

# Consultation Questionnaire

## Draft Statutory Guidance on Care and Support

### Consultation Questions

Section 2 : Values and Principles

**Question 1a: Was this section of the guidance clear and easy to understand?  
(please tick)**

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Question 1b: How useful did you find this section of the guidance?  
(please tick)**

Very useful	Quite Useful	Not very useful	Not at all useful
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Question 1c: Do you have any further comments on this section of the guidance?**

*Some advice to help you to answer this question – Please provide your suggestions for improvements or additions to this section. Are there any further topics that you would like to see included, any changes that should be made or any other comments you'd like to make?*

Comments:

Step 3 of Persons Pathway –  
Questions raised which need clarifying:

Does the supported person have capacity to make informed choices / decisions?  
Is an advocate or an Independent advocate required? Importance of Independent advocate needs to be included.

Can services be provided before the longer process of assessment is undertaken?  
Many people are in crisis so this needs clarifying – new assessment process for personalisation has not been shown to be a quick process.

Step 4 of the Persons Pathway

Community care services are offered to:

Adults aged 18 and over who:  
Are in need of care and attention  
Suffer from illness

Suffer from mental disorder/illness including personality disorder, substance misuse related brain damage or learning disability however caused or manifested.

Are persons who in the opinion of the local authority have asked for assistance for local authority services and facilities.

Are in need of care and attention due to use of drug/alcohol dependency, or having

been released from prison or other forms of detention.  
Are persons subject to immigration control.

Carers of children and Children Affected by Disability (ie young carers, young children with a sibling or parent who needs support) – where do they fit in the process. Very often neglected as they are neither “Community Care” or “Children” need to be clear on this. Where should budgets come from and whose responsibility Adult Services or Children and Families.

## **Draft Statutory Guidance on Care and Support**

### **Consultation Questions**

Section 3: Values and Principles

**Question 2a: Was this section of the guidance clear and easy to understand?  
(please tick)**

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Question 2b: How useful did you find this section of the guidance?  
(please tick)**

Very useful	Quite Useful	Not very useful	Not at all useful
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Question 2c: Do you have any further comments on this section of the guidance?**

*Some advice to help you to answer this question – Please provide your suggestions for improvements or additions to this section. Are there any further topics that you would like to see included, any changes that should be made or any other comments you'd like to make?*

Comments: helpful to include reference to:

## **Draft Statutory Guidance on Care and Support**

### **Consultation Questions**

Section 4: Eligibility and Assessment

**Question 3a: Was this section of the guidance clear and easy to understand?  
(please tick)**

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Question 3b: How useful did you find this section of the guidance?  
(please tick)**

Very useful	Quite Useful	Not very useful	Not at all useful
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Question 3c: Do you have any further comments on this section of the guidance?**

*Some advice to help you to answer this question – Please provide your suggestions for improvements or additions to this section. Are there any further topics that you would like to see included, any changes that should be made or any other comments you'd like to make?*

Comments: Include reference to:

Need to highlight the possible / probable needs for fast response to crisis situations initially before the assessment is undertaken over a longer period of time. Need to include the need to manage risk and enable the Supported Person to meet their outcomes in least restrictive manner possible whilst ensuring enough support is being offered to the Supported Person but either statutory or voluntary organisations.

Encourage capacity building in terms of looking at community assets and supports available.

Where an MHO is involved for but no care management, then MHO have a duty to refer to care management / or to undertake themselves, a robust, holistic assessment of all the Supported Persons aims and objectives.

**Draft Statutory Guidance on Care and Support**

**Consultation Questions**

Section 5 : Support Planning

This section of the guidance covered:

- general guidance on support planning
- risk
- resources
- the choices that must be made available to the supported person and
- information and support

**Question 4a: Was this section of the guidance clear and easy to understand?  
(please tick)**

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Question 4b: How useful did you find this section of the guidance?  
(please tick)**

Very useful	Quite Useful	Not very useful	Not at all useful
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Question 4c: Do you have any further comments on this section of the guidance?**

*Please provide your suggestions for improvements or additions to this section. Are there any further topics that you would like to see included, any changes that should be made or any other comments you'd like to make?*

**Comments:**

I think this section would benefit from highlighting the necessity of working with and managing risk in a less risk averse manner (least restrictive way) which helps the Supported Person to work towards achieving their outcomes.

