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# Consultation Response

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National Care Service (Scotland) Bill

September 2022



## **About Us**

Volunteer Scotland is Scotland's National Centre for Volunteering. We believe that volunteering should be an enjoyable, rewarding and fulfilling experience for the volunteer; that volunteers have the right to be safe and protected in delivering their volunteering roles; and that to derive health and well-being benefits from volunteering requires regular and meaningful contributions of time.

Should any queries arise from our response, please contact our Policy Officer by emailing **[sarah.latto@volunteerscotland.org.uk](mailto:sarah.latto@volunteerscotland.org.uk)**

# Consultation Briefing

## Introduction

Volunteering plays an important role in the delivery of care services, both in statutory settings and in roles which support prevention and early intervention. The Scottish Government recognised the significant contribution of volunteering to society in the Volunteering Action Plan launched earlier this year. As such, it is vital that the Bill introducing plans for a National Care Service for Scotland acknowledges the contribution of volunteers and recognises their specific needs, as well as those of the organisations that engage them.

## Policy Context

The Scottish Government has acknowledged on many occasions that volunteering has an important role in the successful delivery of many policy priorities, including social care. In 2019 Aileen Campbell MSP, then Cabinet Secretary for Local Government and Communities, stated that:

*“volunteering is key to us achieving our shared ambition of a fairer and more prosperous country with equality of opportunity for all – a country where everyone has the chance to participate and make a difference.”* ([‘Volunteering for All: National Framework’](#), 2019, Scottish Government)

Similarly, in the 2020-21 Programme for Government, it is stated that: *“[The Scottish Government’s] role must be to create the best conditions for the third sector and volunteering to thrive and contribute to a recovering economy and society.”* ([‘Protecting Scotland, Renewing Scotland: The Government’s Programme for Scotland 2020-2021’](#), 2020, Scottish Government)

Despite this commitment, volunteering remains fairly elusive in wider relevant policy areas. This was reflected in the recent Resource Spending Review where volunteering is not mentioned and funding for the third sector is due to be reduced by £1 million in 2023-24 ([‘Resource Spending Review 2022’](#), 2022, Scottish Government).

Scotland’s national Volunteering Action Plan was launched by the Scottish Government, Volunteer Scotland and other partners in June 2022 ([‘Volunteering Action Plan’](#), 2022, Scottish Government and Volunteer Scotland) and builds upon outcomes identified in the Volunteering for All framework published in 2019 ([‘Volunteering for All: National Framework’](#), 2019, Scottish Government). Both

acknowledge the vital role of volunteering in Scotland and create a clear blueprint for improving volunteer participation in Scotland with a particular focus on addressing inequality.

The Resource Spending Review also stated that the establishment of a National Care Service will result in:

“a 25 per cent increase in social care investment – the equivalent of more than £840 million – which will also support measures to strengthen the implementation of self-directed support, improve prevention and early intervention and increase community-based support.” (‘Resource Spending Review 2022’, 2022, Scottish Government)

This increased investment in Social Care, with a particular emphasis on prevention, early intervention and community-based support, presents an opportunity to invest in the third sector and volunteer-led services.

## Role of Volunteers in Social Care

Volunteers provide a major contribution to the delivery of social care, with key roles in both statutory and community-based care roles. The Scottish Household Survey 2020 showed that 17% of Scotland’s formal adult volunteers supported organisations or groups focused on health, disability and wellbeing, which equates to 201,075 people (Analysis of SHS 2020 data, 2021, Volunteer Scotland). This equates to the total number of paid staff in the social care sector, as stated in the Policy Memorandum, and is not even a complete reflection of the actual contribution of volunteers to the delivery of social care outcomes.

Volunteers support a range of activities which support positive health and wellbeing including befriending, sport and activities to promote community connection. The different types of organisations and groups with a connection to social care that volunteers support are detailed in the table below:

<b>Types of organisations or groups for which adults have done formal volunteering in the last 12 months</b>	<b>2020 % of formal volunteer</b>	<b>2020 Number of formal volunteers</b>
Groups aimed at supporting older people	5%	59,140
Physical activity, sport and exercise (coaching, organising or otherwise helping out)	12%	141,936
Health, disability and wellbeing	17%	201,075
Local community or neighbourhood	25%	295,699

Volunteer Scotland analysis of Scottish Household Survey data, 2020

## Volunteering in Social Care Settings

Volunteers support the treatment and care of people with health conditions, including long term health conditions and disabilities, in a variety of settings. Many residential or respite care services in the voluntary and statutory sector engage volunteers to provide person-centred support and ensure beneficiaries have rich social experiences.

