

Older People, Public Policy and the Impact of Devolution in Scotland

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Foreword

Devolution in Scotland has led to an evolution in Scottish political culture. The introduction of proportional representation in both local and national elections has resulted in the political parties governing for the first time as part of a coalition, or even as a minority administration. The establishment of the Scottish Parliament has brought power over the day-to-day running of the country closer to Scotland's citizens than it has perhaps ever been, both literally and figuratively. It has opened up new opportunities for businesses, voluntary organisations and - above all - people to have their say, thanks to a system that is much more open and transparent than Westminster. It has not all been plain sailing though. The 'new politics' we were promised have not fully materialised. Furthermore the new laws passed by the Scottish Parliament have not all been unmitigated successes.

But the most important question is always "what difference has it made to people's lives?" and from our perspective, of course, "what difference has it made for older people?" In many respects the changes for older people in Scotland are marked. For example, in 1999, at the opening of the Scottish Parliament, older people did not have bus passes that allowed them to travel the length and breadth of the country for free. They did not receive free personal and nursing care when they were in need of it. They were not eligible for free central heating if they had never had it.

It was in this context that we commissioned Professor Charlie Jeffery of the University of Edinburgh, an academic with intimate knowledge and experience of Scottish politics, to take an independent look at how well devolution had served the interests of older people in Scotland. His report casts a revealing light on policy developments for

older people and is both informative and thought provoking. We believe it also makes an important contribution to the debate about the future of older people's policies in Scotland.

Although this report stands out in its own right, it is only part of the developing story of devolution in Scotland. We would like to hear your reaction to the report as well as any views, thoughts or suggestions on how well devolution has served the interests of Scotland's older people, and what you think the future could, or should, hold for the next generations of older people.



David Manion
Chief Executive
Age Scotland

1. Introduction

Over the last 15-20 years, in Scotland, the UK and beyond, policies on ageing and older people have risen dramatically up the political agenda. During that period awareness has grown of the fact that our populations are ageing, and of the challenges this poses. Our responses have, happily, become more nuanced. Much of the initial commentary, especially in the media, was alarmist. Having more older people brought 'crisis', especially in healthcare costs and in financing the pensions 'time bomb'. Older people were depicted as a problem and a burden that fell on the rest of society and, in particular, younger people. These depictions de-personalised older people, overlooking the contributions to society they have made and continue to make for the general good. They also skimmed over the fact that younger people become older people, and have a stake in how society collectively provides both support and opportunity for its older members, now and in the future.

More recently – broadly in the last decade – a more differentiated understanding of the policy challenges of an ageing population has emerged. This still, and inevitably, puts the big, collective challenges in the foreground, in particular how to fund health and social care as a bigger proportion of our population becomes older, and how to fund adequate incomes for older people. But it also treats older people much more as individuals who have needs to be fulfilled and contributions to make, and also as *citizens*, with rights as other citizens have. As this more individual-centred perspective has emerged, policies focused on the implications of an ageing population – healthcare, pensions and so on – have been supplemented by policies *for* older citizens.

The Scottish Parliament is now more than a decade old. It is one of the most powerful sub-state parliaments in Europe and as such has real scope to introduce distinctive policies which may be different from and, perhaps better than, those made by the UK Parliament at Westminster. It was also founded with an ambitious commitment to inclusiveness and participation. This promise of a 'new politics' was perhaps over-optimistic, but it did open up possibilities for voices beyond the 'usual suspects' to be heard. It certainly created new opportunities for ordinary citizens – including older ones – to have a voice, and for age-focused charities such as Age Scotland to help those voices count.

This report offers an evaluation of how far a changing policy agenda and a more open, devolved political process have delivered change and improvement for older people in Scotland. In the round it presents a positive account of change for the better which, in part, stands out from the situation facing older people in other parts of the United Kingdom. But there are areas where significant problems remain, or cannot easily be fully addressed in Scotland alone, given the way that the Scottish Parliament's devolved powers intersect with those still held by the UK Parliament.

The report has two main sections. The first sets out the public policy context for ageing and older people in Scotland. Part of that context is demographic: the way that Scotland's population is changing. Part is about policy-making structures: the powers of the Scottish Parliament and those at Westminster which relate to ageing and older people; the relationship of the Scottish Parliament to local government, which has many of the responsibilities for implementing policies for older people; and the wider 'policy community' – the various governmental and non-governmental bodies involved in the policy process, and the shared assumptions they have. A final part of the context is more narrowly about

politics, and in particular the change of government in May 2007 from the Labour-Liberal Democrat coalition that governed Scotland from 1999–2007 to a Scottish National Party minority government.

The second section of the report focuses on the key policy issues where policy since devolution has made a mark. It begins with a discussion of the Scottish Government strategy on ageing and older people, *All our Futures: Planning for a Scotland with an Ageing Population*.¹ It then discusses policy in Scotland under six headings: equality for older people; free personal and nursing care; at-home services; fuel poverty; transport; and employment. This is intended neither as a comprehensive list nor as a set of discrete policy challenges; indeed, one of the themes is how interlinked different policy headings are, and how they require a concerted and integrated approach. The six policy headings also illustrate how the particular policy structures Scotland has – as set out in the in the first part of the report – helped deliver, or at times hampered, policy change.

The report concludes with a number of recommendations that might allow further progress to be made as we progress into the second decade of devolution.

2. The Policy Context for Ageing and Older People in Scotland

2.1. Scotland's demographics

Scotland's demography is well-researched and clearly understood.² Fertility rates – the number of births in relation to the number of women of childbearing age – halved between the early 1960s and the turn of the millennium, before growing a little since. And life expectancy has grown to 74.7 years for a baby boy born in 2005 and 79.5 years for a baby girl. In 2031 the equivalent figures are expected to be 80.4 for males and 84.8 for females.³

These developments have been major factors in determining the age structure of the Scottish population. In the decade 1997-2007 the proportion of Scots in the age groups 0-15, 16-29 and 30-44 each fell, while the proportion in the age groups

45-59, 60-74 and 75+ rose, the latter by 13 per cent.⁴ This pattern is set to continue. Between 2006 and 2031 the age group 0-15 is projected to shrink by 7 per cent from 0.92 million to 0.86 million. At the same time the number of people aged 60-74 is set to grow by 40 per cent and the 75+ group by a remarkable 81 per cent as the total number of over-60s rises from 1.12 million to 1.73 million.⁵

Looking comparatively across the UK, the Scottish population is older than the UK average and set to get more so (Table 1), with the 19.1 per cent of pensionable age in 2005 projected to rise to 21.3 per cent by 2021. England and Northern Ireland have fewer older people, and Wales rather more.

