HSCP08 Scottish Care Independent Sector Lead Post

About the Proposal

Title of Proposal.

HSCP08 Scottish Care Independent Sector Lead Post

Intended outcome of the proposal.

The proposal is that the Independent Sector Lead funding for Scottish Care not be continued resulting the loss of the current part time post and subsequent representation from this role on the IJB. This post will be removed due to budget constraint. This will deliver a saving of £44,157.

How does your proposal align with strategy?

The proposal is contained in the annual budget proposals which consider a wide range of posts and services. Within the current strategic plan the HSCP is required to efficiently and effectively manage all resources to deliver best value. Scottish Care work with HSCP's across Scotland supporting each in unique ways according to locally identified need. The ISL has facilitated the relationship with the Independent Sector bringing expertise and knowledge and independent advocacy. This role has participated on the board and delivered operational support. There is acknowledgment that there would be a loss of Scottish Care national expertise for the sector however we are not required by statute to have the post and in the landscape of all the budget proposals we require to direct funding to the delivery of care.

Description of proposal.

The budget proposal is not to continue with funding for the 3 day per week Independent Sector Lead post. This role has experienced significant reductions in funding over the last three years by making this a four day a week post in 2024/5, then three days a week in 2025/26 and removing the expenses budget to ensure this role is delivered remotely.

This post supports relationships with the independent sector and offers advisory to the IJB (independent sector nominated Scottish Care replacing a provider as representative and explains the breadth of involvement atypical of IJB membership).

The HSCP commissions the independent sector for:

76% of care home beds, and

over 65% of all care at home hours

This means the independent sector is not peripheral rather it is the core delivery mechanism for statutory adult social care in Argyll & Bute.

Lead and Appropriate Officers

Lead officer.

Charlotte Craig

Lead officer job title.

Business Improvement Manager

Lead officer service.

HSCP

Appropriate officer.

James Gow

Appropriate officer Job title.

Chief finance officer

Who will deliver proposal.

The proposal would remove the funding to Scottish Care with a potential loss of employment.

Signed off by. James Gow

Date.17/03/2026

Evidence

Data - What data have you used to inform the IIA.

Working with Scottish care they provided a narrative report which included submissions from independent sector partners advocating for the retention of the post on the basis of benefit on the provider/HSCP relationship.

Providers stress that they are at breaking point due to pressures in the sector and issues with process. Without representation and advocacy, several have noted they will struggle to survive with issues often unaddressed.

Other information - This may include reference to reports by other people / organisations relevant to the impacts you identified.

The post holder is employed and managed directly by Scottish Care. The post has previously been subject to reduction. Sector sustainability is an ongoing issue however with the rise in the cost of care pressures have increased post covid.

Consultation - What consultation / engagement have you carried out to inform the IIA?

This role is included in the general public engagement and direct engagement has taken place with Scottish Care on a number of occasions with one formal online meeting with the post holder and the Chief Executive.

Narrative submissions have also been received from the Scottish Care Branch chairs on behalf of Care at Home and Care Home providers. Both note the importance of participation in the strategic planning group and the posts role as advocate.

Gaps in evidence.

The report provides a wide ranging impact on the basis of the removal of the post. The post has brought value and exists in the wider operational team. Some concern is raised that the sector would be impacted to the degree oultined by the removal of the post, this may be on the basis of forecast impacts and requires some mitigating actions. A gap in evidence is an overall and individual picture of provider health at this point and this would be recommended as a starting point in the event this is supported. This would then require to be tracked for change.

Knock on affect.

Yes

Knock on affect details.

The report notes the increased need for access to HSCP leadership which would require to be clear on its role in supporting commissioned providers, there would be a loss of wider sectoral knowledge directly for providers through the ISL. There would be a requirement to establish different practice with providers and avoid the highlighted downstream consequences for service users and the independent sector..

Monitoring - How will you monitor the impacts of your proposal.

Increased monitoring of relationships, provider sustainability, concerns about viability. there would be potential to formalise a more rigorous approach in the following. Part of this is currently undertaken with the commissioning team and manager although may need increased resource during any transition.

monthly financial health of each provider

staffing levels & ability to fill care at home runs

vacancy and occupancy rates in care homes

risk of provider failure (RAG rated)

number of emergency HSCP interventions required

communication failures leading to people not receiving care

provider staffing turnover and vacancy rates

establish monitored formal communication

any impacts across wider duties

Fairer Scotland

No impact justification.

