

POST LEGISLATIVE SCRUTINY OF SELF-DIRECTED SUPPORT – STAGE 2 REPORT	Completed or in-progress	Working towards	Not able to achieve/or other relevant comments
<b>The sector and its staff</b>			
<b>Pressures on social care organisations and the available marketplace of providers</b>			
<p>2. The Committee has heard that an unsustainable social care sector with restrictions on available providers, how services are commissioned and procured, and the financial systems and models of care currently in place is hampering the effective implementation of SDS.</p>	<p>Option 3 framework is flexible and has recently ‘re-opened’ and there has been a successful inclusion of 4 additional option 3 providers.</p> <p>Support to care at home providers in recruitment from AHSCP continues</p> <p>Option 2 development work in progress</p> <p>Payment to provider work ongoing- Model of payments</p>	<p>Option 3 development due to start Summer 2025</p> <p>Option 1 – looking at start up costs for employers, development in rural areas and regulation of self-employed PA’s</p>	<p>There is a lack of social care applicants for post in a saturated marketplace.</p> <p>Lack of choice of resources hampers the true use of SDS.</p>
<p>3. The Committee is of the view that in order to deliver SDS in accordance with the Act, there needs to be a range of social care providers to deliver that care across all regions, in accordance with how people choose to receive their support.</p>	<p>As above</p> <p>Practitioner involved in career events at local schools and colleges to encourage care as a career</p>	<p>As above</p> <p>Development of Pin Point system to support care at home providers to create efficiencies of practice</p>	<p>As above</p>
<p>4. The Committee has heard good practice examples of certain local authority areas offering more choice using a range of different collaborative initiatives – namely through locality planning, community planning structures, and developing consortiums of care. The Committee calls on local authorities and COSLA to:</p> <ul style="list-style-type: none"> <li>• identify areas where there is currently a lack of appropriate resources to offer people the choices they are entitled to under the legislation, and target support in those areas towards developing more collaborative initiatives to address this issue.</li> <li>• embed or mainstream good practice across all local authorities to help overcome the current lack of choice and shortage of providers that exist within certain areas.</li> </ul> <p>The Committee further calls on the Scottish Government to set out how it will ensure national oversight of this process</p>	<p>Option 1 development work completed with a review of how SDS Budgets can be used.</p> <p>Option 2 development work to increase choice, and to reduce bureaucracy, following ethical commissioning practices.</p> <p>Training delivered around person centred approaches, creative support planning and outcomes to operational staff to enhance creative solutions.</p>	<p>Option 3 development work due to start summer 2025 to look at framework- Task and time versus outcomes focused commissioning.</p> <p>Option 1-Employed Personal Assistants (PA’s) development within rural areas, and regulation of Self-Employed PA</p>	<p>There needs to be a National drive on recruitment into care and financial investment to remove competition from eg supermarkets etc</p> <p>IMO areas like Angus, where we struggle to attract ‘big’ providers due to lack of scale, need to think differently as to how we develop the local delivery of social care, in partnership with local</p>

	<p>Peer support sessions and associated MS Teams channel has been set up for operational staff and management in order for them to have a space to discuss good practice in the delivery of SDS, issues and ethical dilemmas to supported people and carers.</p> <p>Review document to note which option people would like, what they have had to choose and why, to determine area's which need further economic development.</p> <p>Regional forums established to look at a multi-agency approach which Angus is actively involved in.</p>	<p>A session will be held with providers in March 2025 to engage on AHSCP Market Facilitation Plan – covering gaps, future developments and how we can target resources most effectively.</p> <p>Review of how to spend your personal budget, to align more with legislation and SDS Standards.</p>	<p>communities and 3<sup>rd</sup> sector interface.</p> <p>We also need to start challenging the premise that the 'market' and competition deliver results.</p>
<p><b>Social workers: Education and training for social work staff</b></p>			
<p>5. The Committee has heard evidence that a lack of knowledge and understanding of the principles of the Act, among key staff – both social work staff and others involved in decision making – is having a substantial impact on how social care is organised and delivered and is contributing to the poor implementation of SDS.</p>	<p>In-person training delivered this year on SDS, including the principles to social work/care staff from operational teams.</p> <p>In person and online training delivered to operational teams on person centred approaches, equal conversations, creative support planning, and personal outcomes to enhance workers knowledge around principles of SDS legislation.</p> <p>Online training now developed based on Person Centred Approaches training sessions to</p>	<p>SDS E-learning to be updated for use across all key staff involved in decision making, and to be added to induction packs.</p> <p>Operational instructions and guidance has been reviewed, updated, and shared to support practice</p>	<p>This needs to form part of induction to <b>all</b> CFJ and AHSCP staff, and particularly NQSWs.</p>

