

AGENDA FOR CARE



1

Prioritising care of adults and older people

Older people's care, and some adult care provision, remain disadvantaged by comparison with provision for children, young people, or young adults with complex needs. The allocation of resource across different service user groups is currently inequitable, and there could even be an argument that older people are discriminated against. We need a transparent and fair resource allocation system across all service user groups.

The overall spend on older people is significant because of the numbers involved, but the spend on individual older people is actually less than for other service user groups.



2

Prioritising social care

Over recent years, the Health Service has enjoyed a degree of protection from cuts whilst Social Care, largely dependent on Council funding, has borne the brunt of austerity. In many ways this is counter-productive: to work efficiently and effectively, and to deliver positive outcomes, the Health Service depends on there being a strong, adequately-resourced Social Care sector with the capacity for up-skilling and innovation. We believe that the development of Social Care has to be seen as a priority in its own right.



3

Providing the necessary levels of resource

If there is a lack of a level playing field between NHS and Social Care, this is compounded for the Independent sector, by the lack of a level playing field with Council in-house provision.

The net result has been to drive many services to the point of non-viability, with knock-on effects in terms of quality, and continuity of care. Secure, stable models for the commissioning and funding of care are crucial to sustainable service delivery and future development.



4

Securing the workforce

Over 100,000 people work in the Independent Social Care sector in Scotland. The move is correctly towards this being an all-qualified, all-registered workforce. However, turnover across the sector runs between 20%-30%, and recruitment and retention is at crisis point in some parts of the country.

A National Social Care Workforce plan is urgently required to address the challenges, and further investment will be needed to improve terms and conditions, and support training. There has to be a coordinated approach to promoting Careers in Care.



5

Inclusive partnership at all levels involving independent and third sector, and service users

The Integration of Health and Social Care is rightly seen as the foundation for future provision. However, this cannot just be about the Councils and Health Boards getting their act together: the partnership has to fully include the Independent and Third sectors, who provide the bulk of social care, as well as those who use services and their immediate families and carers, and also the local communities in which care is located. This partnership has to be based on the genuine sharing of decision making in relation to service design and resource allocation, and not simply involve tokenistic consultation.



6

A Human Rights based framework for all care provision

Mutual respect, a shared vision for future provision, and a joint commitment to improving outcomes, are all hugely valuable and important. So too are the elements of local planning and choice.

However, underpinning it all has to be a clear Framework of Rights, which establishes the reciprocal obligations and entitlements, and applies across all aspects of Health and Social Care. The wellbeing and empowerment of those who use services cannot be left to chance, or be down to local interpretation.



7

A partnership approach to regulation and service improvement

The public has a legitimate right to assurance about the quality of care. There also has to be a drive for continuous improvement, and better outcomes. However, this depends significantly on having a partnership between the Regulatory and Improvement Bodies, service providers, commissioners and funders, and those who use services. Driving up standards and delivering improved outcomes requires a coordinated approach which supports improvement rather than reinforces failure.



8

Promotion of positive media and public image of care

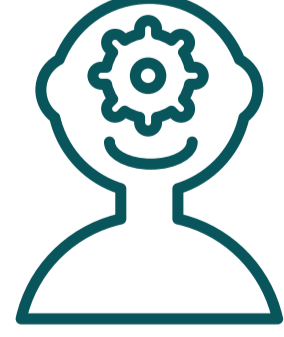
The bulk of care services perform well, and standards have in fact continued to rise. However, the media representation of the care sector, and therefore public perception, often emphasises a more negative picture, creating anxiety for those who use services and their families, and deterring people who might otherwise consider working in the sector. We need a joined-up approach to tackling this, and find ways of creating a balanced, more positive profile of care.



9

Support for innovation and new models of care

To meet the demographic and fiscal challenges; to shift the balance of care away from the acute sector; to maintain the individual's capacity for independence and social connectedness; to deliver on the Scottish Government's Health and Social Care outcomes and targets: all require new care pathways, and new models of care. We need to support, encourage and resource innovation, rather than simply trying to get more of the same, but cheaper. Strategic Planning and Commissioning, market facilitation and targeted investment are all going to be important if we are to shape the provision we want for the future.



10

Informed political comment/debate

It is part of the job of politicians to comment on things in the public domain. Correctly, too, there should be political debate about the future shape and resourcing of care. Accordingly, it is vitally important that politicians are well-informed about any matter under discussion. Partly, this is the task of providers and representative bodies to provide relevant information and briefing. But partly it is down to politicians themselves seeking to become better informed: visiting services, talking to staff and service users, and finding out at first hand what the challenges are. Managing this, would we believe, lead to both better public discourse about care and better decisions being made about the way forward.