Make clear that the legislation runs alongside the SSSC Codes of Practice and also the duty of the local authority to safeguard vulnerable adults. More substance given to the duty of LA to investigate complaints into Power of Attorney and Private Guardianship and to investigate this under the Mental Health (Care and Treatment) Act 2003. Also reminder of necessity for investigation of alleged abuse by Provider Agencies under Adult Support and Protection legislation.

Concerned about the use of POA to act against someone's wishes (mainly in Dementia / Older People category) where although someone lacks capacity they would have felt very strongly that they were against the measures being agreed by the POA and Statutory bodies in order to alleviate strain on system (ie bed blocking or too many cases for Care Management). Need to make sure that the option of Independent Advocacy is made available to Carers as well as those who meet criteria under the Mental Health Act.

**Draft Statutory Guidance on Care and Support**

**Consultation Questions**

Section 6 : Monitoring and Review

**Question 5a: Was this section of the guidance clear and easy to understand?  
(please tick)**

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Question 5b: How useful did you find this section of the guidance?  
(please tick)**

Very useful	Quite Useful	Not very useful	Not at all useful
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<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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**Question 5c: Do you have any further comments on this section of the guidance?**

*Please provide your suggestions for improvements or additions to this section. Are there any further topics that you would like to see included, any changes that should be made or any other comments you'd like to make?*

Comments: Include reference to:

More clarity sought on how the different processes such as Mental Health process and AWI, ASP fit within this new framework.

Frequency of reviews should be determined and agreed by level of risk presented to self, other and from others (ie clear Risk Assessment recorded which addresses these matters). This is also much more realistic given the amount of work undertaken by an overwhelmed Health and Social Care system.

**Draft Statutory Guidance on Care and Support**

**Consultation Questions**

Section 7 : Facilitating genuine choice for individuals

**Question 6a: Was this section of the guidance clear and easy to understand? (please tick)**

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Question 6b: How useful did you find this section of the guidance? (please tick)**

Very useful	Quite Useful	Not very useful	Not at all useful
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Question 6c: Do you have any further comments on this section of the guidance?**

*Please provide your suggestions for improvements or additions to this section. Are there any further topics that you would like to see included, any changes that should be made or any other comments you'd like to make?*

Comments: Include reference to:

This requires a really good community mapping in each area and will be very localised and hit and miss. Quality of support and information / knowledge of individual worker will be crucial and will need to be given much more importance. Working in partnership with local organisations in the voluntary sector and providing funding for these organisations will be crucial. In England many of the different, quality, not-for-profit services available in the community have gone to

the wall and closed down as a result of lack of foresight in this area.

Paragraph 64-66 in Section 5 covers the extent to which a local authority worker can limit the types of support someone uses, which in practice may also relate to which providers are used for these types of services. The guidance covers situations where a professional doing the assessment uses a “duty of care” discretion to refuse to fund a particular type of support.

I am concerned that it is vital that this discretionary “power” is used with extreme care and that the professional is able to **robustly** defend and explain the reason behind any such decision. This could lead to an abuse of power and instead of empowering the Supported Person could be detrimental to them. Given the need for “cultural change” within Social Care this does need to be carefully watched.

Equal opportunity needs to be given to smaller, user-led organisations so that there is no hint of bias towards larger organisations which can offer better rates, but not particularly better services. “Preferred Provider Lists” need to be carefully and robustly monitored. This needs to be clarified in these Guidance Notes. Exclusion of smaller user led organisations and charities from any such lists could be classed as unfair and lead to their being excluded from opportunities to work with SDS provisions. Particularly important people with Learning Disabilities or Developmental Issues (ie Aspergers, Autism), be given enough choice (and shown the different options open to them in a way they can understand and make a proper choice. Not knowing the options available can be an easier and quicker way of dealing with Supported People. Independent advocacy needs to be offered and concerns about the paper on Advocacy currently out for Consultation, makes one concerned that organisations will have an advocate attached to them which is not indeed Independent.

