

Self-Directed Support Improvement Plan 2023-27

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Joint ministerial / COSLA foreword

High quality social care helps people to meet the outcomes that matter most to them, to participate in their community and help them to realise their human rights. Self-directed support, or SDS, is the way in which social care should be arranged and delivered for carers, adults, children and families in Scotland, by putting choice and control over their support front and centre.

It's important that people are supported to live their lives in ways which are meaningful to them. Each adult, child, family and carer that accesses social care will have their own vision of what this looks like. They are experts on their own lives and must be recognised as such throughout the stages of planning and accessing care.

This plan recognises the need for a whole-system approach to improving the delivery of SDS: delivery partners across statutory, third and independent sectors all play an essential role in SDS improvement. No single public body or organisation works independently to deliver SDS. This Self-Directed Support Improvement Plan is for all those with a role in ensuring people experience high-quality social care in line with the principles and values of the Social Care SDS (Scotland) Act 2013. This includes local authorities and integration authorities, the Scottish Government, independent support organisations, third sector organisations, professional associations, and providers.

Over the years, we have made significant progress towards embedding the principles and values of SDS within social care and social work. The personalisation of care has meant people are more involved in decisions that involve them and, alongside social care and social work professionals, are able to take more creative and flexible approaches to their care and support.

There is much positive work to build on, but there is also still more to be done, in partnership, to make improvements in social care across Scotland.

This requires strong leadership, effective systems, skilled workers, sustainable investment and a strong partnership approach – including with the involvement of supported people and carers.

Development of this Plan involved engagement and consultation with supported people, carers, local authorities, third sector and independent sector organisations and included providers, commissioners, social workers, disabled people's organisations, professional bodies, independent support organisations and individuals.

The SDS National Collaboration played an important role in shaping the approach, and members of the National Collaboration led on the engagement activities to ensure that people had the chance to include their voice, experience and knowledge. We would like to take this opportunity to thank every individual and organisation who contributed their voice to the development of this Plan.

This Plan comes at a challenging time. Health and social care systems are recovering from the impacts of the Covid-19 pandemic, there are ongoing challenges in recruitment and retention of our valued workforce, increasing levels of demand, and the detrimental impact of the cost of living crisis.

There are improvements that can and must be made despite these challenges. Scottish Government and COSLA recognise the need for an ambitious approach to transforming social care. We understand our responsibilities to deliver the necessary changes in partnership with others and remain committed to listening, valuing and acting on people’s experiences of social care support.



A handwritten signature in black ink that reads "Maree Todd".

Maree Todd,
Minister for Social Care,
Mental Wellbeing and Sport



A handwritten signature in black ink that reads "Paul Kelly".

Councillor Paul Kelly,
COSLA Spokesperson for
Health and Social Care

Introduction

The Social Care (Self-directed Support) (Scotland) Act 2013 (the SDS Act¹) sets out important principles governing Scotland's approach to how social care and support should be delivered. The SDS Act recognises that adults, carers (including young carers), children, and families who need social care support, have the right to choose how that support is delivered in order to lead full lives and live as equal citizens.

Since the Act was introduced, there has been a range of related legislation, statutory guidance and action plans to shift social care and support towards this new model, and to ensure citizens can exercise their right to SDS. The **most recent Implementation Plan** to support the SDS strategy was in place from 2019 to 2021. This laid out 36 actions that were designed to move forward the implementation of SDS.

Since the previous Plan expired, local authorities, independent support organisations and others involved in delivering SDS have continued improvement activity for the provision of SDS. But there has not been a national plan that sets the strategic direction of this work. This new Plan has been developed to make sure that work taking place to improve SDS is more coherent and better coordinated, focuses on the right priorities, and can be delivered effectively by local authorities, third sector organisations, the Scottish Government and COSLA, working together.

Further change is coming to social care in Scotland in the shape of the proposed National Care Service. At the time of writing, the National Care Service Bill is making its way through Parliament, with an intended start date of 2027. There has been a commitment to ensure the values and principles of SDS underpin the National Care Service.

