

# Consultation Questionnaire

## Draft Statutory Guidance on Care and Support

### Consultation Questions

Section 2: The supported person's pathway

**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 type="checkbox"/>	<input checked="" 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?*

Table 1: It may be helpful to add a column showing who may be involved at each stage. This column would help to reinforce the collaborative approach undertaken. For example, step one could potentially involve the supported person, unpaid carer and worker.

The term "professional" is used throughout the guidance, and does not promote the co-productive approach to which SDS aspires. We suggest it should be replaced with more specific terms where appropriate. For example it may be preferable to use "assessor" in first row in table 2. The use of specific terms would reinforce the point that there are a range of workers involved in the delivery of Self Directed Support (SDS). The guidance implies (p7) that, in terms of assessment, 'the social work or health professional' role is identical. This is misleading. We suggest the unique role of the social worker in terms of their statutory responsibility, and the specific skills they bring to working with vulnerable people, should also be referenced, as should the specific responsibilities of the Chief Social Work Officer (CSWO) in terms of monitoring and quality assurance of service delivery. It would also be good to reinforce (either here or elsewhere) the role played by the wider community.

The terms “assessing for needs” and “assessing for outcomes” are used interchangeably throughout the guidance. It may be more appropriate to use “outcomes” throughout.

The roles of advocacy and user-support organisations should be added to the table outlining roles and responsibilities (p7-8).

The role of the unpaid carer as an “equal partner in the delivery of care” (Carers Strategy) should be emphasised in table 2.

## **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 type="checkbox"/>	<input checked="" 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?*

Self-Directed Support requires a whole systems approach. The values and principles outlined in this section are equally relevant to the whole workforce and all partners within care and support.

It may be helpful if the discussion about values and principles came before the discussion on roles and responsibilities. It would be helpful to explain that these values and principles underpin SDS and the wider public service reform agenda.

Table 3: the overview of statutory principles is useful. Under risk enablement the term “all aspects of life” should be removed as this is an unrealistic assertion. “Responsibility” could be highlighted as an important part of risk enablement to emphasise that choice and control bring with them a need for responsibility from all partners in care and support.

## **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 type="checkbox"/>	<input checked="" 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?*

Paragraph 34: While achieving personal outcomes is of primary importance, it may be helpful to practitioners, people using services, and organisations to distinguish between personal and organisational outcomes. Some examples of each may illustrate this difference.

Table 5: Suggest that the importance of community is reflected here, as workers will need to look beyond traditional service boundaries to enable creative approaches to support. This table could also be enhanced by adding a column to show what is required from organisations to support this way of working. For example, active listening requires allocation of worker time while a strengths-based approach should have organisational tools and processes that promote and underpin this. We suggest that the guidance should support organisations and individuals to make it easy to 'do the right thing'.

Paragraph 39: By focusing on the 'products' of assessment, it is not clear what is different from a traditional social care approach. It might be helpful to acknowledge some of the 'softer' outcomes that may be achieved through an effective assessment, and to recognise the importance of the worker as a resource. For example, the assessment begins to build a relationship between the supported person and other partners. It can also demonstrate the beginnings of a co-productive approach. We appreciate that there are links to material that may helpfully support workers to focus on an outcomes based approach but suggest that the guidance is more specific in relation to this, so that there is no doubt.

Paragraph 40: Suggest this should read 'it is important that the supported person's outcomes are regularly reviewed' (rather than 'later reviewed').

## **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 type="checkbox"/>	<input checked="" 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?*

Section 5.2: Risk – An awareness and appreciation of what others do is essential for effective collaboration between agencies, organisations, workers and individuals. We suggest that both the organisational responsibilities and the specific roles of partners in care and support in relation to risk should be highlighted in this section. It is essential that everyone understands the contribution they can make, and how these contributions fit together to support improved outcomes for individuals. For example, the statutory responsibilities of the social worker in relation to investigation of risk should be explained, as should the responsibility of all partners to be vigilant and aware of risk, and to support positive risk management. It would also be helpful to acknowledge the challenges that may be faced in terms of the need to balance the principles of risk enablement with the statutory responsibilities in relation to risk and protection.

Paragraph 45: the final sentence mentions 'others' who can assist in the identification of personal risks. It would be helpful to clarify who exactly is being referred to here (and to link specifically to the roles and responsibilities as suggested above).

Risk: Further guidance and hyperlinks – please include links to [Adult Support and Protection \(Scotland\) Act \(2007\)](#) and to [National Guidance for Child Protection in Scotland \(2010\)](#)

Paragraph 50 – This paragraph implies that social workers and health professionals have a similar skill set in relation to resource allocation. This is not necessarily true. Suggest further clarification is required as to the health professionals referred to here.