More clarity would be useful with regard to the Local Authority providing and promoting information on the variety of providers available in their area not just in larger towns or cities but also which include areas affected by being based in rural locations and the issues which affect them such as lack of transport and distances travelled. Lack of market forces and competition in some areas leads to monopolies of providers and service availability being given more weight than should be appropriate in personalisation. This monopoly is very often held by the Local Authority’s own provider services.

With high workloads and lack of stability within Social Care presently, local knowledge of resources is becoming unsustainable and this issue will impact significantly on the implementation of SDS if greater emphasis is not put on this issue now.

Local and National area directories of resources, providers and facilities will be required. How does the government intend to tackle this.

## **Draft Statutory Guidance on Care and Support**

## Consultation Questions

### Section 8 : The role of the NHS professional

**Question 7a: Was this section of the guidance clear and easy to understand?  
(please tick)**

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Question 7b: How useful did you find this section of the guidance?  
(please tick)**

Very useful	Quite Useful	Not very useful	Not at all useful
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Question 7c: Do you have any further comments on this section of the guidance?**

*Please provide your suggestions for improvements or additions to this section. Are there any further topics that you would like to see included, any changes that should be made or any other comments you'd like to make?*

that are more appropriate for statutory guidance rather than Regulations?

Comments:

Health Authorities need to engage much more firmly with Self Directed Support and I am concerned that little information and knowledge is provided around the obligations of Health Authorities with regard to "Continuing Health Care". I am extremely concerned that a lack of understanding of the roles in Health and Social Care will be a major issues if we have not found a way of working together and understanding each other prior to the changes being sought around Health and Social Care and budgets for 2014.

Very often the Supported Person is passed from pillar to post by competing agencies. A more joined up, smooth approach needs to be encouraged which gives someone a lead responsibility to provide a seamless journey through the minefield of what is and what is not Health's responsibility, and what is Social Work responsibility and what is anyone else's responsibility. Given lead responsibility would be a sensible option. A heiretical system still remains in some Health and Social Care setting and this really needs to be broken down so that the "lead" person can do their job effectively and provide joined up, smooth pathways for everyone going through the processes.

The guidance refers, but is not specific about the way the services "can" work together. Perhaps this should say "will" and put more onus on the Local Authority and Health professionals to work together properly.

More clarity is required on whether people will be able to use support from user-led providers and SDS which **prevents** them becoming unwell and needing hospital care. An example of this is people with long term, fluctuating mental health issues.

Working with together needs to be extended to include the need for proper interaction and support to be given by Health and Social Work with the voluntary and private sector. It needs to be clear that the localities are joined up and have a bottom up approach to community capacity building and community planning so that support can be given to looking at unmet needs in the community and successful and supportive local organisations are given as much importance as great big corporate organisations in the processes.

**Draft Statutory Guidance on Care and Support**

**Consultation Questions**



Section 9.1 : Children and Families

**Question 8a: Was this section of the guidance clear and easy to understand? (please tick)**

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Question 8b: How useful did you find this section of the guidance? (please tick)**

Very useful	Quite Useful	Not very useful	Not at all useful
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Question 8c: Do you have any further comments on this section of the guidance?**

*Please provide your suggestions for improvements or additions to this section. Are there any further topics that you would like to see included, any changes that should be made or any other comments you'd like to make?*

Comments:

This is an area where I am not familiar or experienced enough to comment.