This Plan is therefore important in moving social care and support further towards delivering fully on the SDS principles of participation and dignity, involvement, informed choice and collaboration.² The overarching aim of this Plan, aligned with the intention and values underpinning the SDS Act 2013, is to support and enable people to achieve the outcomes that are important to them, to lead full and meaningful lives, and to participate in and contribute to the economy and society.

1 **The Social Care (Self-directed Support) (Scotland) Act**

2 As described by the **SDS Statutory Guidance** (update published in November 2022)

How the SDS Improvement Plan 2023-27 has been developed

This Plan has arisen out of the work of the National SDS Collaboration, which first came together in April 2022. The National SDS Collaboration includes the Scottish Government, COSLA, individuals, and independent support and disabled peoples' organisations from across the social care sector, all of whom have a stake in the successful delivery and implementation of self-directed support. The aim of the National Collaboration is to ensure that Scottish Government policy around SDS is informed by a wide range of people including those who have lived experience of SDS, or who are involved in delivering it. The National SDS Collaboration will continue to provide a forum for stakeholder discussion of the implementation and evaluation of the Plan.

The approach to writing this Plan is in line with the broad approach taken by the Collaboration to its engagement activity; to seek views from across the sector, including those with lived experience, to make sure the final Plan is informed by what those involved in SDS feel is most important.

A working group which includes representatives from Scottish Government, COSLA, Social Work Scotland, Self-Directed Support Scotland, In Control Scotland and others, formed to start work on the Plan. This group put together ideas for work that could take place over the coming years to improve SDS. This was based on their own understanding of what the priorities need to be, wide consensus on the importance of taking into account cross-cutting issues into account, and on recommendations from research into SDS that has been published in recent years.

An open consultation process ran during January-February 2023, to enable individuals, including those with experience of SDS, and organisations to feed in their views about the draft ideas, and highlight anything that they felt was missing.

What we heard during the consultation

More than a hundred individuals and organisations responded to the consultation that informed this Plan.

While it has not been possible to capture every comment or suggestion made during the consultation, the Plan attempts to reflect some of the most commonly expressed views about what needs to happen to improve SDS, and what needs to be prioritised.

The responses to the consultation highlight several issues that will be key to improvement:

- ensuring people with lived experience are involved in planning services
- ensuring people who need social care support are informed about SDS and understand their rights
- ensuring access to support, including independent support and advice throughout the SDS process
- making sure SDS is included in social workers' education and ongoing training
- ensuring leaders are informed about SDS and subscribe to the values and principles of SDS

The responses to the consultation also highlighted that the Plan needs to recognise specific cross-cutting issues throughout – we call these 'golden threads'. See the **relevant section** for more information on these.

What is different about this Plan

We know that when it comes to SDS improvement, some pieces of work are complex and take time to embed consistently in order to make a real difference. This Plan builds on the important progress made by the previous Plan.

Many of the activities of each theme will therefore span multiple years. To ensure transparency, every year (before the end of July to report on the activities undertaken during the previous financial year), an annual progress report will be written by the Scottish Government and agreed by the National SDS Collaboration, to report on progress on activities undertaken.

The Plan also reflects the consensus among the Collaboration that in a very challenging budgetary and operational context for social care in Scotland, prioritisation of themes and activities has been – and will continue to be in future years – necessary for the Plan to be delivered. The Plan aims to set out priorities in a clear and helpful way, and to ensure that there is regular and appropriate reporting, monitoring and evaluation of what is being done.

How this Plan links with other work that affects SDS

This Plan sets out work that will take place to improve SDS over the coming years. However, it is important to acknowledge that while the Plan recognises a number of dependencies and supporting activities, it is not exhaustive (see **section on rationale for selecting priorities**) and therefore does not capture all the valuable work undertaken by local authorities, public bodies, professional associations and third sector organisations to improve SDS.