Table 1: The Age Composition of the UK Population, 2005 and 2021

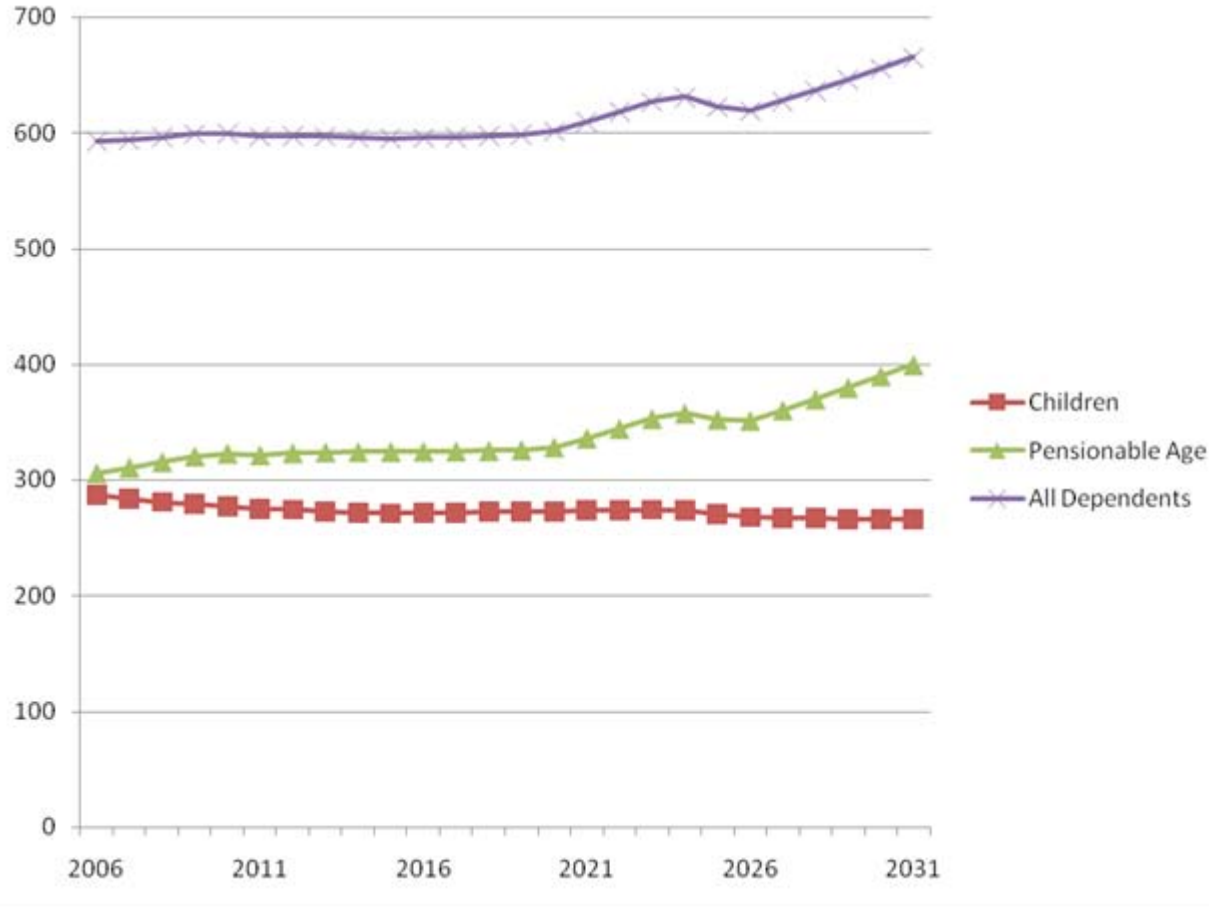
	UK	England	Scotland	Wales	Northern Ireland
2005					
Total Population (m)	60,209	50,432	5095	2959	1724
Adults under the state age of retirement (%)	62.0	62.1	62.6	60.3	61.7
Adults over the state age of retirement (%)	18.6	18.6	19.1	20.5	16.3
2021 Projection					
Total Population (m)	64727	54605	5127	3165	1830
Percentage Change from 2005 (%)	+7.5	+8.2	+0.6	+7.0	+6.2
Adults under the state age of retirement (%)	62.7	62.9	62.6	60.6	62.8
Adults over the state age of retirement (%)	19.7	19.4	21.3	22.2	18.1

Source: Alan Trench and Charlie Jeffery, *Older People and Public Policy: The Impact of Devolution, Age Concern England, 2007*, p. 6.

This changing age structure has very direct implications for the 'dependency ratio', the number of 'dependants' (children aged under 16 and people of pensionable age) per 1,000 working age population. Table 2 shows a significant growth in the projected dependency ratio between 2006 and 2031, especially towards the end of that period, controlling for the planned adjustments of

pension age in the coming decades.⁶ There are obvious implications for the planning and funding of pensions. But as pensionable age rises, there are clear implications too for labour markets, as older people are likely to stay in employment for longer. In addition, some older people may delay retirement for financial reasons in light of the current recession.

Table 2: Dependency Ratios (per thousand working population) 2006-31



Source: Scotland's Population 2007. *The Registrar General's Annual Review of Demographic Trends*, SG/2008/123, at <http://www.gro-scotland.gov.uk/files1/stats/scotlands-population-2007-the-register-generals-annual-review-153rd-edition/scotlands-population-2007-the-register-generals-annual-review-153rd-edition.pdf>, p. 16.

Table 2 also shows a shift in the balance of dependants, with the ratio of children falling and the ratio of pensioners growing, but also within the pensionable groups a shift in balance between the 'younger elderly' (up to 74 years), and the 'older elderly' (74+). That latter shift in balance is partly due to the projected rises in state pensionable age, which trims back the numbers in the 'younger' group, but partly also a consequence of growing life expectancy. But growing life expectancy does not necessarily mean growing healthy life expectancy. The 'older old' are more likely to have increasing health problems, with these compounding other challenges older people face. The distinction between the younger (and healthier) elderly and the growing older age group with more ill-health, is an important one that may call into question existing policies for older people, which often have a one-size-fits-all character.

There is another important variable that differentiates older people: location. Rural areas are generally older than urban areas. In 2006 the oldest three local authority areas were Dumfries and Galloway, Eilean Siar and South Ayrshire (each with 24 per cent of people at pensionable age), and the youngest West Lothian, Glasgow City and Edinburgh City (with between 15 and 17 per cent). By 2031 the oldest three are projected to be Dumfries and Galloway and Eilean Siar again, but now joined by the Shetland Islands (each at over 30 per cent), with the same three as the youngest (each at 20 per cent or less).⁷

The rural-urban divide is also important because it interacts with other variables that impact disproportionately on older people, such as the availability of public transport and other services, and housing type. There are significantly higher proportions of detached houses in rural areas, which are typically harder to heat and more expensive to maintain. The highest proportions of detached dwellings in Scotland, for example, are in Shetland,

Orkney and Eilean Siar at over 58 per cent, compared with an average of 20 per cent for Scotland as a whole.

