**NATIONAL SELF-DIRECTED SUPPORT COLLABORATION**

**NOTE OF MEETING – 7TH JULY 2022**

**In attendance by video conference:**

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| Donald Macleod (SDS Scotland) (chair | Rhonda Alexander (East Ayrshire Council) | Pauline Nolan (Inclusion Scotland) |
| Susan Kelso (Personal Outcomes Network) | Jan MacLugash (People-Led Policy Panel) | Jill Fraser (Inspiring Scotland) |
| Mark Han-Johnston (In Control Scotland) | Kevin Drugan (Glasgow Centre for Inclusive Living) | Sophie Lawson (Glasgow Disability Alliance) |
| Joyce Campbell (Scotland Excel) | Yvonne Nova (Scottish Government) | Roddy Huggan (Moray Council) |
| Hannah Tweed (Health and Social Care Alliance Scotland) | Sharon McLeod (Ayrshire Independent Living Network) | Ruth Griffith (Coalition Of Scottish Local Authorities) |
| John Campbell (Moray Council) | Lynsey Stewart (L-Mac Consultancy) | Becs Barker (Community Contacts) |
| Andy Miller (Scottish Commission for People with Learning Disabilities) | Anne-Marie Monaghan (Scottish Association of Social Workers) | Robert White (Independent Living Fund Scotland) |
| Louise Officer (Care Inspectorate) | Claire Roxburgh (East Ayrshire Council) | Emma Miller (Personal Outcomes Network) |
| Innes Turner (Care Inspectorate) | Ali Upton (Scottish Social Services Council) | Les Watson (Personal Assistants Network) |
| John Skouse (Care Inspectorate) | Lyn Pornaro (Lothian Council for Inclusive Living) | Pauline Lunn (In Control Scotland) |
| Morag Duncan (Dundee Carers Centre) | Ian Thomson (NHS Highland) | Janet Crozier (SDS Library subgroup) |
| Louise Morgan (Carers’ Trust) | Martin Kettle (Glasgow Caledonian University) | Alan Bigham (Healthcare Improvement Scotland) |
| Jane Kellock (Social Work Scotland) | Donna Murray (Social Work Scotland) | Calum Campbell (Social Work Scotland) |
| Calum Carlyle (Social Work Scotland) (minutes) |  |  |

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| **Updates** | **Actions** |
| * Donald MacLeod opened the meeting and welcomed the group. |  |

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| **Development of a new national SDS implementation plan** | **Actions** |
| D MacLeod and Jane Kellock have met with James McNulty of the Scottish Government SDS team to discuss updating the SDS implementation plan. The feeling was that the SDS strategy is fine as it is, but what is lacking is an implementation plan to take us up to, and to potentially influence, the inception of the National Care Service. The implementation plan should identify all key stakeholders and their role, as well as how people will be engaged in this work.  In line with the previous implementation plan, the intention is to continue working with leadership, systems, workforce and people, all of whom are represented here in the National SDS Collaboration. It will be particularly important to consider how to include people with lived experience actively in this process. There will need to be a section on understanding progress, and recognition of developments since the last plan, such as the SDS standards, and the impact that those developments have made, in order to identify an effective implementation structure for future delivery.  There is the opportunity to connect with the PA Programme Board and its subgroups, as well as communities of practice such as the SDS Community of Practice hosted by Social Work Scotland, and other groups involved in policy development. SDS Scotland have also offered to host a webpage for sharing of meeting minutes, news items and other resources that are relevant to this group.  *Points made and discussion:*   * This was welcomed by the group, and the point was made that it will be important to ensure that organisations represented on this group support that SDS implementation across the whole of Scotland, not just the central belt, and that the group should discuss how to best do that. * With that in mind, many of the organisations represented here have considerable commitments already, so while this is positive, group members need to be clear about their ability to commit time and resource to developing the plan, as well as promoting and supporting SDS implementation. * This is all in the context of the National Care Service, which represents a changing landscape and this should be borne in mind. * It is important for this group to have continuing dialogue with other forums and groups to support ongoing collaborative planning, and to ensure that SDS is bedded into wider planning, not added onto a finished plan as an afterthought. * It would be interesting to know how we recognise success in the Implementation Plan and measure progress - can we do this with people currently in this group? Success might look different depending on the perspective in relation to SDS and social care. * The group needs to plan for how to implement the SDS implementation plan, maybe a working group can be set up to consider this. * Can we make sure that end-users are actively involved in that group? There is a real concern that a lot of what is now happening in relation to the development of NCS etc is being done in "back rooms" and a lot of the conversations taking place are going nowhere or being ignored. I cannot emphasise strongly enough that we need to do things **with** people, not **for** or **to** people and we cannot present fait accomplis. * We cannot lose sight of the fact there are many people who use services as well as carers in this group. We have also talked about the pressure on people and the responsibility that those organisations have that work with people who use support to feed back. Surely the role of the SIRDs, CILs and other DPOs is to carry the message and include and involve people through their networks. This groups, as other groups such as the PA Programme Board and subgroups, has been very open to involving people with lived/living experience. * We need to dovetail with other national activities, also across children's services (The Promise). | **Action: SWS and SDSS to collaborate on work towards the web page.**  **Action: Jane, Donald and Yvonne to discuss coordinating a working group.** |