The publication of this plan comes at a time of immense pressure across the health and social care system. There are challenges in the recruitment and retention of the social care and social work workforce; the continued impact of Covid-19 and recovery; the cost of living crisis; and the impact of a very challenging budgetary and financial context.

This Plan seeks to recognise and complement all of the important and innovative work that is happening across the system to improve the quality and delivery of social care. Our partners involved in the development and implementation of this Plan are committed to proactively identifying and strengthening links with other related work to ensure coherence and efficiency.

Dependencies

The implementation of SDS is dependent on work being undertaken across other priority national policy areas, and some of these are already mentioned in the list of prioritised activities. These dependencies will be taken into account when implementing activities, and include:

- innovative work undertaken by local authorities in their central role in the implementation of SDS.
- other workplans, including the PA Programme Board Workplan,³ Fair Work in Social Care and Workforce Planning.
- the **Future-Proofing Programme of the Scottish Social Services Council (sssc.uk.com)**
- the values and outcomes of Scotland's **National Performance Framework** and the current Programme for Government.
- the development of the National Care Service. NCS themes include reviewing care complaints and redress systems, independent advocacy provision, the Charter of Rights, and access to care.
- the implementation of the Getting It Right For Everyone (GIRFE) model and refresh of the 'Getting It Right For Every Child' approach.
- **the Promise** (including Early Help and Family Support work in children and families).
- the Mental Health and Wellbeing Strategy.
- **A Fairer Scotland for Older People: framework for action** .
- the Transitions Strategy.
- carers policy and legislation, including the implementation of the **National Carers Strategy** and its focus on recognising the value and expertise of unpaid carers.
- Ongoing work as set out by the **SG/COSLA Joint Statement of Intent**, which describes a range of improvements to social care.
- ethical commissioning: Commissioning Planning (SCP) Guidance expected to be updated in 2023, as well as existing themes related to improving commissioning for outcomes taken forward by the Coalition of Care and Support Providers in Scotland.
- the **Dementia Strategy**.
- the **data strategy for health and social care**

³ More information about the Workplan is available here: <https://www.sdsscotland.org.uk/pa-programme-board-workplan/>. This dependency reflects the principle that support for the PA workforce (through the Workplan mentioned above) and support for PA employers (through this Plan) are mutually reinforcing and must be coherent.

'Golden threads'

Golden threads include a number cross-cutting issues which are fundamental to the full delivery of SDS as intended by the SDS Act and other relevant legislation. The golden threads are areas that all activity related to SDS improvement should consider in implementation.

These are:

- human rights, the values and principles of SDS and of the Independent Living Movement.⁴
- the role of the third sector and care providers in SDS improvement.
- that people with lived experience of SDS should be involved in all the Plan's activities.
- the importance of transitions – both from children's to adults' services, and at other life stages, for example, moving into residential care, or out of hospital.
- the needs of marginalised groups – including those who are under-represented in access to SDS and those, including disabled people, who may face specific barriers to accessing it.
- the needs of rural, island and remote communities.
- how digital technology could support improved service planning and delivery.
- the role of Personal Assistants.
- the universality of SDS, including its availability to children and families and other groups including homeless people, older adults and those living with addiction.

For more details about key terms and definitions used in this document, please refer to the Glossary of the recently updated **SDS Statutory Guidance** (November 2022).

4 For more information about ILM, see the SDSS **Factsheet**

How will we know the Plan is working?

The Independent Review of Adult Social Care (IRASC) states its ambition to close the implementation gap, and to make 'new provision for learning and improvement programmes for social work and social care, to support quality, improvement, consistency, and professionalism'.

In line with this, this section outlines our approach to monitoring, learning and evaluation, taking account of what has been learned from the implementation of the previous Plan.

Scotland has a wealth of social care data, but there still remains large gaps in our current knowledge, such as around unmet needs and people's experiences and outcomes, including the extent to which information about SDS options is made available, the extent to which eligible people receive the SDS option that they wanted, and whether that option met their outcomes.

