# Guide to social care (Scotland)

## What is social care?

Your local authority’s social services department is there to give you the help and support you need to continue to lead an independent life. This can include things like:

* personal care at home
* domestic help
* help with shopping
* accessing the community
* meals on wheels
* services in day centres
* provision of equipment, aids and minor adaptations to the home
* care in residential or nursing homes.

To access this type of help, you will normally need to be assessed by social services. This factsheet is a guide to accessing social care in Scotland. The law covering social care in Scotland is different to other countries in the United Kingdom and so if you are based in England, Wales or Northern Ireland, this factsheet will not apply to you.

If you have questions about social care in England, Wales or Northern Ireland, then you can contact our Sight loss Advice Service on **0303 123 9999** or email us at **helpline@rnib.org.uk**.

Alternatively, you can find our information resources online at [**rnib.org.uk/social-care**](https://www.rnib.org.uk/information-everyday-living-your-rights/social-care)**.**

## How do I get a community care assessment?

Community care assessments are for adults who may need care and/or support because of a disability, ill health or old age. It should assess what your care and support needs are and whether you are eligible for any extra help through social services.

If you think you need an assessment, the first step is to contact your local social services team and ask for a needs assessment to be carried out. If you’re unable to make the call yourself or are uncomfortable with doing this, then someone can do this on your behalf instead.

You can find your local authority’s social services telephone number in the phone book, directory enquiries or online. You can also contact our Helpline and we’ll find the number for you.

When you call social services, you’ll need to make it clear that you’re blind or partially sighted and that you would like an assessment of your needs. You should be able to speak to a specialist team within social services (often called a “Sensory Impairment Team”). It can be useful to keep a record of who you speak to throughout the process.

## What is vision impairment rehabilitation?

Once social services are made aware that you may have a need for care and support, they have a legal duty to carry out a community care assessment.

Sometimes, before a community care assessment is carried out, social services may offer you a period of **rehabilitation**. This is a type of support aimed at helping you to learn or relearn certain activities to maintain your independence and prevent or reduce your need for further social care. Vision rehabilitation can cover the following areas:

### Orientation and mobility skills

* sighted guide techniques with you and your family
* mobility training in new and unfamiliar areas
* white cane training.

### Independent living skills

* cooking
* cleaning
* looking after yourself
* taking part in leisure activities.

### Communication skills

Rehabilitation officers may be able to provide advice and training on communication skills, such as:

* using a keyboard or mobile phone
* using aids such as writing frames and labelling devices
* learning braille.

## What should I expect from my assessment?

Your needs assessment should be carried out by a professional who is appropriately trained and understands your condition. This will often be a professional such as a rehabilitation worker for blind and partially sighted people, social worker or care manager. They will usually do this in your home, so that they get a better understanding of your home life. Sometimes they may conduct the assessment at other places such as a social services office, a day centre or a resource centre.

The person carrying out your assessment should look at how your sight problem affects your independence, what you can and cannot do, and what you could do if you had support. The assessment should also include you in the process and explore the personal outcomes that are important to you.

## How to prepare for the assessment

Below we have included 4 tips on how to prepare for your community care assessment:

* before the assessment, sit down and consider what your needs are and what sort of support it is that you need. If possible, record this and give it to the social worker so that nothing gets missed out on the day. Have a think about what support you need in the following areas and what the risks to your safety and wellbeing are if you do not get this support:
* personal care
* domestic routines
* home environment
* participation in community life
* the role of any unpaid carer you have.
* don’t underestimate your needs and demonstrate as much of your life as possible to the assessor
* tell the assessor about aspects of your life that might improve with some support – even if they do not ask you about these. You do not have to limit your answers to the questions that you’re asked by the assessor
* give real examples of when you find it hard to manage, or you’re prevented from doing something, especially if that effects your health and safety. Also tell the assessor if you have had any accidents, for example when cooking at home, or while trying to walk outdoors, such as a fall.

## Who decides if I am eligible for help?

In Scotland each local authority sets their own eligibility criteria, but this exists within a national framework. The national framework requires the local authority to consider your needs in relation to:

* personal care
* domestic routines
* home environment
* participation in community life
* the role of any unpaid carer you have.

