

# Health and Social Care Alliance Scotland

## 'Creating the CALL (Connections At Local Levels)'

### *Report from the Western Isles*



### Introduction



The Western Isles were the first of the Third Sector Interfaces to host the ALLIANCE's 'Creating the CALL' event. Due to the geographical landscape, two events were held in Stornoway and Balivanich, with an overall participation of around 40 delegates. Representation came from Comhairle nan Eilean Siar (Council), NHS Western Isles, third sector organisations, providers, people with experience of using support services, and carers.

While each event differed in numbers (Stornoway – 32, Balivanich – 4) and style, similar themes emerged about the introduction and delivery of Self Directed Support on the islands. Many of the concerns to be raised during each event were directed towards the council's approach to communicating their messages about the roll-out of Self Directed Support. During the course of each event delegates had the opportunity to discuss the key issues that were relevant to people on the islands who require social care. This mostly focused on staffing issues; attracting people to work for people in a caring capacity on the islands, and service distribution; ensuring that services are equally accessible in all parts of the islands.

### The Council's Perspective

At each event, council representative Aman Toor gave an overview of Comhairle nan Eilean Siar's perspective of the delivery of Self Directed Support on the islands. Key the council's agenda is the reassurance that the transformation to a self-directed social care system will not disrupt or decrease local provision. It was the council's belief that rushing through the changes to self-directed social care would not be in the best interests of those who currently require services. Aman therefore made clear that all changes to service provision in each area would be preceded by consultation with those affected by the transformation. The main focus of his presentation was therefore to demonstrate the council's commitment to outcome focused assessments and planning, to



ensure that the principles of Self Directed Support were applied equality throughout the islands.

Aman's presentation highlighted the shift in approach that the council is taking towards instilling an outcomes based model of support planning. He claimed that this had already been taking shape with a 280 per cent increase in direct payments users since 2012. The vision was therefore to take a co-productive approach so that there was a collective ownership of the Self Directed Support strategy on the islands.

### **The Scottish Government's Perspective**

Nick Brannigan, who works out of Tagsa Uibhist, is employed by the Scottish Government to promote the Self Directed Support strategy on the Western Isles. His main focus is to increase the number of social care users who have a Self Directed Support package. The input Nick gave to each event was to elaborate on the possible options available to people through Self Directed Support. However, also apparent through his contribution was that there were immediate concerns over the timescale and approach to the Self Directed Support roll-out on the Western Isles. There was the sense that there was a lack of information and clarity of the intentions to transform the social care landscape to one that encourages Self Directed Support. From this perspective, and from comments made by other delegates, it was apparent that there were concerns over the time taken to assess and review the needs of people with social care requirements.

### **Asset Mapping the Western Isles**

Creating the Connections At Local Levels depends on constructive conversations between all partners involved in shaping the future of health and social care services in their areas. To facilitate the start of this conversation, Peter Ashe of the ALISS project instigated an asset mapping session by asking delegates to consider what keeps people well. While it is important to consider the strategic implications of Self Directed Support in making its delivery successful, it is imperative that all partners do not lose sight of its ambition: to achieve the outcomes of individuals with social care needs. Therefore the asset mapping session provided a supported opportunity for people from all spheres to concentrate on what outcomes they want and what in their local community can help them to achieve them. Getting away from thinking about traditional services prompted delegates to consider local amenities and daily activities that improve their wellbeing. The delegates thought of the following assets in their area that contributed to their wellbeing:

- Bowling club
- Castle grounds
- Hydrotherapy
- Family
- Kayak club
- Crossroads
- Sports centre
- College
- Walking club
- Photography
- Writing poetry
- Views of the islands



### **Key issues emerging from the Western Isles**

Over the course of each event on the Western Isles the following themes emerged as being crucial issues to the implementation of Self Directed Support from the perspective of delegates attending the events. The issues are summarised here.

#### *Transporting care*

There are fifteen inhabited islands in the Western Isles covering 130 miles with an approximate population of 28,000 people. Providing consistent, quality care with a person centred approach was reported by delegates to be one of the most pressing issues of ensuring Self Directed Support achieves its intentions of providing more choice and control to people on the islands. These issues are not new. Services have commonly had difficulty in securing provision for all those who need it, in all areas. Delegates highlighted examples of podiatry and community based health services being especially affected by the geographical constraints which could restrict access for people from more rural areas.

The concern relating to Self Directed Support on this issue was that it could leave individuals with the responsibility of securing their own support, but without the appropriate choice of services to meet their needs in their areas.

#### *Staffing Self Directed Support*

The Western Isles has an ageing population and a declining population of people of working age. This has led to fears that there is going to be a shortage of people able to provide support and assistance to people with increasing support needs. It has even been suggested that a recruitment drive is required to attract people from mainland Scotland to fill the employment gap. From the perspective of the delegates the reality was of a decreasing workforce and a fear of being unable to support the needs of people in the community.