These data say something about the scale of the challenge, both in addressing the wider implications of an ageing population for society as a whole and in ensuring that individual older people – whether the younger old or the older old, urban or rural – have the opportunity to fulfil their roles as citizens. The discussion now turns to the policy-making structures which need to be mobilised to address these challenges, exploring firstly how the broad constitutional structure of Scottish devolution shapes the policy-making relationships that link the Scottish and the UK governments; secondly how Scottish central and Scottish local government work together to address Scottish policy goals, thirdly how a wider, non-governmental policy community in Scotland engages with government; and finally how far the election of the minority SNP government in 2007 has impacted on the policy lines established by its predecessor Scottish Governments.

2.2. The structure of Scottish devolution

The broad framework for policy on ageing and older people is set by the structure of Scottish devolution, and initially it would appear that that structure is relatively straightforward. The Scotland Act 1998 defines which powers are 'reserved' to Westminster, leaving anything not so specified as a matter on which the Scottish Parliament can legislate. And, with few exceptions, each level of government is responsible for the implementation of its legislation in Scotland. The two levels of government operate, in principle, in discrete fields in discrete ways.

This separation of Scottish and UK powers in policy fields with relevance to ageing and older people is set out in Table 3.

Table 3: The Division of Powers between Scotland and the UK on Ageing and Older People (2007)

Policy area	Scottish Responsibility	UK Responsibility	Comments
Health promotion	X		
Mental health	X		
Health care	X		Abortion and xeno-transplantation are reserved
Mental capacity	X		
Assisted suicide and voluntary euthanasia	X		Legislation would need to comply with ECHR protection of right to life
Housing	X		
Social care services	X		
Local government finance	X		
Regulation of health and social care	X		
Regulation of medicines		X	
Decision on funding medicine or other treatments	X		NICE advice on surgical treatment extends to Scotland
Transport	X		But long distance/cross-border rail travel, air travel and most aspects of shipping are reserved
Power to provide free local transport	X		
Social security		X	
Regulation of private pensions		X	
Provision of tax credits		X	
Income tax		X	But with limited tax varying power in Scotland
Corporation tax		X	
Capital gains and inheritance tax		X	
VAT		X	
Regulation of financial service		X	
Crime	X		
Employment generally		X	
Age discrimination in employment		X	
Water supply	X		
Gas and electricity supply		X	
Fuel poverty	X		
Consumer protection and safety		X	
Equality		X	But with additional Scottish equality regime in devolved matters
Human rights		X	
Legal services including legal aid	X		

Source: Alan Trench and Charlie Jeffery, *Older People and Public Policy. The Impact of Devolution, Age Concern England* (2007), pp. 33-5.

It shows, with few exceptions, that either the one level of government or the other is responsible for particular policy matters. That pattern of separation of responsibilities may appear at first glance to simplify the terrain for policymaking. But there are complexities. These arise in part in the one or two areas where there are overlaps of functions, notably in health care and equalities policy. But they stem more generally from the very neatness of the division of powers. There is no single policy field which captures all the issues relevant to ageing and older people; it is more or less a truism that any set of policies for older people needs to be 'joined up' across several conventional policy fields. But that means, post-devolution, joining up across different levels of government.

For example the key policy levers that impact on the income of older people – on pensions, benefits and taxation – and those which shape their terms of access to the labour market, are held at UK level. There are, as a result, obvious limits on the capacity of a Scottish government to develop an integrated policy approach. This has been the case in particular where changes in policy in Scotland are interpreted by UK government as removing entitlement to UK social security benefits. If the UK government holds this view, then the cost of introducing policy change in Scotland may be deemed too high. This was the situation recently in the withdrawal of the SNP's policy on introducing a local income tax, which would in the UK government's view have rendered council tax benefit redundant.

A move to local income tax may have been beneficial to many older people who have relatively low incomes but own properties in the upper council tax bands. In drawing up plans for local income tax, the Scottish Government had expected the savings to the UK Exchequer from council tax benefits no longer payable in Scotland, to be added to the grant allocated to the Scottish Government, but the UK Government

refused. There were similar issues – dealt with in detail later in this report – which complicated the introduction of free personal and nursing care in Scotland (and still complicate that policy's operation), and which also have the potential to limit Scottish scope of action in other fields, like combating fuel poverty.

To an extent, then, the apparently neat dividing lines in the division of powers between Westminster and the Scottish Parliament have jagged edges. That is a reflection of how the powers of the Scottish Parliament were established in the 1998 Scotland Act. The division of powers set out there was not the product of a considered reflection about what would most appropriately be done by a UK Parliament acting for the UK as a whole and a Scottish Parliament acting for Scotland. It was the product of historical coincidence. What became devolved powers under the Scotland Act were powers that had been exercised from within UK government by the Scottish Office. Some of those powers could be traced back to the autonomy guaranteed to Scottish institutions under the 1707 Treaty of Union of Scotland with England. Others accumulated over time as UK central government found it convenient to introduce devolved administration of UK policies in Scotland. In that way, the Scottish Office 'grew incrementally, with no clear pattern'.⁸ So what the Scottish Parliament took over at the launch of devolution in 1999 had that same lack of pattern.

Other states which have devolved governments also have the jagged edges that arise from the way the powers of different levels of government have evolved incrementally over time. They tend also to have systematic ways of dealing with them through structures of 'intergovernmental relations', normally committees which bring together politicians or civil servants working in different jurisdictions either to help coordinate policies across jurisdictions or to resolve disputes over who does what.

While post-devolution UK does have intergovernmental relations between devolved and UK governments, they tend to be ad hoc, done largely by civil servants, and outside the formal political body – the Joint Ministerial Committee – set up at the launch of devolution to provide a UK-wide framework for policy discussion. This reliance on informality and ad hoc arrangements has been widely criticised, not least by those worried that once the electoral process produced governments led by different parties in different places, the inevitable result would be party-political conflict that may make devolution difficult to operate.⁹

Some evidence for this might appear to be given by the disputes we have seen between the UK (Labour) Government and the Scottish (SNP) Government since the 2007 Scottish election. Much of this has, though, been little more than political grandstanding which disguises what, under the surface, remain cordial and, in their ad hoc way, effective relationships between the two governments (in fact some of the biggest intergovernmental disputes so far have been between a Labour UK Prime Minister and a Labour Scottish First Minister, notably on free personal and nursing care back in 2001). An arguably more serious problem is the lack of system and routine in intergovernmental relationships. This means that different groups of civil servants deal with problems in different areas at different times. The lack of system and routine prevents the accumulation of inter-governmental institutional memories on the ‘rules of the game’ from emerging, and leaves more scope than there otherwise would be for new issues at the UK-devolved interface to become new jagged edges of devolution.