Paragraph 52 – the case study talks specifically about the role of the social worker, but doesn't mention the health worker. Suggest that this could be rebalanced.

The first sentence in paragraph 60 ("Large numbers of individuals will continue to select their support under option 3") could be rephrased or removed. Suggest that the final sentence should read 'workforce learning and development' (to emphasise the importance of reflective practice and information learning opportunities, not just formal educational courses). We recommend the inclusion of a section specifically focusing on workforce learning and development, which could detail both the organisational and individual responsibilities for workforce development, as well as the specific development required to support Personal Assistants and Personal Assistant Employers.

Section 5.5: Information and support – some of the information in this section should also be included in the roles and responsibilities table on page 7-8.

Paragraph 73 – There is a question included in italics at the end of this section which we suspect may have been included in error.

Some of the links within this section should be reviewed to ensure their relevance to Scotland. For example, it is possible that some of the information and legislative references contained within the Social Care Institute for Excellence link (page 24) will not apply in Scotland.

## **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
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**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?*

Suggest that Paragraph 78 should specifically mention review of risk.

Reference should also be made in relation to the Chief Social Work Officer role in terms of monitoring and quality assurance of service delivery.

## **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 type="checkbox"/>	<input checked="" 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?*

Suggest that in Table 8, review should not just be about the commissioning process working, but should also measure whether the provision of services to meet identified need resulted in improved outcomes for people. In addition, the inclusion of a case study on commissioning could help illustrate this, and emphasise the difference between traditional commissioning processes and those required to support the individual approach of SDS.

## **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 type="checkbox"/>	<input checked="" 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?

The previous sections of the guidance reference the role of the healthcare professional in the assessment of risk and need. However this section does not appear to make the same assertions. For example, in Case Study 1 (Lisa), the Occupational Therapist's role is described as helping the family to 'complete the required paperwork'. We suggest this case study should be reviewed or replaced to ensure that it highlights the role of the healthcare professional in relation to outcomes focused assessment. We suggest that 'filling in the paperwork' is not in keeping with the aspirations of outcomes focused assessment and support planning.

Paragraph 88 and Paragraph 90 (final bullet point): This section of the guidance has potential regulatory implications for workers either undertaking delegated assessment functions or providing social care support. Health Board or equivalent employer responsibilities need to be made explicit:

A) To ensure that Healthcare professionals undertaking specific delegated assessment functions are registered with their appropriate regulatory body as well as being adequately trained and supported to undertake this role.

B) Where the provision of service is undertaken by a Healthcare support worker who will be carrying out social care tasks as part of their job role, the Health Board, or equivalent employer, will need to take into consideration whether there are aspects of the job function that require registration with SSSC. If the Health Board or other employer employs any worker registered with the SSSC, they should also be advised of their responsibilities under the SSSC Code of Practice for Employers.

C) Consideration should also be given to the workforce implications of differing roles and responsibilities of regulators in relation to standards of education and training, as well as fitness to practice issues.

The SSSC would be happy to meet with the policy team to discuss the regulatory implications further.

Paragraph 89 / 90: These sections should take into account the likely impact of health and social care integration on joint funding and pooled budgets. In terms of leadership, the guidance does not address who should lead or act as Care Manager responsible for a joint health / social care SDS arrangement.

## **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 type="checkbox"/>	<input checked="" 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?*



It would be good to include a case study in this section.

## **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 type="checkbox"/>	<input checked="" 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?*

The information on "circles of support" could be relocated to section 2 (roles and responsibilities).

## **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 type="checkbox"/>	<input checked="" 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?*

No comments

## **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 checked="" type="checkbox"/>	<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 checked="" 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?*

Suggest dropping first sentence in paragraph 124. The sentence could be misconstrued as negative and uses a word which could be misinterpreted (“benefit”).

Paragraph 130: the responsibilities which come with a Direct Payment should include a reference to the Scottish Social Services Council Codes of Practice for Workers and Employers. For example: “where a Direct Payment is used to employ a Personal Assistant, the PA employer should be made aware of the SSSC’s Codes of Practice for social service workers and employers.” A link to the Codes of Practice should also be added to the box containing further guidance and hyperlinks: Scottish Social Services Council, [Codes of Practice for social service workers and employers](#), [www.sssc.uk.com](http://www.sssc.uk.com) . It would be helpful to explain that there is a workforce development issue here in relation to supporting PA employers to exercise their responsibilities as social service employers. A link to the Personal Assistant Framework could also be included.