	ensure consistency of training for new staff.		
6. The Committee understands that social work students are expected to achieve a practical understanding of SDS as part of placement-based learning. However, the Committee has been concerned by evidence that, when it is supposed to be the mechanism for delivery of all social care in Scotland, SDS does not consistently form part of the taught curriculum for social work students in Scottish educational establishments. The Committee calls on the Scottish Government to establish the extent to which SDS is taught within Scottish educational establishments and, if there are gaps, what plans it has to address these.			Is there an opportunity for non-statutory placements to explore opportunities with LA's to look at pieces of joint working to provide learning re SDS. Could SDS lead input into curriculum?
7. The Committee has heard evidence that significant learning takes place during the post-qualification period for newly qualified social workers (NQSWs). The Committee recommends that all NQSWs are routinely given access to continued support and development as part of the post-qualification period that specifically focuses on delivering the principles of SDS using relationship-based practice. The Committee calls on the Scottish Government and the Scottish Social Services Council to ensure this is an integral part of the NQSW Supported Year in Scotland.	Angus has a Snr Planning Officer who had a dedicated function to support newly qualified social workers in Angus HSCP and Council.  NQSW's included in roll out of training/ SDS is included in induction and job shadowing of colleagues to gain experiential learning		
8. The Committee has further heard that many local authorities are applying a care management model approach to social work, whereby social workers act as brokers arranging services based on defined procedures. Where such an approach is utilised, it is in place of engaging with individuals to build relationships and deliver flexible needs-based support focused on building resilience and prevention in communities. In order to fully realise the principles of the Act, it is clear that a more relationship-based approach to social work practice is required. The Committee calls on local authorities to set out what actions they will take to facilitate a shift in social work practice in their areas towards a relationship-based model. The Committee calls on the Scottish Government to set out how it will ensure national oversight of this process.	In-person and online training sessions on Person-centred approaches has been delivered this year, and the beginning of next year to support operational teams to focus on outcomes  Snr Planning officer for SDS involved in Social Work Scotland's Relationship based practice subgroups.  Social work staff who were previously referred to as Case	Continue with training on person centred approaches.  Start the roll-out of GIRFE Training for AHSCP staff and embed the GIRFE Toolkit into assessment practice to strengthen relationship-based practice.	

	<p>Managers, have now been re-named as Social Workers.</p> <p>Peer support sessions and associated MS Teams channel has been set up for operational staff and management in order for staff to have a space to discuss good practice in the delivery of SDS, issues and ethical dilemmas to supported people and carers.</p> <p>Case file audit framework in place identifies good practice, relationship-based practice/creativity</p>		
9. The Committee further asks the Scottish Government to set out to what extent, and how, it intends to exercise national oversight to ensure social workers are permitted the necessary time to be able to undertake assessments using relationship-based practice as a mechanism for ensuring the principles of the Act are consistently delivered across the country.			
10. In order to establish more collaborative systems and processes, the Committee also calls on COSLA and other relevant stakeholders to ensure that all staff in local authorities who are involved in SDS decision-making are required to undertake appropriate training on the legislation and the principles that underpin it. In addition to social work staff, this should include finance and administration staff, managers, those involved in commissioning and procurement, and councillors.			
<b>Social workers: Fair work for social work staff</b>			
11. During its scrutiny, the Committee has heard evidence that social workers face a number of constraints which prevent them from taking a relationship-based approach to their work in a way that would enable them to fully implement the principles of SDS. The Committee has also heard evidence that the consistently high level of complex and crisis work social workers are currently being required to undertake is leading to stress and burn-out and causing many to leave the profession, contributing to a vicious cycle which means there is less capacity in the system to support those remaining.	<p>All workers receive regular 1:1 supervision and annual appraisal, frequency is increased for NQSW's</p> <p>Beam Magic notes to be trialled in Angus next year to free up more time for practitioners to spend with supported people in</p>	<p>Do we have any future plans for restricted case load numbers? We're able to embed this in CFJ at present, however, budget constraints could impact on future recruitment if any vacancies.</p>	<p>Budget constraints- Unable to recruit more staff? Yes, this is an organisational risk.</p> <p>Social work recruitment issues nationally: We were involved in Stage 1 and across the board the committee heard that Social Care &amp; Social Work</p>