2.3. Local Government in Scotland

There is however a second form of intergovernmental relations in Scotland, which does have system and routine: the relations between the Scottish Government at Holyrood and Scottish local government. Those relations are important for policies on ageing and older people because in many fields, local authorities are responsible for implementing Scotland-wide policies, as they were before devolution for implementing many UK-wide policies in Scotland.

Local authorities, and their umbrella group in Scotland, the Convention of Scottish Local Authorities (COSLA), were prominent in the campaign for devolution and gave considerable support to the Scottish Constitutional Convention.¹⁰ COSLA’s support for devolution in part reflected a wider theme in the devolution campaign: that a Conservative UK government with declining support in Scotland lacked a mandate to govern in Scotland. There were also elements of party politics at play; Labour was then the dominant party in Scottish local government. And – irrespective of the arguments about devolution and the party political dynamics – there was a more generic pattern of local government feeling over-constrained by the requirements imposed on it by the centre, in this case a geographically remote central government in London.

In all these respects ‘things could only get better’¹¹ with devolution. Devolution would bring a ‘made-in-Scotland’ democratic legitimacy to the government of Scotland, better party-political congruence, and a closer ‘centre’ in Edinburgh. And in most respects, devolution in practice was felt by local government to have brought better central-local relationships, in particular a better quality of access to ministers.¹² But even then, the more generic forms of tension that can emerge between centre

and localities were never far from the surface. These were of two, inter-related kinds:

- Central governments like to shape what local governments do – through regulation, target-setting and financial controls – to ensure central government policy gets carried out as the centre would like; local authorities generally resent and often resist over-stringent central direction
- Relatedly, central governments tend to favour standardised policy provision across the whole jurisdiction, while local authorities favour autonomy in delivering their policy portfolio, often in the name of local democracy.

There was a growing sense in local government by the mid-2000s that central controls were becoming too tight and that local autonomy was being undermined. The change of government in Scotland in 2007 brought an opportunity to re-think central-local relations. A ‘concordat’ was agreed by the Scottish Government and the 32 local authorities in COSLA in November

2007¹³ which appeared to put that relationship on a new basis (though much of the language used was not unlike that used in earlier agreements before 2007¹⁴). The key features of the Concordat are set out in Box 1. The general thrust is one of loosening central regulation of the local level in particular by moving to one ‘Single Outcome Agreement’ (SOA), drawn up by local authorities themselves, rather than specific, multiple targets set by the centre (though some specific delivery obligations remain).

The effect, in principle, was to create greater scope for autonomous decision-making at the local level. In addition, the level of ring-fencing of funding streams around particular activities was reduced, again offering local authorities more leeway in defining local priorities. The wider package was lubricated by a funding boost awarded in exchange for a freeze of council tax at current levels and a commitment on the part of local authorities to seek efficiency savings (which could be kept for re-investment in local services).

Box 1: Key Features of the Scottish Government-COSLA Concordat 2007

- A commitment that the Scottish Government will not undertake structural reform of local government during the term of this Parliament.
- There will be a move to a Single Outcome Agreement (SOA) for every council, based on the agreed set of national outcomes (underpinned by agreed national indicators).
- SOA processes will be supported by streamlined external scrutiny and effective performance management systems, and more focused and proportionate inspection regimes replacing the myriad of existing systems.
- The Scottish Government will reduce substantially the number of separate funding streams to local government.
- Local authorities agree to deliver on a specified set of commitments from within the funding provided.
- Local authorities will be able to retain – for the first time - all their efficiency savings to re-deploy against ongoing pressures.
- COSLA and the Scottish Government will put in place arrangements jointly to oversee and monitor the new partnership and, as part of this, to assess how the new arrangements are working and how each side is fulfilling the commitments made.

Source: Neil McGarvey, ‘Centre and Locality in Scottish Politics: From Bi- to Tri-partite Relations’, in Charlie Jeffery and James Mitchell (eds), *The Scottish Parliament 1999-2009: The First Decade*, Edinburgh: Luath (2009).

The more amicable and decentralised relationship between central and local government since 2007 appears so far to have held up (though it will no doubt face difficulties as pressures to cut public spending following the current recession accumulate and the contentious question of local government reorganisation will likely resurface). But it does bring implications for policies for older people. More decentralised autonomy and less central control means, inevitably, more variation in what individual councils do. That variation can be applauded as providing greater capacity to respond to differing local needs. The challenges facing older people may not be the same from place to place; for example one of the themes that emerged from the discussion of Scotland's demography earlier in this report is that older people in rural areas often face more difficult challenges than those in urban areas, and need different policy responses. But variation can also be interpreted negatively as a recipe for 'postcode lotteries' in the provision of services, so what you get depends on where you live. This has been an issue that has dogged the flagship Scottish policy for older people on free personal and nursing care and is discussed further in section 3.

To an extent the scope for 'postcode' variation was limited by some of the specific commitments made in the concordat, notably in the field of social care: a commitment to improve care home quality; a commitment to increase and then adjust for inflation the standard payment levels for free personal care; and a commitment to provide additional respite support for carers. All these have direct relevance for older people. But many of the other policy issues and instruments touched on elsewhere in this report are not specifically addressed in the Concordat; a good number of the funding streams that had ring-fencing removed were streams that provided support and services for older people.

Unsurprisingly, local authorities have taken diverse approaches to drawing

up SOAs. SOAs do not have a standard format but they do, generally, give profile to policies for older people. All 32 local authorities have indicators focused on ageing and older people. Many of these, according to the analysis by Community Care Providers Scotland, appear driven by the 'strain' that an ageing population is likely to put on services in their area, which needs to be mitigated by measures to relieve that pressure: improve home care, reduce hospital (re-)admissions and ensure earlier hospital discharges.¹⁵ This rather old-style focus on the 'problem' of ageing is only in part balanced by indicators focused on combating social exclusion among older people or ensuring opportunities to participate in decision-making. The emphasis, to put it another way, appears to be more on older people as passive recipients of services than as active contributors to society. This would appear to contradict some of the founding rhetoric on openness and accessibility that surrounded the introduction of devolution; this has generally not translated to greater openness and accountability for service users in terms of service design and delivery 'on the ground' at the local level.

