

PE2071/H: Take action to protect people from airborne infections in health and social care settings Scottish Care submission, 28 June 2024

Scottish Care welcomes this opportunity to respond to Citizen Participation and Public Petitions Committee request of the petition PE2071: Take action to protect people from airborne infections in health and social care settings.

It is important to first contextualise our response, Scottish Care is a membership organisation and the representative body for independent sector social care services in Scotland. We represent over 350 organisations, which totals almost 900 individual services, delivering residential care, nursing care, day care, care at home and housing support services.

The requests laid out in the petition are important steps towards better protection for people who work in health and social care and people who access the care and support. As we reflect on the pandemic and prepare for the future, it is crucial to adopt a balanced perspective that emphasises learning from our experiences, leveraging scientific advancements, and respecting the rights and wishes of individuals, families and social care staff.

The pandemic provided a wealth of lessons that we must heed, to better respond to this petition. One primary lesson from this period is the importance of consistency, we cannot have a reapplication of past mistakes. During the pandemic, Scottish Care's members were at the forefront, caring for older people and those with disabilities in residential settings and/or in those individuals' homes. They relied heavily on government advice and epidemiological instruction to keep staff, families and those who accessed their care and support safe. Yet, the impact of following accepted 'clinical' advice was that in practice, in residential settings families were kept apart for unacceptable periods of time and that both staff and residents were not as protected as they might have been. Providers often found the guidance given by the government inconsistent, in part because the accepted 'science' was developing at the same rate as the guidance. This led to continuous U-turns in procedures and regulation, with care providers confused about conflicting accounts and requirements. Ultimately, providers were forced to apply a common-sense ideology plus the latest U-turn in instructions, which inevitably led to inconsistent application across Scotland.

Improving air quality in health and social care settings through addressing ventilation, air filtration and sterilisation is critical to the current and future response. The science which is needed to support this mandate must be clear, consistent and accepted by the key strategic partners in the delivery of care and support. To date, this is transparently not the case. We need to arrive at a context where the requirements around this mandate are co-produced by those who would be required to enforce it, such as care providers, owned by those most affected including staff and families and underpinned by accepted clear scientific evidence.

While science provides a critical foundation for effective response, it must be balanced with respect for individual rights and wishes. This is especially important in the context of mask wearing, which whilst clearly beneficial, has an impact on the wearer and on those who are supported. Respecting personal autonomy and ensuring informed consent are fundamental ethical principles that should guide our actions.

From Scottish Care's engagement with members, many in the sector felt that the pandemic had a negative impact on the recruitment and retention issues that had been slowly increasing over the past decade. The conditions of the pandemic catapulted many skilled and dedicated workers out of the social care sector. Issues of increased workloads stemming from regulatory and oversight pressures led to staff experiencing significant morale and burnout challenges, which stemmed from a continued sense of feeling undervalued and under-recognised for both their individual professionalism and their sector's role. The request and needs of staff must be balanced with the rights of individuals who receive care and support.

Additionally, for families and those who were supported the pandemic brought significant emotional and psychological stress. Not least through the enforced restrictions on visitations, which for instance although developed to prevent transmission, also caused extreme distress. Nevertheless, we recognise that there are many with respiratory vulnerabilities who do not feel adequately supported or prioritised today in an environment which includes little of the pre-existent protective measures and which as a result places them at greater risk. As we move forward policies must strive to balance these at times conflicting needs.

This petition highlights the important role social care continues to play in protecting those who access care and support, especially those who are clinically vulnerable from airborne infections. If this petition is taken forward there needs to be clear, positive, and inclusive routes to ensure the social care and support workforce are not faced with increased responsibility without proper compensation and recognition. In addition, providing adequate protective equipment and mental health support would be essential steps in supporting social care staff while maintaining high standards of care. We support the petition's request to support ill staff to stay home.

The pandemic resulted in a social care landscape of reduced resilience and capacity. There are still concerns currently regarding the future of the social care sector given the need for urgent support and radical reform which values its contribution to society, national wellbeing and the economy. We have consistently outlined that Scotland currently has an unsustainable social care system. Requests to the Government to improve this system have been met with claims that there is no funding which can be allocated to bring forth the required improvements. The requests under this petition will require adequate and consistent funding to be effectively fulfilled. Private and third sector providers who are struggling to maintain their services cannot absorb the necessary costs for new ventilation, air filtration and sterilisation systems, respiratory masks; Covid testing and the financial support for ill staff to stay home. Without the required fiscal support and investment from central Government this proposal will negatively impact the viability of the sector. This could

lead to significantly reduced levels of provision creating an even more fragile social system for people, with less choice for those who need the support and an attendant increased risk.