	<p>the community and less time with admin tasks.</p>	<p>Development of more early intervention and prevention to manage crisis: This is something we are actively looking at – we’ve had some success this year but intention is to review this to see how we can develop this further into 25/26. Again though, budget constraints may impact.</p> <p>Increase joint working opportunities with Voluntary Sector to support early intervention and prevention</p> <p>Developing an option appraisal currently to consider 7 day working across all MH community services</p> <p>AHSCP has put itself forward with the Care Inspectorate for Phase 2 Workstream 4 – Early Intervention and preventative practice within ASP – AHSCP will find out in Jan 2025 if it will be part of the Phase 2 work.</p> <p>Review of caseload numbers against setting the bar recommendations.</p>	<p>recruitment was a significant issue across the whole system</p>
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<p>12. The Committee calls on the Scottish Government to provide an update on its plans to apply fair work practices to the social work profession, alongside detail of specific mechanisms it has introduced or plans to introduce to listen to and support social work staff. Given the significant challenges around retention of social workers, the Committee believes the Scottish Government should consider the application of fair work practices to social work as a high priority and calls on the Scottish Government to set out a plan and associated timetable for achieving this.</p>			
<p>13. The Committee believes that commissioning and strategic planning processes need to ensure that social workers are consistently able to arrange care in accordance with people's choices under the Act. The Committee further calls on the Scottish Government to set out more broadly what it plans to do to improve commissioning, funding and fair work for social work staff to ensure this can happen.</p>	<p>Option 2 development work to ensure social workers can arrange care based on the person's choice. Purchase goods/items. New process developed.</p>	<p>Further option 3 improvement work to follow in Summer 2025.</p>	<p>Lack of choice of resources hampers the true use of SDS.</p>
<p><b>Consistency</b></p>			
<p><b>National Consistency: Information, advice and support</b></p>			
<p>14. During this scrutiny, the Committee has heard that there is a lack of national consistency in relation to information, advice and support to ensure fair and equitable access to social care through SDS. The Committee recommends that the Scottish Government issues further guidance to all HSCPs to ensure there is a significantly improved level of consistency in communication of information, definitions and use of language to describe SDS.</p>			
<p>15. The Committee's scrutiny has revealed a lack of public awareness about what social care, and SDS, is and how it works. The Committee agrees with stakeholders that there should be an online one-stop resource for people who may need to access support with SDS and calls on the Scottish Government to establish such a service, accompanied by regular campaigns to promote it. This would be a huge benefit to people who require social care support and want to understand more about SDS.</p>	<p>We have reviewed and updated our external website to provide national information along with local process information on SDS for the public to access easily.</p>		<p>A one-stop shop for SDS information would be hugely beneficial as this would provide more consistency across the LA's/Partnerships.</p> <p>Promotion of SDS across Scotland would also be hugely beneficial as there are still lots of people who do not know what SDS is and that they may be eligible for this support.</p>
<p><b>National Consistency: Funding</b></p>			
<p>16. The Scottish Government has identified a number of key priorities and activities, as part of its Improvement Plan, which it states will move "social care and support further towards delivering fully on the SDS principles".</p>			<p>Progression of NCS increases the risk here by directing</p>