This 'recipient' emphasis is perhaps reinforced by the analysis of SOAs by the Scottish Parliament Information Centre – the research service for MSPs – which noted how few SOAs gave prominence, or even reference, to equalities issues, including those to do with older people.¹⁶ This rather stands at odds with the emphasis in the Scottish Government's *All Our Futures* strategy which is much more fully focused on the activation of older people's potential contributions to society as citizens rather than simply as consumers of services. It perhaps marks a difference in perspective between a central government that sets the broad lines of policy, and a local level which faces the challenge of implementing policy on the ground, where perhaps some of the broader vision is lost amid the policy detail. And again it marks out the complexity of

multi-level politics: for a successful, multi-faceted policy on ageing and older people, policymakers at Scottish, UK and local levels need to be carefully coordinated.

2.4. The Wider Policy Community

Policy-making also involves a wider group of organisations than just government, including interest groups with long-standing relationships with government, like the healthcare professions, and other organisations, such as those in the voluntary sector, which have generally lacked the ‘insider’ status of, say, doctors, but are nonetheless valued for their expertise and their relationship to their particular constituencies. Age Scotland is a good example of this latter kind of organisation.

Recent work by Michael Keating and his colleagues has focused attention on the distinctive ‘territorial policy community’ that has become consolidated in post-devolution Scotland.¹⁷ This community is in part a well established one, based in the relationships of the pre-devolution Scotland Office with the legal and public sector professions and interest groups for business

and agriculture, many of which were easily renewed in the context of devolution. But while these groups – ‘usual suspects’ in some views¹⁸ – remain influential, it appears that the policy community has become more diverse and inclusive since devolution, opening up more fully to new voices. There are two broad explanations for the change.

The first lies in the imagery of the ‘new politics’ the Scottish Parliament was intended to deliver. This was a terminology that emerged in the Scottish Constitutional Convention. The Convention’s final report in 1995 ‘expected’ that the Parliament would ‘provide, through its practices and procedures, a form of government in whose accountability, accessibility, openness and responsiveness the people of Scotland will have confidence and pride’.¹⁹ That expectation was given more concrete form by the establishment of a Consultative Steering Group (CSG) on the Scottish Parliament (including a number of figures who had been prominent in the Convention) in late 1997. The CSG’s report was endorsed by the newly elected Parliament in June 1999. It highlighted four key principles (Box 2):²⁰

These principles were reflected in the institutional design of the Parliament, notably in a powerful committee structure

Box 2. The Consultative Steering Group Principles

- The Scottish Parliament should embody and reflect the sharing of power between the people of Scotland, the legislators and the Scottish Executive;
- The Scottish Executive should be accountable to the Scottish Parliament and the Parliament and Executive should be accountable to the people of Scotland;
- The Scottish Parliament should be accessible, open, responsive, and develop procedures which make possible a participative approach to the development, consideration and scrutiny of policy and legislation;
- The Scottish Parliament in its operation and its appointments should recognise the need to promote equal opportunities for all

designed both to hold the Scottish Government to account and to be accessible to voices outside the Parliament. The committee structure includes committees focused on equal opportunities (including for older people) and public petitions (to give a voice to individuals). More informally cross-party groups have emerged which engage MSPs who share interests with outside organisation and members of the public on particular matters, including one on Older People, Age and Ageing. And the attempt was made, at the CSG's behest, to establish a Civic Forum to open up space for civic organisations to contribute to policy debate. The Scottish Government also established new practices of engagement, not least through the wide use of consultation in policy development and by seeking to structure relationships with the voluntary and community sectors, including a partnership 'Compact'.

Against this background it is clear that a form of 'new politics', more open and accessible than 'old' (that is, Westminster) politics has been achieved (though some initiatives, like the Civic Forum have failed). But it is important not to read this simply as a vindication of the often rather high-flown visions of the Convention and the CSG. A view is emerging that the Convention and CSG were rather naïve about the possibilities of a shaping what the chair of the CSG, Henry McLeish, called 'a new sort of democracy'.²¹ In particular, they underestimated the central role of political parties in representative democracy, their capacity to bind MSPs to party lines, and the resulting adversarial relationships between parties (that replicate in the Scottish Parliament a number of the features of classic Westminster politics). There is also scepticism about some of the mechanisms of engagement, including concerns that consultation processes are box-ticking exercises with little actual effect, and about the extent to which the compact with the voluntary sector has produced genuine partnership.²²

Some have cautioned that the voluntary sector needs to beware of being tempted into a Faustian pact as junior partners of government bearing co-responsibility for at times unwelcome decisions.²³

There is a second, and rather more compelling explanation of the greater accessibility of policy-making around the Scottish Parliament and Scottish Government, and it is a simple one: proximity. Scottish ministers and MSPs are easier to get hold of in Edinburgh than UK ministers and MPs are in London. It was difficult logistically for groups without the insider status of, say, the public sector professions, to get their voices heard in UK-level policy processes. They can much more so now in a Scottish policy process. The newly designed structures and high ambitions of the Parliament have also, of course, played a role, but arguably proximity is the key to the 'newness' of the politics that Scotland has seen since devolution. Proximity is what most enables voluntary sector organisations like Age Scotland to influence policy agendas.

There is another qualification to the imagery of a 'new' politics. What is distinctive about the substance of policy in Scotland since devolution is not so much its sense of innovation, but rather its sense of tradition. As Keating and his colleagues put it:²⁴ 'Scotland has retained more of a traditional public services model of provision and given a larger role to local government ... There is also less stress in Scotland on "targetry", the setting of quantitative targets for policy performance'. Keating et al's comparator is England, or more precisely UK Government policy in particular on health and education in England, where private finance, private management, and market-style allocation mechanisms have been introduced by both Conservative and Labour governments. Post-devolution policy in Scotland has, to a considerable extent, resisted emulating what is happening in England and, to a

large degree, preserved or reinstated a more 'traditional social democratic model'.²⁵

The effect of devolution has been to enable this distinctive Scottish approach – linked to, and supported by the public sector professions – more fully, but also to open out its scope. Policies on ageing and older people have come in part under that wider scope, and voluntary sector organisations concerned with older people have been able to push issues higher up the agenda through the greater access that proximity and more open institutional structures bring. One example is the 2007 Scottish Adult Support and Protection Act, which followed sustained campaigning by Age Concern Scotland to recognise that older people are often among those who may require special safeguards from abuse by family members or carers; significantly there is no equivalent legislation elsewhere in the UK. In this and other areas, as the discussion in section 3 shows, significant policy change has resulted.

2.5. The SNP Government

The question of how much policy has changed is one also raised by Scotland's first post-devolution change of government in 2007. But it is easy to 'read' the SNP government through its constitutional policy – seeking Scottish independence – and through that to overstate the difference it was ever likely to make in an area like policies for older people. For one, the SNP government has been structurally limited by its minority status; it cannot easily pass legislation when it needs the support of opposition parties to achieve a majority of 65 of the Parliament's 129 seats (Table 4).