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| **National SDS work 2022-2023** | **Actions** |
| **Highland SDS Strategy** ([Click here to view the presentation slides](https://sway.office.com/zsOEBsZGG67rUy0s))  Ian Thomson gave an update on the SDS strategy in Highland, which started in 2021 with a cross-organisational reference group, including organisations and people with lived experience, to determine a vision for SDS in Highland. This was then consulted on quite extensively, through focus groups and paper/online surveys. There was a really clear open consultation plan, with enough time to facilitate true discussion and create the space for people and organisations to think into that space. The outcome was that initiatives and organisations started to come forward with offers.  Values, priorities, approach and methodology were all popular, particularly the community aspect. Feedback was that Highland need to listen to people more, be less prescriptive and less judgemental.  The outcome was a set of implementation objectives around Good conversations, Independent sources of advice, People and carers shaping decision making, Clear parameters on resource allocation – sustainable and equitable, More choice and control – better information available at all levels, Community support as the primary route to SDS, Support the whole workforce  Local groups, co-production groups and partnership groups were set up, taking a bottom up approach, and trying to support local initiatives as much as possible without taking over control of those. Ian talked through the ten SDS implementation objectives.   * Information and Communication – bringing together partners from statutory and voluntary sectors to improve information and communication in all directions at a local level * Community Led Approaches – Having a good relationship with people in the community, including signposting, and possibly low level preventative help without the need for assessment and care planning. * Costing Care and Identifying budgets – working with people in receipt of Direct Payments to discuss realistic rates for those who need to manage employment of Personal Assistants * Better Conversations – working with Social Workers to reduce bureaucracy and improve autonomy. * Independent Support – More independent support needed across Highland to expand people’s access to independent support. * Option 1: Short Breaks for Carers – to make resources available to carers through a simple application process, to improve choice and control and allow flexibility. * Option 2 – In Control Scotland has been working with Highland to better understand how to improve the option 2 offer. * Developing Capacity – place based commissioning – This work is to consider the blend of available formal and informal services available within communities across the diverse geography of Highland. * Personal Assistant Employer Support – and support to Personal Assistants – Work being done to identify the challenges to the PA/employer relationship and how to support that better. * Shared Ethos – Developing a series of real-life stories to clearly convey the ethos of choice, control and flexibility behind SDS.   Becs Barker added that there has been a real focus on ethos, and on collaborative problem solving with people and organisations, which has been really helpful. The fundamental shift towards building relationships and working with people is the main reason for positive change in Highland.  Ian Thomson agreed and reiterated that co-production is essential to success, people feel like they are really involved in decision making. An approach imposed from above will never work, when dealing with people.  Jan MacLugash agreed and commented that this collaborative approach is better because people and carers are able to make connections with each other, and that using Zoom/Teams has been helpful in communicating in Highland, particularly, where geography can be a barrier.  Becs Barker talked about work that is now planned on the true cost of care, by NHS Highland along with the peer support group, taking into account all of the wider relevant factors.  Mark Han-Johnston mentioned that the SDS strategy is a working document, not a fixed one, and that as issues come to light, the strategy can adapt to respond.  Group members received the presentation very positively and commented that this is a testament to what cn be done with good active leadership. Ian said that good leadership has been key at every level, not just senior leadership, and this includes connections and allies across organisations.  *Some questions from the group and answers from Ian Thomson:*  What enables Social Workers to be more autonomous?   * There are approval processes which are very time consuming and frustrating for Social Workers, and the approach will support Social Workers themselves to come up with more streamlined processes.   Are you using any thresholds and eligibility on accessing formal support?   * For the Option 1 short breaks scheme, there are no eligibility criteria, up to a fixed amount of money, access to this is at the discretion of the Social Worker. * We spend far too much on gatekeeping. Let’s try instead to be equitable and sustainable by engaging in discussion with people who use services, to make sure that any support is effective and efficient, and that we make sure we use community resources first.   To what extent have you been able to involve Children and Families in this work?   * It is taking a bit longer for Children and Families to come onboard, due to the way this is set up in Highland.   What challenges are you finding to implementation of the strategy?   * People often still think of SDS as peripheral, and that option 3 services are the main focus. We need to start to integrate SDS in with these option 3 services, and identify more non-statutory, hopefully preventative, services that people can access.   Have the SDS standards been useful in developing the implementation plan?   * Although the SDS standards can be useful, they are not felt to be there to inspire change, and are not a strategy in themselves.   How will you know that you have succeeded?   * We really want to get an idea of how the changes affect people’s lives, and some of that can be difficult to evaluate, but we are trying to gather information about how the changes we make are affecting people being able to achieve their outcomes.   Becs Barker also commented: Another point about working in Highland: I was fairly resigned to my experiences that working with local authorities is impossible from my perspective as a third sector worker. I have changed that view completely. Our positive relationships with NHS Highland colleagues means we can achieve more. We can support each other and appreciate each other's challenges. Working as part of the Highland SDS Strategy group has been life changing for me and now I view my work in a whole different way. I feel valued, included and respected. And if I feel like that, how many others do? Way to go, and one for other LA areas to follow. |  |

