SOCIAL CARE SUPPORT
An investment in Scotland's people, society, and economy

PROGRAMME FRAMEWORK

A partnership programme to support
local reform of adult social care

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Riaghaltas na h-Alba
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Programme framework (blueprint)

This document sets out the framework for the reform of adult social care support programme. We will use it to make sure the programme is on track and the activities are helping to change the system.

It has three parts:

➡ Programme priorities - Page 2
➡ Programme workstreams – Page 3
➡ Programme vision – Page 8

Programme priorities

The programme priorities are the things that people who use social care support and people who work across the system, say must be included in the process so that change can happen.

➡ Have a shared agreement on the purpose of social care support. Focus this on human rights and a process that is person-led.

➡ Focus on social care support that fits around a person, how they want to live their life, and what is important to them. This includes living as independently as they can and as they wish to. It includes the freedom to move to a different area of Scotland if they want or need to.

➡ Focus on equity of experience and expectations across Scotland.

➡ Change attitudes towards social care support, so that it is seen as an investment in Scotland's people, society and economy.

➡ Value the people who work in social work and social care support.

➡ Include and co-produce with people who use social care support, unpaid carers, and wider communities. Strengthen the quality and consistency of co-production at local and national level.

➡ Look at investment in social care support, and how it is funded and paid for in the future.

➡ Evaluate and learn from data and experience.

Programme workstreams

The programme workstreams, or plans, describe the work required to make the changes. There are seven workstreams.

➡ The purpose and value of social care support and self-directed approaches
➡ Consistent experience and expectations
➡ Models of care and support
➡ Workforce conditions and skills
➡ Investment in care and support
➡ Commissioning and procurement
➡ Communities, care and support

The principal workstream

1.   The purpose and value of social care support and self-directed approaches

At the beginning, this is likely to focus on:

➡ a public conversation about the purpose of social care support and its social and economic value
➡ training and knowledge sharing across the public sector about the purpose of social care support and its social and economic value
➡ leadership and champions for adult social care support at local and national level. This will include owning the implementation plan for self-directed support
➡ designing a national data and evidence framework which captures the value and purpose of adult social care support
➡ aligning national and local policies and delivery systems to the shared vision for adult social care support

Designing new ways for the future

2. Consistent experience and expectations

At the beginning, this is likely to focus on:
- developing a framework of practice principles for adult social care support that is shared across Scotland. This will include sharing knowledge, improving transparency (including on charges and charging approaches), developing a common language, consistent outcomes-based assessment and resource allocation processes to support portability of care, and other topics
- making it easier to share and do best practice
- expectations and commitments on quality and service standards based on the Health and Social Care Standards
- exploring current and future mechanisms for appealing decisions

3. Models of care and support

At the beginning, this is likely to focus on:
- developing and taking forward a plan to make it easier to design more flexible care and support options and to promote these. It will cover key aspects including:
  - existing models of care and support
  - investment in developing new models of care and support, and innovations
  - role of housing
  - role of transport
  - changes in practice
  - registration
  - commissioning processes
  - collaboration
  - decision-making powers
  - digital support for care and support, and management systems

Changing or improving parts of the current system

4.   Workforce conditions and skills

At the beginning, this is likely to focus on:
- developing a central point for issues for the social work and social care workforce (this includes Personal Assistants employed directly by people who use support). For example, this might be a group of people with personal and professional experience, knowledge, and influence to make changes. It will look at the issues and take actions to address them in the context of the whole system – especially work being done to improve systems and processes and the positive use of digital technology. Key issues to be considered are:
  - pay, terms and conditions
  - collective voice of the workforce
  - leadership capacity
  - professional autonomy
  - training
  - equal access to professional development opportunities
- supporting the implementation plan for the Carers Act
- a media campaign on the value of social care and social work professions and careers

5.   Investment in care and support

At the beginning, this is likely to focus on:
- research to get a better understanding of the full cost of social care support across the whole system. This will include charges
- research to get a better understanding of future need for social care support and complexity of needs
- co-developing and testing new funding structures or models. This will focus on enabling investment in both high-end care and support, and preventative, anticipatory and early support

6.   Commissioning and procurement

At the beginning, this is likely to focus on:
- developing support, expectations and tools for Health and Social Care Partnerships and communities to consistently use the full flexibility of current procurement processes
- supporting partnerships and collaboration between social care support providers
- making sure contracts between Health and Social Care Partnerships and social care support providers support people's personal outcomes
- making sure contracts between Health and Social Care Partnerships and social care support providers support good working conditions

