

Making sure your voice is heard: Summary of findings from regional forums

September 2023

About the National Care Service

The Scottish Government is working with people and organisations across the country to improve community health and social care support in Scotland.

We want everyone to have access to consistently high-quality local services across Scotland, whenever they might need them.

That's why we are introducing the National Care Service (NCS) and shaping it with the organisations and people who have experience of accessing and delivering community health and social care support.

Introduction

Throughout the summer of 2023, we held a series of regional events across different communities in Scotland as part of our on-going work to co-design the National Care Service. These took place in places from Stranraer to Shetland and were chosen to ensure we worked with both rural (mainland and island) areas as well as town and urban areas.

We also ran online events for people who could not attend in person. This report is a summary of what we heard from people and what we will do next to continue co-designing the National Care Service with the people and organisations who need or deliver community health and social care support.

At each of these regional events we ran three co-design theme sessions as well as more informal drop-in lunchtime sessions. In some areas we also went out to local organisations to run additional events on their premises.

The sessions were all aimed at people:

- with lived experience of community health and social care support
- with lived experience of working (in a paid or an unpaid/carer capacity) or volunteering in community health and social care
- or who have an interest in community health and social care in Scotland

The total number of attendees at these events was 606.

The co-design sessions related to one of the five current co-design themes of the NCS:

- Information sharing
- Keeping care support local (part 1 local services and part 2 community health care)
- Making sure your voice is heard
- Valuing the workforce
- Realising rights and responsibilities

The first part of each session involved sharing our current understanding of:

- People's current experiences of health and social care
- where people felt the changes to community health and social care in the National Care Service should be focussed.

We wanted to check with people if our understanding was right and if we had missed asking any important questions.

In the second part of each session we then asked people to share their ideas about how to solve the problems or make the changes we had discussed in the first part of the session.

This report is a summary of the key things that we heard from people. We will use the full detailed feedback we have gathered to develop further co-design work with people and organisations over the next 18 months, as we move towards the final decisions about the design of the National Care Service.

We will also run additional sessions targeted at children and young people, as well as at people from groups who we know are currently under-represented in this work. This is to ensure that the National Care Service reflects and meets the needs of all the different kinds of people who need to use and work in delivering (whether paid, unpaid carers or volunteers) community health and social care support.

About Making sure your voice is heard

This report relates to the feedback we have gathered from the Making sure your voice is heard sessions. This was collected at the events in:

- Glasgow
- Oban
- Elgin
- Strathpeffer

There was also an online event on this theme for people who couldn't attend an in-person event (for example due to ongoing concerns about Covid).

In total 84 people took part in the Making sure your voice is heard sessions.

During this first phase of co-design activity under this theme, we have looked at four key areas:

- complaints and redress: we want to make sure the NCS complaints service is fair, effective and consistent
- independent advocacy: we want to have a standard approach to independent advocacy
- support planning: we want to improve the way people can access support

- eligibility criteria: we want to make sure getting support is based on human rights and needs

How we ran the sessions

We ran two different types of co-design sessions for the Making sure your voice is heard theme. One covered complaints and independent advocacy. Another covered support planning and eligibility criteria.

People who attended took part in group discussions and completed group exercises. We sent a summary of key findings from our research to participants before the sessions (see Annex A). We wanted to get people's thoughts on these findings. We also wanted to get ideas about what potential improvements can be made.

On the day, we explained the discussion topics and provided written information to make sure the questions were clear.

During the sessions the topics we covered included:

- how we might make it easier for people to make a complaint
- how we might make it easier for people to access independent advocacy services
- how we might improve the way people can access support
- how we might make sure getting support is based on human rights and needs

We also collected feedback about how people felt the session itself went at the end and used this information to improve how other sessions were planned. This was to make the regional forums as accessible as possible for participants and to make sure we were asking the right questions. Because of this, the discussion questions changed slightly between the first regional forum and the last regional forum.

What we learned

Complaints and redress – what is working well?

