



## INTEGRATION OF HEALTH AND SOCIAL CARE

### SCOTTISH PARLIAMENT DEBATE

Thursday 15 December 2011

CCPS is the coalition of care and support providers in Scotland. Its membership comprises 70 of the most substantial third sector providers of care and support, supporting approximately 270,000 people and their families, employing over 45,000 staff, and managing a combined total annual income in 2009-2010 of over £1.2 billion, of which an average of 73% per member organisation relates to publicly funded service provision.

CCPS welcomes today's debate and would like to take this opportunity to provide some information for Members of the Scottish Parliament relevant to the issues under consideration.

#### **Care and support in the third sector**

The third sector is at the forefront of quality care and support in Scotland. More than a third of all care and support services registered with the Care Inspectorate are provided by third sector organisations. In many areas of care and support for adults and older people – including care home provision, care at home and housing support – third sector services receive a higher proportion of 'very good' and 'excellent' quality gradings from the Care Inspectorate than their counterparts in either the public or the private sector.

#### **Support for the government's proposals**

CCPS welcomes many of the elements contained in the Cabinet Secretary's announcement regarding health and social care integration. The proposals are based on a number of long-standing principles and policy objectives in this area, including the commitment to shift the balance of care from institutions to the community; to reduce both delayed discharges from hospital and unplanned admissions; to support more older people in their own homes; and to improve the quality of care provided.

These objectives have been adopted by successive administrations in Scotland and many initiatives have been set up to progress them, starting with the Joint Future Group established in 1999. Progress, however, has been limited. We welcome the renewed commitment to these objectives set out in the Cabinet Secretary's statement, and we support the key new elements to be introduced in making progress towards them:

- **Integrated budgets:** whilst some third sector providers are involved in the provision of acute or intensive services, most are placed further 'upstream', contributing directly to the prevention of escalation of need among older people, and consequently to a reduction in demand for more costly acute services later on. The value of third sector support in this respect is not adequately recognised under current arrangements, because the budget of the authority providing the funding for it is not always affected by its consequences. This is another facet of what the Cabinet Secretary refers to as 'cost-shunting' (a term first employed in this context in the (then) Scottish Office policy document, *Modernising Community Care*, also published in 1999). We can therefore see significant value in the proposal for integrated budgets because of their potential to recognise and enhance the role that the third sector plays in keeping older people safe, well and out of hospital. It will be vital that joint commissioning strategies reflect this, and empower the third sector to play to its strengths in

this regard. CCPS has, through its role on the Scottish Government Health and Community Care Delivery Group, indicated that it is ready and willing to play a key role in developing the capacity of partnerships for joint strategic commissioning.

- **Accountability:** health and social care have been subject to a “hands-on/hands-off” approach to accountability, with the NHS driven by central HEAT targets and local authorities working to more individualised outcomes with looser monitoring. Neither have placed sufficient emphasis on the early intervention and ‘upstream’ activity that will reduce demand and impact on outcomes and budgets. A set of jointly agreed outcomes for which partnerships will be accountable within both NHS and local authority structures is a positive step forward: the appointment of a single accountable officer for each partnership is also very positive.

### Issues of concern

CCPS has a number of concerns about the proposals as announced. We recognise that many of these are likely to be addressed as the details are fleshed out and we are looking forward to taking part in that process. Meanwhile we would comment as follows:

- **Nationally agreed outcomes:** we understand why ministers have opted to avoid the upheaval and disruption that would result from large-scale reorganisation, and to focus instead on better outcomes for older people as the key driver for change. However, given that delivery arrangements are to remain a matter for local agreement, a very great deal will depend on the nature of these outcomes and how progress towards them is monitored. We have significant concerns, in this regard, about modeling the change process on the type of outcomes that make up Single Outcome Agreements: in our view, these are not always sufficiently clear or measurable, not enough independent scrutiny is brought to bear in assessing progress towards them, and there appears to be little or no sanction for failure. If the goal is to bring about major identifiable change and improvements to care and support for Scotland's older people, then something much more robust may be required.
- **Self Directed Support:** the government has already published a 10-year strategy for self directed support in Scotland, and intends to legislate for SDS in 2012. It is therefore a matter of concern that there is no mention in the proposal of the role that SDS can play in helping older people to identify the care and support that is right for them. We will seek to ensure that the SDS principles of choice and control are knitted into the integration agenda as the proposals are developed.
- **Wider implications for care and support in Scotland:** we understand why ministers have opted to begin the process of change for older people's services specifically. However we are concerned about the impact on support for other groups – including adults with learning disability and mental health problems, and children and families – if all the priorities and drivers for integration relate to matters such as delayed discharge and shifting the balance of care, which may not be as relevant to other groups. We would not want to see the introduction of two distinct systems emerging, one integrated, and one not; far less, a programme of change with major implications for other groups that is not led by priorities that are relevant to them.
- **Service quality and cost:** we agree that the quality of care and support for older people needs to improve. We have consistently maintained, in our evidence to Scottish Parliament committee inquiries and elsewhere, that the severe downward pressure now being placed on costs in the third sector is likely to have significant consequences for the quality of care and support. We strongly support the recommendation in the Health and Sport Committee report of its inquiry into the regulation of care for older people, that the Scottish Government should examine the merits of extending the powers of the Care Inspectorate in relation to commissioning and procurement, particularly now that joint commissioning is to become a central feature of the programme for integration and reform. Care that is poorly commissioned will pose as much of a risk to older people as care that is poorly delivered.



### **The CCPS agenda for care and support**

- More choice and control for people over the design and delivery of their own care and support, including, wherever possible and appropriate, the ability to direct how resources are spent
- A new agenda for all care and support agencies to foster independence and autonomy, increase wellbeing and promote resilience and self-help
- Greater priority for early intervention that prevents escalation of need and more costly service responses later on
- A better match between the requirements of the regulatory regime, and the agenda for greater choice and control, independence, outcomes and early intervention.

### **Our agenda for a stronger third sector**

- Recognition and respect for the third sector as an engaged partner, not just a contracted supplier
- Funding incentives for high quality support that has a positive impact on individuals, families and communities
- Commissioning for outcomes, not for fixed service volumes based on hourly rates
- Creative alternatives to competitive re-tendering of existing care and support services
- Appropriate reward for a confident, competent and qualified third sector workforce.



CCPS - Coalition of Care and Support Providers in Scotland  
Norton Park  
57 Albion Road  
EDINBURGH  
EH7 5QY

T: + 44 (0)131 475 2676  
E: [annie.gunner\\_logan@ccpscotland.org](mailto:annie.gunner_logan@ccpscotland.org)  
W: [www.ccpscotland.org](http://www.ccpscotland.org)

CCPS is a company limited by guarantee registered in Scotland No. 279913, and a Scottish Charity registered with the Office of the Scottish Charity Regulator (OSCR) No. SC029199