Children's Hospices Across Scotland (CHAS) involve 750 volunteers in roles which support families, including triaging families' needs, music therapy and play therapy ('Annual Report and Accounts 2020/21', 2021, CHAS). Similarly, Erskine engages volunteers to support a range of services in their homes, including physiotherapy and speech and language (['2021 Annual Review'](#), 2021, Erskine).

Volunteers support a significant number of voluntary organisations which help people experiencing a range of health and care needs in community settings. For example, Volunteer Glasgow provide an Elderly Home Visiting Service which has significant positive outcomes for beneficiaries, including reduced isolation, increased activity and stimulation and engagement in the community ('Elderly Home Visiting Service Case Study', 2022, Volunteer Glasgow). In the case study it is reported that:

*'the fact that the Home Visitor is a volunteer gives a real sense that the Senior's company is chosen and looked forward to and that their conversation, knowledge and experience are valued.'*

The service works with statutory services as part of a network of support, and the consistency of visits means that the service can identify any early signs of change or vulnerability.

For people who spend an extended period of time in hospital, many volunteer-led services provide support to readjust to life at home. The Royal Voluntary Service provides a 'Home from Hospital' service, which begins when the person is still in hospital (['Support in Hospitals' webpage](#), 2022, Royal Voluntary Service). As a result of the plethora of services provided by the Royal Voluntary Service, all volunteer-led, 88% of vulnerable people they supported in 2021 said it helped them feel more able to cope.

## Volunteering in Prevention and Early Intervention

Volunteering also supports prevention and early intervention services. In particular, volunteers have a significant impact on social isolation and loneliness. Research has shown that social isolation and loneliness can be both a cause and consequence of poor health and is linked to increased risk of depression, cognitive decline and

dementia, amongst other issues ([‘Risk to Health’](#), 2022, Campaign to End Loneliness).

In research undertaken by Befriending Networks into the benefits of befriending in one specific project, beneficiaries reported positive changes in their confidence, happiness and social connection ([‘A stitch in Time - The benefits of Befriending’](#), 2015, Befriending Networks). Befriending and mentoring services have a key role in ensuring that many people have regular meaningful social interactions, which in turn improves their mental wellbeing and can help to prevent the onset of more severe health issues.

In addition, volunteers support a range of services that aim to keep people in their home environment for longer. For example, the charity Food Train provides a range of volunteer-led services to support older people to eat well, including a shopping service and engaging volunteer ‘meal makers’. In a report published in 2018, Food Train found that the increase in demand for services coupled with reductions in public funding are providing significant challenges. They found a postcode lottery of statutory food services, with many Local Authorities offering very limited choice in the services they provide ([‘Meals and Messages’](#), 2018, Community Food and Health Scotland & Consumer Focus Scotland).

Another key service supporting people to stay in their homes is the provision of community transport. For the Community Transport Association, ‘community transport is about providing flexible and accessible community-led solutions in response to unmet local transport needs, and often represents the only means of transport for many vulnerable and isolated people, often older people or people with disabilities’ ([‘What is Community Transport?’](#), 2022, Community Transport Association).

Many community transport services are either volunteer-led or reliant on volunteers. Badenoch and Strathspey Community Transport Company engages volunteers to drive older people and those with reduced mobility to medical appointments, community events and to get shopping ([‘Member Profile – Badenoch and Strathspey Community Transport’](#), 2017, Community Transport Association). According to one volunteer, Kenny, BSCTC is a ‘lifeline’ for older residents.