<p>However, the Committee has heard concerning evidence that the Improvement Plan is currently significantly underfunded and, if unaddressed, believes this will continue to hinder the full implementation of SDS.</p>			<p>valuable resources away from LAs and HSCPs.</p> <p>Increased Fiscal pressures on Local Authorities and Partnerships alongside National care Home Contract and changes to National Insurance contributions have had a significant impact on commissioned services in Care Homes and Care at Home. This creates pressure on the implementation of SDS.</p>
<p>17. The Committee has also heard significant evidence on wider funding constraints and considerations and underfunding in the social care system, and recognises the Minister's commitment to increase social care funding. However, it believes that until additional resourcing of the Improvement Plan is secured, the ambition to fully implement SDS, as the delivery mechanism for all social care in Scotland, will remain nothing more than an aspiration</p>			<p>See "16." above</p>
<p>18. From the evidence it has heard, the Committee also has concerns that the allocation of funding within the Improvement Plan may not be optimal to achieve full implementation of SDS. While independent advocacy and the provision of information are important, this appears to be the primary focus of funding, whereas, for SDS to work as intended by the legislation, greater priority should be accorded to improving the underlying fundamentals (improving the sector, addressing issues around workforce recruitment and retention, fair work and staff training, enhancing consistency in various areas, and reviewing and improving local authority processes and implementation). With this in mind, the Committee calls on the Scottish Government to ensure resourcing of the relevant activities in the Improvement Plan is suitably prioritised.</p>			
<p><b>National Consistency: Eligibility criteria and the Options</b></p>			
<p>19. The Committee has heard extensive evidence that changing eligibility criteria as a result of budgetary constraints and funding restrictions is preventing HSCPs from effectively meeting people's care and support needs under SDS.</p>	<p>We have reviewed our HSCP Eligibility Criteria, where we are now providing support to those of critical or substantial need. This can restrict the amount of support that can be provided</p>		<p>Increased Fiscal pressures on Local Authorities and Partnerships alongside National care Home Contract and changes to National Insurance contributions have</p>

	<p>through SDS budgets for early intervention and prevention work.</p> <p>Work is continuing with Voluntary organisations re the input they can provide for early intervention and prevention work</p>		<p>had a significant impact on commissioned services in Care Homes and Care at Home. This creates pressure on the implementation of SDS.</p>
<p>20. The Committee has concluded that the current eligibility criteria are not working and, as currently applied, contradict the aims and principles of SDS. To address this issue, the Committee believes that the model of social work needs to change from the current model of care management to a model of relationship-based practice and that individualised, means-tested assessments that use eligibility criteria need to be replaced with community-based services that are properly responsive to individuals' choices and preferences.</p>	<p>Person Centred Approaches training delivered to operational staff focusing on outcomes.</p>	<p>Continue to deliver Person centred Approaches training, focusing on outcomes.</p> <p>AHSCP has recently updated the Eligibility Criteria Guidance – ensuring it is fully aligned to the National Eligibility Criteria written by Scottish Government and COSLA in 2009 and this has been rolled out across Teams.</p> <p>To deliver this, many areas may need to bring more services 'in-house' particularly where the 'marketplace' is not delivering.</p>	<p>To deliver this, many areas may need to bring more services 'in-house' particularly where the 'marketplace' is not delivering.</p> <p>Eligibility criteria supports the use of resources to ensure that those most in need have access to services. By ensuring that all partners in 3<sup>rd</sup> sector have an understanding of the use of SDS service user outcomes don't need to be just met by local authorities.</p>
<p>21. The Committee recognises that the Scottish Government is working with COSLA to review eligibility criteria as part of the National Care Service programme of reforms. The Committee asks the Scottish Government to provide an update on this work, including setting out the detail of discussions and related decision making, alongside timescales for action.</p>			<p>Agree this need to be reviewed nationally.</p>
<p><b>Local authority implementation: Processes - assessment</b></p>			
<p>22. The Committee has heard evidence of significant variability in implementation of SDS between different HSCPs. While some areas have been developing SDS policies and procedures based on the original SDS strategy that pre-dates the Act, others do not have such policies and procedures in</p>			<p>This issue is about the consistency of approach across the country so there is no 'postcode lottery' and</p>