**Draft Statutory Guidance on Care and Support**

**Consultation Questions**

Section 9.2 : Supported decision-making and circles of support

**Question 9a: Was this section of the guidance clear and easy to understand? (please tick)**

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Question 9b: How useful did you find this section of the guidance? (please tick)**

Very useful	Quite Useful	Not very useful	Not at all useful
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Question 9c: Do you have any further comments on this section of the guidance?**

*Please provide your suggestions for improvements or additions to this section. Are there any further topics that you would like to see included, any changes that should be made or any other comments you'd like to make?*

Comments:

In Part 113 I would suggest that there needs to be clarity as to who makes the

decision about incapacity and that this needs to be assessed by a medical professional.

I am very keen on “Circles of Support” and believe this may suite some individuals extremely well. This should be encouraged and an Independent Advocate would be a recommendation of mine as I believe this would help the Supported Person to be allowed to make his/ her opinions known. If a carer is struggling then again there would be a need for an Independent Advocate for that carer. It is vital that we make sure people are not pressurised and do not feel overly influenced by the professionals around a table. It is going to be hard for professionals to learn not to push someone in the direction they feel is the best way of meeting their needs. This would go against the whole ethos of personalisation.

## **Draft Statutory Guidance on Care and Support**

### **Consultation Questions**

#### Section 9.3: Carers

**Question 10a: Was this section of the guidance clear and easy to understand? (please tick)**

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Question 10b: How useful did you find this section of the guidance? (please tick)**

Very useful	Quite Useful	Not very useful	Not at all useful
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Question 10c: Do you have any further comments on this section of the guidance?**

*Please provide your suggestions for improvements or additions to this section. Are there any further topics that you would like to see included, any changes that should be made or any other comments you'd like to make?*

Comments: Helpful to include reference to:

Clarity required with regard to Carers and where they fit into the process in terms of disjointed Adult and Children and Family services. This needs to be made clearer and also young carers needs to be considered. Children affected by disability are often ignored when they are seeing their home life breaking apart due to their parents necessarily looking after a sick child.

Most carers end up with Mental Health issues and the increasing number of carers in the 60's, 70's, 80's and 90's highlights how important they are to the process. They need to be properly supported. Will they receive their own budget or will they have to be considered as part of the budget provided for the Supported Person?

## **Draft Statutory Guidance on Care and Support**

### **Consultation Questions**

#### **Section 9.4: Direct payments**

**Question 11a: Was this section of the guidance clear and easy to understand? (please tick)**

Yes	No
√	<input type="checkbox"/>

**Question 11b: How useful did you find this section of the guidance? (please tick)**

Very useful	Quite Useful	Not very useful	Not at all useful
√	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Question 11c: Do you have any further comments on this section of the guidance?**

*Please provide your suggestions for improvements or additions to this section. Are there any further topics that you would like to see included, any changes that should be made or any other comments you'd like to make?*

Comments

If the assessment is undertaken holistically and a risk assessment is done then this would be the point where a decision would be made. No one should be excluded but measures for monitoring the use of the budget need to be more robust in these circumstances. Smaller, weekly payments may be the better solution and financial systems should be able to adapt to the Supported Person's needs.

## **Draft Statutory Guidance on Care and Support**

#### **Section 9.5: Wider legal duties and strategic responsibilities**

**Question 12a: Was this section of the guidance clear and easy to understand? (please tick)**

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Question 12b: How useful did you find this section of the guidance? (please**

Very useful	Quite Useful	Not very useful	Not at all useful
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Question 12c: Do you have any further comments on this section of the guidance?**

*Please provide your suggestions for improvements or additions to this section. Are there any further topics that you would like to see included, any changes that should be made or any other comments you'd like to make?*

Comments: Should also include reference to:

Mental Health (Care and Treatment) Act 2003 s25 – 25 which confers duties to local authorities to enable a person who have or have had a mental disorder to lead as normal a life as possible.

Asylum Seekers – s12 of the Social Work (Scotland) Act 1968 also confers this duty to local authorities.

Adults with Incapacity (Scotland) Act 1968 which confers duties to Local Authorities to investigate complaints about private guardians and powers of attorney including recommendation to recall powers to a court. In addition to supervise private guardians – this will be particularly relevant with the implementation of SDS.

