

On the Block



Lack of care? The Scottish Government's Consultation on A National Care Service for Scotland

Anonymous

On the Block is an occasional column which allows authors to express themselves in unconventional or provocative ways. In this special issue we publish a piece by an anonymous author whose experience of government consultations leads to questions about their purpose and value if they do not sufficiently engage (with) the participants.

This is a personal account of being involved in the consultation both as a disabled person myself, and as a community worker supporting a group to take part. For many community workers, our own experiences relate to those of the people we work with. This brings knowledge and passion to our work and helps us connect to people, but sometimes the work can affect us more deeply than if we were working with people with whom we didn't share a background. This was my experience with the National Care Service (NCS).

Background to the NCS

I had used social care services in the past, and I expected I would need them in the future. Social care services in Scotland are delivered by the public sector, voluntary sector and private sector. Service users usually have to contribute to the cost and provision can vary widely in different parts of Scotland. It's a complex system to understand and deal with. It is also undervalued and underfunded compared to the National Health Service.

So, the idea of A National Care Service was welcomed by many people. It offered a vision of a responsive, person-centred, joined-up care system and, given the analogy to

the National Health Service, many hoped it would be publicly owned and free at the point of access. First Minister Nicola Sturgeon promised us: "We will create a National Care Service, to match the post-war National Health Service." https://www.gov.scot/news/scotlands-recovery/

The Scottish Government set up an Independent Review of Adult Social Care (IRASC) chaired by Derek Feeley who produced a report in February 2021. Following the Scottish Elections in May 2021, the Government then started a consultation on the National Care Service which began on 9 August 2021 with a deadline of 2 November 2021. The Scottish National Party had made the National Care Service a central manifesto promise.

My experience of the consultation

My organisation hadn't engaged with the Independent Review of Adult Social Care (IRASC) and I had not taken much of an interest in it either. However, one of the groups we supported wanted to get involved in responding to the Consultation. I was keen to do this work with them and I began to find out as much as I could about the NCS and the consultation.

I looked at the Feeley Report and the SNP manifesto. I looked at the consultation document. I read statements from a variety of organisations. Most importantly of all, I spoke to people I knew who were active in the disability movement.

Key problems

My experience of the consultation made me very uncomfortable from the start [?]. And the more I engaged in it the less confident I was about its potential to fulfil the promises of the Feeley Report and the stated aspirations of the Scottish Government.

One reason that I felt so discouraged was the way the consultation was organised:

 The Easy Read version of the consultation was delayed. This should always be published at the same time as the full consultation as it is a way of making written information more accessible to people with learning disabilities and is also useful for people who struggle with written text for other reasons.

Vol. 13, No. 3, Winter, 2022

- 2. The public meetings were held online on Teams, which ostensibly made it easier for people all over Scotland to attend. The Scottish government can only use Teams for online meetings and events. There were regularly over 100 people at these meetings and most of us could not use the chat to add our comments and thoughts. The large number in the meetings meant that many of us would not get a chance to speak and, in any case, many people find it easier to type in the chat box than speak.
- 3. Most importantly, the meetings did not provide BSL interpretation, captioning and there were no breaks. All this made the events more inaccessible for many disabled people.
- 4. The consultation document itself was very long, uneven and complex. Some sections were covered in very vague details while others were much more developed. There was very little reference (?) to related policy and consultations e.g. Human Rights Taskforce, Mental Health Law Review.
- 5. The consultation included many more services than were covered in the Feeley Report. It wanted to cover all manner of services such as criminal justice social work, all children's services and community mental health services.
- 6. Finally, it was rushed. The SNP had promised to begin the consultation within the first 100 days of Parliament and that there would be a Bill before Parliament by the end of the first term. A new team of civil servants had to be created and they had very little time to organise themselves and to start a very high profile and complicated consultation.

Care?

Caught up in all of this was very stressful for me, both as a disabled person and a community worker.

It seemed to me and the group members that people who use adult social care services were not as central to this consultation as we had been promised. The powerful voices of service providers and professional bodies were much better organised and louder. And the rushed process meant that the time disabled people and other social care users need to engage seriously with such complex matters was not factored in. We were told we only needed to respond to those sections that were relevant to us. However, the



group I worked with identified that many sections which were not obviously relevant actually were.

We were told we could have a member of the Review secretariat come and speak to our group. It took a lot of back and forth to arrange it and we had very little notice of the date so not many people could attend.

When the consultation period ended, I was exhausted. It wasn't just the amount of work; it was deeper than that.

I felt that in the end the NCS was not for me, or people like me. It was going to be business as usual, focused on service provision with little real input from disabled people on how it was developed. It would still be run by current providers and there would still be care charges. I couldn't see how this would lead to meaningful change on the ground. Most disabled people experience invalidation and epistemic injustice throughout our lives, most often from health and social care services. The consultation repeated this negative experience.

It doesn't have to be this way. For example, I had a much more positive experience with the Mental Health Law Review. It was much more inclusive and interested in the views and experiences of people with lived experience. The main differences were that it wasn't rushed, it offered different ways for people to be involved, and all the different interest groups were taken seriously and equally. Perhaps this was because it was run by people who had a background in mental health legislation including people who had been subject to the law, as well as people with relevant legal and professional experience. The Review's remit was clear and well thought out. It happened in stages rather than in a two-month flurry of meetings with only six weeks to respond. And the quality of the final report is proof of that.

The crucial difference between these two experiences is that there was a commitment to producing mental health legislation in a way which was transparent and inclusive while the focus of the National Care Service consultation was on pushing it through for political reasons.

About the National Care Service: <u>https://www.gov.scot/policies/social-care/national-</u> <u>care-service/</u>