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| **Members’ discussion about the representation and reach of each member organisation** | **Actions** |
| Donald MacLeod acknowledged the comments made already about including as broad a reach as possible in the work of the group, and using membership as actively as possible to include people’s views, and encouraged people to keep that in mind through the work going forward. |  |

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| **Collaboration Work** | **Actions** |
| **Option 2 progress update**  Pauline Lunn reported that the Option 2 report should be published by the end of the month, supported by a webinar event and lunchtime sessions, and then the option 2 group will consider actions going forward and how best to apply the learning.  **Eligibility Criteria event update**  Anne-Marie Monaghan reported on the recent event: Eligibility Criteria: Exploring Alternatives.  This was a single day event that happened on the 25th June, as two separate sessions (morning/afternoon). The event was chaired by Sally Witcher and Alison Bavidge and was jointly organised by SASW, Coalition of Carers for Scotland, East Renfrewshire HSCP, Social Work Scotland, the Personal Outcomes Network, Inclusion Scotland, Healthcare Improvement Scotland, National Development Team for Inclusion and the University of Strathclyde. The event was well attended through the whole day (with approximately a hundred attendees, as anticipated).  This event brought together key stakeholders from across Scotland, including people with lived experience, unpaid carers, policymakers, practitioners and professional bodies, to discuss alternative approaches to eligibility criteria in the context of the move towards the National Care Service. The intention is not to determine a particular model at this stage, but to build a better informed basis for decision-making on this important topic, in recognition of the recommendation in the [Independent Review of Adult Social Care (Feeley)](https://www.gov.scot/groups/independent-review-of-adult-social-care/) that people should be supported to know and to access their human rights, without being hampered by eligibility criteria.  Anne-Marie highlighted in particular the presentation from Mark Smith of Gateshead Council and his findings that eligibility criteria come at a cost, that often money is being spent which does not help people or improve people’s situations at all. He said that everybody has the eligibility to be understood, and it is understanding people that makes the difference.  [(click here to access resources relating to this event including details of each of the presentations)](https://www.carersnet.org/meetings/eligibility-exploring-alternatives/)  Emma Miller is currently collating the feedback from the breakout groups and a report will be published and shared in due course. The intention is to do more work built on a research model.  **SDS Resource Library**  Janet Crozier reported on recent work on [the SDS Resource Library](https://hub.careinspectorate.com/resources/self-directed-support-library/). Some issues had been identified with the website through user testing, and work has continued with the Care Inspectorate who host the library to resolve these, which is taking longer than expected due to capacity issues.  Also, work is being done to reduce the number of topic fields, and tagging documents with relevant topics, so that more relevant results will be returned when people search.  Gaps in the library are also being identified, for example toolkits in the areas of **mental health**, **people in ethnic minority communities**, **unpaid carers**, **advocacy** and **sensory impairment**, and to work with partners to identify, and in some cases to develop, resources that might fill those gaps.  **Evaluation**  Jane Kellock reported that the SDS project team have met with Des McCart and colleagues from the Care Inspectorate to discuss how to move forward with the work of the SDS Evaluation group. The outcome was acknowledgement that a focus on learning, more than on impact, was more useful. The terms of reference and membership of the SDS Evaluation group will be refreshed, and group members were invited to come forward if they wish to be involved with this self-evaluation work.  **Standard 12 (Budget Allocation Standard)**  Calum Campbell reported that the budget standard has now been refined on the basis of comments from COSLA’s carer’s representative, with collaboration from …..79 mins  The updated standard has now been approved through COSLA’s Health and Social Care Board, and thanks were extended to everyone in this group who had an input into the development process. The project team have contacted colleagues within SG to discuss how to get the new budget standard added into [the SDS Framework of Standards](https://www.gov.scot/publications/self-directed-support-framework-standards-including-practice-statements-core-components/) document currently on the SG site  **SDS Training**  Jane Kellock reported that there was a meeting with representatives of the Office of the Social Work Advisor, the Scottish Social Services Council, Glasgow Caledonian University and the Social Work Education Partnership on 7th June to look at what was available with regard to skills-based training for the workforce. The feeling was that training is very variable with regards to SDS, but also that there are wider system issues which don’t support good practice even when good training is available. The discussion considered training from undergraduate level through to advanced practice, and the availability and cost of training for Local Authorities, and the need for coaching and supervision models and the need to train front line managers.  Work is underway to develop a post-qualifying Advanced Social Work Practice Framework, and this work is being led by the Office of the Chief Social Work Advisor. This will build on the supported year for newly qualified Social Workers and will be a move towards a coherent and consistent framework for learning and development within Social Work. It is acknowledged that the values and principles of SDS are central to this, so the intention is that the SDS project team will be brought into this work to ensure that this is the case.  **Personal Assistants Survey Update**  Donald MacLeod reported on the first annual Personal Assistants survey, which received feedback from members of the PA Programme Board, Scottish Social Services Council, Scottish Government, and from independent support organisations (917 respondents). Some highlights of the data include:  The average PA is female, about 54 years old, white Scottish, non-disabled and identifying as heterosexual. About two fifths of survey respondents reported that they were disabled.  92% of respondents said they trust the person they assist and that the person trusts them, highlighting the importance of relational practice.  Approximately 60% of PA respondents feel job insecurity or have misgivings about the PA role in the future, and 81% haven’t received training in the past year, with 60% saying they had not received training prior to that.  Qualitative comments included that there needs to be increased emphasis on the importance of independent living, service user empowerment, and the core values of the PA role.  Approximately 20% of respondents said they were experiencing poor or very poor mental health and that there was not a consistent pathway to access support.  More [detail about the data gathered can be found on the SDS Scotland website](https://www.sdsscotland.org.uk/annual-pa-workforce-survey-analysis-underway/), and the intention is to gather this data each year for comparison.  The full report will be published on the 27th of July, along with a number of videos, PA case studies and the formal launch of the PA Handbook and the relaunch of [the revamped PA Employers Handbook](https://handbook.scot/the-pa-employer-handbook/). |  |