Below are several key sources of national strategic priorities across health and social care which are likely to be of relevance to this Plan and a useful starting point for understanding the impact the Plan should have.

1. Scottish Government budgetary information about **health and social care in 2022/23** states that it contributes towards the following national outcomes: Health, Children and Young People, and Human Rights.
2. The SG-COSLA joint **Statement of Intent** mentions the importance of improving the experience and outcomes of the people who access social care support. It states that 'to support a preventative approach, people must have a strong voice in planning their own care. Their strengths and needs must be at the centre of the approach throughout, regardless of what services people interact... with each person having a voice in the care and support they receive.'
3. The National Performance Framework, which includes the following indicator (currently in development pending review of the Framework): public services treat people with dignity and respect.
4. **Health and Social Care Standards** (2017) describe headline outcomes and the descriptive statements which set out the standard of care and support a person can expect. '1: I experience high quality care and support that is right for me. 2: I am fully involved in all decisions about my care and support. 3: I have confidence in the people who support and care for me. 4: I have confidence in the organisation providing my care and support. 5: I experience a high-quality environment if the organisation provides the premises.'
5. The **national health and wellbeing framework** of 2015 states nine person-centred outcomes which provide a strategic framework for the planning and delivery of health and social care services.

6. The **SDS Framework of Standards** sets out a clear formulation of what ‘good’ looks like and is written specifically for local authorities to provide them with an overarching structure, aligned to legislation and statutory guidance, for further implementation of the self-directed support approach and principles.
7. Finally the **Change Map** at the heart of the SDS Implementation Plan 2019-2021 lists five major outcomes. ‘People’s social care support outcomes are met’; ‘senior decision-makers and systems create the culture and conditions⁵ for choice and control over social care support, ‘workers across all aspects of social care support exercise the appropriate values, skills, knowledge and confidence, ‘people are empowered to make informed decisions about their support’, and; ‘people have choice and control over their social care support’. However, there are no proposed indicators on how progress on outcomes should be measured and understood.

The above sources reflect that improvement in social care support should be understood as being person-centred or person-led and reflect human rights as expressed in the SDS Act 2013 and other related legislation and guidance.

This Plan’s monitoring and evaluation approach is based on the assumption that, in order to generate confidence that the Plan has identified the most effective means of achieving its outcomes, each activity in this Plan must demonstrate a clear connection to a person-centred contribution to improvement.

In order to understand whether this Plan is working, we will make arrangements for evaluating its effectiveness and involve supported people with lived experience in the evaluation design. The gathering of information and data for improvement should take into account and not duplicate efforts made by other organisations as part of their own improvement and data gathering plans.

A short monitoring and evaluation plan will be developed later in 2023 through the National SDS Collaboration to support how individual activities will be monitored and evaluated. The principal goal of the monitoring and evaluation plan will be to focus on improving the impact of activities and to facilitate a continuous learning approach. The perspectives, values and questions of supported people will be at the heart of the design of the evaluation of the Plan. The annual progress report will be coherent with the approach set out in the monitoring and evaluation plan.

5 It should be noted that some issues like availability of providers and workers are subject to market forces outwith the control of senior leaders.

Outcomes and how the Plan is organised

This Plan, drawing from the Change Map which underpinned the previous Plan and the findings from our consultation, recognises that there are four main outcome areas reflecting where improvements in how SDS is delivered most need to be made. These are:

1. **supported person and carer's choice over their support**, where success means access to information, advice and advocacy, access to quality support, and control and involvement for supported people over how it is delivered.
2. **enhanced worker skills, practice and autonomy**, where success means workers across all aspects of social care support are better able to practice in line with SDS values and with statutory duties (where applicable), standards, skills, and knowledge.
3. **systems and culture**, where success means national and local SDS system and planning design is more person-centred and person-led, including through involving supported people and carers.
4. **leaders understand and help staff realise SDS principles and values**, where success means duty-bearers and senior staff supporting their workforce and creating the culture and conditions for supported people to have choice and control over their social care support.