7.   Communities, care and support

At the beginning this is likely to focus on:
- creating links with community development and influencing and supporting work
- support and consistent expectations for doing best practice in involving people who use social care support and communities in decision-making

Enablers

These are the things that need to happen together with the workstreams for the programme to be successful.

a) Investment in reforms

Funding for the programme's activities and general investment in the development and improvement of adult social care support.

b) Removing barriers to reforms

Understanding things that are making it difficult for reform work to succeed and removing or changing them. For example, this could be legislation, national and local policies, language, as well as other things.

c) Aligning national policies

Making sure the right connections are made when things are planned and taken forward.

d) Self-directed support

The actions from the 2019-2021 self-directed support implementation plan will also be included in the workstreams.

How we will work

The workstreams are what we will do.

People with different knowledge and experiences, especially people who use supports and services, will be involved in the work and decision making. This is sometimes called co-production.

People who use social care support, carers, people who work in social care, and the organisations responsible for care delivery and policy, and others with relevant knowledge and experience will be involved.

Programme vision

The programme vision describes what the system will look like to achieve the shared vision for adult social care support.

It has the same five sections as the shared vision.

- ➡ The way we value and understand social care support
- ➡ The way people access support
- ➡ The way people are supported
- ➡ Our systems, processes and decision-making
- ➡ Our support across Scotland

Social Care Support

The way we value and understand social care support

➡ The public, and the system and policy makers, see social care support as an investment in Scotland's people, society and economy.

➡ Social care support is about both meeting needs and ensuring quality of life. This respects and protects people's human rights. 'Needs' incorporate a person's whole wellbeing, for example social, physical, mental.

➡ Social care support is a mix of formal and informal support.

➡ Public health messages promote strengths-based approaches and attitudes, self-management, and maintaining community connections for health and wellbeing.

➡ People planning for their future care and support needs is routine.

➡ The value of the people who work in social work and social care support is demonstrated through appropriate parity of opportunities, conditions and authority.

➡ Unpaid carers are regarded and supported as equal partners in care.

➡ Social care support is sufficiently resourced as part of the whole network of supports and services in Scotland. How social care support is paid for is appropriate and sustainable.

Social Care Support

An investment in Scotland's people, society, and economy

The way people access support

➡️ Early intervention and prevention are embedded in cycles of planning and delivery. This looks at how all parts of someone's life have a role to play in them living well, or as well as possible, for as long as possible (for example, socialising and being connected with others, housing).

➡️ People have access to support (formal/informal) before reaching crisis.

➡️ Assessments are timely and happen at times and in places that are appropriate and helpful for people.

➡️ Assessments are outcomes-focused and use best practice models.

➡️ People are actively involved in processes that affect them and lead decision making about their care and support.

➡️ People have access to appropriate information, advice and practical support to make decisions about their support. This includes creative support options. Information is clear and easy to understand. They are directed to this information, advice and support.

➡️ People know the budget and resources available to them and can direct them creatively and flexibly.

➡️ Care and support teams are made up of people from different professions and disciplines. They have the range and mix of expertise and skills needed to support people and carers when they are making decisions about their care. They are compassionate.

➡️ All social care support is personalised.

➡️ All social care budgets are personalised, no matter how they are managed.

➡️ Alternative support routes are visible, valued, and people are able to access them.

➡️ Professionals and practitioners work with the supported person, their strengths, and their networks to achieve the best possible care and support arrangements. This includes formal and informal supports and services.

➡️ Where someone is supported by an unpaid carer, this includes asking for and taking into account the carer's views.

The way people access support (continued)

➡ People are trusted to know what is right for them.

➡ Care and support arrangements work for how the person wants to live their life and what they want to achieve.

➡ They also recognise carers' needs and everyone's right to family life.

➡ People's care and support needs are reviewed, and support arrangements change as the person's needs do.

➡ Support arrangements recognise that a person's capabilities might fluctuate, and adapt accordingly.

➡ People are supported when they change between different kinds of supports and services, or when they take on more responsibility for their social care support.

➡ People, their unpaid carers and families, or their other social friendships and connections, have access to the right practical training and tools to manage their social care support to the degree they have chosen.

➡ People with diverse backgrounds can understand and access the social care support system, and support that works for them.

➡ People experience respect and kindness at every stage in the journey – not only when they are receiving social care support. Carers and people working in the system also experience respect and kindness at every stage.

