating this guidance and are about to commission our own work to look how well providers are engaged in this process as part of our ongoing improvement support for commissioning and procurement locally.
 - However, we would note that looking at planning and commissioning, without also considering the impact of how procurement operates is too short sighted. If procurement remains focused on competition and price / inputs then the most enlightened approach to commissioning cannot succeed. We think the Scottish Government has missed an opportunity to truly reflect a radical shift in social care commissioning and procurement – as envisaged in the Independent Review of Adult Social Care - that could be a far greater drive to effective reform and could also more clearly embed the principles for SDS into the new NCS, providing additional leverage to existing implementation gaps.

- What are the benefits and challenges of having a 'mixed economy' in social care provision (compared with the NHS model)? What specific changes would you want to see to the Bill that could enable this fundamental difference between health and social care provision to be addressed?
 - Social care is, fundamentally, rooted in the choice and control of those requiring care and support in order to meet rights, such as the right to independent living. Choice can only take place where there is plurality of provider. Over many years, third sector charitable providers have emerged – and continue to emerge - to meet identified needs within geographic communities and communities of interest. These organisations will have different aims and objectives, different cultures, different ways of working. It is in this very plurality that individuals benefit from diversity of choice in provider. Indeed, this is the very basis of the self-directed support policy which Scotland has championed.

- Many providers have emerged from local communities themselves, where unmet needs have been identified. This approach to diversity in social care development ensures that provision remains rooted in local need and with local people.
- However, the Bill as it stands can be much improved in this regard. We have said more in our discussion paper on possible amendments but for example:
 - The principles could have far greater emphasis on choice and control – and link to the principles of SDS
 - There are no duties on ministers to assess unmet need or to take cognisance of sustainability issues in making allocative funding decisions
 - The Bill does not end competitive tendering for third sector social care providers
 - Issues around sustainable, long-term funding are also pertinent in this regard.
- What are the benefits, challenges and disadvantages of providing social care services directly as opposed to commissioning them from external providers? To what extent do you think direct provision of social care services would be possible and/or desirable under the reformed structures proposed by the Bill?
 - First, we note, as in our discussion paper shared with the Committee, that we are not clear whether the NCS will be a commissioning or delivery body or both. On this basis, it is not wholly clear to us what “direct” service provision, opposed to commissioned service provision will be.
 - If this is a reference to in-house public sector provision over third sector provision, then we note, as above, that choice for individuals who require care and support is at the heart of social care and should be enhanced in an NCS. This choice is already embedded in legislation through the SDS Act.

Commissioning and procurement

- What has been your general experience with Scotland Excel and what would be the impact if Scotland Excel were no longer involved in commissioning arrangements for social care?
 - We work with Scotland Excel regularly, particularly in relation to the National Care Home Contract. We note that Scotland Excel has developed a number of other national contracts, but that the take up of these is not high.
 - Our members have told us that national contracts are generally not outcomes based, bespoke or able to meet local need.
 - We are hearing that local authorities are increasingly developing their own collaborative commissioning plans and local contracts to meet local needs.

- At this stage, no agency has yet taken the work from CCPS and others on ethical commissioning and procurement to translate this into supporting ongoing, standard working practice across Scotland.
- However, we do think there may be benefit in an agency supporting the significant shift to ethical commissioning and procurement – setting guidance, providing models, giving advice etc. We remain open to how this can be best enacted.

Profiting from care

- What is meant by ‘market shaping’ (as referenced in Scottish Care’s written submission to the Committee) and how can the Bill best support ‘vibrancy and stability’ in the sector?
 - From the CCPS perspective, choice through diversity of provider remains a key feature of social care in empowering those who require care and support to take control of that care.
 - In the Bill there is also a need to clarify what role, if any, the Care Inspectorate would have in market shaping.
- What motivates the voluntary sector to participate in the competitive market of social care services? Would the voluntary sector be more or less likely to continue participating in that market under the terms of a national care service, as set out in the Bill?
 - At present, voluntary sector providers have no choice, in many instances, but to enter a competitive market for social care service contracts. Although the potential already exists for local commissioning and procurement agencies to procure services through collaborative approaches, these are used infrequently – often, we believe, because of low legal and financial risk appetite for these changes in some councils.
 - We note that whilst the Bill includes the potential of restricting contracts it will not end competitive tendering.
 - To answer this question fully, the provisions in the Bill must be clearer for how an NCS will support collaborative, ethical commissioning with multi-year financing based on improving outcomes for people who are in receipt of funded services, whether delivered by individual organisations or through partnership arrangements.

Please do let me know if there is anything here it would be helpful for us to speak to more fully.

Yours

Rachel

Rachel Cackett
CEO