<p>place over a decade after the legislation was introduced. This means that the experience of accessing social care can be very uneven. Although recognising that a move to a different area presents an opportunity to reassess someone's needs and outcomes in a new context and environment, the Committee has concluded that the process of transition needs to be transparent, timely and fully supported by both authorities to ensure that a person's autonomy is preserved and respected in any changes to support. The Committee therefore calls on COSLA and Health and Social Care Scotland to set out what it is doing, or plans to do in future, to minimise such variability and to <b>smooth transitions for those individuals moving from one HSCP area to another.</b></p>			<p>transfer (transition) of individual's and their packages from one LA / HSCP to another.</p>
<p>23. The Committee is equally concerned by stakeholder reports that some local authority processes are seen to work against the principles of SDS. As part of ongoing work on the improvement plan, the Committee therefore calls on COSLA and Health and Social Care Scotland, as a matter of priority, to undertake an evaluation of all HSCPs to ensure local processes are universally consistent with SDS principles.</p>	<p>A Snr Planning Officer was appointed in August 2023, dedicated to improving SDS across the council and HSCP including reviewing or planning for SDS policies and procedures.</p> <p>Development of SDS policies, procedures and training has been ongoing to provide consistency of SDS across teams and practitioners internally in Angus.</p> <p>Option 1 Guidance  SDS Operational Instruction  Your Carers Budget Guidance  PA Rates policy and guidance  CSWO Operational Instruction for employment of Guardians or Power of Attorneys as PA's  Maintenance of equipment guidance</p> <p>Work on Budget Guidance, to make sure this is more in-line with SDS legislation and principles.</p> <p>Promotion of SDS Framework of Standards to all operational staff</p>	<p>Development of SDS polices and procedures to continue to support all staff delivering SDS, and involved in decision making.</p> <p>SDS Option 2 Guidance  SDS Option 3 Guidance  PA Rates policy and guidance  Direct Payment start-up costs for PA employers' policy and guidance</p> <p>Foundations of Practice work to scope issue in practice and focus future improvement work to increase time for practitioners with people they support</p> <p>A teams channel has been established to allow practitioners an opportunity to share practice and ask questions re SDS</p>	<p>Our eligibility criteria disadvantages those in rural settings due to the cost of care delivery. We need to look at this.</p>

	Peer Support group to support with SDS principles within local processes.		
24. Following this evaluation, the Committee further calls on COSLA and Health and Social Care Scotland to systematically identify areas of best practice and ensure there are opportunities to share these across all HSCPs (including related opportunities for additional training, improved processes and mentoring). The Committee calls on the Scottish Government to set out how it will ensure national oversight of this process.			Better practice or good practice – one area’s ‘best’ practice may not fit for another area.
<b>Local authority implementation: Processes - complaints</b>			
25. The Committee has heard that people accessing social care feel they are unable to challenge decisions about their social care provision, especially where the care they receive may not correspond to what was discussed as part of the assessment process.	<p>Implementation of Care Opinion</p> <p>Complaints procedure in place to deal with complaints received which are in regard to SDS delivery.</p> <p>There is an SDS spend panel in place which allows for review of decisions – there is independent representation on the panel</p>		
26. The Committee is of the view that, to ensure proper implementation of SDS in accordance with its principles, there needs to be a formal complaints process for social care that is consistent across all HSCPs. This should form part of an iterative process, where decisions around complaints then feed back into the care review system, following a continuous improvement model.	Consistent approach to complaints, learning from complaints is fed into support and care group with is held monthly, and actions agreed for improvements.		Comment from CJS ‘They generally already are, in my experience having worked across 3 areas in recent years’
27. In this context, the Committee refers the Scottish Government to the recommendations it has made on the subject of complaints as part of its Stage 1 report on the National Care Service (Scotland) Bill.			
28. The Committee further concludes that, to be effective, any such complaints process needs to be clear, transparent and properly publicised so that individuals are able to make effective use of it and requisite lessons are learned to ensure progressively improved implementation of SDS over the long term.	<p>Complaints are accessible through various means in Angus.</p> <p>We have a consistent approach to complaints, and our learning from complaints is fed into support and care group and actions agreed for improvements</p>		
<b>Local authority implementation: Processes - finance and budgets</b>			