The way people are supported

→ Social care support is outcome-focused.

→ People experience best practice in social care support, no matter where in Scotland they are.

→ There is a diverse range of formal and informal support options. They are flexible and creative.

→ Support options are recognised and valued by how they support a person to do what is important to them.

→ There are options which involve communities and community assets.

→ Commissioning and procurement processes promote this diverse range of flexible and creative support options.

→ Support options enable people to fulfil their right to participate in their community and society, to live life in the way they choose, and to achieve their goals.

→ Care and support is appropriate for a person's needs, circumstances, and phase of life.

→ People working in social work and social care support are adequately trusted, trained, resourced and autonomous to deliver self-directed approaches and support people in the right way. They feel and are empowered in their roles.

→ Social care careers are well paid and secure.

→ Care and support teams have the range and mix of professions, expertise and skills needed to deliver care and support that is right for a person. They are compassionate.

→ Digital technology supports people to be contributing, active citizens and to live as independently as possible.

→ Digital solutions are used proactively for prevention, care, and care planning and management.

→ In general, care and support arrangements include a mixture of person-provided and technological solutions.

Our systems, processes and decision making

→ We respect the dignity and contribution of all people getting information, advice, and care and support.

→ Systems and processes are responsive and efficient.

→ They are set up in a way that makes it as straightforward as possible to make changes to a person's support arrangements when their needs or circumstances change.

→ National and local policies, systems, and processes are co-produced with people who use support, carers, wider communities, and people who work in social work and social care support.

→ These people are involved in making decisions. This includes decisions about prioritisation and spending. Their voices and opinions are valued and taken seriously. This shows in the decisions that are made.

→ Decision-making is based on data and evidence. This data and evidence reflects 'need' as holistic (including physical and social needs, for example) and considers the whole system and sustainability.

→ Decision-making in local systems and processes is dispersed – particularly for decisions on budgets and spending. Frontline staff, or people working closest to the supported person, have sufficient autonomy and authority to do their job.

→ Decisions taken at national level are realistic and practical for local delivery.

→ Communities and supported people and carers shape the planning, commissioning and monitoring of support. Health and Social Care Partnership strategic commissioning plans are co-produced.

→ Local and national systems, processes and decisions are transparent. This includes decisions on budgets and spending.

→ People know what they can expect and how long it will take. Timescales are consistent and acceptable.

→ Accountability is clear and acted on.

Our systems, processes and decision making (continued)

➡ There are independent and consistent processes, and advocacy, for appealing decisions or raising concerns, and to hold responsible bodies to account.

➡ The organisation and delivery of social care support is joined up with other supports and services. People organising and delivering social care support plan and work together with other professions, services and supports to achieve the best outcomes. For example, this means communities, community workers, mental health practitioners, GPs, nurses, hospitals, therapists, housing services, transport services, and others. It includes both formal and informal supports.

➡ The specific skills and knowledge of social care support and social work professionals are recognised, included and valued in multi-disciplinary teams.

➡ There is parity of esteem across organisations in the system and all are working to common outcomes and objectives.

➡ The relationship between public, independent and third sector health and social care organisations is trusting and collaborative.

Our support across Scotland

➡ People's needs are recognised equally wherever they are in Scotland. These needs are recorded.

➡ There is local flexibility but people's experiences are consistent nationally. People get the same quality and level of support across Scotland even if it is provided differently in different areas.

➡ Local and national systems and processes are set up in a way that makes moving to a different area of Scotland for a person who uses social care support as straightforward as possible.

➡ Data and evidence is used to optimise investment decisions and the quality and operation of services and models of support.

➡ Data and evidence is used to improve the coordination and integration of services and supports across the whole system.

➡ Best practice builds, maintains, and develops a sustainable social care support system.

➡ Infrastructure and relationships support the whole system of supports and services that social care support is one part of to adapt together to changing circumstances. This happens at both a local and national level.

The following partners have worked together to develop these documents

Care Inspectorate
Coalition of Care Providers in Scotland (CCPS)
COSLA
Health and Social Care Scotland
IHub at Healthcare Improvement Scotland
Independent Living Fund Scotland
Scotland Excel
Scottish Care
Scottish Government
Scottish Social Services Council
Social Work Scotland
People-led Policy Panel
Unison for Scottish Trade Union Congress

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Any enquiries regarding this publication should be sent to us at
The Scottish Government
St Andrew's House
Edinburgh
EH1 3DG

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