9.4: Direct Payments: much of this section could be linked to within existing documents or guidance.

Paragraph 138: consideration needs to be given to employment legislation in relation to Personal Assistant employment. A link to the forthcoming Personal Assistant Framework could be added here.

Suggest adding a link to the SDS Strategy to the section on further guidance and hyperlinks.

## **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 type="checkbox"/>	<input checked="" 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?*

The Mental Health (Care and Treatment) Scotland Act 2003 and Adults with Incapacity (Scotland) Act 2000 should be included in this section.

Paragraphs 143 and 144 and following paragraphs describe Reablement and Intermediate Care, and talk about professional responsibilities. However, the organisational responsibilities are not defined. It may be more helpful to locate the 'professional' responsibilities earlier in this guidance, and concentrate in this section on the organisational responsibilities.

In order to meet the aspirations of Self-Directed Support, significant changes will be necessary not only in relation to practice and process, but in relation to culture and values across health and social care services. The significance of this culture change should not be under-estimated. While support will be offered to local authorities and NHS Boards to encourage positive culture change, there is a specific responsibility in relation to workforce development that social care and health employers have responsibility for. This section might helpfully expand on what that means for employers, and reference the SDS Workforce Implementation Plan which outlines the national support available for organisations to build capacity and capability to support the workforce and encourage culture change

## **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?*

We welcome the draft guidance to accompany the Social Care (Self-Directed Support) (Scotland) Act 2013. We have a number of additional points:

- The introductory section states that, in addition to health and social care professionals, the guidance will be of interest to 'any person or organisation involved in care and support'. We suggest that the language used in the document should be reviewed to ensure that it is accessible. For example, the use of short hand such as 'the 1995 Act' is not inclusive and assumes knowledge. Another example would be the length and dense nature of the content. This will not be easily understood by everyone. It may be that the document could be presented differently, with some content being hidden, unless required (in an electronic version, for example), or that some of the content may be more appropriately held as appendices rather than within the main body of the guidance document.
- Thought should also be given as to whether the information in the main

document is future-proofed, particularly where references are made to budgets, funding and resource allocation systems.

- The statement of intent in section 1 provides a helpful description of Independent Living. This statement should affirm that SDS is relevant to a range of individuals including people with mental health needs, dementia or carers. The guidance should be reviewed to ensure that it is clearly inclusive of all potential client groups.
- The requirement for workforce transformation is not fully acknowledged in the guidance. Shifting from traditional assessment to outcomes focused conversation, and from service-led solutions to valuing community assets requires a significant shift in workforce skills and capability. We suggest that a section on workforce should be included and should set out the individual and organisational responsibility and challenge to support workforce transformation. This could highlight the role of the SDS Workforce Project Board (chaired by SSSC) in delivering support to the workforce through the SDS Workforce Implementation Plan (please also refer to comments on this in previous sections).
- The approach taken from section 5.4 onwards to include direct quotes from the Act was particularly helpful and gave focus to the new statutory requirements. We suggest that this direct link between the Act and the guidance is applied throughout the document.
- The use of case studies could be further developed to reinforce the underpinning values of SDS throughout assessment and support planning. The inclusion of an organisational case study could highlight organisational and workforce issues.

### 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.*

The expectation that the guidance and the Act put on organisations to consult will have time and cost implications.

Effective outcomes-focused assessments, conversations and on-going support planning will require investment in skills at the frontline, as well as investment in terms of time and relationship building.

## 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.*

We suggest that the references to ‘disability’ throughout the document should be reviewed.

**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>

We have no comments on this question.

## **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)?**

We have no comments on this question

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

The SSSC is supportive of SDS as a means of enabling individuals to exercise more choice and control over their support arrangements. While the choice, in exceptional circumstances, to employ a close family member may enhance this, consideration should be given to both risk enablement and safeguarding issues which may arise in such situations. We suggest that the guidance could be strengthened to give clear direction about roles and responsibilities in enabling and managing risk in relation to employment of personal assistants. In particular it would be helpful to acknowledge the importance of professional judgement (particularly within the social work role), and the organisational role in terms of supporting and enabling staff to exercise this professional judgement.

**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?

We suggest that any exclusion to receiving a Direct Payment should be as a result of a robust, outcome-focused assessment process, rather than pre-set exclusions.

**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?**

Please see question 3, above.

**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.

Please see question 3, above.

**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?**

Please see question 3, above.

**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?

We have no comments on this question

**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.

We have no comments on this question.

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.

We have no comments on this question.



**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>

We have no comments on this question.