

# Integration Authorities Consultation with Stakeholders

## SCVO response to Scottish Government

08 March 2017

SCVO welcomes the opportunity to respond to the consultation on integration authorities.

While SCVO is not actively involved in service provision with regards to health and social care, this is a key aspect of the third sector in Scotland and the focus of many of our members. Social care amounts to over a quarter of the third sector's turnover and 34% of voluntary organisations in Scotland are involved in social care-related activities. Nine out of the ten charities receiving the most public sector funding are health and social care providers. Sustainable, responsive social care is therefore crucial to the sustainability of the third sector as a whole.

### Our position

SCVO would direct you to the submission by Voluntary Health Scotland (VHS). This submission was drafted after extensive consultation with our sector. The third sector in Scotland has an abundance of practical experience of working with Health and Social Care Partnerships (HSCP) and Integrated Joint Boards (IJB) and should be seen as a vital stakeholder within this consultation and the wider agenda.

In addition, we'd ask the Committee to consider the following points:

1. The third sector has great experience, knowledge and expertise of health, social care and working with vulnerable people. In line with the VHS response, we question the approach of HSCPs in the apparent failure to include non-voting partners in a consistent and meaningful manner.
2. There also appears to be a lack of understanding as to the role and purpose of the third sector within this process and we would urge the Committee to assess how a better understanding could be promoted within HSCPs and IJBs. The sector must be seen as an equitable partner. Moreover, for integration to be truly embedded non-clinical services and community support, often provided by the third sector, must be valued and recognised.

3. Equally, there must be more emphasis on ensuring a strong-voice for carers on Boards. At present, there is evidence that carers are not able to fully-participate, as further detailed in the VHS response. The capacity of carers to play a full role on the IJBs has been stretched due in part to their caring responsibilities and there is a need for more Integration Authorities to invest in training and support to ensure carers understand and can carry out the roles required.
4. User experience is the most important aspect of integration and individuals must be consulted, involved and valued throughout this process. A key issue for our sector is that the non-voting members of the IJB are effectively viewed as a proxy for the general public and patient representatives have not always received the necessary training or support to represent wider interests. Reducing user experience to anecdotal issues is problematic not only for the issues that service users face but also for the reality of creating a system based on co-production.
5. It is the experience of SCVO that the general public do not yet have awareness and understanding of health and social care integration and there must be efforts to communicate the vision, process and expectations to the public, particularly individuals and communities receiving care.
6. At present, the focus continues to be on clinical services and social care is often reduced to merely being 'healthcare in the community'. Moreover, within recent documentation such as the Health and Social Care Delivery Plan, health continues to swamp social care in terms of energy, focus and language. There is testament to a wider pattern which does not see social care as distinct from healthcare and ignores the need for a full recognition of the parameters of social care support. We would welcome further work on exploring exactly what social care is, and what it means for service users as there continues to be issues around misunderstanding.
7. In this vein, the [Shared Ambition](#) report has stimulated some important conversations around Scotland's model of social care. Adopting a social model definition of disability, the report advocates for a sustainable human rights based approach to social care across Scotland. The Report promotes a new narrative 'which sees social care support as an infrastructure investment in the social and economic wellbeing and development of society as a whole; not the spiraling cost of an ageing society; nor merely the provision of 'healthcare in the community'. In line with this, we believe that social care is fundamentally a social justice issue.
8. As the Committee examines the written evidence, we hope that a key consideration will be the human rights of the people of Scotland. Social care can, and must, be a gateway to the realisation of other human rights - including the right to liberty, the right not to be treated in a degrading way and the right to food. It is important that the public are aware of their own rights, and those of their friends and family, when it comes to social care. The renewal of social care standards based upon human rights lines is a positive step in this area, however, much work is to be done in raising awareness of these rights. Only then will individuals, and their families, be able to make informed choices about their care.

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## Conclusion

The Voluntary Health Scotland response gives essential detail of the experience of the third sector, carers and the people our sector supports. We therefore hope that the Committee will examine their response and consider how the importance of the third sector could be better recognized and valued throughout this process.

SCVO believes that the involvement of the third sector and service users is vital for the process of integration in respect to; the recognition of non-clinical services, in promoting the prevention agenda, in building resilient communities and ensuring the human rights of those receiving care.

In the coming weeks, SCVO will also be publishing a paper on the future of social care in Scotland and we would be happy to share this with the Committee in due course.

## About us

The Scottish Council for Voluntary Organisations (SCVO) is the national body representing the third sector. There are over 45,000 voluntary organisations in Scotland involving around 138,000 paid staff and approximately 1.3 million volunteers. The sector manages an income of £4.9 billion.

We work to the following mission: To support people to take voluntary action to help themselves and others, and to bring about social change.

We have over 1,600 members who range from individuals and grassroots groups, to Scotland-wide organisations and intermediary bodies.

As the only inclusive representative umbrella organisation for the sector SCVO:

- has the largest Scotland-wide membership from the sector – our 1,600 members include charities, community groups, social enterprises and voluntary organisations of all shapes and sizes
- our governance and membership structures are democratic and accountable - with an elected board and policy committee from the sector, we are managed by the sector, for the sector
- brings together organisations and networks connecting across the whole of Scotland
- SCVO works to support people to take voluntary action to help themselves and others, and to bring about social change.

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The Scottish Council for Voluntary Organisations (SCVO) is a Scottish Charitable Incorporated Organisation. Registration number SC003558.