In **the previous SDS Implementation Plan**, 'leaders and systems' was the first area of focus, while 'supported people's choice and control over their support' was listed last.

In this new Plan, the order has been reversed to recognise that supported people and carers are at the centre of SDS and that improved choice for supported people and carers is what all other elements of the plan aim to help achieve. Leaders and systems have also been separated into different areas to recognise that these need separate attention, reflecting the importance placed by recent literature⁶ on the connection between leadership and systems and how these interact to have an impact on choice and flexibility.

Alongside these four main outcome areas, a number of themes have been identified, with activities under each theme. These describe areas of work that need focused attention to improve SDS. The **table of themes and activities** is intended to be as simple as possible, although it is recognised that some activities will contribute to more than one theme or outcome.

6 For example, Lou Close's report for In Control in 2022 which describes the importance of 'senior leaders publicly and routinely articulating their vision for increased choice and control. Including a staunch commitment to embody the spirit and the letter of the legislation'.

How the Plan relates to the SDS Standards

The **SDS Framework of Standards** was produced following extensive consultation in 2021.

The Standards describe what good SDS looks like and are intended for use by Local Authorities to support them by providing an overarching structure, aligned to legislation and statutory guidance to guide further SDS implementation and practice. The Plan also includes work to review the existing Standards and ensure they are capturing everything necessary for good SDS.

While we have included them in this Plan to describe what good looks like according to our current understanding, this may change if Standards are further developed.

Rationale for selecting priorities

The Consultation, using responses from around a hundred individuals and organisations, initially led to the collection of around eighty discrete activities proposed for inclusion in this Plan. A number of workshops and discussions held by National SDS Collaboration members has led to the consensus that to be deliverable and manageable within existing resource and capacity constraints, this list of activities needed to be reduced and prioritised.

The proposed table of **themes and activities** also reflect the intention to invest in supported people, SDS systems and in the development and sharing of SDS good practice and tools supporting increased flexibility, choice and control.

Selected for prioritisation are those themes and activities which can⁷:

- contribute to a direct impact for supported people.
- build on, enhance or find synergies with existing work of value.
- align with Scottish Ministers/COSLA social care support priorities (see **Joint Statement of Intent**).
- align with consultation responses gathered in advance of the Plan, and recommendations from, the **Feeley Report** and the **My Support, My Choice report**.

⁷ These have not been used in a formal scoring process, and none of these are weighted.

Themes and activities

Below are listed the key outcomes, themes and activities beginning from the financial year 2023-24 undertaken by local authorities, third sector organisations (including those funded by the Scottish Government such as In Control, Self-Directed Support Scotland, Social Work Scotland, Inspiring Scotland and The Alliance), public bodies and Scottish Government policy teams. This publication may be updated throughout the life of the Plan to reflect future year's activities and relevant reporting progress made within the previous year.

This plan highlights core outcomes and themes for the improvement of SDS based on research, personal and professional experience and wider consultation. The plan aims to set out a national direction of travel by identifying the strategic areas for focused improvement underpinned by the overall shared ambition of improving the experience of accessing SDS, and improving the outcomes of people and carers. Organisations and delivery partners are encouraged to use this plan to consider how these outcomes and themes can be advanced nationally and/or locally. The activities below are examples of specific areas of work that have been identified but are not exhaustive.

1 Supported person and carers' choice and control over their support

1.1 Access to SDS support, brokerage, advice, advocacy and tools

- 1.1.1 Continue to fund independent support and advice through Support in the Right Direction funding.
- 1.1.2 Provision of access to SDS advice, independent advocacy, brokerage and preventative support.
- 1.1.3 Continue to build capacity of supported people and Independent Support Organisations (ISOs).
- 1.1.4 Brokerage: continue to deliver the SQA Award for Brokerage, develop a National Brokerage Framework for Scotland, support practitioner understanding and knowledge of community brokerage and develop the Approved Brokers Community of Practice.

