

**SUBMITTING EVIDENCE TO A SCOTTISH PARLIAMENT COMMITTEE
DATA PROTECTION FORM**

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Organisation: (if required)	Scottish Care
Topic of submission:	Call for written views on Health and Care (Staffing) (Scotland) Bill Financial Memorandum

I have read and understood the privacy notice about submitting evidence to a Committee.

I am happy for my name, or that of my organisation, to be on the submission, for it to be published on the Scottish Parliament website, mentioned in any Committee report and form part of the public record.

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I would like to request that my submission be processed in a non-standard way.

FINANCE AND CONSTITUTION COMMITTEE**HEALTH AND CARE (STAFFING) (SCOTLAND) BILL FINANCIAL MEMORANDUM****SUBMISSION FROM SCOTTISH CARE**

Scottish Care is the representative body for independent social care services in Scotland. This encompasses private and voluntary sector providers of care home, care at home and housing support services across the country. Scottish Care counts over 400 organisations as members, which totals just under 1000 individual services. Scottish Care is committed to supporting a quality orientated, independent sector that offers real choice and value for money. Our aim is to create an environment in which care providers can continue to deliver and develop the high-quality care that communities require and deserve.

In relation to older people's care, this sector provides 89% of the care home places in Scotland, both residential and nursing. There are more older people in care homes any night of the week than in hospitals – as at 31st March 2016 there were 873 care homes for older people providing support to 33,301 residents any night of the year.

It is in this representative capacity that we are responding to this consultation

In principle, Scottish Care agrees with the need for mechanisms and/or models that can assure the public and others that staffing levels are appropriate to meet the often complex needs of individuals supported by health and social care services.

We believe that the creation of a tool to measure capability levels is a key first step in achieving the Bill's policy objectives. It is only through understanding the needs of individuals supported by services that we can better determine the staffing required to meet these. Out of this, there should be an algorithmic tool to show appropriate staffing requirements to deliver quality care and support and provide assurance of this.

However, given that these methods and tools have not yet been established, tested and implemented, it is currently impossible for us to say what the financial impact will be of the Bill's introduction in the social care sector.

There are also significant risks in relation to making costings and projections on the basis of flawed data, given that there is no data collection which captures accurately either the number of people accessing care and support, or the numbers of people working in the social care sector. Any work on costings would need to include work on developing a robust data source.

We support the desire for integrated legislation but believe that the current conditions of austerity make it extremely challenging to ensure that it is implemented effectively and in a way that will support the sustainability of critical health and social care services. The consequences of not getting it right mean that it is essential that the social care voice is heard and listened to in the development and implementation of the Bill, including in terms of any financial impact.

In our response to the Health and Sport Committee, Scottish Care have highlighted some particular financial concerns that we have in relation to the Bill's extension to social care settings:

- The Bill needs to make clear that the duties placed upon providers have equivalence with the duties placed on commissioners of services to ensure achievable staffing levels and sustainable services, including the covering of any financial burden incurred through compliance with the Bill. Current commissioning practices, such as year on year commissioning and contracting, make meaningful workforce planning extremely difficult and a lack of commissioner accountability under the Bill would create a situation where care services have a duty to act without the tools or resources to do so.
- A body of work has already been undertaken to increase the number of nursing student places at the next intake, the main reason for this being the critical state of nursing numbers within social care and the strain that this is placing on nursing homes across the country. While it will be around 3 years before these students qualify and are ready to take up work, it has been well received by Scottish Care members and the social care sector more widely. If, however, this Bill shows a need for an increase in nursing within hospital settings (as is anticipated) then these additional places will be swallowed up by NHS. This will result in extreme financial fragility within the social care sector due to an unsustainable reliance on high cost agency staff to cover shortages. It could also result in closures or partial closures of nursing homes, leaving thousands of vulnerable people without appropriate care and the burden falling on the state.
- It is commonly accepted that we are currently in a recruitment and retention crisis within social care, across all roles and areas of the sector. We are therefore concerned about where any higher numbers of carers and nurses that are stipulated as a result of the Bill are going to be sourced and resourced from. There is a body of work that requires undertaking across the country to meet the current demand for care workers before the Bill can be implemented effectively. Otherwise, it risks the unintended consequence of crippling and closing care services rather than meeting its objective of assuring safety and quality.

We are therefore concerned that the Bill will result, through whatever methods and tools are agreed, in the highlighting of substantial vacancies in the social

care sector, which is already faced with profound staffing shortages. In order to address these, significant numbers of people as well as levels of resource will need to be located and allocated to the sector and to services within it. We are not clear where these human and financial resources will be sourced from. What is clear, however, is that any method of redress would have significant cost implications, ranging from the recruitment and employment of more individuals in a sector where this is already challenging right through to the closure of services due to their inability to comply with the legislation. Right across the spectrum of potential solutions, there remains a significant population with complex needs who require and deserve high quality care. If existing services are not supported properly to comply with the Bill, other – likely higher cost – solutions would need to be found.

Scottish Care is happy to be contacted and to provide any further information required.

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