Table 4: Party Strengths in the Scottish Parliament

Party	Total Seats
SNP	47
Labour	46
Conservative	17
Liberal Democrat	16
Greens	2
Independent	1

But there is also a second limitation on the scope for change: ideologically the SNP is generally understood as being a little to the left of centre, as are its predecessors in Scottish Government, Labour and the Liberal Democrats. The constitutional issue aside, there is little else that sharply divides all three parties. The thrust of SNP policy, especially in the broader field of social policy, has been to pursue differences of degree rather than of principle, and the changes it has produced have largely been incremental adaptations of what went before (though in some fields, such as equality, policies have been markedly lower in profile under the SNP). That basic continuity is buttressed by the wider Scottish policy community, which also maps neatly onto a broadly centre-left position, and which is especially influential in the field of social policy including policies on ageing and older people.

The SNP took forward the previous government's *All our Futures* strategy, including its palette of high-level commitments.²⁶ It has generally not questioned its policy inheritance, though it has brought a rather different approach to government. In particular it has introduced an encompassing tactical orientation with five strategic objectives: Wealthier and Fairer; Smarter; Healthier; Safer and Stronger; Greener – underneath which cascade sets of 'national outcomes' the government wishes to see achieved, and 'national indicators and targets' which offer measures of those outcomes. Policies on ageing and older people need to fit within this new and seemingly more focused orientation

This more rigorous approach can be double-edged. Where there is a clear fit, swift action can follow, as for example in addressing some of the controversies surrounding free personal and nursing care which the previous government was slow to do. But where the fit is less clear – for example in the way the inherited definition of fuel poverty mapped onto the government's chosen indicators for 'poverty' more generally – established policy instruments which disproportionately benefited older people can come under threat. Both these issues are dealt with more fully in section 3, but are flagged here to highlight the kinds of difference the change of government in 2007 has begun to make.

There are also differences which relate to the other features of the wider policy context set out above, and which have been touched on already. Relations with local government have been renewed, though it is perhaps too early to provide an evaluation. Although there is currently a more positive and concerted relationship, this may become strained as the consequences for public spending of the current recession become clear.

The intergovernmental relationship until May 2010 was between the Labour

UK Government and the SNP Scottish Government. Beyond periodic disputes concocted by either side primarily for consumption by party constituencies, there was a different tone to relationships. The Scottish Government was more forthright and public in representing its views to UK Government. Whether this achieves more than the typically in-house and private relationships pursued by the previous administrations remains unclear, though it probably increased awareness of how in some areas the scope of devolution remains limited and/or dependent on effective coordination with Whitehall.

A final point on the SNP Government has to do with its constitutional policy. The SNP's primary aim is Scottish independence; it also appears content to accept further-reaching devolution of legislative powers and enhanced fiscal autonomy, at least as a staging post en route to independence. In its discussion of options for further-reaching devolution – notably in the suggestion of devolving powers in social security matters – there would be direct implications for older people, not least in terms of pensions and other benefits. Significantly the Government's White Paper on Scotland's constitutional options, *Choosing Scotland's Future* (which gives rather more space to further-reaching devolution than to independence) suggests powers either to supplement a core level of UK provision ('United Kingdom benefits and tax credits could be supplemented by Scottish schemes to promote particular social objectives') or entirely to devolve some social security functions, including pensions.²⁷

The SNP Government's commitment to move in some way – independence or more devolution – beyond the current devolution arrangements has set the agenda in Scotland's constitutional debate, and the unionist parties – Labour, the Conservatives and the Liberal Democrats – have followed by moving, through the vehicle of the Calman Commission on Scottish Devolution,

towards acceptance of further-reaching devolution. The Calman Commission initially flagged the issue of welfare policy as one in which it would consider further-reaching devolution, though in the end it made no significant recommendations in the field. Nonetheless the current debate does highlight possibilities for greater country-by-country variation in areas that have been considered as central to a common UK-wide 'social citizenship', perhaps by giving Scotland and the other devolved nations scope to go beyond UK-wide minimum standards should they see fit.

This is not the place for a detailed analysis of that debate, but it raises an important implication. Any constitutional changes that follow from the current debate are likely to be asymmetrical, adding further distinctiveness to how Scots are governed in the UK. They are likely to enhance the tendency already visible for a package of public services to be available in Scotland that is distinctive from that in England and elsewhere in the UK. They may continue to erode a sense of common social citizenship across the UK; what the state provides as social policy seems set to vary increasingly according to where in the UK a citizen lives. In other words, devolution – and further-reaching devolution all the more so – has the potential to produce inequalities between older people in different parts of the UK.

One question which the broader devolution reforms have not addressed is whether this matters. Should social citizenship be defined differently in different UK jurisdictions? Is it a problem if older people in one part of the UK experience better, or worse, policies than people in another part of the UK? There is some evidence, as discussed in this report, that older people in Scotland, since and as a result of devolution, do have better provision than elsewhere in the UK. How much of an issue should this be outwith Scotland? What if the situation is reversed in future?

One way of addressing these questions might be to explore how to encourage different jurisdictions – whatever their constitutional status or aspirations – more fully to exchange ideas with, and learn from, one another. The capacity to do so is currently limited by the absence of regular forums for the sharing of information and coordination of policy across UK jurisdictions. There may be an opportunity here for organisations like Age Scotland which, as part of the Age UK family, is linked to organisations in each part of the UK, all sharing a common purpose, to act as catalysts for policy learning.

3. Scottish Policy on Ageing and Older People

3.1. All Our Futures

As suggested earlier, Scottish policy on ageing and older people is, to a large extent, non-partisan. The former Labour-Liberal Democrat Scottish Executive commissioned a series of studies in 2006 involving wide consultation and involvement from older people and organisations that pursue their interests, which led to the publication of the strategy *All Our Futures: Planning for a Scotland with an Ageing Population* in March 2007.²⁸ The strategy was developed in a period when a number of policy development processes focused on longer-term thinking were under way, including the then Scottish Executive's Futures Project²⁹ and the first substantial output of the

Scottish Parliament's Futures Forum which focused on 'positive ageing'.³⁰

The result was a document notable in a number of ways. One was its ambition, as set out in a 'vision' statement (Box 3). This had a very clear focus on the perspective of the individual older person as framed by the notion of 'active ageing' and avoided the more traditional depictions of older people as passive recipients of services and/or as administrative problems that needed to be addressed. It also suggested a commitment to working across the conventional administrative boundaries of the public sector to produce an integrated set of policies.

Box 3. The 'Vision' of *All Our Futures*

'Our Vision is of a Scotland where:

- All the years of life are fulfilling and the contribution of older people - irrespective of age, ethnicity, disability, gender, sexual orientation, or religious belief - is valued, appreciated and where necessary supported.
- Age is not used to define or make assumptions about the role, value or potential of an individual.
- People enjoy more years of healthy life, and are enabled to manage long term health conditions.
- People are enabled to continue to work for as long as they want or need to, in the way that suits them best, supported by flexible approaches to employment and retirement.
- Older people have ready access to information technology and the internet.