1.2 Improving the availability and flexibility of SDS Options

- 1.2.1 Work to address key barriers to use of SDS Option 2 in Adults' and Children's services.
- 1.2.2 Support provider engagement with Option 2.
- 1.2.3 Develop and roll-out of tools and contractual models for Option 2 to increase workforce confidence and efficiency in offering it.
- 1.2.4 Work to increase flexibility in the provision of in-house and commissioned services when delivering Option 3.

1.3 Increase public information about SDS and improve its reach

- 1.3.1 Promote SDS using agreed common language reflecting good practice, including through information sessions.
- 1.3.2 Ensure SDS communications are in accessible formats. This includes communication about support planning and the promotion and signposting of appropriate tools and language services.

1.4 Support Personal Assistant employers

- 1.4.1 Maintain and develop the Personal Assistant Employer Handbook and related Personal Assistant Employer resources.

2 Enhanced worker skills, practice and autonomy

2.1 Improve SDS Practice Resources

- 2.1.1 Finalise, publish online and promote practitioner toolkit as a guide to SDS practice resources.
- 2.1.2 Update and roll-out of practice guidance to support implementation consistent with the refreshed SDS Statutory Guidance and revised SDS Framework of Standards. See also Theme 4.3 (Standards).

2.2 Social work education and incorporation of practice development for SDS

- 2.2.1 Ensure the principles of SDS are reflected in the emerging post-qualifying Advanced Practice Framework for Social Work, including describing the knowledge, competencies and skills required across the full breadth of social work roles (framework to be launched by OCSWA September 2024, followed by the development of a training plan).
- 2.2.2 Review of current SDS training at both local and national level, consistent with an alignment to the developing Advanced Practice Framework for Social Work (see above).

3 Systems and Culture

3.1 Improved involvement of supported people in planning

- 3.1.1 Review the involvement of supported people and carers in planning and evaluating social care support services and make improvements where identified. Including through the use of Planning with People Guidance and in line with Equal Partners in Care principles.
- 3.1.2 Enabling flexible use of individual budgets in accordance with the supported person's choice, outcomes identified in their support plan and desired degree of control.

3.2 More ethical and equitable processes for commissioning, resource and budget allocation

- 3.2.1 Develop and share good practice on commissioning for SDS, and ensure processes align with the most up-to-date guidance and principles from the Adult Social Care (ASC) Ethical Commissioning Working Group.
- 3.2.2 Work to further develop the flexible use of budgets for short breaks for carers, for example promoting examples where positive outcomes have been achieved, and sharing learning about the flexible use of SDS budgets.
- 3.2.3 Supporting local review, good practice and improvement of Resource Allocation Systems, for example testing of calculation methodology, and sharing learning and good practice more widely.

3.3 Improving referral pathways

- 3.3.1 Work to improve referral pathways by embedding choice and control early in the hospital discharge process, including linking to community-based initiatives and support to facilitate early intervention.

3.4 Effectively mainstreaming SDS principles into relevant policies

- 3.4.1 Ensure that SDS is embedded into key national priorities including NCS, the Promise, Dementia Strategy, Ethical Commissioning and GIRFE themes as they develop, drawing on stakeholder evidence and expertise.

4 Leaders understand and help staff realise SDS principles and values

4.1 Supporting local authorities to ensure principles of SDS are incorporated into local planning and systems

- 4.1.1 Support local areas to embed SDS within relevant local policies and plans reflecting SDS as the way social care support should be delivered, including access to peer support to share learning.
- 4.1.2 Support Local Authority leaders across Scotland to innovate, embed, implement and sustain good practice to ensure that all care groups have access to SDS, incorporating good practice on self-evaluation and evidence on where challenges and opportunities exist.