Many of the opportunities for people to remain physically active are also supported or led by volunteers, thus decreasing the burden on care services. The Scottish Sports Association published a report into ‘#whysportmatters’ for older adults and social care ([‘#WhySportMatters to Older Adults and Social Care’](#), 2021, Scottish Sports Association). It found that participation in sport or being active led to a 30% reduction on risk of falls for those with mobility problems and a 38% reduction in cognitive decline, amongst other benefits. It also recently reported in its 2021

manifesto that Scotland's 13,000 sports clubs are reliant on 200,000 volunteers ([‘SSA Manifesto for Scottish Sport 2021’](#), 2021, Scottish Sports Association).

## Therapeutic Value of Volunteering

Participation in volunteering can also have significant health and wellbeing benefits for the volunteers themselves, which in turn can prevent or reverse more serious health issues. In a report from December 2018, we found that regular volunteering can alleviate depression, anxiety and stress, and reduce loneliness and social isolation ([‘Volunteering, Health and Wellbeing’](#), 2018, Volunteer Scotland). This same research also found that the health and wellbeing benefits of volunteering were more pronounced for those experiencing significant disadvantage. In particular, it found that volunteering can help to alleviate the symptoms of those experiencing mental and physical health problems or help them to cope with symptoms more effectively.

There is also evidence that there can be ‘therapeutic’ value in volunteering for an organisation that you have also been a beneficiary of. The Scottish Volunteering Forum spoke about this in a discussion exploring volunteer motivations and barriers in 2019 ([‘Volunteer Motivations and Barriers Summary Report’](#), 2019, Scottish Volunteering Forum). Two member organisations shared that service users and family members regularly request to volunteer, and they described it as a ‘win-win’. The volunteers benefit from the ongoing input from the organisation, are able to give something back to an organisation that has supported them, and the organisation benefits from the knowledge, skills and understanding that their lived experience brings.

Finally, volunteering can have a significant impact on physical health by promoting healthy behaviours, helping to maintain a level of physical activity that promotes independence and improves volunteers’ ability to cope with illness ([‘Volunteering, Health and Wellbeing’](#), 2018, Volunteer Scotland). To reinforce this, a survey completed by volunteers for Chest, Heart and Stroke Scotland, found that 60% of respondents reported that volunteering helped to reduce feelings of isolation and loneliness (‘Volunteer Survey’, 2022, Chest, Heart and Stroke Scotland).

## Question Responses

### Fit for Purpose

We believe that several key considerations still need to be addressed in the detail of the National Care Service (Scotland) Bill to ensure it can fulfil its purpose - “to

improve the quality and consistency of social work and social care services in Scotland”.

The Bill fails to acknowledge the role of over 200,000 volunteers directly supporting health, wellbeing and disability organisations, as well as the many thousands of other volunteers supporting older adults, physical activity and community connection (comparative analysis of SHS 2018 and 2020 data’, 2021, Volunteer Scotland). Volunteers are a key part of the Social Care workforce but are not mentioned in the Bill at all. It is vital that volunteers are explicitly referenced in the Bill when detailing arrangements for workforce planning and development.

Similarly, the Bill does not adequately recognise the voluntary sector as a key partner in the delivery of social care. The Scottish Government’s commitment to a joined up, collaborative approach to the National Care Service is commendable, and we are reassured to see that the contribution of the voluntary sector is acknowledged in proposed plans for Community Health and Social Care Boards. However, it is unclear in the Bill how the voluntary sector will be meaningfully engaged and consulted at a local and national level about care plans.

The third sector is incredibly diverse with over 40,000 voluntary organisations estimated to exist, including 24,832 registered charities ([‘Sector Stats’](#), 2022, SCVO). Meaningful collaboration with the voluntary sector is challenging, particularly given it is estimated that half of voluntary organisations are community groups who will likely be largely or wholly operated by volunteers. As a result of significant restrictions on time and resource, many voluntary organisations find it difficult to engage with collaborative decision-making processes at both a local and a national level.

As a result, the Bill needs to explicitly state that the voluntary sector will be meaningfully included in decision-making structures, and identify solutions for some of the challenges with engaging this sector. We would propose that the Third Sector Interface network has a key role in representing the interests of the local voluntary sector on Care Boards, and would require significant additional resource to ensure they can consult widely and provide adequate representation.

## **Quality and Consistency**

We have some concern about centralising decision-making to the extent detailed in the National Care Service (Scotland) Bill when much of the social care sector locally has developed organically to meet local demand. We are also wary of increasing the bureaucratic burden on small voluntary sector care providers, often run by volunteers, with more detailed reporting structures. It is important to ensure that the

requirements of smaller voluntary organisations that support social care are proportionate to their size and capacity.

