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National Care Service Consultation

Carr Gomm is a leading Scottish social care and community development charity (SC033491). We currently support about 2,000 people every day across Scotland to live their lives safely and well according to their choices, whilst making plans to achieve their hopes and dreams for tomorrow.

Everyone is unique and we all need support with different things at different times in our lives. Carr Gomm helps with any area of someone's life: from small things to being fully involved in all aspects of someone's life. Our philosophy is based on taking a person-centred approach. This means that we support everyone differently, according to their individual requirements, desired personal outcomes, and plans for the future. We tailor our support to each individual and we care about always providing the right support, at the right time, in the right way.

We use our knowledge, skills, training and value based approach to identify how we can best add to each person's strengths and abilities, enabling them to live successfully and well within their own home and community. Our role is not to do things *for* people but to work *with* them. On any given day we may be supporting an older woman with dementia to live independently in her home and continue socialising with her friends; or helping a young man with autism move into his first home away from his family; or supporting a father of young children with his benefits claims and understanding his responsibilities as a tenant to reduce his risk of eviction. Every day the support we provide facilitates each person or family living the life they choose. Our commissioned services are registered with the Care Inspectorate and are routinely graded as *Very Good* or *Excellent*.

Whilst our services are commissioned by Health & Social Care Partnerships, local authorities, health boards and the Scottish Government, an additional core part of our work as a charity is to fundraise to fill the gaps in society; to provide support where no one else is. Specifically, this work focuses on tackling the crippling issues of loneliness and isolation.

We are also sector-leading digital innovators, developing the Google award-winning ClickGo, a web-based platform for self-directed support (SDS), and YooToo, a family-led app incorporating sophisticated medication management, a hospital discharge wizard and reablement tools.

In responding to this consultation, and in appreciating the complexity and nuance of the questions posed, we have gathered perspectives from across Carr Gomm. In addition to completing the attached questionnaire, please find below some overarching comments and principles.



Carr Gomm welcomes the consultation, just as we welcomed the opportunity to submit our views to the Independent Review of Adult Social Care and welcomed the findings and recommendations published by Mr Feeley. The National Care Service represents an unmissable opportunity to reform adult social care and ensure that people, families and communities all have access to the best supports available to live their lives well.

The National Care Service provides the opportunity to build on the significant and wide-ranging assets within the existing system, including world-leading legislation, creative and innovative third-sector provider organisations, a committed and inspirational workforce, and the indefatigable determination of people and families that access social care supports. The creation of the Social Covenant Group and the commitment to embed the voices of people with lived and living experience in the National Care Service is to be commended, although there is a risk that the proposals do not clearly describe how a National Care Service will put people at the centre and uplift the principles self-directed support to become the systematic reality.

The NCS provides the opportunity to address the dysfunctional elements and unintended consequences of the existing system, as highlighted by Mr Feeley, including the disappointing reality of SDS implementation, the dogmatic pursuit of competitive tendering in-line with local standing orders over community-wide consultative commissioning, and a clear and obvious imbalance of power, control and decision-making throughout the sector. Vociferous calls to pause competitive tendering during a global pandemic were ignored by most statutory procurement teams, presumably because local rules and regulations to continue with the status quo took precedence, therefore there is merit in redirecting responsibilities and resources into new ministerially-accountable structures.

The development and creation of a National Care Service is complex and nuanced. There will be few 'quick wins' and there are likely to be competing demands, conflicting opinions and divergent priorities when engaging with different stakeholder groups. We believe that the voices and opinions of those people at the cutting-edge of the system should always be prioritised and the simple question "will this change lead to better outcomes for people, families and communities?" should be posed regularly by the NCS Team. Perhaps the greatest challenge facing the NCS is not changing legislation or macrostructures, but in changing cultures, behaviours and expectations of the actors within the system.

The language we use provides an insight into our underlying views or preconceptions, for example in the NHS we often hear reference being made to "bed blockers" rather than to "people being detained in hospital contrary to clinical requirements and unable to return home due to a lack of appropriate social care supports, resulting in a needless and avoidable deterioration in their health and wellbeing". The former labels the person as the problem whereas the latter is clear that a systemic issue is negatively impacting on a real person. In the former, we focus on the cost to the NHS and all of the related negative impacts on the state-funded entity, rather than on the health and wellbeing cost incurred by people and their families. The National Care Service has the

opportunity to develop a system and narrative with compassion and humanity at its core.

Embedding systemic language, culture and behaviour change in the new National Care Service will not happen quickly, but the NCS Team must continue to focus on immediate priorities and opportunities for evolution of the system, including changes to commissioning/procurement, improving the narrative around the sector and implementing progressive proposals relating to Fair Work.

The Independent Review of Adult Social Care called for a new narrative in the whole sector, parity with the National Health Service and an overhaul of the remuneration structure. The ambition of the NCS must be to elevate the importance of this sector, to adequately invest and reward our key workers, managers and support teams, and to ensure that the sector once more becomes a desirable and realistic career option. No adult social care professional should be faced with the current reality of having to change sector in order to afford to buy a house, start a family or secure a reasonable pension. The current proposals do not clearly state the scale of investment and potential funding mechanisms required to deliver the structural and behavioural changes required across the whole system. The need for a coherent and equitable pay policy for all social care workers is crucial: improved pay, terms and conditions, and systematic career opportunities linked to professional development and expertise.

The proposal for ethical commissioning for public good is welcome, although this will make no difference unless there are significant changes to existing procurement policy, practice and implementation; there must be a radical shift away from competitive price-based tendering and towards collaborative commissioning incorporating values-based relationships and respectful behaviours. At present, we seem tied into a right-wing perspective that seeking 'best value' in a competitive free market will result in optimal outcomes, but there is no evidence of success; the reality is a monopsony delivering frustration and angst, with positive outcomes being delivered in spite of the system and certainly not because of it. Moreover, there is a risk of the NCS significantly changing legislation, structures and national policies, but the intent being stymied by the same local officers using the same local procedures to implement the same price-focussed competitive tenders and nothing is improved for people and families. The challenge facing the NCS Team is significant as radical change is required.

The consultation document speaks to the importance of national consistency and we must stress that this does not mean 'one-size-fits-all'. There must be variations in approaches to suit our many and varied communities. Consistency does not equal equity.

The NCS provides an excellent opportunity to embed efficient and effective digital and data systems within social care, underpinned by a common set of standards, protocols and data sharing agreements. As with other elements, this requires a culture shift to understand and agree who needs what data, when, to make informed decisions on which topics. Moreover, the importance of clarifying

the data owner is paramount, and this speaks to the fundamental elements of choice, control and power.

We have answered many, but not all, of the questions posed in the consultation. Our aim has been to comment constructively, highlighting the complexity and nuance underpinning the development of a national care service. Thank you for taking the time to read and consider our submission. Carr Gomm would be pleased to discuss any aspect of this submission with the National Care Service Team in whatever way would be most convenient.