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| **Scottish Government Updates** | **Actions** |
| **SDS Statutory Guidance Review**  Yvonne Nova reported that the first draft of the updated SDS statutory guidance was circulated to the Short Life Working Group on 6th July, for feedback at the next meeting on the 27th of July, which will be a half-day workshop to look at the document collectively, and in subgroups looking at specific areas.  44 individual responses were received to the recent survey on the draft SDS Statutory Guidance document, including collective responses from member organisations, and thanks were extended to group members who responded to that. Approximately 500 distinct comments have been received, and almost all of those have been incorporated into the guidance in some way.  [**NCS Bill**](https://www.gov.scot/policies/social-care/national-care-service/?utm_source=redirect&utm_medium=shorturl&utm_campaign=ncs) **& information events**  The National Care Service Bill has now been introduced to parliament, and this will be supported by four online information events, and group members were encouraged to participate in these. The events will start with a presentation, and then there will be the opportunity for discussion and feedback. These are *(MS Teams meeting links)*:   * + [Wednesday 6 July, 4pm to 5pm](https://scot.us20.list-manage.com/track/click?u=feffb8d81365d935d19ae1c3d&id=62ece2bd31&e=3cb5377fdf)   + [Thursday 21 July, 11am to 12pm](https://scot.us20.list-manage.com/track/click?u=feffb8d81365d935d19ae1c3d&id=c83d806c62&e=3cb5377fdf)   + [Tuesday 9 August, 6pm to 7pm](https://scot.us20.list-manage.com/track/click?u=feffb8d81365d935d19ae1c3d&id=e36ad02d26&e=3cb5377fdf)   + [Monday 22 August, 10am to 11am](https://scot.us20.list-manage.com/track/click?u=feffb8d81365d935d19ae1c3d&id=8586b3def2&e=3cb5377fdf)   Yvonne Nova shared [the National Care Service co-design paper](https://scot.us20.list-manage.com/track/click?u=feffb8d81365d935d19ae1c3d&id=492e390175&e=3cb5377fdf), which explains the way in which collaboration will work through the co-design of the National Care Service, how the views and expertise of those who have experience of the system will contribute to its development, and where responsibility for decision making will lie.  **SDS Standards – easy read version**  Jane Kellock reported that there had formerly been an Easy Read version of the SDS standards but it was felt that this may need to be updated before being re-published. However, since the SDS standards are due to be reviewed and impact assessed, it may be better to create an easy read version after that process has been done. |  |

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| **Any Other Business** | **Actions** |
| No other business to discuss, the next meeting of the group will be on **Wednesday 3rd August**.  [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) |  |