## **Training**

In Section 24, 'Training', we believe it is important to acknowledge the training requirements of volunteers in the provision of social care services, as well as those of paid staff. Volunteers have different training needs to paid employees, in terms of capacity, timing and types of roles they will be expected to fill, and these will need to be acknowledged at the design and delivery stages.

## **Secondary Legislation**

We are reassured that many aspects of the proposed National Care Service are yet to be outlined in future secondary legislation as this will allow for more meaningful consultation and co-creation on some key areas. These include further clarity around the composition of care boards, plans for achieving financially sustainable services and priorities for shifting the focus to early intervention and prevention. However, it is vital to ensure that the wider voluntary sector is meaningfully consulted at all stages. As detailed previously, meaningful consultation with the voluntary sector is challenging and will require dedicated resource.

## **Financial Implications**

It is hoped that the Bill will make funding for services related to social care in the voluntary sector, many of which are reliant on volunteers, more sustainable. Organisations in the voluntary and community sectors have a key role in supporting much of the community-based and early intervention work in social care but are operating in an increasingly challenging financial environment.

In the Scottish Government's recent research exploring the impact of Covid-19 on volunteering, 48% of volunteer involving organisations identified dedicated funding for their volunteer programmes as a priority for their medium or long term recovery (['Scottish Third Sector Perspectives On Volunteering During Covid-19: Survey Report'](#), 2021, Scottish Government and Volunteer Scotland). Similarly, OSCR's survey exploring the impact of Covid-19 on Scottish Charities exposed a particularly acute issue related to fatigue and burnout experienced by trustees, who are volunteers, particularly in smaller organisations with no paid staff (['November COVID-19 survey: Volunteers and Trustees Supplementary'](#), 2020, OSCR).

Cost of living increases are also affecting the balance sheet of many voluntary and community organisations. Demand for services is increasing, as are operating costs, yet the money available is decreasing. Those whose core funding comes from the public sector are often subject to either fixed funding, which is declining in real terms due to high inflation, or reduced funding. This is compounded by the fact that many people will likely have less disposable income to donate to charities in the months ahead. The Charities Aid Foundation recently found that 12% of individuals are planning to cut back on charity donations ([‘Cost-of-living squeeze hits donations to charity sector’](#), 2022, Charities Aid Foundation)

As a result of this, it’s vital that the financial challenges facing the voluntary sector are addressed in the long-term funding of social care, social work and community healthcare

## **National Care Service Principles**

We are largely supportive of the National Care Service Principles detailed in the Bill, but feel further consideration is required as to how they will be achieved in practice.

The principle to ‘increase equality and enable people and communities to thrive’ is admirable, but the inequality of access to both services and opportunities for participation present a significant challenge. We know that those living in the areas of greatest deprivation have significantly worse mental and physical health outcomes, and that those who have the highest demand for health and care services are likely to generate the highest benefits from volunteering ([‘Volunteering, Health and Wellbeing’](#), 2018, Volunteer Scotland). However, volunteering participation rates in Scotland’s most deprived communities are significantly lower than the average participation rate of 26% - 20% in 2018 and 14% in 2020 (Comparative analysis of SHS 2018 and 2020 data’, 2021, Volunteer Scotland). As such, significant investment is required in inclusive volunteering strategies for people and communities to thrive.

The principles to ensure that the National Care Service is an exemplar of Fair Work practices, and to ensure that the care workforce is recognised and valued, are equally welcome but also require explicit recognition of volunteers as part of the workforce.

Volunteers can have a valuable role to play in the provision of health and social care services, but it is vital that this is not a replacement for duties previously performed by paid staff. In response to a question regarding waiting lists for social care in parliament on the 4th May 2022, the Minister for Mental Wellbeing and Social Care stated that ‘Through contact with partnerships, I am aware that there is a range of

local initiatives across the country to support recipients of care, using volunteers, redeployed staff and third sector partners.’ Whilst we welcome the recognition of volunteers in the provision of social care, referring to them as part of a solution in the context of staff shortages could unintentionally condone the displacement of paid staff by volunteers.