Section 146 – Residential Care

Direct Payments should be able to be used to purchase residential care to open range of options available to people. I believe that this would also include the type of services provided within the residential setting. Too many residents are left to sit around and watch the world go by as a way of not interacting and allowing them to have their own lives. If they have no family they should still be able to go to bingo at the local church hall for example. If their budgets included the financial breakdowns then the Providers may be more diligent in their responsibilities.

Also within residential care what happens in an emergency situation when a person is placed in residential care when no home carers are available to provide care for them at home.

## **Draft Statutory Guidance on Care and Support**

### **Consultation Questions – General Questions**

#### The Guidance document as a whole

**Question 13: Do you have any further general comments on the guidance?**

*For example, are there any gaps in terms of the topics covered by the guidance? Are there any major changes that you would recommend? Do you have any comments on the style and layout of the guidance, or the language used in the guidance?*

Comments

I personally believe, as a person with a hidden disability that being more specific about the different client groups helps people to understand that we are not just talking about “Physical Disabilities” when we say a “disabled person”. This could be made clearer in the guidance.

Links to other documents can make the document hard to follow at times. It is difficult to keep flipping from one document to the other and it would be useful if the

link relates to a paragraph or section, if that was quoted in the actual document instead. I realise that is more time consuming but it would make things much easier to read and understand.

Document flips between jargo free and jargon excessive. Needs to be consistent.

#### The costs and benefits arising from this guidance

#### **Question 14: Do you have any comments on the financial costs or benefits of the requirements set out in the guidance?**

*Can you identify any financial costs or benefits to individuals, local authorities, health boards, providers or any other person or organisation affected by the guidance. In considering the costs and benefits you may wish to consult the Business Regulatory Impact Assessment published for the Social Care (Self-directed Support) (Scotland) Act available at the following hyperlink:*

<http://www.scotland.gov.uk/Publications/2012/03/5525>

*We plan to update the BRIA in light of the comments and information from this consultation.*

I am extremely concerned about the need for public education and re-training and cultural changes not just to staff but to the actual people who will receive support. I have recently been part of a team providing support plan training to supported people and realised how much of an adjustment it will be for them to take on personal responsibility and engage properly in the process. They are used to having things done for them and although they see SDS as a way of getting more money they don't look at the responsibility they are taking on in a logical and responsible manner.

I also am extremely concerned about the level of crisis the local authorities' Social care teams are in and the amount of work that is already being neglected and people are physically unable to carry out. To have this work successfully proper investment (not just financially) needs to be made in staff. I have worked in Care Management for 20 odd years and have recently left as a result of no job satisfaction and excessive case loads. I was lucky to be part of a pilot to look at cases where SDS would suit. I have not been able to support the clients in any way during the last year due to excessive case loads, reviews don't get done and work is fire fighting only. SDS is exciting and life changing but we need a workforce who can carry out the work.

#### The equality and human rights impacts of the guidance

#### **Question 15 (a): Do you have any views on the impact of the guidance on any or all of the following equality categories:**

- i) age;**
- ii) disability**
- iii) gender;**
- iv) lesbian, gay, bisexual and transgender;**
- v) race, and;**

## vi) religion and belief

*Some advice to help you to answer this question - By “equality impacts” we mean whether or not the guidance will affect certain groups in a positive or a negative way. In considering the impacts you may wish to consult the Equality Impact Assessment published for the Social Care (Self-directed Support) (Scotland) Act available at the following hyperlink:*

<http://www.scotland.gov.uk/Publications/2012/03/9876>

*We plan to update the Equality Impact Assessment in light of the comments and information from this consultation.*

Fully inclusive and appropriate.

### **Question 15 (b): Do you have any views on the impact of the guidance on human rights?**

For more information about human rights please see the Scottish Human Rights Commission’s website at:

<http://www.scottishhumanrights.com/abouthumanrights/whatarehumanrights>

Comments

## **Consultation Questionnaire**

### **Draft Regulations**

#### **Consultation Questions**

**Question 1: What are your views on Part 2 of the draft Regulations (calculation, payment and termination of direct payments)?**

Sorry, no time to view these.

