
ALLIANCE Annual Conference Report 2024



Our Voice, Our Rights, Our Future



ALLIANCE
Annual Conference and AGM

2024

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Introduction

#ALLIANCEConf24

@ALLIANCEScot

Attendance Statistics

282

delegates



272
in-person



10
online

9

expert speakers

12

diverse
workshops

3

creative projects

16

exhibitors with
interactive tables





Every year, the ALLIANCE conference invites members and individuals across health and social care to share key priorities and developments in the health and social care sector. This year's conference, **"Our Voice, Our Rights, Our Future"** was a chance for attendees to reflect, look forward to opportunities, engage in workshops, keynote speeches, and panels from sector leaders. By bringing together a diverse network, discussions focused on the future of health and social care, centered around the importance of sharing individual and collective experience to impact change.



I have met interesting people and heard some great discussions - Survey Response

The hybrid annual conference provided individuals with the opportunity to attend and contribute to conference activities, both in-person and online. 272 delegates attended in person, with 10 delegates joining online. Electronic notetakers and BSL interpreters were available throughout the day.



Great to have electronics note takers and BSL interpretation at the ALLIANCEConf24. Accessible for everyone in the room today. Fantastic! - X (Twitter)

To set the stage for this year's conference themes, an informative and inspiring webinar titled **'Shaping the future of health and social care'** was delivered by Professor Derek Feeley, former Chief Executive of the NHS. The webinar provided valuable insights into the status and future direction of health and social care at a national level. Additionally, the ALLIANCE conducted Impact Visits with member organisations across Scotland, showcasing the tangible and measurable impact of these health and social care organisations on their communities. Both additions displayed the innovative work occurring across the sector, providing a solid foundation for conference delegates before the conference itself.

The day included the ALLIANCE's Annual General Meeting, keynote speeches, panel discussions, workshops, and performances. Participants were also able to engage with event sponsors, who hosted stands for networking and collaborating. This report covers key points from workshops, contributions from speakers, participants, and facilitators, organised according to the three conference themes.



Insightful, engaging workshops & discussions - X (Twitter)

Laying the foundations

The annual conference represents the past, current, and future work of the ALLIANCE. Delegates and stakeholders are given insight into the challenges, opportunities, and ambitions of the health and social care sector. The pre-conference events encourage reflections, conversations and collaborations into the future.

Impact Visits

As part of this year's Annual Conference, the ALLIANCE conducted impact visits with member organisations across Scotland. Recently, ALLIANCE Live launched a series of video case studies highlighting these organisations and their work. The video showcases the work of four diverse organisations, from the Central Belt to the Western Isles.

The impact visits highlighted the many ways that ALLIANCE member organisations influence the third sector as beacons of positive and meaningful change. Above all, these visits demonstrate that the future of health and social care is already taking shape, with grassroots organisations emphasising their community impact and leading the way. One of this year's conference themes, 'Our Future', underlines the importance of looking ahead, inspiring collaboration and continued progress in the sector.

The impact visit videos share insights into the resilience, compassion, and dedication of Scotland's third sector.

Affa Sair

Location: Moray/Online

A charity dedicated to creating a space for, and supporting individuals with, chronic pain, with a focus on education, and advocacy for various care needs.

[WATCH VIDEO](#)

Networking Key Services (NKS) Ltd

Location: Edinburgh

An organisation providing a wide range of services - from independent health advocacy to English conversation classes - to South Asian women and their families as they integrate into Scottish society.

[WATCH VIDEO](#)

Long Term Conditions Hebrides

Location: Western Isles

An organisation supporting individuals with long-term conditions and their carers enhancing well-being, skill development, and inclusion through online and in-person activities.

Macaulay College

Location: Stornoway

A college which provides people with additional support needs and learning difficulties with a programme of activities aimed at enhancing their social and working lives.

[WATCH VIDEO](#)

Pre-Conference Webinar: Shaping the future of health and social care

Prior to the conference, members had the opportunity to engage in a webinar, *Shaping the future of health and social care* delivered by Professor Derek Feeley. During this webinar, Feeley offered insights on the current standing and trajectory of the health and social care system in Scotland and set the scene for the conference by encouraging the radical rethinking and redesign of the health and social care system.



Derek Feeley

Former Chief Executive of the NHS, policy developer and chair of the Independent Review of Adult Social Care

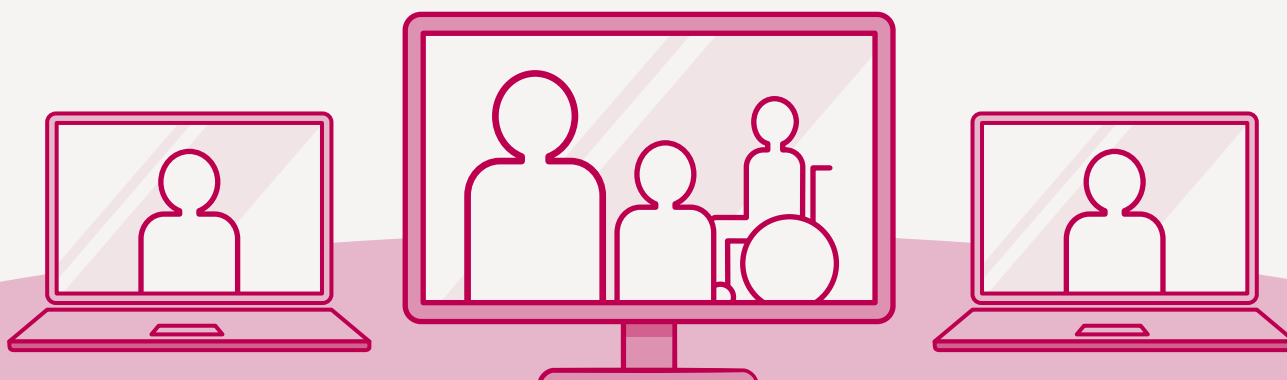
“ The answer to our problems is not more of the same - Derek Feeley

Feeley emphasised the role of various stakeholders in achieving a more equitable, fair, and adapted health and social care system, from the government to people with lived experience. Looking towards the future, we must have adequate funding to meet the sector’s needs, including financial investment and proper resourcing to fully integrate new policies and strategies.

