**NATIONAL SELF-DIRECTED SUPPORT COLLABORATION**

**NOTE OF MEETING**

**In attendance by video conference:**

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| Donald Macleod (SDS Scotland) (chair) | Les Watson (Personal Assistants Network) | Emma Miller (Personal Outcomes Network) |
| Jeremy Adderley (SDS Scotland) | James Carle (Scottish Care) | Des McCart (Healthcare Improvement Scotland) |
| Mark Han-Johnston (SDS Scotland) | Pauline Lunn (In Control Scotland) | Kevin Drugan (Glasgow Centre for Inclusive Living) |
| Margaret Petherbridge (Falkirk HSCP) | Alistair Minty (In Control Scotland) | Lou Close (researcher for In Control Scotland) |
| Claire Roxburgh (East Ayrshire HSCP) | Jill Fraser (Inspiring Scotland) | Sophie Lawson (Glasgow Disability Alliance) |
| Roddy Huggan (Moray HSCP) | Innes Turner (Care Inspectorate) | Fran Holligan (Convention of Scottish Local Authorities) |
| Jen Grundy (Edinburgh HSCP) | John Skouse (Care Inspectorate) | Karin Heber (Scottish Association of Social Workers) |
| Jan MacLugash (People-Led Policy Panel) | Nicoletta Primo (Sight Scotland) | Gordon Dodds (Scottish Government/Dementia) |
| Jane Kellock (Social Work Scotland) | Becs Barker (Community Contacts) | James McNulty (Scottish Government/SDS) |
| Donna Murray (Social Work Scotland) | Calum Carlyle (Social Work Scotland) (minutes) |  |

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| **Welcome** | **Actions**  |
| **Actions From Last Meeting**SWS/SDSS to collaborate on a web page to host documents and news pertaining to National SDS Collaboration – done, presentation in this meeting.Working Group to be set up to create a plan to support implementation – to be discussed in this meeting.Apologies noted from Louise Morgan, Martin Kettle, Pauline Nolan, Anne-Marie Monaghan, Sharon Mcleod, Joyce Campbell, Robert White, and Andy Miller.  |  |

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| **National SDS Collaboration** | **Actions**  |
| **National SDS Collaboration Online Space –** Jeremy and Donald of SDS Scotland have put together [a prototype web page](https://www.sdsscotland.org.uk/national-sds-collaboration/) to give an idea of what is possible. At the moment it has some background on the SDS Implementation Plan and the national SDS collaboration. There is an area for key resources, currently containing several relevant documents including [a terms of reference](https://www.sdsscotland.org.uk/nsdsc-working-group-terms-of-reference/) for the Implementation Plan working group. There are sections on Resources, Governance, Secretariat and other details, and a link to [a thread on the SDS Forum](https://forum.sdsscotland.org.uk/t/implementation-plan-working-group/431) for group discussion. The discussion in the forum will also appear on the National SDS Collaboration page, along with the other content relating to the group. Registration to participate in the discussion forum is fairly easy and [all group members are encouraged to do so](https://forum.sdsscotland.org.uk/) if and when they wish to participate. The level of notifications is also fairly configurable, where you can watch and be notified about specific topics and discussions. The page has a space for documents as well, eg minutes of previous meetings, and there are a couple of documents there now as an example. Comments from the group were generally positive, specific comments include:* Has the webpage been checked for accessiblity with screenreaders and downloadable documents in word format (as opposed to PDF)?
* The SDS Scotland website works pretty well with screenreaders, and this is part of that website. When documents are received in PDF format, there can be issues with converting them, but generally we can create Word documents, and maybe even input minutes and agendas directly into the site rather than attached as documents.
* If there is an option to make the text larger on the page too that would be great. not all websites have that function though
	+ - The usual controls (Ctrl+ and Ctrl-) work with this website, and with existing screenreading
* Can we add in that links with all partners is key, including COSLA and SG, rather than **only** COSLA and SG? Also, it's 'Ian' rather than 'Iain' Thomson.
* Having a table with links sounds really useful, rather than a big page full of logos. Maybe this can help us identify any 'gaps' in representation (eg Advocacy services and certain 'groups' of people)
* I rather like the shared logo that you have provided.
* I agree, the current logo being used looks fine and would save clutter by trying to include all logos.

