



The Scottish Parliament
Pàrlamaid na h-Alba

Jeane Freeman MSP
Cabinet Secretary for Health
and Sport

Via email only

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Dear Cabinet Secretary

THE FUTURE OF SOCIAL CARE AND SUPPORT IN SCOTLAND

Following publication of the Health and Sport Committee's inquiry report on 10 February 2021, the [Future of Social Care and Support in Scotland](#), the Committee held an additional evidence session on Tuesday 23 February. I am writing to you on behalf of the Committee to highlight the issues raised with us during this session and to ask for a response to these to be included alongside your response to our report.

The purpose of the evidence session was to take views from those involved in delivering and receiving social care and support. We wanted to hear from participants on the recommendations contained in both our report and the Independent Review of Adult Social Care.

The [Official Report](#) from this session provides full details of the discussion.

You will note this was a generally positive session with participants supportive and welcoming of the majority of the recommendations and conclusions across both pieces of work. However, there are some areas on which they offered useful critique and I have highlighted these below.

Implementation

All of the participants expressed concern about the implementation gap. There was a general consensus that the proposals must be carried through as soon as possible, and that this should not just be another positive set of words with little or no action. Self-directed Support was again referred to as an example of well-intentioned policy being let down by poor implementation. The point was made to us that all of the

recommendations in the Review must be treated as being of equal priority and implemented together – they all work together, or they don't work.

Prevention

Much of the discussion related to the need to take a more prevention-focused and holistic approach to social care and support. This agrees with the recommendations in the Committee's report. It was reinforced that social care does not exist in a vacuum, and links must be made to primary care and consider issues such as poverty, homelessness, children's services and the justice system. We heard yet again about the cost-effectiveness of preventive work and avoiding an institutional response. Prevention, collaboration and innovation are crucial to achieving equity and putting people at the centre of their care and support.

Workforce

We heard the Fair Work principles should already be in place and this would address many of the issues facing the social care and support workforce. Whilst there was some difference of opinion on the professionalisation of the sector, we were told those who have skills must be nurtured into the workforce. Proper wages must be paid alongside a career path. We heard there is currently a lack of useful courses, for example working with people with dementia.

Data

Reference was made to the points raised in the Committee's report around data gaps and that effective planning cannot take place with the current lack of information on unmet need.

Pandemic Recovery

Concerns were raised over clinicalising social care, particularly as a result of the pandemic with the introduction of increased infection control measures. We heard care homes have become less homely and more like hospital wards. There was additional concern raised over the ability of some services to survive the financial impact of the pandemic. Data shared with us after the meeting from the [Coalition of Care and Support Providers in Scotland \(CCPS\)](#) states a total of £262 million has been allocated to support social care. You will note CCPS has heard from its members about the challenges experienced by third sector care providers in accessing these resources. Data they have collected shows that as of December 2020, of the £8,021,557 claimed by 32 providers only £3,270,564 has been received. We urge the Scottish Government to seek to resolve the difficulties in accessing the significant resources allocated to social care as a matter of priority.

Finally, we heard there is currently a lack of detail in the Review on national and local accountability and how this will work, as well as the role of the Care Inspectorate.

We have/

We have asked for a response to our report by **Wednesday 17 March** and I would be grateful if a response to this letter can also be included.

Yours sincerely

A handwritten signature in blue ink that reads "Lewis Macdonald". The signature is written in a cursive style with a blue underline for the first letter 'L'.

Lewis Macdonald
Convener, Health and Sport Committee