Derek Feeley discussed the need for further policy development regarding the National Care Service, focusing on equity, human rights, and civility. He stressed the importance of implementing the recommendations from *The Independent Review of Adult Social Care*, which advocates for social care as a human right, the simplification of processes, and the consideration of individuals’ lived experiences.

Individuals also play a crucial role in the development of health and social care. For change to be effective and adaptive, individuals with lived experience must be considered experts in their own care. Their experiences must be listened to and valued as a crucial asset to the decision-making process that is central to policy development, and the running of public and private organisations. When considering lived experience, we can look at how intersectional experiences shape an individual's knowledge, to help inform a range of issues simultaneously. Feeley’s inspiring presentation underlined the interdependent nature of work in health and social care, and the importance of both independent and collaborative work.

Listen to the full webinar chaired by Sara Redmond, Chief Officer of the ALLIANCE



'Our Voice'



How can we use our voice to impact change? As individuals and as a collective, what roles do we play?

This section summarises the importance of individual contributions, such as meaningful participation of those with lived experience, and collaborations, such as research and networking. Amplifying the voices of those in the most marginalised and stigmatised communities is essential. Together, our voices are necessary for change.

Keynote Speaker: Empowering health and social care

The conference opened with a keynote from Neil Gray, Cabinet Secretary for NHS Recovery, Health and Social Care. Neil Gray provided insight into the Scottish Government's priorities this past year. Among others, he noted the Government's commitment to addressing disparities in health, quality of life and life expectancy that continue to have a disproportionate impact on minorities and marginalised groups. Across these groups, underlying issues such as the pandemic, Brexit, and poverty continue to exacerbate inequalities.



Neil Gray

Cabinet Secretary for NHS Recovery, Health and Social Care
@neilcgray



Pennie Taylor

Conference Chair, and Award-winning freelance journalist and broadcaster
@ptupdate



Tackling inequality and poverty and improving people's wellbeing remain central to the ambitions of the Scottish Government

- Neil Gray MSP

As Scotland moves forward with the new Human Rights Bill (Scotland), integrating the language of human rights and utilising a human rights-based approach across the sector will be essential. By incorporating a range of internationally recognised human rights directly into Scots Law, namely the Right to Health, Scotland will be placed as a global leader in human rights attainment. The Right to Health will be an important part of addressing health inequalities alongside meaningful participation from those with lived experience.

“ I would like to state the significance of working together to tackle health inequalities, its underlying causes, and achieving the best for our people. A key part of this will be learning from the lived experience of individuals, professionals and communities to achieve this - Neil Gray MSP

Another example of legislative progress is the Wellbeing and Sustainable Development Bill, which seeks to create policy and services in line with the planet, our health, and the health of future generations. A new Learning Disabilities, Autism and Neurodiversity Bill will expand the scope of protection of individuals with additional support needs in Scotland. The widening of legislative scope in the health and social care system is a step in the right direction towards creating a just and adapted system for all.

Alongside legislation, the Cabinet Secretary mentioned important work being done on the ground, and in collaboration with the government. In Scotland, the NHS is dedicating its efforts towards incorporating anti-racism approaches in healthcare, with several local NHS boards creating ambitious co-produced plans to address health inequalities and pursue equality and inclusion.

“ Pleasing to hear Neil Gray reiterate that regional NHS Boards in Scotland should be working in partnership with the third sector, as there needs to be more collaboration between communities, charities and health services to protect public health - X (Twitter)

Recently, the government has secured continued funding for the Community Links Worker Programme in Glasgow, who offer one-to-one support for a range of issues, including poverty, isolation and loneliness, housing, debt, and abuse. Community Links Practitioners are invaluable members of the health and social care sector in Scotland, and funding ensures that far more people across Scotland have access to the care they seek. The continuation of this programme is essential for those in the most deprived communities to be linked with essential health and social care services.

Among other projects, the Scottish Government has worked in collaboration with the ALLIANCE to administer the Self Management Fund, which directly supports work that addresses health inequalities. The fund was organised to support the development of co-produced, person centred, self management activity across Scotland. The fund centres the experience of people living with long term conditions, and their unpaid carers.

Third sector organisations in Scotland are the necessary intermediary between the government, legislation and policy, and the people who are at the centre of health and social care. The Cabinet Secretary highlighted only some of the innumerable initiatives by organisations across Scotland that illustrate the progress that has happened in the recent past.

“ As we continue to reform and improve our health services, we shall place people at the heart of this. Only together, can we continue to make a real difference to the health and wellbeing of the people of Scotland - Neil Gray MSP



Workshops: Our Voice



The workshops were an “opportunity to hear from others and listen to concerns of those with lived experience”
- Survey Response

A central theme to this year’s conference echoed Professor Derek Feeley’s sentiment of individuals as experts in their own care, and the value in listening to people with lived experiences. It is also a recurring theme from last year’s annual conference, “**Strengthening our Collective Voice**”, which centred discussions around lived experience and collective work. This focus emphasises one of the ALLIANCE’s priorities and is a crucial step in pushing for systemic change. Workshops during the day approached this topic from several different angles, from networking to innovative research, national outcomes, and the reduction of stigma.