We presented key insights of what appears to be working well in relation to complaints and redress. In general, across the sessions:

- people agreed it is positive that anyone can make a complaint, whilst highlighting that people do not always know how to complain
- people agreed it is good that complaints about care services can be made anonymously or confidentially to the Care Inspectorate
- people agreed it is positive that services are encouraged to resolve issues as soon as possible however, many said that this does not always seem to happen

- people mostly agreed it is good there is a standard process for complaints but said this process can be used differently across providers

In addition to the insights we presented on what appears to be working well:

- some people shared positive experiences of making a complaint. Feeling listened to and accessing services that try to resolve the issue or getting a positive outcome from their complaint led to a more positive experience
- people said it is important to have the option of taking the complaint to an independent body if it cannot be resolved
- some people with experience of providing social care services said there has been a culture change in recent years of complaints handlers becoming more aware of issues like the impact of dementia and trauma-informed practice
- some people with experience of accessing social care services talked positively about services that asked for their feedback

Complaints and redress – what is not working well?

We presented key insights of what does not appear to be working well in relation to complaints and redress. Across the sessions, the people who attended generally agreed that:

- some people do not get a response to issues until they make a formal complaint
- some people find it difficult to find out how to make a complaint
- some people would like more help and support to make a complaint
- some people fear that their support might be taken away if they complain.
- some people's complaints did not improve their care or other people's care, as they had hoped
- complaints information is published in different ways, so it is hard to understand the number and types of complaints people have made

In addition to the insights we presented about what does not appear to be working well, people also told us that:

- information about the complaints process or the support available is not always accessible to the people who might need it most
- services do not always give people information upfront about how to make a complaint
- using words like 'complaints' and 'complaining' can be a barrier for people who want to raise issues but do not want to make an 'official complaint'
- some services do not welcome complaints and feedback and view them negatively instead of as opportunities for learning and improvement
- there is a need for adequate resourcing so services can provide complaints training to staff and allow time for staff to have good conversations with people

Complaints and redress – how might we improve?

People shared ideas of how we might improve complaints handling to inform the development of the NCS complaints service. The suggestions mainly related to:

- making it easier to understand how to complain for example by making a single entry point to the complaints system
- providing information on how to complain in accessible formats (e.g. digital accessible formats or audio)
- making sure people who cannot use or access the internet can get advice and submit a complaint (e.g. a phone line and postal address)
- providing clear, transparent, and consistent information on the complaints process in simple language, including what should happen and when
- having the option of speaking to someone about the complaint, such as an advice line or a named complaints handler
- having joined-up complaints processes across sectors like health and social care
- encouraging people to raise concerns and provide feedback
- more focus on resolving issues at an early stage
- encouraging a culture change across services so complaints and feedback are welcomed and used for improvement
- increased training, mentoring and support for staff on complaints handling skills, such as communication and early resolution
- ensuring there are strong links between the complaints system for the NCS and independent advocacy
- improved information sharing so people do not have to repeat their complaint
- having a system for gathering and reviewing feedback

Independent advocacy – what is working well?

We presented some key insights of what appears to be working well in relation to independent advocacy. Across the sessions, people generally agreed that using an independent advocate helps people feel supported to challenge decisions about their care, although some highlighted that experiences of advocacy services can be mixed.

In addition to the insights we presented of what appears to be working well, some people who attended said:

- advocacy support is particularly important for those who cannot use their voice or have additional communication support needs
- there is good advocacy support for complaining about the NHS. One person described the advocate as being ‘like a tugboat by their side, guiding and protecting them’ during the complaints process
- where someone is in conflict with one body or service, independent advocacy often leads to the issue being resolved
- it is important that advocacy is independent. Some people said the Scottish Independent Advocacy Alliance (SIAA)’s definition of an ‘independent’ advocacy service or advocate explains this well

Independent advocacy – what is not working well?

We presented some key insights of what does not appear to be working well in relation to independent advocacy. Across the sessions, the people who attended generally agreed that:

- some people do not know about independent advocacy services and what support they can provide
- people might not be able to access face-to-face advocacy support if they live outside cities and in remote or rural areas
- some people are worried that because advocacy services are funded by local authorities, they are not truly independent

In addition to the insights we presented of what does not appear to be working well, many people who attended the sessions talked about:

- a general lack of knowledge and understanding of what independent advocacy is and what it can do for people
- there are gaps in independent advocacy service provision, particularly for those in rural or remote communities, those accessing social care support, and for carers
- there is not enough accessible information about independent advocacy and people often only hear of it 'through the grapevine'
- care professionals, rather than independent advocates, should be talking to people about their care support options. The primary role of independent advocates should be to help people claim their rights
- some people expressed concern about a lack of scrutiny around the quality of support provided by independent advocacy services
- some people said it can be hard to find an 'independent' advocate in rural or island communities, as advocates might know the details of an issue from both sides because the population is so small

Independent advocacy – how might we improve?