**National SDS Implementation Plan Steering Group Remit -** The key function of the Implementation Plan Working Group is to develop a National Self-Directed Support Implementation plan, based on the Self-Directed Support Strategy, to ensure cohesive implementation of SDS. This will support the transition from the current situation to the point of delivery of the National Care Service, dovetailing with the objectives and delivery vehicles therein and influencing that development. The group will do this by:* identifying the role of each stakeholder
* Identifying delivery structures, and how they connect to implement good practice
* Conducting a review of the previous implementation plan structure, identifying gaps and future need
* Focus on three established main delivery components: Leaders and systems, Workforce, People
* Establishing the means to understand progress, through Social Work Scotland’s SDS Community of Practice and other sources of evidence
* Identifying the required elements of a comprehensive and integrated data gathering and management system, to feed into national planning

The Implementation plan was circulated to the group, but it was felt that members would like to look at it more thoroughly and discuss at the next meeting. This item was carried over.  |  |

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| **Option 2 Report** | **Actions**  |
| In Control Scotland have recently published their report “[How are we doing with Option Two/Individual Service Funds](https://www.in-controlscotland.org/newpublications)”. Lou Close and Pauline Lunn presented some highlights from the report (see attached slides). The research is into Health and Social Care Partnership (HSCP) experiences of implementing option two of Self-Directed Support. Option two is often referred to as the ‘best of both worlds’, with people having full choice and control over how support is arranged, without the need to become an employer, but uptake has been relatively low since it was introduced. Over the years there have been many case studies of individuals and families using option two to live good lives, but very little information published about how HSCPs had actually made this happen through their practices, policies, and processes.This research, carried out by Lou Close across 6 HSCPs, was designed to begin to fill this gap in the evidence, looking at the changes that had taken place to fully embed option two and make it a reality for people in these communities, with the hope of sharing learning that makes option two more accessible to everyone across Scotland. The research looked at the challenges they faced, as well as highlighting good practice in finding solutions to these challenges. The report includes 6 recommendations to improve peoples’ experiences of option two:1.To revisit the definition of option two so that there is a consistent starting point in all areas which matches the expectations of Scottish Government as clearly set out in the SDS Act and Guidance, and to implement mechanisms through the regulation and inspection process to ensure compliance with this.2. To build support plans around outcomes and not units of time, with a dedicated piece of work initiated at a national level to properly apply the principle of an up-front allocation of resource, which people are fully enabled to choose to spend on meeting their outcomes.3. To positively and proactively incentivize provider engagement with option two, by working at a national level to understand the barriers to providers fully engaging to manage option two budgets, and then to proactively address this.4. To agree a national standard in relation to whether Individual Service Funds (ISFs) should be held and managed by the local authority.5. To undertake work at a national level to identify and address the key blockages to real change in the commissioning landscape. This should include a shift in thinking away from frameworks as the default approach for all options to allow for more individualised support across all groups and greater availability of genuine choice, along with support for providers to develop systems for managing option two prior to taking them on.6. To proactively increase worker autonomy including addressing organizational appetite for risk, through an examination of local policies and procedures to ascertain whether or not these are, as required by the Statutory Guidance, “flexible enough to allow workers to be autonomous in exercising their professional judgement”.The full findings are in [the report](https://www.in-controlscotland.org/_files/ugd/fd9368_438ce0e5a9b746179378b11d9148bec7.pdf), which surveyed six local authority areas (Aberdeenshire, East Ayrshire, Edinburgh, Falkirk, Highland and Scottish Borders). It came through that people were often choosing option 2 for reasons not really in the spirit of the legislation, often because there is not really any other option for them to get the support they need, which may have had an effect of the data. In other cases people were “not allowed” to use option 2 for a particular type of service and would have to use option 3, 4 or 1 in some local areas, but not in others. There was also a considerable amount of variation in what is being charged, and what