To build connections and encourage delegates to share their voices, the ALLIANCE organised a **networking and connecting café** which ran both in the morning and the afternoon. This workshop served as a chance to establish and build essential connections that are central to the running of third sector organisations, in a tangible and immediate way.

The workshop, **Strengthening global health: keeping medicine person-centred** was hosted by members of the ALLIANCE, Parkinson’s Scotland, ABPI Scotland, and the Government. James Jopling, Director of Scottish Parkinson’s UK and Professor Dame Anna Dominiczak, Chief Scientist for Health in the Scottish Government, described Scotland as a vibrant research environment, where pioneering clinical and commercial clinical research is occurring.


During her presentation, Professor Dame Anna Dominiczak spoke of the triple helix collaboration model, which underlines the need for collaboration between academia, industry, and the NHS to conduct research that guides tangible progress in the health and social care sector. She then explained the process of clinical trials so that delegates could have insight into the research process that guides innovation in health and social topics. Topics ranged from the use of Artificial Intelligence in diagnosis, to race equality, and the value of

technological equipment for people living with Parkinson's. A greater focus on research through funding, collaboration and innovation is a crucial step in guiding the health and social care system, so that it can be more adapted and considerate of individuals with differentiated needs and experiences.


Just as there is a need for more focused and innovative research, national outcomes need to be updated to guide local governments, public services, charities, organisations, and businesses in Scotland. These guiding principles provide a strong foundation for advising decision-making and action in the sector. A joint workshop by IFIC Scotland, UWS and the ALLIANCE called **Measuring What Matters** took place. During the workshop, Professor Stephen Gibb reported that the Scottish Parliament is considering the proposed revisions to the National Outcome on Care:

 **We are cared for as we need throughout our lives, and value all those providing care**

This workshop was an opportunity to listen to those with lived experience of using health and care services, particularly about what needs to change in view of the National Care Service. Facilitators discussed the role of the third sector, which is good at capturing qualitative outcomes, with efforts towards person centred approaches.

 **We should measure success in health and care with personal and rights-based outcomes, not just short-term targets** - Delegate

Often national outcomes are complicated, placing emphasis on the most easily measurable and quantifiable outcomes. Other 'soft' outcomes like care, are equally important and should be considered as such. Delegates agreed that it is crucial to listen to those with experience and consider inequalities and unmet needs when suggesting changes to existing national outcomes.

 **It would be good if we had a one-door policy, like a one-stop shop that would allow organisations to work together to measure outcomes in a truly integrated system** - Delegate

Another essential aspect of shaping 'Our Voice' in health and social care is understanding how the language we use shapes narratives and creates barriers. Stigma and stigmatising language hinder progress. During the workshop, **Bad choices or poor options? Tackling stigma**, speakers from Simon Community Scotland, Fast Forward, and the ALLIANCE explained that to shift narratives and to encourage a meaningful focus on individuals, it is essential to adapt our language and recognise how stigma spreads through words, tone, and intent.

In this workshop, attendees and panellists contributed to powerful discussions by sharing their expertise and experience with stigma across areas like learning disabilities, ageism, criminal justice, gambling harms, substance use, and single-parent families. Delegates agreed that stigma remains evident in health and social care, often centring narratives that perpetuate further harm and division.



People are not homeless, people experience homelessness - the way we use language is so important. Homelessness is a hard experience, one which people move in and out of, not a defining part of identity - Delegate

In Scotland, substance use is a priority issue in health and social care. Despite this, stigma continues to harm those with experience of substance use, who often simultaneously experience other barriers like homelessness, institutional care, poverty, and gambling. Presenters underlined that it is important to shift the narrative from lifestyle choice and personal responsibility to societal accountability, and the need for better options. To strengthen our voice, and move away from stigma, awareness and capacity-building helps individuals and organisations understand their role in stopping the use of stigmatising language.

An important tool to tackle stigma is the use of a human rights-based approach. The National Collaborative recently launched their draft outline of a '[Charter of Rights for People Affected by Substance Use](#)', highlighting how the use of human rights principles and language is essential for those navigating substance use, their families, and services across the sector. A rights-based approach makes it easier to centre individuals and acknowledge the influence of wider societal and systemic issues.



'Our Rights'



What are human rights in health and social care? In what ways are they protected, and how do we ensure equitable access for all?

It is important to create an equal understanding of legal rights in the sector, especially with the proposed Human Rights Bill (Scotland). A human rights-based approach is coming to the forefront of practice in the sector, where human rights law and principles are integrated into practice every day. The panel discussion and workshops integrated conversations of human rights to educate attendees and encourage crucial conversations within the changing landscape of health and social care.

Panel discussion: Shaping a more equitable future in health and social care



Professor Dame Anna F Dominiczak
Chief Scientist, Scottish Government
@UofGRegiusAnna



Professor Donna Hall CBE
@ProfDonnaHal



Marianne McCallum
Deep End GP
@mmccallum81



Naina Minhas
Director of Networking Key Services Ltd
@nkshealthLtd



An excellent hybrid panel on equitable healthcare tells us that healthcare must be co-produced by the people who use it most, to reach all communities in Scotland and break down barriers

- X (twitter)

During the morning sessions, delegates heard from a panel of experienced individuals committed to seeing progress in health and social care in Scotland. The panel was chaired by award-winning health journalist Pennie Taylor. The panellists, Professor Dame Anna Dominiczak, Professor Donna Hall CBE, Naina Minhas, and Dr Marianne McCallum, come from a broad range of professions and expertise, and provided a balanced and stimulating conversation. The panel represents key areas that are crucial for addressing health inequalities; including education, health and social care, and industry. During her address, Dame Professor Dominiczak emphasised the role that academic research can play in reducing inequality. Clinical studies, particularly those that come from global sources, can be used as a benchmark for continuous innovation. Equally, communities must be engaged in ways that represent their diverse experiences and needs.