- Older people are able to participate in learning activities, both vocational and for personal development.
- Older people are enabled to volunteer for as long as they want, in the way that suits them best, and that contribution is fully recognised.
- Fewer older people than ever before will live in poverty.
- Vulnerable older people are protected, safe, and are free from fear.
- Older people have access to public services which are people-centred, accessible and joined up; and can access quality services appropriate to their needs, when and where they are required.
- Houses, buildings, communities, transport systems and infrastructure are well-designed and accessible, and can be used by older people in safety and with confidence.
- Authoritative, up-to-date sources of advice and information are accessible to older people, when and where they are required and in a format that is accessible and user-friendly.

A second feature of *All Our Futures* was its view on policy implementation, which was unusually open, giving a central role in defining and monitoring ‘indicators of success’ to a new National Forum on Ageing with a membership drawn from older people’s organisations and public and voluntary sector bodies, including Age Scotland. There were also commitments to a ‘national stakeholder event’, which

subsequently metamorphosed into a series of regional events to generate feedback on the strategy, and a Centre for Intergenerational Practice to forge better understanding about ageing across generations. That aim was one of the six ‘priorities for action’ that were singled out (Box 4), each with a list of anticipated government actions.

Box 4. Priorities for Action in All Our Futures

- We will act to continue to improve opportunities for older people – to remove barriers and to create more chances for older people to participate and to be involved in their communities – as volunteers; through paid work; in learning, leisure, culture and sport
- We will act to forge better links between the generations
- We will continue to act to improve the health and quality of life of older people
- We will continue to improve care, support and protection for those older people who need it
- We will ensure that the right infrastructure is in place for a Scotland with an ageing population with housing, transport and planning progressively meeting the needs of all ages
- We will offer learning opportunities throughout life

All our Futures was published in March ahead of the SNP winning the May 2007 Scottish election. The SNP government endorsed it ‘as an evidence base and a clear strategy

for the future’ and supported ‘its overall conclusions’.³¹ In its Progress Report to the Scottish Parliament in December 2008 it did not, though, seek to measure progress

against the six ‘priorities for action’, but rather by mapping specific commitments onto its own five Strategic Objectives and, underneath these, its fifteen National Outcomes. The foregrounding of the Strategic Objectives and National Outcomes is standard practice across government and is intended to give the Government as a whole a more tightly defined sense of purpose.

There is however some danger in the integration of purposes across government as a whole, that the *thematic* integration of measures around ageing in *All Our Futures* may be diluted or compromised. It is not clear, for example, what weight the specific action points from *All Our Futures* that are deemed to relate to the Government’s Strategic Objective on ‘A Wealthier and Fairer Scotland’ have when measured against ‘wealthier and fairer’ measures in other policy fields. This potential for dilution appears to have been a concern in the Sutherland Review of Free Personal and Nursing Care ordered by the SNP Government. The Review argued (unfortunately without illustration or elaboration) that a ‘specific reference to securing the wellbeing of older people [should] be included within the Scottish Government’s 15 National Outcomes’.³² The Scottish Government, while claiming to have accepted all of Sutherland’s recommendations, has not yet introduced a National Outcome for the wellbeing of older people³³.

But even if there were a more explicit strategic focus on ageing and older people, the re-presentation of the *All Our Futures* action points under the headings of the Scottish Government’s strategic priorities sets a difficult challenge of administrative coordination within the Government. That challenge falls in particular to a dedicated Older People and Ageing Team (OPAT) which forms part of the Older People’s Unit in the Health Directorate. The Older People’s Unit in turn works with the Joint Futures Unit which is focused on ensuring effective

joint working between the NHS and local authorities at the interface of health and social care.

OPAT led the work in developing the *All Our Futures* strategy and has responsibility for progressing its implementation. It has been moved three times in recent years, initially from Health to Equalities, then back again and now back to Equalities. These moves appear to have been made for administrative convenience rather than as a policy measure. It is not yet fully clear how significant these moves are for policy, though they do suggest some uncertainty about how best to position the civil service in order to optimally achieve the aims of the Government’s policies on ageing and older people. There has, however, been a suggestion from the OPAT that the *All Our Futures* strategy has been as fully implemented as it can be, as “it has no long-term commitments beyond those already implemented and because its language predates the present Government”³⁴. This begs the question of whether there may be an opportunity and need for the present Government to develop a new strategy that fully reflects the structure of the National Performance Framework and Single Outcome Agreements.

With these issues in mind, what follows offers, in part, an assessment of how far an integrated approach to some of the key policy challenges around ageing and older people has been developed. The timescale is across devolution to date, but with an emphasis on the more recent years. The first challenge – equality – is chosen deliberately, as it provides an overarching frame for the more citizen-focused, activation approach to policies on ageing that Scottish Government policy across administrations has favoured. The other policy challenges are assessed against that frame: how far in free personal and nursing care, at-home services, fuel poverty, transport and employment there has been a focus on – as the *All Our Futures* vision repeatedly puts it – *enabling* older people. Under each

heading there is also consideration of how the wider policy context set out in section 2 of this report has shaped the direction and implementation of policy.

3.2. Equality

Equality policies in the UK³⁵ have gradually widened in scope from initial emphases on race relations and gender inequality to encompass also disability, sexual orientation, religion or belief, and age. Equality issues, and related matters of human rights, are areas of considerable complexity that have straddled the divide between UK-level and Scottish responsibilities since devolution.

The starting point is the rights protected under the European Convention on Human Rights, enshrined in UK law under the Human Rights Act 1998. The Human Rights Act 1998 establishes a 'floor' standard: no legislation or other action by the devolved institutions in Scotland may infringe the rights protected by the 1998 Act. Similarly, equal opportunities is a reserved matter. A UK-level Equality and Human Rights Commission, set up under the UK Equality Act 2006, has a remit extending across the whole of Great Britain (Northern Ireland has its own institutions for equality and human rights). But that remit does not extend to areas where the Scottish Parliament has legislative powers.

To address this gap, the Scottish Parliament legislated in 2006 to establish a Scottish Commission for Human Rights (SCHR). The SCHR has a duty to promote human rights and to review and recommend changes to the policies or practices of Scottish public authorities or the law of Scotland, though its remit is limited to matters that fall wholly under devolved powers.