<p>29. The Committee's scrutiny has highlighted a lack of transparency and accountability around funding decisions related to SDS. The Committee believes that HSCPs should be funded to deliver social care in line with the Act, and the Scottish Government has a responsibility to ensure that HSCPs allocate appropriate budget in order to deliver on social care commitments. The Committee asks the Scottish Government to set out how it intends to address these issues to improve the delivery of SDS.</p>			<p>Throughout, there's no recognition of the impact of austerity and the funding constraints of the past decade</p> <p>Increased Fiscal pressures on Local Authorities and Partnerships have had a significant impact on the delivery of SDS.</p>
<p>30. The Committee is aware of stakeholder concerns that staff involved in financial and budgetary decisions on SDS may not be fully aware of their obligations under the Act. The Committee calls on COSLA to ensure there is better collaboration between finance and accounting staff and those responsible for establishing social care and support needs, across all local authorities. This will help to ensure resulting support better reflects people's outcomes and will help enable local authorities to fully realise the principles of SDS.</p>	<p>It is always the aim to ensure that finance and accounting roles are involved in SDS improvement work.</p> <p>Finance and Accounting staff are part of support and care and are represented on groups to improve processes</p>	<p>SDS E-learning to be updated for use across all key staff involved in decision making.</p>	
<p>31. The Committee has heard evidence that in order for SDS to be properly implemented in accordance with the legislation and the underlying principles, there needs to be greater flexibility in funding and budgetary arrangements. The Committee calls on the Scottish Government to explore how greater flexibility might be promoted, for example, by allowing for greater pooling or annualization of budgets.</p>			<p>Procurement legislation to be looked at in line with SDS legislation to make opportunities for more flexible use of budgets</p>
<p><b>Local authority implementation: Leadership and culture</b></p>			
<p>32. During its scrutiny, the Committee has heard extensive evidence that, although the legislation has been in force for more than a decade, the existing culture, and by extension leadership, within HSCPs remains a barrier to effective implementation.</p>	<p>Agreement for funding at local level for an SDS lead has allowed for improvement work</p>		<p>The 2013 Act was not enabled to embed, with local areas having to move into the integration of health and social care, particularly as the 2016 Act re integration did not 'talk to' the 2013 Act</p>
<p>33. The Committee has concluded that the current underlying system of social care delivery based on individual assessment, eligibility and transactional care contracts is incompatible with the principles of SDS and that this makes it difficult, if not impossible, for leadership at a local level to cultivate the appropriate ethos and culture for the SDS principles to become a reality.</p>	<p>In-person and online training sessions on Person-centred approaches has been delivered this year, and the beginning of next year to support operational teams.</p>		<p>National training to be made available for leadership and development sessions for system and culture change?</p>