I think Scotland has an opportunity to innovate without increasing inequalities - Professor Dominizak

Marianne McCallum discussed her experiences as a Deep End GP, working directly with the most deprived communities in Scotland, for whom health inequalities are multiplied. As an academic GP, McCallum has always practised in socioeconomically deprived areas, though she uses the term 'deprived' under protest. She acknowledged this as the current term to be used but cautioned against reducing communities to this label. She stressed the importance of proportionate universalism, recognising that universal rollout can create further inequality by focusing on equality over equity.



There's a massive issue that the health system is designed by healthy people, for healthy people. That's a very big reason why it does not work for our Deep End populations. Unless you spend time in communities, unless you live without resource, unless you face the many unseen barriers, you don't make policies that work

- Marianne McCallum

Treating people equally does not always mean treating them the same, particularly through the lens of health and social care needs. Naina Minhas, Director of Networking Key Services (NKS), has over 30 years of experience working with and advocating for the needs of ethnic minority communities in Scotland. Minhas focuses on combating isolation and deprivation, while continuing to platform women and their families to collectively address the concerns and issues they have.

During the panel, she identified the barriers facing South Asian communities because of cultural differences that are not always considered in service design. Barriers to accessibility - physical, financial, information, and cultural barriers – can further exacerbate existing inequalities. The design and delivery of health and social care must do better to recognise and remove barriers for ethnic and minority communities in Scotland.

“ Instead of starting with the service, we started with the person. Very often we have whole range of different types of services people access, but they don't work together, they don't wrap around to support the person, and very often people don't want a service or need a service, they need community support
- Donna Hall, CBE

Panellist Donna Hall CBE, joined remotely to discuss her work in local government. She spoke of her work with **The Deal** in Wigan, a social contract between residents, citizens and local government, that recognised how important resourcing and investment can be. In areas experiencing the highest rates of multiple deprivation, healthy life expectancy has increased by seven years. Projects like these are an excellent opportunity for policy makers to engage in genuine co-production, so that intersectional lived experiences can be included, and foundational in how we approach healthcare. Hall explained that consistent dedication to shifting investments, and person-centred care can create tangible impacts in the sector.

“ Shifting resources away from acute systems into community and prevention is essential. Trusting the sector in the voluntary and community sector and seeing them as equal, not having this parent-child relationship that we currently have - Donna Hall, CBE





Workshops: Our Rights



As the theme of 'Our Rights' continues to expand across all sectors in Scotland, health and social care remains central in implementing human rights. This year's workshops build on the foundation of existing rights work and take a meaningful look at how the new era of human rights in Scotland will allow this work to progress. With consistent focus on person-centred care, meaningful participation, policy implementation, and partnership working, we get closer to integrating human rights for all.



"We are in this together" - Survey Response

The workshop, **Policy, manifestos and influencing government**, led by the ALLIANCE policy team, allowed participants to discuss key themes emerging in the latest Scottish Government policies and legislation. The proposed integration of four additional human rights treaties into law with the new Human Rights Bill was discussed, with delegates recognising opportunities and barriers for implementation. Delegates agreed that human rights must go beyond just language or artificial inclusion.



The Human Rights Bill can't be doing what previous acts have done, where you have rights on paper but not in practice

- Delegate

Delegates discussed the need to increase access to current human rights by focusing on equity and intersectionality. Discussions also included key issues such as gambling harms, gaps in drug and alcohol policy, and the need to focus on dignity when discussing disability. The work of the ALLIANCE policy team continues to directly engage members to support campaigns, create engagement events, and conduct meetings. As the Bill, and other policy initiatives evolve, members should keep an eye out for opportunities to participate in giving feedback on further amendments.

Top-down human rights strategies, like policy and legislation, are important, but equally, bottom-up approaches from organisations and communities are an essential part of making rights meaningful for people in Scotland. This was echoed in the workshop, **Citizens Assemblies: Shaping the future of health and social care through inclusive decision making**, chaired by Pennie Taylor, with panellists from Inclusion Scotland, SCDC, Glasgow Caledonian University, and IJBs. Panellists shared their perspectives on the work of Citizen Assemblies (CAs), providing participants with a well-rounded and critical perspective.

Citizen Assemblies allow a representative group of individuals to learn about and participate in decision-making processes on national and local scales, making recommendations to politicians and other duty-bearers. During the workshop, delegates expressed concerns over

Citizen Assemblies becoming tokenistic or non-representative, particularly in cases where national assemblies are used to represent local areas. For this reason, additional emphasis was placed on the importance of ensuring mechanisms are established to measure the effectiveness of Citizens Assemblies.

Participants and panellists identified how co-produced ground rules could ensure a more effective process. While Citizen Assemblies are imperfect, they allow for participation, where decision-making has generally been done behind closed doors. The workshop concluded with a focus on encouraging meaningful participation wherever possible - centring people in decision-making processes.

When discussing rights, it is essential to look at the barriers for accessing rights and identifying those most affected. Those most at risk for human rights infringements, are often those with unseen and unmet needs. The workshop, **Unmet needs and health inequalities: strengthening our communities through partnership working**, investigated how persisting inequalities make accessing rights difficult. Contributions from the ALLIANCE Links Programme, Deep End GP, and the Moira Anderson Foundation, exemplified the success of partnership and community-based working. Partnerships like these are necessary to address the social determinants of health, and to ensure equity across health and social care needs.

