THE SCOTTISH GOVERNMENT LOCAL LIVING AND 20 MINUTE NEIGHBOURHOODS – CONSULTATION

SCOTTISH CARE RESPONSE – APRIL 2023

1. How helpful is part 1 of the guidance in furthering the understanding of local living and 20-minute neighbourhoods in a Scottish context?

☐ very helpful
☒ somewhat helpful
☐ not at all helpful

Why?

Part 1 of the consultation is helpful to the extent that it has detailed aspects of local living which are important to living a well-rounded life. However, the details could be improved by outlining how this may affect different groups in the community and that is where the effects on guidance can fall short.

The policy outcomes which are meant to support this guidance states that part of its intention is to *reduce inequalities* and that *communities are planned together with homes and the key local infrastructure*. However, from the description outlined in part one, there is the implication that there has not been enough thought and weight given to how this local living is suitable for older adults. As the Scottish government's Health and social care strategy for older people recognised, we have an aging population and by 2040 it is projected that 25% of Scotland's population will be aged 65 or older. Additionally, as acknowledged by public health Scotland the length of time spent in ill health is also rising as the incidence of health problems increases with age. It is important that we understand that for an older adult what might be considered a 20-minute walk for some can be a longer and difficult task for an older person. This is also applicable for older adults who live in rural areas, building connectivity links to access necessities might be difficult or unachievable with reduced physical mobility.

Additionally, without a targeted approached the workforce supporting social care could also be negatively impacted by this guidance. In adult social care, there are providers who offer care at home services. For the workforce that support these services it is difficult to rely on public transport in rural areas, as such transport is unavailable or impractical, also because of the nature of the job remote working is unrealistic. Furthermore, for care staff in both cities and rural areas zero-emissions zones can be difficult to navigate as they can incur costs while travelling through different streets to try and reach service users. However, because of the time and task model implemented by local councils' staff are always trying to find the quickest routes to reach as many clients as they can. Therefore, avoiding these zones can be impractical for an efficient workday. This is also applicable to a service users' family and friends who might find it difficult to reach their loved-ones who are in homes far away. Because of unviable funding many care homes have had to close

or move further away from a service users' community, this can make it even more difficult for residents to stay sociable.

Care homes and care at home services fall in a unique category, while some may see them as independent service providers, it has to be remembered that staff in these services support people's homes. Therefore, they have a wealth of knowledge readily available that can be shared. As a representative in the adult social care space, we set out a vision for the future of social care, this can be found in our *Coileanadh* report. This report is meant to work with communities improving social care for service users, for now and in the future. The points highlighted in that vision could help to improve the impact of this guidance, helping the local development team to understand the perspective of an older adult in social care.

With the wealth of knowledge provided by care providers, local living can help older adults in health and social care to be active citizens within their community. For example, in our *What if and Why Not* report we highlight the need to reconceptualise the social care workforce to be resilient to the challenges that face social care. One of the ways we have encouraged this is by promoting the use of technology, which can help older adults to stay independent for longer and feel connected to their friends and family. While remote working might not be viable, there are other ways which technology can be used to support the goals of local living.

2. How helpful is the framework diagram in encouraging flexible, place-based approaches to support local living?

☒ very helpful
☐ somewhat helpful
☐ not at all helpful

Why?

3. Looking at part 2 of the draft guidance: how helpful are the 'categories' and 'key considerations for local living' that are captured within this part of the document?

<mark>☐ very helpful</mark>
☐ somewhat helpful
☐ not at all helpful

Why?

The categories captured for local living are very helpful. To improve this, areas in which these categories might be difficult to implement, projects or activities should be considered on a seasonal basis. This could encourage involvement, especially in rural communities, so '*the local population is more likely to be engaged and able to influence decision-making processes*'.

4. How helpful is the proposed 'structured approach' for use?

☒ very helpful

☐ somewhat helpful
☐ not at all helpful

Why?

5. Does part 3 of the guidance clearly communicate the importance of both qualitative and quantitative data in establishing a baseline for a place?

☒ very helpful
☐ somewhat helpful
☐ not at all helpful

Why?

6. How helpful is the 'collaborate, plan, design' section of part 3 in supporting collaborative practices?

☐ very helpful
☒ somewhat helpful
☐ not at all helpful

Why?

The 'collaborate, plan, design' section is generally helpful however it can be elevated by outlining that there are different community stakeholders, and each will have a different contribution which could assist the planning process. As highlighted in question 1, the older population who access adult social care services are either helped to live independently in their homes or rely on care service providers for a supported home. The importance of these services to the older population cannot be minimised. However, different providers will have different contributions, therefore information acquired from one type of provider, cannot be deemed as representative of the whole sector. For example, third sector care providers will have different experiences to independent care service providers though they offer a similar service. By including a document which details the different types of stakeholders that should be consulted, the results produced could offer a better representation therefore helping to target local living plans for effective outcomes.

7. How helpful is the 'implement and review' section of part 3 in assisting the delivery of collaborative approaches to support local living?

☒ very helpful
☐ somewhat helpful
☐ not at all helpful

Why?

The 'Implement and review' is helpful, however it can also be improved by outlining key stakeholders for each sub-group, as illustrated in Q6. These stakeholders will have vital information for the planning, implementation, and review of local projects. This will help the local development planning team to understand what groups are enjoying the benefits of local living and which ones still need targeted plans.

8. Looking at part 4 of the draft guidance: do the case studies provide a useful and appropriate range of examples of good practice?

☐Yes
☒No

Why?

The examples given do not provide a useful and appropriate range of good practice. There is no mention of a care provider being involved in the process or even residents who access care at homes services. This implies that results from this case studies are skewed towards certain sub-groups in the Scottish demographic. We are aware that the independent sector lead for social care in Edinburgh was not consulted on this project, and as outlined in Q1 there are concerns with the result that it provides. Independent service providers are not only paramount to support the older population, but they are also employers of those in the local community. They can provide an expertise that can further and strengthen the goals of local living, however without their input, older people who access their services may not have the opportunity to benefit from local living. Additionally, the Stewarton example outlines one of the ways that data could be acquired from the local community. When asked which services they accessed the most, the options given were in the context of healthcare but there was no mention of social care. If there is the perception that social care services is not commonly accessed by residents in a town/ city, then the importance of those services could be diminished as developments around it might not be complementary or appropriate. There is a wealth of knowledge which independent care providers harness, which can fuel effective services and maximisation of limited resources. By not engaging with this group, local living benefits can be limited for the older adults who access social care services and the staff that work in this sector. For example, in Dumfries and Galloway, the independent sector lead is using technology to assess where care is most needed, then better co-ordinating between care-providers, thus maximising limited resources. This knowledge could be shared to improve local development, understanding the problems associated with specific areas in the region.

9. Looking at the impact assessment update report: do you have any views about the initial conclusions of the impact assessment update report that accompany and inform this guidance?

☒Yes
☐No

Why?

10. Additional information: please provide any further comments on the draft guidance document.