4.2 Improved data and reporting on information, choice and quality of options to aid planning

- 4.2.1 Improve data-gathering approaches to better determine extent that individuals are accessing their preferred option and their personal outcomes are being met.

4.3 Ensuring leaders are supported through access to shared good practice

- 4.3.1 Review, refresh and promote the SDS Standards. The refresh will use the principles of Equalities Impact Assessment, Fairer Scotland Action Plan and Islands Community Impact Assessment to ensure that they cover all equality groups, care groups including informal carers, islands and diverse geographies.
- 4.3.2 Continue to support local areas to embed the 12 Standards. Where relevant and appropriate, support local authority implementation of SDS Framework of Standards in three priority areas:
 - 4.3.2.1 Standard 3: Relationship- and strengths- and asset-based approaches across care groups and across all four SDS options.
 - 4.3.2.2 Standard 8: Worker Autonomy (particularly in assessment, support planning and determining personal budgets).
 - 4.3.2.3 Standard 12: Access to Budgets and Flexibility of Spend (including improving processes and approaches to approving personal budgets).
- 4.3.3 Consider and develop ways in which the SDS framework of standard may be adapted and used by ISOs to build on improvement of SDS across the whole system.

A number of additional areas of work were suggested and developed as part of the consultation work for this plan which may be considered in future years. Examples include:

- establish a national freecall SDS helpline which can signpost to local independent support organisations, as a transition measure towards the establishment of the National Care Service.
- work to explore credible, legally sound, workable models for pooling budgets so that supported people have the option of combining resources with others with similar needs.
- work to enable relationship-based social work practice within a community-led model of early help and support.
- development of a training framework for PA Employers.

Supporting activities

There are a number of supporting activities which underpin the implementation of this Plan.

- National SDS Collaboration: continue to facilitate the National SDS Collaboration to develop and implement best practice in SDS and support and influence national policy development.
- SDS Community of Practice: continue to facilitate learning and development of SDS approaches within and between local areas.
- SDS Conference: facilitate annual SDS National Voice conference to engage cross-sector partners in SDS developments.
- All partners being willing to share information and data.
- All partners playing a role in publishing or promoting SDS resources to increase awareness amongst supported people, practitioners and support organisations of SDS resources, good practice and guidance.

How the Plan will be resourced

The majority of resource that goes into the delivery and improvement of SDS is determined from local authority budget setting. Additionally, Scottish Government has allocated a total Budget of £7,547,000 for financial year 2023-24 to support SDS Improvement.

This funding will be distributed to delivery partners based on their involvement in the Improvement plan as detailed in individual grant agreements, to be monitored and managed by the Scottish Government SDS Improvement Team. This allocation also includes £3.696m of 'transformation funding' made available directly to local authorities for investment in SDS improvements.

Scottish Government funding for activities beyond the financial year 2023-24, building on Year 1 outputs and new workstreams, will be subject to future budgetary decisions.

Sources of further information about SDS

- SDS Statutory Guidance (updated November 2022): <https://www.gov.scot/publications/statutory-guidance-accompany-social-care-self-directed-support-scotland-act-2013-2/>
- SDS Framework of standards: <https://www.gov.scot/publications/self-directed-support-framework-standards-including-practice-statements-core-components/pages/2/>
- COSLA health and social care: <https://www.cosla.gov.uk/about-cosla/our-teams/health-and-social-care>
- Self Directed Support Scotland: <https://www.sdsscotland.org.uk/>
- In Control Scotland: <https://www.in-controlscotland.org/what-we-do>
- Social Work Scotland: <https://socialworkscotland.org/>
- The Alliance: <https://www.alliance-scotland.org.uk/>
- Inspiring Scotland Support in the Right Direction programme: <https://www.inspiringscotland.org.uk/what-we-do/our-funds/sird-2021/>
- Care Inspectorate SDS Library: <https://hub.careinspectorate.com/resources/self-directed-support-library/>



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