People who attended shared ideas of how we might improve independent advocacy. The suggestions mostly related to:

- raising people's awareness and understanding of independent advocacy and what it can do for them
- ensuring there is easily accessible information in simple language about independent advocacy support and how to access it
- advocates should be independent of the service provider - they should not be employed by the service or attached to it
- recognising there are local differences and local needs.
- increasing provision and access to face-to-face advocacy services, as a lot of advocacy services are online only
- having advocacy services for carers, who may have a different view or needs to those of the person receiving care
- independent advocacy services should be funded sustainably and there should be funding for specific issues

- advocates should be trained and knowledgeable on the issue at hand
- ensuring people have access to independent advocacy to support them in making a complaint, particularly those with additional needs
- recognising the difference between person-centred and person-led advocacy. Person-led approaches are preferable, as the emphasis is on decisions being made by the person accessing care support
- building on existing services and practices by gathering information about what advocacy services are out there and what is working well

Support planning – what is working well?

Across the sessions, several people shared positive experiences of the current system as follows:

- carer centres are valuable in terms of the information they provide and their approach to discussing people's needs. However, it was also flagged that 'delivery is patchy'
- taking a conversation-based approach to support planning is good and some people had positive experiences of this. People felt this works well where good communication is at the centre of interactions.
- however, people felt this was not consistent and they made a lot of suggestions on how it could be improved

Support planning – what is not working well?

The main things that people felt were not working well within the current process for accessing support planning were:

- a general lack of awareness about how to get support. This was the case amongst individuals with support needs, unpaid carers and also members of the workforce
- services for first telling people about social care support needs are not the same across Scotland
- community hubs and community link workers were flagged as positive services by those who had experience of them, but overall there was limited awareness of these services and people felt there was a general lack of provision
- people described the support planning process as stressful and daunting. Some people felt like they were being judged, which made them feel anxious and afraid about the outcomes. People said 'you really fear getting the call,' and 'people are terrified because they fear losing their support'
- some people noted that assessments can happen without any conversation with the individual ever taking place
- where support planning conversations do happen they are not always conducted by qualified professionals
- feedback and communications from social workers can be slow with people feeling like they have to chase them
- people can be required to repeat the assessment process if they move local authority areas because they cannot take their existing care package with them
- there can be a lack of awareness and recognition of the role and needs of unpaid carers (amongst professionals but also more generally across the

community, including amongst unpaid carers themselves). People also noted a disconnect between legislation that sets out rights for carers and implementation

- a lack of social work resource was felt to be a key reason for many of the things that are not working well within the current system

Other comments appear to focus on difficulties obtaining the social care support services people need after support planning and assessment, such as:

- there is inconsistent availability of social care support services with people noting that services 'change all the time'. It was suggested this could be because many services are provided by the third sector and there is the perception that these are not properly funded. Variability in provision of day care centres across the country was also specifically mentioned
- services are often targeted towards older people rather than wider groups of people with social care support needs
- there are long waiting times for support services to be put in place. People felt this was mainly due to insufficient staff resource. Some also felt this was because services in their area are disjointed and fragmented

Support planning – how might we improve?

People's suggestions for improving the process for accessing support planning were as follows:

- addressing the stigma surrounding receiving social care support
- providing people with clear information throughout their journey, but especially from the beginning
- making support services available when people have lower level or earlier stage needs. Some felt that community health contacts are the best place for people to go initially. GPs and pharmacists were mentioned specifically but others recognised that other / new services might also help avoid overburdening existing community health services
- services should be able to do more such as signposting to or 'prescribing' local community supports such as befriending services or local walking groups
- introducing a 'lead person' or 'single point of contact.' This would provide a coordination function, helping people to navigate the process and provide them with continuity. This could be an extension or evolution of the existing community link worker scheme. Parallels were drawn with the 'lead professional model' within the Getting it Right for Every Child programme. Link workers available through Alzheimer's Scotland were also mentioned as an example of good practice
- having a centralised helpline promoted with a campaign to raise awareness
- taking a 'whole community approach' so that people can recognise when they need support, particularly when they have earlier-stage needs and where they live alone or have a limited network of friends or family.
- investing in community-based supports was felt to be key. Specific ideas that people supported were having community offices and community hubs as a first contact service, particularly in rural areas