There was a noticeable call at each event for a *bank* of carers who could be utilised by people with Self Directed Support from all parts of the Isles. This may offer the potential for consistent, reliable support staff who can deliver support based on a contractual relationship with the organisation that facilitates the bank. However at the same time this arrangement could have the potential for limiting people's choice and control, and decrease the flexibility that is afforded by Self Directed Support. At the same time however, there are also concerns for staff themselves, the main worry being that being independently employed on the islands is not a secure situation for support staff. The example was given that a person being supported who employs their own staff, could immediately stop the support (through their end of life). While it was recognised that this could also happen for staff employed by the council, it was felt that this offered greater protection and therefore did not compromise the employment of support staff.

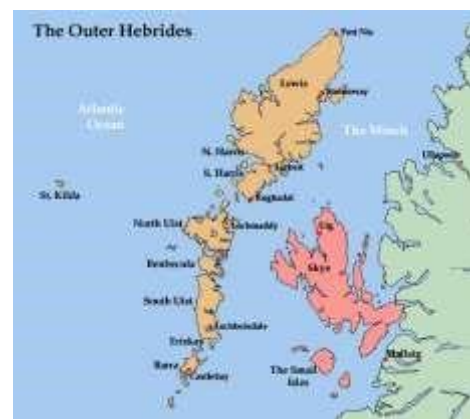
### *Supporting health to support*

Though it would seem that there are close ties between NHS Western Isles and the local authority services when it comes to dialogue, there is a lack of collaboration reported by delegates. It was described that this can result in delayed discharges from hospital of those who could benefit more from adequate social care support at home. This resonated across each of the events with claims being made that poor planning across the agencies had led to services being withdrawn from certain areas, leaving people unable to access appropriate health care. The response from the council was that with Self Directed Support individuals could effectively use their budget to meet their health needs, so long as it contributed to their positive social care outcomes. However, at a more strategic level it was felt that there needed to be a more collaborative and co-ordinated approach to the design of support services in the future, so that individuals with health and social care needs could be enabled to live independently with all their needs met. This was particularly pertinent for older

people who wanted to maintain their living situation in their own home, but who had traditionally been forced to stay in hospital through a lack of creative support being available. One solution to this was to bring down the barriers between health and social care staff, so that community care could be delivered on an outcomes basis without having to define where the budgetary resources to achieve people's independence have come from.

### *Geographical choices*

Beyond the issue of transport there is a fundamental issue that harks back to the original construction of direct payments. It may sound a far stretch, but the outback of Australia was one of the first locations where the principles of direct payments formed. Living far from a central city, the support available to people in rural communities does not always provide the equity of support provision. Having the money and the control to arrange and manage one's own support was the founding notion of direct payments. In a similar fashion, living on low-inhabited islands off the west of Scotland can mean that services that are easily accessible and available in the central belt are not transferrable. While Self Directed Support does not directly change or impact on the social care provider landscape, it does have the potential for transforming the way that people access the support they need to maintain their livelihoods on the islands.



### **Recommendations**

It is clear from the narrative above that there are definite issues unique to the Western Isles. As the Social Care (Self-Directed Support) (Scotland) Act begins to be rolled out across Scotland, it is important to consider regional solutions to regional issues. The following recommendations are based on the discussions from both events, in Stornoway and Balivanich.

- i) Maintain a constructive dialogue between Comhairle nan Eilean Siar (Council) and the people who will be accessing Self Directed Support. This could be achieved through regular engagement with the user-led group to steer the council's roll-out of Self Directed Support, or by way of the local Third Sector Interfaces distributing regular updates on progress.
- ii) Begin discussions between all partners of a long term strategy on the future of meeting the outcomes of people with long term conditions on the Western Isles. Incorporating health, social care and the third sector into this agenda will support the construction of a co-produced plan to address issues of geographic and transportation restrictions to meeting the health and social care requirements of individuals across the Western Isles.

- iii) Using the 'Everyone Together' model of training, facilitate community events for anyone with a vested interest in the outcomes of people with long term conditions, to up-skill the local population on the principles and practicalities of utilising Self Directed Support to achieve these.
- iv) Explore recruitment drives with local schools and colleges to highlight the opportunities for younger people to stay on the Isles.
- v) Start a discussion with providers of health and social care on the islands and further afield to consider the opportunities available through Self Directed Support for creative solutions to meeting individual outcomes.

### **Creating the future of Self Directed Support**

The intention of Creating the CALL is to instigate a discussion in the Western Isles on the future delivery of Self Directed Support. While the ALLIANCE works to increase the opportunities for integrated self-directed health and social care, all delegates who attended the events and those they work with should own the agenda, ensuring that people with long term conditions are at the centre of the consultation on the future of Self Directed Support on the Western Isles.