In the commitment to Fair Work, and to ensuring that the care workforce is recognised and valued, we would like to see explicit recognition that volunteers will not be used to carry out duties normally performed by paid staff or to disguise the effects of staff shortages. Volunteer Scotland and the Scottish Trade Union Council developed the Volunteer Charter identifying the key principles for ‘assuring legitimacy and preventing exploitation of workers and volunteers’ (2019, Volunteer Scotland and STUC). In particular, the 5th principle states that ‘volunteers should not carry out duties formerly carried out by paid workers nor should they be used to disguise the effects of non-filled vacancies or cuts in services.’

The commitment to prevention and early intervention are an important step in the right direction. The role of the voluntary sector and volunteers is key to achieving this, and also reflects the principle to provide financially sustainable care. The voluntary sector provides excellent value for money, both in terms of reducing the care burden through services focussed on prevention and in providing significant return on investment in the delivery of care services. As such, procurement processes tailored to the needs of the voluntary sector are vital, as is a commitment to multi-year funding. This is detailed further in our answer to the question related to Ethical Commissioning and Procurement.

## **Ethical Commissioning and Procurement**

We welcome the commitment to ethical commissioning and procurement, but we believe that the Bill and associated memoranda do not go far enough in ensuring that the specific needs of the voluntary sector, and the volunteers it engages, are addressed.

Volunteer-led services are often seen as a cheaper option by funders. This undervalues the contribution of volunteers and misrepresents the level of investment required for sustainable volunteer management. Whilst volunteers are unpaid, they are not free. The effective and inclusive engagement of volunteers requires dedicated resource, usually in the form of paid coordinators and budget to cover recruitment, training, ongoing support and recognition costs, as well as volunteer travel expenses, for it to thrive.

An evaluation carried out by the York Health Economics Consortium (YHEC) of Children's Hospices Across Scotland (CHAS) showed that they had invested £306,000 in their volunteering programme in 2018/19 (2021, Hanlon, J. and Hex, N.) This might seem to be a considerable sum of money, however it was also calculated that the return on this investment was £737,000 - over 140%. CHAS have a care model that has fully embedded volunteering. Indeed, their Volunteering Strategy states that 'volunteering is critical to the success of CHAS' (['Our Volunteering Strategy'](#), 2020, CHAS). This demonstrates the significant value that volunteers can add to care services, so long as it receives an appropriate level of investment.

As a result, we feel that the detail around ethical procurement in the Policy Memorandum should explicitly reference the requirement to invest in sustainable volunteer management. This could include a commitment for funded services that involve volunteers to a relevant quality standard such as Investing in Volunteers or Volunteer Friendly. It could also include agreement to abide by the Volunteer Charter, which provides clear and unambiguous principles for assuring volunteer legitimacy and preventing exploitation.

A commitment to multi-year funding for voluntary sector providers would also support the sustainable engagement of volunteers in the delivery of services, ensuring adequate time for recruitment, training and relationship-building.

## **Summary of Recommendations:**

- The Bill needs to explicitly state that the voluntary sector will be meaningfully included in decision-making structures and identify solutions for some of the challenges with engaging this sector. We would propose that the Third Sector Interface network has a key role in representing the interests of the local voluntary sector on Community Health and Social Care Boards, and would require significant additional resource to ensure that they can consult widely and provide adequate representation.
- It is important to ensure that funding for providing social care services is accessible to smaller voluntary organisations, and that reporting requirements for funded organisations are proportionate to their size and capacity.
- The training needs of volunteers involved in the delivery of social care services, in terms of capacity, timing and types of roles they will be expected to fill, will need to be acknowledged at the design and delivery stages.
- The financial challenges facing the voluntary sector are addressed in the long-term funding of social care, social work and community healthcare, through a commitment to sustainable multi-year funding.
- The detail around ethical procurement should explicitly reference the requirement to invest in sustainable volunteer management. This could

include a commitment for funded services to complete a relevant quality standard such as Investing in Volunteers or Volunteer Friendly. It could also include agreement to abide by the Volunteer Charter, which provides clear and unambiguous principles for assuring volunteer legitimacy and preventing exploitation.



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