will be funded within each local area. This is further complicated by the expression of funding in terms of hours of care. It was also thought to be quite arbitrary in some cases whether someone was receiving option 2, either because it was their only choice or just because they were considered to have option 2 when they weren’t receiving either a Direct Payment or in-house services. It was also felt that more work could be done to record outcomes, because the way these are recorded has an effect on how easy it is to change the support required to achieve those outcomes without the need for an extensive decision making process. Where Finance and Procurement staff see their role as supporting Social Workers, the arrangement works very well, generally, however it was felt in some areas that finance could be leading decision-making to some extent which could be a concern. There was also some difference in where the budget is held from area to area. ICS’ considered that option 2 budgets would be held by the provider/s with reports being sent back to the local authority, however in some areas the budget is held within the local authority, with local authorities nevertheless managing those budgets quite flexibly. In some cases the main difference is option 2 is paid a week in advance, while option 3 is paid to providers four weeks in arrears. More relevant to the supported person is how many levels of decision making are required for changes to support (eg home gym equipment instead of a gym membership), and whether the supported person feels confident that they can question and challenge decisions easily which relate to their budget. Areas where workers felt they had more autonomy were also the same areas where workers felt more accountable as well. It was recognised by many respondents that option 2 should be “the best of both worlds”, giving people maximum choice and control without having to hold a budget. In many areas, the reality is that people are getting choice in name only. The next step will be to continue working with these six HSCPs to do a “deep dive” and support their development further, and to learn more about the degree of choice people are actually being offered and how to work on improving that.*Comments from the group:** How do we shift thinking from some providers viewing option 2 and 3 as all being the same?
* The decision to exclude Personal Assistants from option 2 have really reduced the efficacy of option 2, which was conceived as being option 1 but without the hassle of managing the budget. PAs are one of the main things option 1 is used for, so disallowing this from option 2 makes it an unhelpful option for many people.
* That might be possible under the current option 1, where the supported person can nominate a third party to manage the budget, with the local authority providing funding in the budget to cover the administrative costs for that.
* We need a way to clearly explain option 2 to people, so they can make an informed decision.
* There was work done a few years ago on [a model option 2 contract](https://www.ccpscotland.org/our-work/cp-outcomes-based-contracts/), which is in use in some local authority areas, but could be promoted further.
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| **National Collaboration Work** | **Actions**  |
| **SDS Scotland Update**The [report from the first annual Personal Assistant workforce](https://www.sdsscotland.org.uk/first-pa-survey-report/) survey was recently released. The group were encouraged to read the report, but attention was drawn in particular to page 40, key messages. The [Make An Impact: Become A PA](https://www.sdsscotland.org.uk/impact/) initiative has now also started, with a link to [PA jobs on MyJobScotland](https://www.myjobscotland.gov.uk/personal-assistant-jobs). [The PA and PA Employer Handbook](https://handbook.scot/) is also available now from handbook.scot. The [Community Brokerage Scotland](https://communitybrokerage.scot/) site for people who want to support others to get their social care needs met is now online, and there are still places available on the SQA award, which can be applied for through the site. There are also bursaries and support available to do the qualification, group members were encouraged to make any interested colleagues aware. **Social Work Scotland SDS Project Team Update**The SDS project team, under the umbrella of the PA Programme Board, are adding a new member to the team next month, Noleen McCormick, to look at developing a national collaborative agreement on what a good DP arrangement would look like. The SDS Community of Practice will meet initially on 31 August, and the project team are pleased to say that all Local Authorities now have representation on this group, with all but four local authorities fielding a full team, with the total membership being around 130 names. At the moment the team are also looking at a review of the SDS standards, identifying gaps and looking at some of the detailed roles and responsibilities of leaders in driving forward the standards, also the role of the carer. The SDS standards also need to be quality and impact assessed, looking quite closely at SDS from the perspective of different populations across Scotland.  |  |