It then requires the local authority to grade these needs in relation 4 levels of risk to your independence and wellbeing:

**Critical Risk:** Indicates that there are major risks to an individual’s independent living or health and well-being and likely to call for the immediate or imminent provision of social care services.

**Substantial Risk:** Indicates that there are significant risks to an individual’s independence or health and wellbeing and likely to call for the immediate or imminent provision of social care services.

**Moderate Risk:** Indicates that there are some risks to an individual’s independence or health and wellbeing. These may call for the provision of some social care services managed and prioritised on an on-going basis or they may simply be manageable over the foreseeable future without service provision, with appropriate arrangements for review.

**Low Risk:** Indicates that there may be some quality of life issues, but low risks to an individual’s independence or health and wellbeing with very limited, if any, requirement for the provision of social care services. There may be some need for alternative support or advice and appropriate arrangements for review over the foreseeable future or longer term.

If you have unmet needs arising from your disability that cause either a “critical” or “substantial risk”, then most local authority eligibility criteria will find this eligible for care and support.

However, the national framework indicates that the local authorities should still invest in preventative services such as vision rehabilitation to help address “moderate and low risks”.

## What happens after my assessment?

Following the assessment if you are identified as being eligible for care and/or support you should be fully involved in co-creating a care plan to clarify how your needs will be met. There are different ways social services can meet your eligible needs, for example:

* they can provide you with care and support directly
* they can arrange for the care and support to be provided through another organisation
* they can provide you (or someone else on your behalf) with a sum of money to source and pay for care and support yourself, called a direct payment (see “What are direct payments?” below)
* they can provide you with a combination of the above options.

You should be facilitated to make an informed choice about which of the above options is best for you. The care plan should include details of the services or direct payments to be provided to meet needs together with any charges you must pay for these. It should also include contingency plans for managing unforeseen changes to the care plan and a date for when the care plan will be reviewed.

## What are direct payments?

Direct payments are one way that you can ask social services to meet your needs if you are assessed as eligible for care and support. Instead of the local authority arranging your care and support, direct payments are cash payments that allow you to choose who you pay to provide your care and support. This is subject to social services agreeing that your choice in care and support meets your assessed needs.

Social services must also be sure that you, or a suitable person on your behalf, can manage the direct payments. While direct payments give you more flexibility and choice around choosing your care, there are some important things to consider if you choose to pay for your care using them, for example:

* You will need to keep records and submit accounts to social services to show how the payments have been used
* If you hire a personal assistant or care worker, you will take on the legal responsibilities of being an employer
* Where you use a direct payment to purchase care and support, you cannot normally make a complaint to social services in the way that you could if the care and support had been arranged directly by them.

Social services should support you with any help you may need with managing your direct payments and can give you details of independent brokerage services in the area that can assist with managing your direct payments.

## Do I have to pay for help from social services?

There are some types of care that should always be free, such as personal care and nursing care. Personal care includes care in the following areas:

* Personal Hygiene: e.g. bathing, showering, shaving
* Continence Management: e.g. toileting, skin care, incontinence, laundry
* Food and Diet: e.g. assistance with food preparation and special dietary needs
* Problems with mobility
* Counselling and Support
* Simple Treatments: e.g. assistance with medication (including eye drops)
* Personal Assistance: e.g. assistance with dressing, getting in and out of bed
* Equipment to help with personal care

Nursing care such as giving injections or managing pressure sores involves a medically qualified nurse. If you require nursing care in your own home, this is arranged by NHS Scotland via your GP surgery.

However, you may incur a charge for the following types of ‘domestic support’:

* Help with housework
* Laundry
* Shopping
* Services out of your home such as day care centres or lunch clubs
* Cost of supplying food or pre-prepared meals
* Non-personal care related equipment.

You may get the above types of support free if they are provided immediately following discharge from hospital as part of your reablement into the community. Reablement lasts for up to 6 weeks.

Your local council's charging policy will show how much home care services cost and you can ask the social care department to obtain a copy of this. The amount you will need to contribute towards your support will depend on the outcome of a ‘financial assessment’. This is a means-test that will look at how much (if anything) you can afford to pay towards the cost of your support. The possible outcomes could be that:

1. Your income and savings are low enough that you do not have to contribute towards the cost of your care and support
2. Your income and/or savings are high enough that you must contribute something towards the cost of your care and support, but not all of it
3. Your income and/or savings are so high that social services would expect you to pay for the full cost of the care and support yourself. This will automatically apply if your savings are £16,000 or above.