- better partnership working with third sector organisations because they can sometimes be better placed to provide services. This would help to 'lighten the statutory load' and deliver positive outcomes for people

In terms of the support planning process, it was stressed by many that relationship-building needs to be the focus rather than making structural changes. People suggested that:

- there should be a focus on conversations that take a person-centred and strengths-based approach rather than assessments
- conversations should start with people's goals and 'what good looks like for that person' rather than being determined by available resources (which people felt was often the case at present)

For this approach to work people suggested that:

- conversations should follow a format that is the same for everyone while responding to individual rights and needs.
- conversations should be led by qualified professionals
- people should be provided with examples of different options that might meet their needs to help them think through what they want. Success stories could also be shared to help people learn from others' experiences
- there should be an opportunity for friends, families and carers to be involved. It was noted that some individuals do not always remember to share details of appointments with family members and so direct communication with representatives would help (where appropriate)
- there should be more frequent reviews to reflect changing circumstances
- conversations should be based on people's whole needs (not just physical needs)
- more social workers are needed because of the amount of time taking this conversation approach takes. To do this it was felt that the social work profession needs to be made a more attractive place to work

Some front line staff who participated specifically stressed that wider system changes in terms of eligibility and availability of social care packages are also required if the above outlined support planning improvements are to make any difference.

Improvements for unpaid carers were also a specific area of focus. The key points raised were:

- increase awareness and recognition about the role and value of unpaid carers and who they are across the community rather than identifying them based on who is in receipt of carers allowance.
- two specific suggestions for how this could be done were changing the terminology to enable people to recognise themselves as carers, and having more information hubs to provide relevant information

- build carers' needs into the support planning and assessment process, including acknowledging their own circumstances such as work and other commitments and any illness or disabilities they may have
- make the carer assessment process easier and less daunting. One specific suggestion was to automatically offer support for carers when someone with support needs first seeks support. Another suggestion was to standardise carer support planning across health and social care so that carers do not have to repeat themselves
- offer practical supports for carers like access to training
- improve the visibility of Carers Centres
- ensure there is independent advocacy support for carers

There were also general comments about improvements that could relate to support planning but also about the provision of services more widely:

- a consistent approach to social care training that embodies a holistic approach
- being able to employ family members / friends as personal assistants

Eligibility criteria – what is working well?

There were no positive comments about the current eligibility criteria or their application.

Eligibility criteria – what is not working well?

People felt strongly that the current eligibility criteria and their application do not work. Some of the comments overlapped with similar comments about the support planning process. The main issues raised were:

- the way eligibility criteria are currently applied often means that people are at crisis point before they can get the support they need
- eligibility is based upon availability of resources rather than individual need, which may be 'substantial' or at crisis point before the person becomes eligible to receive support
- portability of care when people moved area was raised as an issue for both assessment services and eligibility to receive adult social care support.
- people felt the support planning process can be used to filter eligibility in advance by confirming that people's needs are not serious enough for a full assessment and to 'talk people out of the care they need'
- there is a lack of awareness and access to the different self-directed support (SDS) options. There was also a sense that limited budgets mean people are often not able to choose the best option for them. A lack of resourcing for Personal Assistants (PAs) was cited by one person while another felt 'money is the main barrier to being able to access support'
- there can be an assumption by professionals that people want things done for them rather than making decisions themselves
- many people encounter lengthy waiting times for services to be put into place
- people want consistency around eligibility to receive social care support, as this can differ between local authority areas

- people want flexibility in support planning as people will have different needs and ‘the same size doesn’t fit all’
- people said that eligibility criteria are discriminating and excluding people

Eligibility criteria – how might we improve?

Suggestions for improvements were as follows:

- based on comments about what is not working, people feel that a change to eligibility criteria categories and/or how they are applied would be an improvement
- however, there was also the suggestion there is a need to go further and to ‘abolish’ eligibility criteria entirely
- having a standardised approach to eligibility with the same criteria/procedures applied across Scotland
- look at shared decision-making and identify if there is any good practice that can be incorporated
- having a named and trusted social worker who knows the person and will be able to re-assess when things change. One person said ‘relationships are key but named social workers are non-existent’
- more accessible information about what will happen so that people can be prepared

Next Steps

What’s next for Making sure your voice is heard

We are continuing our programme of co-design across the country and there will be an additional session focusing specifically on complaints and independent advocacy.