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| **Scottish Government Updates** | **Actions**  |
| **SDS Statutory Guidance Review**The Short Life Working Group met last week to discuss the first draft of the revised SDS statutory guidance, which was circulated in July. This was a very constructive workshop, generating a lot of feedback and action points to inform the second draft. This draft will come out in the next couple of weeks. Some highlights include:* The need to simplify Human Rights and Eligibility content.
* More recognition required of the systemic obstacles and pressures on staff within the limits of statutory guidance.
* Importance of being clear about eg pooled budgets, Power of Attorney, redundancy etc
* Need to be clear on roles and responsibilities and how different functions relate to each other.
* Areas identified such as training and resources that are relevant but lie outwith the scope of the guidance.

Working Group members had requested again that there be more time to consult with their members about revisions, to ensure that the process is well informed and legitimate, and the SG SDS team are seeking to add another four weeks to the process in response to this, with the aim of publishing by the end of October. The question was also raised about when there would be an update of the SDS Practitioner Guidance, and whether this should be a single document, or a suite of documents with an overarching key document referencing that, and with the SDS standards threaded throughout. This exercise will be considered once the Statutory Guidance is published. [**National Care Service Bill**](https://www.gov.scot/policies/social-care/national-care-service/?utm_source=redirect&utm_medium=shorturl&utm_campaign=ncs) **and Information Events**The Bill has been laid before parliament last month, and SG are now into the delivery phase of the NCS programme, with working groups being set up, and being coordinated by the NCS delivery office with governance from the NCS delivery board. NCS is currently at the planning stage, and there is also a governance review ongoing this summer. The Liver Experience Partners Panel is being established to enable people to register an interest in co-design, more detail to follow at a future meeting. This is building on lessons from the Social Security Programme, and will involve the Social Covenant group as well. There are events for the public and stakeholders, on [9th of August 6pm-7pm](https://teams.microsoft.com/registration/R3T3DoMQ7E24nyfHZQdoQA%2CHB1AzCOAOkamyob22zCdxg%2CBuTOUVTdOEChhGb4IfRdSw%2CN2bfVftC8Uy23AOtDsNhJw%2C4qAdnuhOWEe4sEcvrAG3bQ%2CmdOV03lRNE2hp7T0URE8gQ?mode=read&tenantId=0ef77447-1083-4dec-b89f-27c765076840) and [22nd of August 10am-11am](https://scot.us20.list-manage.com/track/click?u=feffb8d81365d935d19ae1c3d&id=8586b3def2&e=3cb5377fdf). Charter of Rights and Responsibilities – some consultation work has been done with stakeholders. Ministers have not yet taken the decision about whether Children and Families will be included within the National Care Service, with work ongoing to look into this.  |  |

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| **AOCB** | **Actions**  |
| AOB: Pauline Lunn introduced the [Working Together for Change programme](https://www.in-controlscotland.org/working-together-for-change-infomation), This is a programme, to be delivered over a total of 8 days with a mix of in-person and online sessions over a 6-month period from September 2022 to March 2023. The programme is designed for disabled people, family carers and people who work in social work, social care and health services who want to stop talking about change and do something to make it happen. There are 30 places available for people with experience of receiving or delivering social care and In Control Scotland are now inviting applications for the Working Together for Change programme before the closing date of 29th August 2022.  |  |

**The next meeting of this group will be on Wednesday 21st September 2022 at 1pm.**

[**Click here to join the meeting**](https://teams.microsoft.com/l/meetup-join/19%3Ameeting_ZDFmMGY1N2UtOTU1Zi00N2VkLWExYzEtZWEwMWI4N2RkMjRi%40thread.v2/0?context=%7b%22Tid%22%3a%223f56ffd8-b90c-4687-b8ed-f572197e94cf%22%2c%22Oid%22%3a%226b5f8009-5ce2-4c65-922f-43460a4bf777%22%7d)