After a decade of work, the **Community Links Worker Programme** (CLWP) underlines the importance of collaboration between the third sector and primary care. Those living in deprived communities face barriers to accessing care, often while experiencing the other issues such as poverty, and social adversity.

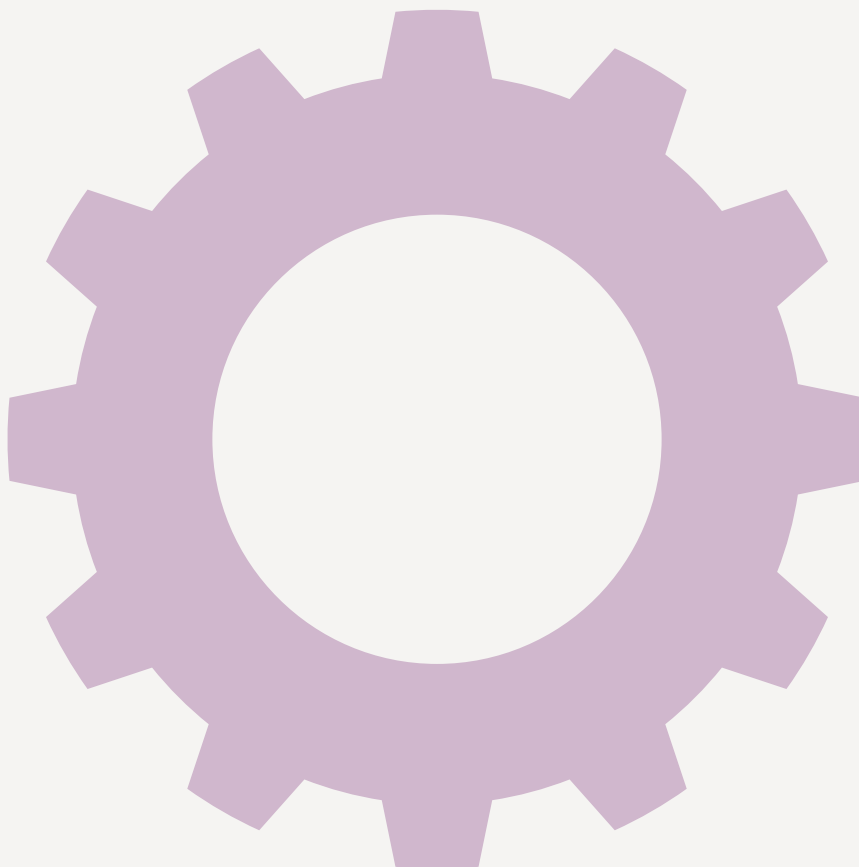
The CLWP is essential in linking communities to necessary services, while identifying gaps in care, and preventing future problems. Delegates expressed concern over how future changes in funding may affect people accessing services, particularly for programmes focused on social and community impact. Decisions about funding and the design of healthcare provisions can create further health inequalities, and without secure long-term funding for programmes like the CLWP, there are concerns that inequalities will worsen.

“ Sometimes we’ve got the wrong people involved in designing the healthcare system - Marianne McCallum, Deep End GP



Organisations, like the Moira Anderson Foundation, play a key role in facilitating partnership working to centre both clients and organisations. The foundation facilitates the referral process to the CLWP, reducing barriers to accessing services. Multi-disciplinary working plays a big role in ensuring individual needs are met, regardless of circumstance. The workshop, **Communication is a human right**, delivered by the ALLIANCE's self management team, Scottish Sensory Hub, and lived experience experts, underlined the importance of recognising hidden needs, and making service delivery more accessible and inclusive. ALLIANCE team members discussed their work with the [Scottish Sensory Hub](#), which is a lived experience platform, drawing on the experience of deafness, deafblindness, or visual impairment. In this workshop, delegates learned about the sensory hub's research on people's experiences of 'accessible information', discussing what the reality of meaningful inclusive communication looks like.

Through this research, and further discussions during the workshop, participants identified important factors that would reduce the continuing barriers for those experiencing deafness, deafblindness, or visual impairment. There was consensus that more staff awareness and training, options beyond digital, and embedding person-led choice in Self-directed Support (SDS) mechanisms, would all be essential to improve inclusive communication. When inclusive communication is not provided, it deepens health inequalities, further reducing choice and independence.



'Our Future'

What is next in store for the health and social care sector? What are the steps we can take to implement our voices and our rights? How do we ensure that change is tangible and durable?

Scotland needs a health and social care sector that is fit for purpose, and while much progress has been made, there is still a long way to go. Throughout the day, a prominent concern raised by panellists, delegates and workshop presenters was the need for tangible and measurable change in line with the ambitions set out across workshops and interventions. A focus on the future of health and social care requires a forward-thinking, creative, and innovative outlook that is fit for the times.

Keynote Speakers and Panel discussion: Scotland needs radical thinking and a new vision for long-term care



Rt Hon. Henry McLeish
Chair, Long Term Care Commission



Sara Redmond
Chief Officer, Health and Social Care Alliance Scotland
@redmond_kidd



Kenny Moffat
Member of Scottish Dementia Working Group, Alzheimer Scotland
@S_D_W_G



As the closing session began, delegates gathered for the final keynote speech and panel discussion, featuring the Right Honourable Henry McLeish, Sara Redmond, and Kenny Moffat, who discussed various perspectives and experiences around long term care. With vast experience in UK and Scottish politics, former First Minister McLeish started the session by introducing ten points related to health and social care that he believes delegates and members should have a unified view on going forward. Importantly, he identified the needs for primary, public, and preventative health, which are essential parts of ensuring care throughout peoples' lives. While recognising that there are competing views on resources and funding, Rt Hon. McLeish stated the importance of consistent investment.