<p>34. The Committee therefore calls on:</p> <ul style="list-style-type: none"> <li>• COSLA and other national partners to explore how that underlying system of social care delivery needs to change in each local authority area in order to become compatible with SDS principles;</li> <li>• each local authority to evaluate what actions are needed within their area to shift the culture around SDS to ensure the principles of the Act are fully realised;</li> <li>• the Scottish Government to set out what it will do, as part of the proposed National Care Service, to embark on a programme of 'culture change' that enables local authorities to deliver social care consistently in accordance with SDS legislation and principles.</li> </ul>	<p>In-person and online training sessions on Person-centred approaches has been delivered this year, and the beginning of next year to support operational teams.</p> <p>SDS Peer Support Forum set up with additional MS Teams channel to support staff with SDS Principles and best practice and a safe and supportive place to challenge culture/processes, and to impact future development work</p> <p>Scoping exercise to be conducted with operational teams, to find issues and themes for improvement.</p>	<p>Focused training on Personal Outcomes based on SSSC booklet designed and shared with staff</p> <p>Evaluation and improvement work to be designed with all HSCP and council staff and leaders to identify actions to improve the realisation of SDS principles at all levels of the organisation to promote an improved culture.</p>	<p>The NCS isn't a panacea – had this investment been made from the outset of implementation of 2013 Act and subsequent 2016 Act, more progress would have been made. SG should be investing in the established provision in place.</p> <p>We also seem to have missed the fact that Covid impacted on the review of integration authorities, which then got derailed by the review of adult social care.</p>
<p><b>Commissioning and tendering</b></p>			
<p>35. The Committee has heard worrying evidence of a gap of communication and understanding between strategic commissioners and the social work services tasked with arranging social care. The Committee would expect it to be the norm that strategic commissioners within authorities were fully aware of available services and support needs in their local area, and were capable, on that basis, of identifying various ways to commission care more creatively. This does not appear to be the case in all areas, from the evidence the Committee has heard during this scrutiny.</p>	<p>Commissioning colleagues in the HSCP are fully involved in SDS improvement work and actively identifying new ways to meet the needs of people in Angus. Most recently in the Option 2 improvement work and reopening option 3 framework.</p> <p>Strategic decision-making group made up of all relevant roles in the HSCP will help establish more robust, collaborative improvement decisions with procurement and commissioning colleagues included.</p>	<p>Data collection, to assess the choices people are making against the choices they want, to focus development moving forward.</p> <p>Standing orders/Financial regulations to be reviewed to make sure these are in line with SDS principles and values, to ensure flexibility and creativity in all options under SDS.</p>	
<p>36. The Committee would expect that commissioning and procurement of social care would enable people to meaningfully choose an Option under the</p>	<p>As above</p>	<p>To review standing orders/financial</p>	

<p>legislation and that HSCPs would ensure their care is organised and delivered in the way that they choose. However, contrary to this expectation, the Committee has also heard that current approaches to commissioning can restrict people's choices, meaning that some Options under the SDS legislation are effectively unavailable to some people seeking care and support.</p>		<p>regulations to ensure these are in line with the principles of SDS and allow enough choice under all the SDS options.</p> <p>Option 3 development work is planned for summer 2025 to look at current commissioning approaches to social care provision.</p>	
<p>37. The Committee calls on each local authority to undertake a review of commissioning and tendering processes in relation to social care in their area and, informed by its findings, to develop an action plan with the aim of enhancing flexibility and removing unnecessary restrictions on choice for individuals and thereby improving the implementation of SDS. The Committee further calls on the Scottish Government to set out how it will ensure national oversight of this process.</p>	<p>HSCP have this in place through third party meeting. Example of reopening option 3 framework</p>	<p>Review to be organised on commissioning and tendering processes in relation to social care in Angus.</p>	
<p>38. The Committee is convinced that poor commissioning and procurement practices have resulted in transactional commissioning and time and task approaches to care delivery. The Committee has heard evidence that establishing collaborative commissioning models and developing a marketplace of providers could lead to substantial improvements in implementation of the Act. The Committee calls on COSLA and Health and Social Care Scotland to ensure examples of best practice in these specific areas are disseminated across all HSCPs and local authorities.</p>			
<p>39. The Committee has concluded from its scrutiny that, in order to be successful, any reforms to commissioning and procurement brought about by the proposed National Care Service need to have SDS principles at their core. The Committee therefore calls on the Scottish Government to set out precisely how it will ensure this is the case.</p>			<p>It would be good to hear from the SG outlining the financial costs of implementation of the NCS and being clear of the reasoning of re-dedicating investment to NCS, rather than supporting the developments highlighted by committee.</p>
<p><b>Monitoring, accountability and transparency</b></p>			
<p><b>Data collection: Priorities for monitoring and evaluation</b></p>			
<p>40. The Committee is concerned that there was no baseline or benchmarking undertaken, and no clear plan produced, on how to monitor or evaluate SDS</p>			<p>LA's were given no time to embed SDS due to the</p>