If you have savings under £16,000, when carrying out the financial assessment, national guidance states that charges must be “reasonable and practicable”. Social services must leave you with a minimum amount of income to live on per week after charges for care and support have been taken into account. This weekly amount is equivalent to:

* your basic entitlement under Income Support or Pension Credit (including the disability premium but not the severe disability premium).
* a buffer of at least 25% of the above entitlement

If you receive a qualifying disability benefit (care component of DLA, daily living component of PIP or Attendance Allowance), you can tell the council about any ‘Disability Related Expenditure’ (DRE) you may have and it will be taken into account in the calculation of your charges. You can ask your local authority for their policy on DRE for examples, but typically they can include:

* additional heating requirements
* purchase, maintenance and repair of disability related equipment
* specialist dietary requirement
* specialist clothing
* help with cleaning and other domestic tasks.

There are different rules on charges on residential care. For more information call Age Scotland on **0800 1244 222**, or email **helpline@agescotland.org.uk**.

If you think you are being overcharged for your care and support, contact our helpline, as RNIB’s Legal Rights Service may be able to assist you.

## Changes in circumstances and reviews of your needs

Your care plan should include the date of your next review. If your circumstances change in between any of these periods (e.g. if your condition deteriorates or your carer stops providing care) then you should inform social services so that they can reassess your needs to see if your care package should be increased.

If your services are withdrawn or reduced, social services should let you know about your right to complain (see “How do I make a complaint to social services?” below).

## How do I make a complaint to social services?

If you’re not happy with how social services have treated you or disagree with a decision that they have made (e.g. in relation to your assessment), you can challenge this by making a formal complaint. Every council has a complaints procedure and must offer you help and support in using this.

You have six months to take a complaint to the local authority. The time limit starts to run from the point you became aware of the issue.

There are two stages to the complaints procedure. The first, is designed to resolve complaints quickly where this is possible. you should receive a communication about your complaint within five working days.

If your complaint is not resolved at the first stage, you will move onto the investigation stage. You should receive communication within three working days to let you know that the complaint has been recorded. Staff will then investigate the situation and have to get back to you within 20 working days. If the situation is very complex or key staff are temporarily unavailable, you might be asked to accept that it will take longer than 20 days.

Once the investigation stage has been completed, if your complaint remains unresolved, you have the right to approach the Scottish Public services Ombudsman if you remain dissatisfied. There is a 12 months deadline from the date you became aware of the issue. You can call them on **0800 377 7330** or see their website **spso.org.uk**.

You can ask your local councillor, or voluntary organisations for support in making your complaint. You can also call our Helpline on **0303 123** **9999** to speak to one of our advisers, and depending on your circumstances, our Legal Rights service might be able to help you.

### Complaints about care providers

If you are complaining about your care provider, you can also complain to them directly. We have template letters on our website to assist with this, which can be accessed by visiting **rnib.org.uk/social-care**.

If this does not resolve the issue you can complain to the Care Inspectorate. You can them on **0345 600 952**, email them at **concerns@careinspectorate.gov.scot** or visit their website **careinspectorate.com/index.php/complaints**.

## How we can help

If you would like any more information about social care assessments, you can speak to our Advice team by calling or emailing our Helpline.

### RNIB Helpline

If you need someone who understands sight loss, call our Helpline on **0303 123 9999**, say **“Alexa, call RNIB Helpline”** to an Alexa-enabled device, or email **helpline@rnib.org.uk**. Our opening hours are weekdays from 8am – 8pm and Saturdays from 9am – 1pm.

### Sight Advice FAQ

Sight Advice FAQ answers questions about living with sight loss, eye health or being newly diagnosed with a sight condition. It is produced by RNIB in partnership with a number of other sight loss organisations. **sightadvicefaq.org.uk**

### Connect with others

Meet or connect with others who are blind or partially sighted online, by phone or in your community to share interests, experiences and support for each other. From book clubs and social groups to sport and volunteering, our friendly, helpful and knowledgeable team can link you up with opportunities to suit you. Visit **rnib.org.uk/connect** or call **0303 123 9999**.

The factsheet gives general guidance only and is not an authoritative statement of the law.



**RNIB Legal Rights Service**

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