Under the Fairer Scotland Duty, the HSCP must consider how decisions will reduce inequalities of outcome caused by socio-economic disadvantage. The submission makes several points that directly relate to inequalities, access, vulnerability, and the potential for widening existing gaps if the ISL role were removed as narrative submission.

The independent sector delivers the majority of care at home hours and care home beds in Argyll & Bute (76% of care home beds and over 65% of care at home hours). There is potential for communication and coordination to weaken, the narrative presented from Scottish Care suggests: increased delayed discharges, increased unmet need, increased likelihood of provider failure. These consequences disproportionately affect low-income individuals who rely on statutory adult social care and have fewer alternative options. The submission notes that independent sector fragility is particularly acute in rural and island areas and people in remote areas already face greater inequality in accessing consistent care. Loss of sector support and coordination could widen this gap. However the extent of this work is not limited to the current role of the Independent sector lead and it is likely that this could be mitigated and impacts avoided in the long term.

Consumer Duty

Does your proposal affect individuals, businesses or both?

Both

On the basis of your assessment, what are the likely impacts of your proposal?

Fairness and Information are rated as don't know as we cannot identify the impacts yet– safety is rated as no impact as despite the narrative provided the HSCP would require to ensure that a relationship with the independent sector is sustained and this relationship is operationally functioning in some areas that we are aware of. Other elements are noted as no impact such as choice as formal contracting structure are in place as is the monitoring of provider health.

Positive impacts you have identified.

While this post represents a loss of expertise there will be financial efficiencies generated by the saving could indirectly benefit consumers.

Negative impacts you have identified.

The Scottish care report notes the impacts on the following
safety and quality of service
risk of harm from system failure
transparency and engagement
provider stability
It further notes impacts on services users of :
access to essential care
fair treatment of people who rely on social care services
Independent representation may be impacted and access to the wider independent sector environment and potential for influencing and information sharing.

The narrative provided is not soley the role of the ISL within the HSCP with a number of officers sharing this responsibility. With the ISL role undoubtedly brings expertise and the wider national picture it would be a concern and risk for this to be the only point of addressing the outlined items within the HSCP.

What alternatives have you considered which can improve outcome for customers and/or reduce harm?

The submission specifically note the relationship with operational staff which would require to be addressed if it is as presented. An improved working position would be to the benefit of staff service providers and service users. Other commissioning relationships or governance mechanisms could absorb some of the post's functions and the establishment of a baseline position and monitoring.

How have you reduced harm to consumers through the development of your proposal?

The report and information from Scottish Care notes a strong preference to retain the role as part of the independent sector liaison, advocacy and support. There is significant value brought by the embedded post and relationship to Scottish Care however at least a proportion of the operational role could be undertaken by HSCP staff albeit not with the inreach to Scottish Care and a reduction in sector expertise. It is acknowledged that no post would create a gap and this would require to be addressed with a risk a harm to the sector if this was not done.

Channels of communication and active working are in place however providers note these as not effective at present and this would require to be addressed.

If you have not been able to reduce harm to your consumers, why not?

The post has brought value and was particularly important historically during the COVID period. It would likely be acutely felt by providers however there would be option to mitigate some of this at least in the first instance operationally. Where possible we would seek a managed handover.

Children Rights and Wellbeing

No Impact Justification

Provided information does not explicitly mention children. The role is primary in supporting providers of older adult services and their sustainability.

A lack of sustainability would have wider impacts across the system however while there is value in the support the role providers it is not system dependents and we note we would require to ensure contract management, developmental and commissioning relationships are sustained across the relevant staff.

While material impacts on children's rights and wellbeing are inferred because the ISL role affects the stability, safety, and accessibility of essential care services, none are evidenced and on

reflection, no indirect impact is anticipated. At this point the risk assessed directly related to the post is low.

Island Community

No Impact Justification.

The report from Scottish Care is not explicit in respect of the removal of the post in respect of the duty but states that independent sector fragility is especially acute in rural and island areas, meaning these areas are at highest risk if sector support is weakened. However gaps in evidence do not substantiate this and the dependency of the sector on the post for continued operation.

The risks noted in the removal of the post are noted with an identified gap which would require to be addressed through the wider operational body.

Equality Impact

Equality impact on service users

No Impact Justification.

Similarly on reflection the responsibility operationally in maintaining operator health and sustainability extends beyond the ISL post and while this brings value the responsibility is shared widely within the HSCP to ensure the cited impacts would not materialise.