We will continue to write up and analyse what people have told us in the co-design sessions for Making sure your voice is heard. We will look to see if there are gaps in what people have told us about what is working well or not working well, and check for areas we need to explore further.

The focus of our co-design activity will shift towards gathering the suggestions people have made to improve people’s experiences and outcomes and testing out ideas for change to make sure they will work. We will also continue to work with key organisational stakeholders to further explore and understand what is currently happening, what is working well and not working well. We will work with them on taking forward people’s practical suggestions for improvement that can be implemented now.

It is important that we hear the views of as many people as possible during the co-design activities. We will speak to people from different walks of life and from different areas of Scotland, including those from seldom-heard groups. We will look for gaps in who we have heard from and we will take steps to make sure we have heard from a diverse range of people.

Complaints – lessons learned

The feedback we have heard so far has flagged five broad themes for us to consider further to ensure the development of an NCS complaints service that is fair, effective and consistent. These themes are: integration; person-led complaints; complaints culture and leadership; workforce; and redress and outcomes.

We will continue to work with people to develop ideas for:

- how to improve complaints where people are transitioning between services and ensure joined-up complaints processes between different sectors
- how to ensure complaints processes are led by the needs of the person making a complaint and are accessible.
- how to embed a culture within the NCS that values complaints as opportunities for learning and improvement.
- how to support the workforce in handling complaints, such as training or guidance

We will work with people to understand more about what people are hoping to achieve from complaints, and what changes can be made so complaints are resolved more quickly and people get better outcomes.

Underpinning all of these themes will be our commitment to embed and promote human rights and equality throughout the complaints process in line with the NCS principles.

Independent advocacy – lessons learned

The feedback we have collected so far has flagged areas for us to consider further as we explore improvements to the provision of independent advocacy services for social care.

We will continue to work with people to develop ideas for:

- ways to improve the awareness of independent advocacy services and what independent advocacy services can do for people receiving or trying to access social care support
- ensuring that people are aware of independent advocacy services and that they can access them at the points in their social care journey when they can be most effective, such as through assessment or complaints processes.
- how to improve independent advocacy services availability and capacity. Particularly for certain groups, such as unpaid carers and those who live in rural and island communities
- ways to improve the consistency and quality of the independent advocacy provision across Scotland

We have heard that it is important for independent advocacy services to remain independent of the organisations that deliver social care services. We will keep working with people to make sure they have confidence in the support they receive from independent advocacy services with the transition to the National Care Service.

We will look in more detail at:

- how advocacy services are funded
- how advocates are trained and how to improve the training of advocates
- how services are evaluated to ensure that people have access to high quality advocacy services

Support planning – lessons learned

The feedback we have heard so far has flagged various areas for us to explore further in co-design to improve the initial access journey and support planning process.

We will continue to work with people on:

- ways to improve people's awareness of where they can go to tell somebody about their social care support needs
- what types of information or support they should expect
- ways to help people who don't think of themselves as unpaid carers know what support is available to them
- how we can provide a level of national consistency in the first access services that are available, but with flexibility in provision that reflects individual needs and local circumstances

We will work with people on ways to further develop and enhance delivery of a conversation approach to support planning that empowers people to be actively involved in decision making:

- exploring ways to standardise approaches, which still allow flexibility to respond to people's individual needs
- ensuring support planning processes can reflect the fact that care provision will vary depending on different local circumstances
- looking at ways to make it easier for unpaid carers to get involved, both in conversations involving the people they care for and to speak about their own needs as carers

Looking at how access and support planning works we will explore with people:

- ways to improve how services communicate with people
- the idea of a single point of contact type of service The idea of a centralised advice service

Eligibility – lessons learned

We learned that the current system of using eligibility criteria to determine if an individual can receive social care support is deeply unpopular.

People described the system of eligibility criteria as unfair as the availability of social care support can be determined by budgets and resource availability rather than 'need' and that this could be discriminatory.

People expressed concerns about inconsistency in the application of eligibility criteria across the country. There was also dissatisfaction about the lack of portability of care support packages across local authority boundaries.

The interface between identification and assessment of need, support planning, the role of the professional social worker and eligibility to receive social care support was a theme throughout discussions.

