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Clare Haughey MSP  
Convener  
Health, Social Care and Sport Committee

16 July 2024

Dear Convenor,

Thank you for your letter dated 26 June requesting follow-up information following my appearance at the Health, Social Care and Sport Committee's session on 25 June which focused on post-legislative scrutiny of the Social Care (Self-directed Support) (Scotland) Act 2013.

I have set out below my response to your specific questions around commissioning and procurement, alongside monitoring and evaluation.

### **Commissioning and procurement**

As the Committee will be aware, ethics and equity are themes that run throughout the SDS Improvement Plan 2023-27, jointly produced by the Scottish Government and COSLA. Specific activities within the Plan 2023-27 that focus on more ethical and equitable processes for commissioning of social care support, as well as resource and budget allocations, include but are not limited to:

- The Scottish Government providing grant funding to In Control Scotland to conduct research into current procurement and commissioning practices, specifically focussing on barriers to commissioning and the sharing of good practice. More information can be found at [Self Directed Support | In Control Scotland \(in-controlscotland.org\)](https://www.in-controlscotland.org).

Furthermore, the plan sets out the need for:

- Increased flexibility in the provision of in-house commissioned services when delivering Option 3.
- More flexible use of individual social care budgets to support a person's choice and desired outcomes.

Additionally, the creation of the National Care Service will address the implementation gap by improving commissioning and procurement practices, through better alignment between legislation, Scottish Ministers, special advisers and the Permanent Secretary are covered by the terms of the Lobbying (Scotland) Act 2016. See [www.lobbying.scot](https://www.lobbying.scot)

strategies and guidance, and local practice. The NCS Board will provide national oversight through agreeing and setting national principles, standards, guidance and practical support for ethical commissioning and procurement which will inform the development and delivery of local ethical commissioning strategies. Work is already underway with partners via the Adult Social Care Ethical Commissioning (ASCEC) working group to develop these principles; in line with the recommendations arising from the Independent Review of Adult Social Care in Scotland (IRASC).

## Monitoring and evaluation

As with all legislation, the Scottish Government is required to produce various accompanying documents to support the parliamentary process. The Policy Memorandum published to accompany the introduction of the Social Care (Self-directed Support) (Scotland) Bill in February 2012 set out the intentions around how compliance with the Bill would be measured. For ease of access, this can be accessed via [\[ARCHIVED CONTENT\] Social Care \(Self-directed Support\) \(Scotland\) Bill - Parliamentary Business : Scottish Parliament \(nrscotland.gov.uk\)](#) and I would draw your attention to paragraph 51 which states:

*“The Scottish Government will monitor compliance with the Bill through a number of existing or soon to be established measures. The Scottish Government is undertaking a review of the statistics collected on direct payments, with a view to amending the categories of information and to cover a wider range of self-directed support options. Implementation of the self-directed support strategy will be subject to ongoing monitoring and review through the activity of the national Self-directed Support Implementation Group. This group includes Scottish Government officials, the Association of Directors of Social Work, the Convention of Scottish Local Authorities, user-led organisations and provider-led organisations. In addition to the review of data collection, implementation will look to shift to measuring improved outcomes for people directing their support. This will be achieved through a number of routes including the Community Care Outcomes framework, the work of the Care Inspectorate and specific evaluation of progress in co-production with citizens who require support.”*

As you will be aware, Statutory Guidance was produced and issued to local authorities in April 2014 to reflect the duties and powers accompanying the Social Care (Self-directed Support) (Scotland) Act 2013. This Guidance was updated in October 2022 to make clearer the roles and responsibilities of local authorities in making sure that people are able to get the support that is right for them. Section 10 of the Statutory Guidance relates to transparency and monitoring. It states the authority’s “approach to the allocation of [SDS] resources should be fair, transparent and clear to everyone” and it outlines the necessity for the authority to co-ordinate its approach to monitoring welfare and financial outcomes. It adds “It is important that all those involved in monitoring arrangements discharge their role in line with the values and principles and outcome-focused approach associated with SDS”.

In terms of your query regarding current criteria of success, Scotland has a wealth of social care data, but there still remains large gaps in our current knowledge. This includes gaps around unmet need and people’s experiences and outcomes, including the extent to which information about SDS options is made available, the extent to which eligible people receive the SDS option that they wanted, and whether that option met their outcomes.

In order to better understand the current delivery of SDS in Scotland, the Scottish Government review data published from a variety of sources. This includes annual data published by Public Health Scotland (PHS) in relation to SDS and Care at Home Demand - sometimes referred to as unmet need. SDS data is also collected and published annually and in response to the variation in

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this data, PHS are actively engaging with Health and Social Care partnerships to improve these statistics for future publications.

The Health and Care Experience (HACE) Survey is also a key source of information on care, support and help with everyday living, including help that people get from organisations, friends or family. The most recent HACE survey published in May 2024 included new responses to allow us to better understand if people were offered SDS options and if they received their preference.

Using these data sources together with a range of engagements with various stakeholders and those with lived experience, we are able to build a better understanding of the current state of SDS delivery across the country.

As outlined during the session on 24 June, within the SDS Improvement Plan 2023-27, we committed to producing a succinct monitoring and evaluation plan that will focus on improving the impact of activities and to facilitate a continuous learning approach. A draft of this plan is currently with stakeholders for consideration, with a view to it being published later this summer, with the first annual report produced soon after. The information collated via the processes set out in this plan, alongside future data improvements will be instrumental in identifying successes, as well as areas for improvement.

I hope this response provides the additional information you are looking for on the above themes but please do not hesitate to contact my office or officials, should you require any further information. I look forward to receiving a copy of your report in the Autumn.

Yours sincerely,



**MAREE TODD**

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