“ We need a care system in Scotland that’s not driven by the market... At the end of the day, peoples’ care needs should not be assessed by how much or how little money we have, they're all intrinsically worth the same - Rt Hon. Henry McLeish

Peoples' health and livelihood should not be market dependent. When speaking on human rights, McLeish echoed many of the sentiments raised by delegates and speakers throughout the conference. He underlined the importance of moving past human rights as a buzzword, stating that human rights are an essential force for good. We need a better understanding of what these mean for the individual. To make rights meaningful, they cannot just be platitudes, they must be met with action. In his current role as Chair of the Long Term Care Commission, Rt Hon. McLeish discussed their current report, informed by lived experience, community discussions, and public engagement events. The report of the Commission's findings is now available.

“ What kind of country do we want to be? And what is the right thing to do? - Rt Hon. Henry McLeish

McLeish warned against the dangers of becoming a contented majority and encouraged delegates to continue with the same passion and drive for change going forward. Panellist Kenny Moffat spoke of his experience living with Vascular Dementia, after being diagnosed at age 50. He is a member of the Dementia Working Group, focusing his campaigns on raising awareness for those with early onset dementia. Moffat shared his experience, and his ongoing work with the Dementia Working Group, where he discussed the lack of support and options available for those diagnosed with Alzheimer's under 65.

The last panel contribution was from Sara Redmond, Chief Officer of the ALLIANCE, who brought together central themes of the day including long term care, the impending National Care Service, and human rights related to this work. When it comes to long term caring options, people speak highly of being able to stay in their homes and communities wherever possible. Nonetheless, there continues to be inequalities where access to these choices is not always possible.



We have strong rights frameworks in Scotland, but unfortunately what we're seeing are examples where people are not enjoying their right to choice... they're maybe being placed in care homes or hospitals, sometimes far away from their family and community
- Sara Redmond

Discussions about the National Care Service have been ongoing, and in the lead up to implementation, there continues to be debate and discussion. Sara emphasises that these conversations can sometimes take away from some of the more immediate issues. Rt Hon Henry McLeish echoed this, underlining the need for services before the implementation of the National Care Service in 2029. While we continue to look towards our future, there must be a balance between focusing on current dilemmas and emergent needs.



Workshops: Our Future



We "need to move from talking to action" - Survey Response


Progress in the health and social care sector in Scotland must consider changing variables outside of the sector - for instance, climate change, and an increase in the use of digital technologies. The sector must continue to adapt to these and overcome challenges in innovative and creative ways. These workshops emphasised the importance of this work and examples of where the third sector is leading.

Sustainability is a contemporary concern, and with the implementation of the Wellbeing and Sustainable Development Bill, comes the need for environmentally conscious progress and implementation. Design HOPES hosted a workshop, **Environmentally sustainable care: The effects of climate change on health and social care**, during which delegates discussed the intersection of climate change and health and social care. Participants identified key challenges of this intersection, specifically to do with managing priorities. They agreed that the sector creates a burden on the environment, for instance because of the plastic and metal waste it generates, but that this can be difficult to prioritise when dealing with immediate and emergency needs. For now, presenters pointed to the fact that progress in this field can take the form of supporting and empowering community-based approaches and initiatives that already exist, instead of focusing entirely on innovation.

In a similar way, the increase in digital use over the past several years has posed challenges for some within health and social care. As digital use increases, a digital divide deepens, excluding some from certain services or activities because they do not have an appropriate device. In the **Navigating the digital divide: Is digital good or bad for you?** workshop by the ALLIANCE, Scottish Care, and SCVO, participants discussed the benefits and potential risks of technology. While technology serves as a tool to access health information, it also poses risks due to misinformation and misleading medical information.

“ We can put all the money into it, but we don’t have the infrastructure. We would need staff, digital workers who coordinate this whole effort. How do we bring communities together? ”

The ALLIANCE provided some helpful existing and upcoming resources to help tackle the shortcomings of digital technology in the sector.



ALISS

An online local information system for Scotland to find service and activities for health and wellbeing.

[WEBSITE](#)



Discover Digital

An online resource to raise awareness of digital tools and resources that can support wellbeing such as community outreach, small grants, education and learning activities.

[WEBSITE](#)



Digital Citizen Panel

A panel that plans to hear the voices of people with lived experiences on their needs and preferences on digital services across health and social care.

[WEBSITE](#)

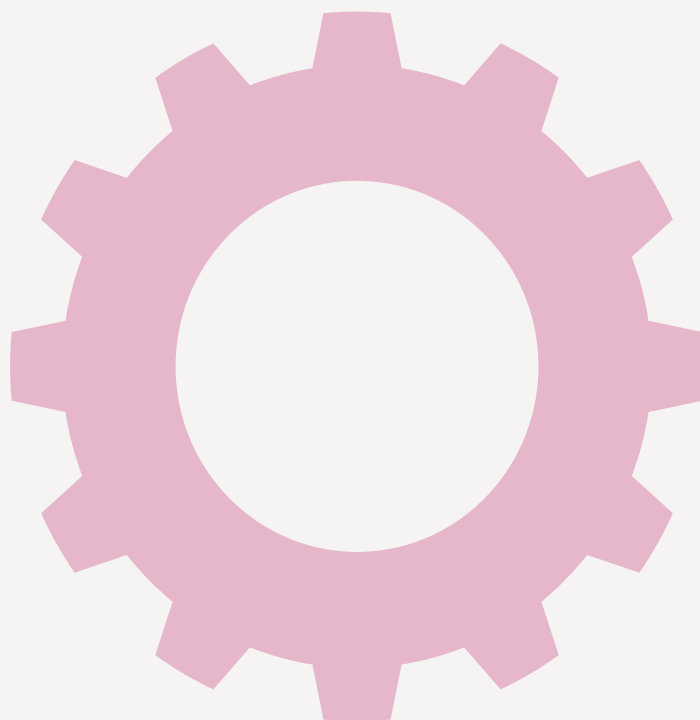
Presenters also explained the importance of hearing the voices of people with lived experience, using human rights principles in digital health and social care. According to these principles, people should be placed at the centre, and the use of digital technology should be a choice and only used where best suited. Emphasis should be placed on digital inclusion, rather than just widening access. Finally, individuals should have access to, and control over their medical records. Using principles like these throughout health and social practice ensures that individuals are not faced with additional roadblocks when accessing care.