The Scottish Government and COSLA are jointly committed to the “overhaul of the current mechanism of eligibility criteria to ensure an approach to adult social care support that is based on human rights and needs”. Together we are working with partners and stakeholder organisations to develop options for delivering this overhaul. The opinions gathered in these co-design sessions will form a key part of the evidence base for the development of these options and we will continue to co-design options on eligibility criteria with people with lived experience.

What's next for the National Care Service

The Scottish Government remains committed to delivering a National Care Service to improve quality, fairness and consistency of provision that meets individuals' needs, however we are also working to make improvements to the social care system now.

What we have learned during the summer events will inform these early improvements, as well as the future structures and policies of the NCS, including the National Care Service (Scotland) Bill.

The Bill is currently in Committee stage in the Scottish Parliament. In January 2024, MSPs will take their first vote on the general principle of the Bill. This is called Stage 1.

Over the next 18 months we will continue to co-design with people who have experience of accessing and delivering social care support to design the NCS.

We will be doing additional work with people from groups we know are currently underrepresented in our work so far.

In the meantime, we will continue to drive forward improvements across the social care sector, including improving terms and conditions for our valued workforce - making it an attractive profession and bringing even more talent into the sector.

Getting involved

We want to hear from as many voices as possible as we shape and develop the new NCS. If you'd like to share your experience or views, you can join our [Lived](#)

[Experience Expert Panel](#). If you join the panel, you'll be invited to take part in different things like:

- surveys
- interviews
- helping come up with ideas about what the NCS could look like
- helping us understand what our research is telling us
- helping us make sure we're designing the NCS to meet everyone's needs

For more information about the NCS, visit gov.scot/ncs.

Annex A

Summary of key findings from our research that was sent to participants in advance of the sessions

Complaints and redress

The things we are hearing that are working well include:

- anyone who receives, asks for, or is affected by a social care service can make a complaint
- there is a standardised complaints handling procedure that sets out a clear process for how complaints should be handled once a complaint has been received
- this procedure tries to make sure that complaints are resolved as soon as it is possible
- it is possible for people to make confidential complaints to the Care Inspectorate

There are some things that people feel are not working well:

- some people told us that they find the current complaints process difficult, and that it is not always easy to find out where and how to make a complaint
- some people told us that they experience delays in dealing with their concerns when they are raised informally and that timescales for handling formal complaints can delay complaints being resolved locally
- some people told us that making a complaint uses a lot of energy and that they would like more support to make a complaint, and more support while their complaint is being looked at
- some people told us that they are scared of making a complaint and worry that, if they do, their support might be taken away
- people told us that they wanted to make a complaint to improve their own social care support, the social care support of other people and social care support for people who need social care support in the future. However, this does not always lead to the improvements they hoped for
- the way information about complaints is made publicly available is different across different parts of Scotland. This means it is not possible to understand the number and types of complaints that are being made

Independent advocacy

For independent advocacy, we think we are hearing about some things that are working well:

- people who used an independent advocate felt supported to challenge decisions about their care
- overall, there are a good number of advocacy services across Scotland

There are also things that people feel are not working well:

- some people do not know about independent advocacy services and what supports they can provide
- people may not be able to access face-to-face advocate support if they live outside cities and in remote and rural areas
- some people do not want to use an advocate as they are worried they are funded by local authorities, and are not truly independent
- there is no consistent definition of independent advocacy in Scotland, with some people feeling this means the types of advocacy services are different depending on where they live

Support planning and eligibility

The things we are hearing that are working well include:

- some people use community link workers. They can help people access the information they need
- social care community hubs can offer advice on how to access local support
- carers centres run by third sector organisations offer information about carer support planning to unpaid carers
- some local authorities have conversations with people to ask what support they need, instead of doing assessments

This is what we have learned about what is not working:

- there is a lack of clear information on how to access social care support
- The way people access social care support is different in different parts of the country
- when organisations do not work together, it can cause long waiting times for people who are trying to access social care support
- Sometimes people have to reach a crisis point before they become eligible for support
- eligibility rules are different in different parts of Scotland. This can mean that the support someone can get is different, depending on where they live
- assessments sometimes leave people feeling judged
- people are often not told about the different self-directed support options
- sometimes people who are carrying out assessments also don't know about different self-directed support options



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