when the legislation originally came into force. The Committee is further concerned that despite numerous calls to address the lack of monitoring and evaluation data around SDS, including through Scottish Government commissioned research, very little progress has been made over the last decade.			immediate step into the integration agenda – there was no long term strategic thinking around this by SG, who also failed to put SDS at the heart of integration.
41. The Committee notes the commitment to produce a monitoring and evaluation plan as part of the current SDS improvement plan but regrets that this is still not forthcoming despite previous commitments that it would be "developed later in 2023". The Committee is firmly of the view that, to achieve meaningful improvement in the implementation of SDS going forward, there is a requirement to develop a comprehensive monitoring and evaluation plan for SDS as a whole. The Committee calls on the Scottish Government to develop and roll out such a plan as a matter of urgency.			
42. As an integral part of such a comprehensive monitoring and evaluation plan for SDS, the Committee suggests the Scottish Government should include research into: <ul style="list-style-type: none"> <li>• the levels of unmet need in relation to social care across the country, including as this relates to those not receiving care and support as well as those who currently do.</li> <li>• whether people’s outcomes are well defined, whether they have been achieved and the challenges they have faced in accessing social care and support.</li> <li>• Social worker experiences, including any specific challenges in assessing SDS and organising delivery of social care.</li> <li>• Local authority practices and processes surrounding SDS.</li> </ul>			Consistency of reporting of unmet need across all areas is needed
<b>Data collection: Learning, improvement and good practice</b>			
43. The Committee has heard encouraging evidence of good practice in certain areas to improve the implementation of SDS on the ground. However, it is concerned that participation in improvement work may be self-selecting, meaning that in those areas where improved implementation of SDS is most badly needed, there is little or no learning or improvement work taking place.			
44. The Committee therefore calls on the Scottish Government to develop a proactive plan to identify areas of particularly poor performance and to support these areas to develop their own improvement plans, underpinned by good practice in better performing areas.			
<b>Data collection: Oversight and accountability</b>			
45. The Committee firmly believes that, to ensure proper implementation of SDS going forward, there is an urgent need to establish a process of national			

oversight and clear lines of accountability as part of a significantly improved approach to monitoring and evaluation of SDS. The Committee calls on the Scottish Government to set out how it will achieve this.			
<b>Alignment of policy and legislation</b>			
46. The Committee recognises that the legislative and policy landscape has changed significantly in relation to social care over the last decade. In particular, the Committee has heard stakeholder concerns that the process of health and social care integration has diverted attention and resources away from successful implementation of SDS. The Committee has also heard stakeholder concerns that the creation of a National Care Service will similarly divert resources away from front-line social care delivery and the implementation of SDS. The Committee calls on the Scottish Government to ensure that the principles of SDS are placed at the heart of all social care delivery in Scotland, whether that is through the National Care Service or other ongoing integration.			
47. The Committee also recognises that understanding of SDS is not well established across all relevant policy areas. The Committee is of the view that the principles of SDS need to be better aligned with the mechanisms and duties that local authorities have to work with, or alternatively, as is suggested by this post legislative scrutiny, those mechanisms (commissioning, procurement, eligibility criteria), and duties (means testing and assessments) must change to enable better alignment of principles and practice. The Committee calls on the Scottish Government to set out how it will ensure SDS is properly integrated and understood within other related policy areas.			National training needed to provide consistency
<b>Conclusions</b>			
48. During this scrutiny, the Committee has reflected that those seeking care and support do not always know or distinguish between the different Options, and that the focus on the Options in both staff training and development, and data collection can be misplaced. From the evidence it has gathered, the Committee has concluded that, to achieve successful implementation of SDS in accordance with its underlying principles, there needs to be a shift of emphasis away from the four Options set out in the Act and towards those underlying principles of choice and control and, ultimately, achieving positive outcomes for individuals.			There is some agreement with this concern, however, there is a statutory duty to explain the 4 Options, so it may not be surprising this is the focus.
49. The Committee recommends the Scottish Government produces updated guidance on the implementation of SDS to provide a framework that focuses on creative and flexible ways of achieving positive outcomes for individuals, informed by good practice and which is not solely focused on the original four Options. As examples, the Committee suggests this could include focusing on relationship-based support, ethical and collaborative commissioning models,			Lots of work has been done by Social Work Scotland on SDS improvement plan Suggest that there should be audit for SDS implementation within each LA/HSPC in

and developing sustainable marketplaces of providers through initiatives to promote greater collaboration.			Scotland to develop specific local implementation/improvements to be made
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