Another workshop, **An equitable future: keeping people at the centre of health and social care** discussed similar ambitions of placing individuals at the centre of health and social care moving forward. This workshop was led by the Health and Social Care Academy, alongside experts to reflect on the **Five Ambitions**. Over the past year, the Academy launched their Five Ambitions for the future of health and social care. The Academy has since held events to highlight work around these five areas - Be Human, Lead Courageously, Reimagine Investment, Share Power, Measure Outcomes - as well as developing case studies, to share how each ambition is being practised across the sector. These ambitions help us imagine the future of health and social care, emphasising the importance of having a long-term vision for positive change.

During the workshop, delegates heard from experts, reflecting on the Ambitions in the context of their work. Stories and advice from those with lived experience brings life to the purpose of the Ambitions, highlighting how they are relevant in practice. The value of lived experience, participation and leadership is often highlighted as an essential part of this work but can easily become tokenistic. Delegates agreed that embracing true and genuine leadership is crucial.

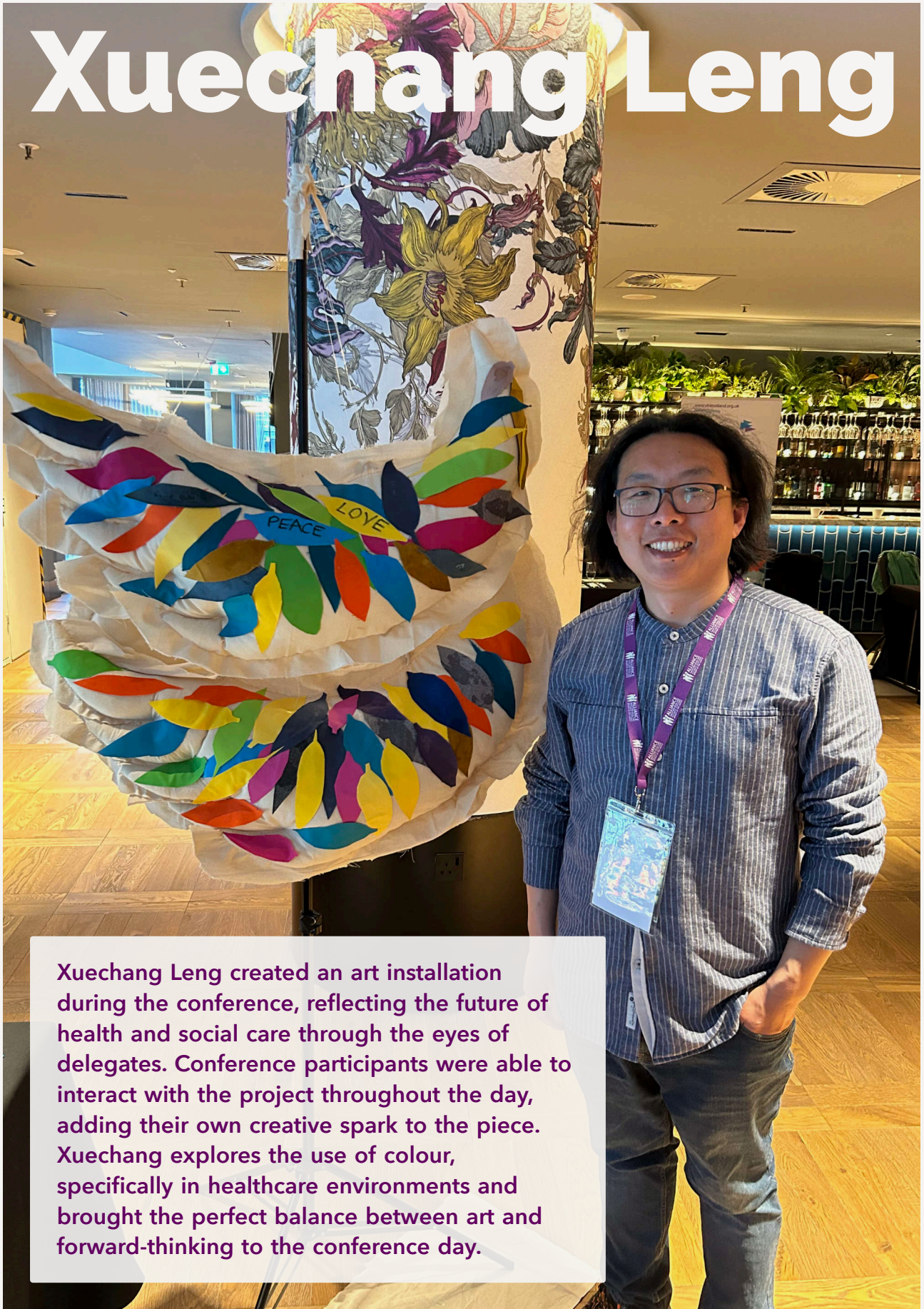
“ To be truly led by people with lived experience, I had to unlearn a lot of my assumptions

The workshop highlighted priorities for the development of health and social care in line with the Five Ambitions. Delegates discussed the importance of empowering people, creating a balance between lived experience and decision-making, prioritising support for individuals over profit and power structures, and viewing social care as an investment. The workshop underlined that the Ambitions serve as a golden thread - especially when centred around the voices of those with experience - to shape a more just, and equitable health and social care sector for all.