**Question 2: What are your views on Part 3 of the draft Regulations (appropriate/inappropriate circumstances for the employment of close relatives)?**

It is essential in some cases and more and more people with dementia refuse to have any strangers in their house. We need to be accepting that close relatives do sometimes need to receive payment and can't work and survive for nothing. However, we need to ensure that this is not a way for people to take advantage of the system and this will need careful scrutiny.

**Question 3: What are your views on Regulation 11 which deems individuals who are placed under a variety of criminal justice orders to be ineligible to receive direct payments?**

For example, is it appropriate to impose the exclusions listed in Regulation 11? Are there any persons not listed in regulation 11 to whom it would be inappropriate to offer the option of a direct payment?

Comments

**Question 4: What are your views on restricting access to direct payments for those who are homeless, those who are fleeing domestic abuse or those who require support in relation to drug or alcohol addiction?**

I think this should be allowed. People in difficult circumstances need the support. If they meet the eligibility criteria then they should be supported.

**Question 5: What are your views on restricting access to direct payments in relation to the provision of long-term residential care?**

This question was raised during the initial consultations on a draft SDS Bill. The Scottish Government would like to invite detailed views before making a final decision prior to the laying of the Regulations before the Scottish Parliament. Should the restriction be removed from the final regulations, thereby allowing direct payments for residential care? Or should it be retained? Please provide reasons as to your support or opposition to requiring authorities to provide direct payments for residential care.

I think in the future we need to look at residential care provision in a way that allows someone to live their life fully. Just because they are supported in a residential setting they should still be able to get out and about and visit friends. This may ultimately lead to better provision in care homes. I would support the right to extend it in the future to long term residential care.

**Question 6: The draft Regulations do not specify circumstances where the direct payment option should be unavailable for care and support to children/families. *Should* there be specific restrictions on choice of support in relation to children/families support (i.e. support provided under Section 22 of the Children (Scotland) Act 1995) and should these restrictions apply to the direct payment only, or to other options as well?**

Comments

**Question 7: Do you have any further comments on the draft Regulations?**

For example, are there any gaps in terms of the topics covered by the Regulations? Are there any major changes that you would recommend? Are there any topics that are more appropriate for statutory guidance rather than Regulations?

Comments

## **Draft Regulations**

### **Consultation Questions – General Questions**

The costs and benefits arising from these regulations

**Question 8 : Do you have any comments on the financial costs or benefits of the Regulations?**

Can you identify any financial costs or benefits to individuals, local authorities, health boards, providers or any other person or organisation affected by the Regulations. In considering the costs and benefits you may wish to consult the Business Regulatory Impact Assessment published for the Social Care (Self-directed Support) (Scotland) Act available at the following hyperlink:

<http://www.scotland.gov.uk/Publications/2012/03/5525>

We plan to update the BRIA in light of the comments and information from this consultation.

Comments

The equality and human rights impacts of the regulations

**Question 9 (a): Do you have any views on the impact of the Regulations on any or all of the following equality categories:**

- i) age;**
- ii) disability**
- iii) gender;**
- iv) lesbian, gay, bisexual and transgender;**
- v) race, and;**
- vi) religion and belief**

By “equality impacts” we mean whether or not, and in what ways, the Regulations will affect certain groups, and whether they will impact on those groups in a positive or a negative way. In considering the impacts you may wish to consult the Equality Impact Assessment published for the Social Care (Self-directed Support) (Scotland) Act 2013, available at the following hyperlink:

<http://www.scotland.gov.uk/Publications/2012/03/9876>

We plan to update the Equality Impact Assessment in light of this consultation.

Comments

**Question 9 (b): Do you have any views on the impact of the Regulations on human rights?**

For more information about human rights please see the Scottish Human Rights Commission’s website at:

<http://www.scottishhumanrights.com/abouthumanrights/whatarehumanrights>

Comments