Performances

Xuechang Leng



Xuechang Leng created an art installation during the conference, reflecting the future of health and social care through the eyes of delegates. Conference participants were able to interact with the project throughout the day, adding their own creative spark to the piece. Xuechang explores the use of colour, specifically in healthcare environments and brought the perfect balance between art and forward-thinking to the conference day.


Indepen-dance



The Evolve dance group by Indepen-dance is a Glasgow-based award-winning inclusive dance company. In the closing session of the conference, members of the dance group performed uplifting dances to Moonlight Serenade by Glenn Miller, and God Put a Smile on Your Face by Mark Ronson ft. The Daptone horns. Delegates were encouraged to participate in some movement during the performance to get involved.



"Indepen-dance is the most fun end to a conference I've ever had!" - Survey Response

A man with a beard and a purple lanyard is seated on a green stool, playing a piano. The piano is decorated with colorful floral and butterfly patterns. A black table in the foreground holds a white folder and a small card. In the background, a woman in a striped shirt is visible. The setting appears to be an indoor event space.

To add a musical element to the day, Tom Binns Programme Director of Glasgow Piano City, joined the conference to perform, and allow others to play and sign the piano lid. Between sessions, participants were able to explore and enjoy the piano, offering their talents.

Glasgow Piano City

Conclusion



The conference “renewed hope and inspiration to make change for the better in health and social care”
- Survey Response

The 2024 ALLIANCE Annual Conference, ‘Our Voice, Our Rights, Our Future’, marked another year of successful collaboration. With a large turnout and access online, the conference had representation from across the country.

Hearing from panellists and keynote speakers gave participants an opportunity to ask questions during lively Q and A sessions, while also showcasing a variety of opinions and expertise. Looking to the future, continuing these opportunities for sector wide collaboration is essential, so we can work together to tackle the challenges and face them head on.

Throughout the day, delegates had the opportunity to fill out bunting, reflecting their thoughts on the future of health and social care. The responses to these questions reflect the current landscape as well as opinions about where we are headed.

What would you like to see from the future of health and social care?

“ Everyone, regardless of where they live, their age/ability/language can free access the services they need to live well

“ Caring employment recognised by better salary and training

“ Stable funding from the government

How do you feel about the future of health and social care?

“ Worried about lack of investment

“ If funding is forthcoming, it has the potential to flourish

Delegates were equally nervous and optimistic about the future, emphasising the importance of proper funding and support for staff. The importance of holistic support and equitable access to services was expressed, alongside a compassionate approach to service design and delivery.

What change would you make to the health and social care sector?

“ Funding being shared equally with private and charitable organisations

“ Better communication to ensure full holistic support

“ Better work/life balance for social care staff, particularly home carers

What does good health and social care look like?

“ Fair, equal, available, and adequately funded!

“ Staff supported in a more caring way

“ Caring for all in a person-centred, equitable, compassionate approach

The conference echoed a sense of urgency, with delegates underlining the importance of using this time to create necessary change in health and social care. Moving forward, it is important to take the next step into action, so that this energy can be harnessed into practice across the sector. The themes from the conference underlined the variety of ways in which individuals and organisations across the sector are working together to implement vital change in areas of human rights, long term care, digital access, environmental justice, health, and socioeconomic equality. We must empower individuals with lived experience of health and social care to be actively involved in health and social care. We need a fundamental shift to focus on supporting good health and wellbeing rather than just service delivery. Sustained investment in communities to support shared decision-making is essential for effective and sustainable reform.

About the ALLIANCE

The Health and Social Care Alliance Scotland (the ALLIANCE) is the national third sector intermediary for health and social care, bringing together a diverse range of people and organisations who share our vision, which is a Scotland where everyone has a strong voice and enjoys their right to live well with dignity and respect.

We are a strategic partner of the Scottish Government and have close working relationships with many NHS Boards, academic institutions and key organisations spanning health, social care, housing and digital technology.

Our purpose is to improve the wellbeing of people and communities across Scotland. We bring together the expertise of people with lived experience, the third sector, and organisations across health and social care to inform policy, practice and service delivery. Together our voice is stronger and we use it to make meaningful change at the local and national level.

The ALLIANCE has a strong and diverse membership of over 3,600 organisations and individuals. Our broad range of programmes and activities deliver support, research and policy development, digital innovation and knowledge sharing. We manage funding and spotlight innovative projects; working with our members and partners to ensure lived experience and third sector expertise is listened to and acted upon by informing national policy and campaigns, and putting people at the centre of designing support and services.

We aim to:

- Ensure disabled people, people with long term conditions and unpaid carers voices, expertise and rights drive policy and sit at the heart of design, delivery and improvement of support and services.
- Support transformational change that works with individual and community assets, helping people to live well, supporting human rights, self management, co-production and independent living.
- Champion and support the third sector as a vital strategic and delivery partner, and foster cross-sector understanding and partnership.



ALLIANCE
HEALTH AND SOCIAL CARE
ALLIANCE SCOTLAND
people at the centre