The SCHR has consulted on how it should fulfil its roles, but no assessment of its

work is yet possible. Its founding vision is ambitious: for a Scotland in which 'social progress is achieved through a rights-based approach, and where human dignity, equality and participation are guaranteed for all.'³⁶ It aims to promote what it calls a 'human rights culture' in Scotland capable of 'promoting awareness, understanding and respect for human rights, with particular regard to those whose rights are not always noticed, or acted upon', and to integrate 'human rights into the governance of Scotland', that is in the exercise of public authority 'at all levels'.³⁷

The ways in which UK and Scottish legislation, and UK and Scottish Commissions (the Scottish branch of the UK Commission and the SCHR are co-located in Glasgow), will interact with each other are not yet clear. What may look at first sight like a rather confusing legal and institutional structure may actually evolve into something a little more straightforward: 'Perhaps the best way to understand the UK statutory framework is as creating a set of minimum standards, where the devolved administrations have freedom to adjust standards but not to fall below the UK-wide ones'.³⁸

What this could mean for policies on ageing and older people in Scotland is still to be seen. It could be possible, for example, to extend the areas in which age discrimination is prohibited beyond those related to employment law. The SCHR appears to be focused more on prompting a more general organisational culture change in the Scottish public sector which mainstreams the idea of older people as citizens, with rights to be regarded as equal members of society and to have the support needed to guarantee that equality. That support might extend beyond the still widespread conception of older people as service users (whose use may put 'strains' on services like healthcare) to a more nuanced approach focused, for example, on combating the forms of social exclusion which older people often experience.

Viewing older people as equal citizens would also see greater recognition of their role (and its value) as contributors to the common good – for example as carers of partners or grandchildren, as contributors to economic wellbeing, through longer and perhaps differently structured employment, and more generally as people with valuable experience and talents.

Central to any of this will be a focus not simply on ‘an ageing population’, but also on older people as *individuals*. One of the clear features of *All Our Futures* is this focus on the older person as individual and citizen. And the Scottish Government has added action to aspiration, for example: in securing opportunities for involvement of older people in the implementation of *All Our Futures*; in researching and delivering a prominent anti-ageism campaign (‘See the Person, Not the Age’³⁹) that has run from the summer of 2008 and is the first such government-led campaign in the UK; and in itself setting an example in flexible employment policies, with both a ‘no retirement age’ policy, and ‘partial retirement’ already introduced for Scottish Government employees.

But, as the Government’s evaluation of the ‘See the Person, Not the Age’ campaign recognised, ‘attitudes towards older people will not be changed overnight’.⁴⁰ Age-related prejudices, and their confirmation in a negative policy language of the ‘crisis’ and ‘strain’ of an ageing population are widespread. The tendency in local authority SOAs to portray older people as a group of service users whose demands need managing and to understate individual-focused equalities agendas is perhaps an example. Sustained effort will be needed to bring about a culture change on equality and citizenship. The following discussions of how particular policy challenges related to ageing and older people have been addressed together offer an interim assessment of how far such change is visible, and where progress needs to be made.

3.3. Free Personal and Nursing Care

‘Free’ Personal and Nursing Care (FPNC) is generally seen not just as a flagship policy for older people, but also a flagship policy for devolution as a whole. FPNC was one of the areas where the then Scottish Executive departed clearly, publicly and amid quite acrimonious dispute from the then UK government line. It was an early illustration of the capacity that devolution gave for the Scottish Parliament to set different priorities than Westminster. But it was not a policy that was well-planned, nor has it functioned without problems in practice.

The Scottish policy on FPNC implemented (in part) recommendations from the Royal Commission on Long Term Care chaired by Sir Stewart (now Lord) Sutherland, which reported in 1999. The Sutherland Commission argued that older people should not be subject to charges either for nursing care (requiring the ‘knowledge or skills of a recognised nurse’) or for personal care (‘care needs which give rise to the major additional costs of frailty or disability associated with old age’). The definition of personal care used by the Commission is given in Box 5.

The Commission’s recommendation that nursing care should be provided free of charge was accepted by all UK jurisdictions. Only in Scotland was its recommendation that personal care should be free, following assessment of need, implemented. Even in Scotland this only happened after some confusion, with the then Scottish Executive initially following the UK Government’s decision not to offer personal care free at the point of need, but instead to continue to means-test recipients and charge according to capacity to pay. In a series of events associated with the succession of Donald Dewar by Henry McLeish as First Minister, and pressure from within the governing coalition by the junior partners, the Liberal Democrats, that policy was overturned and

Box 5. Personal Care, as Defined by the Sutherland Commission

- Personal toilet (washing, bathing, skin care, personal presentation, dressing and undressing)
- Eating and drinking (as opposed to obtaining and preparing food and drink)
- Managing urinary and bowel functions (including maintaining continence and managing incontinence)
- Managing problems associated with immobility
- Management of prescribed treatment (e.g administering and monitoring medication)
- Behaviour management and ensuring personal safety (for example those with cognitive impairment – minimising stress and risk)

the decision to also offer free personal care made.

This change was resisted strongly by the UK government, which was wary of the likelihood of comparison of different approaches to long term care across jurisdictions, and the controversies over ‘postcode lotteries’ this might prompt. McLeish faced down that opposition, which was put with brutal directness, though he was not successful in arguing his case on the interface of the new Scottish policy with existing UK-wide social security benefits. The Scottish Executive had expected to be able to rely on the continued payment of UK Attendance Allowance as a partial contribution to the personal care costs of care home residents; the UK Department of Work and Pensions disagreed, adding significantly (by over 50 per cent) to the cost to the Scottish Executive of providing personal care.

It is now reasonably clear that the policy to introduce FPNC in Scotland was made without full consideration either of policy detail (in particular what constitutes ‘personal care’), or of the costs both at a general level (in terms of population projections) and in the relationships between UK and devolved government, and between Scottish central government as

policy maker and a local government level responsible for policy implementation. For these reasons, controversy has dogged the policy, as reflected in concerns on the policy’s implementation by Age Concern Scotland, Help the Aged in Scotland and Alzheimer Scotland,⁴¹ high profile cases before the Scottish Public Sector Ombudsman,⁴² and a formal review of the operation of the policy by Lord Sutherland ordered by the incoming SNP Government in 2007.⁴³

These concerns need to be kept in proportion. As both Lord Sutherland’s report and available survey evidence make clear, the policy is popular in Scotland, with Sutherland using the revealing measure of the relative absence of formal ombudsman complaints by members of the public in Scotland as compared to England.⁴⁴ The Sutherland Commission’s original concern – that someone with a condition like Alzheimer’s or simply the frailty that can come with old age should be treated equitably by the state with someone who has a condition like cancer – appears to command strong support (it also does so in England, despite the differences in policy across the Anglo-Scottish border).

There has also been clear commitment to the policy by successive administrations,

though the incoming SNP administration did act rather more forcefully in increasing funding for the recipients of FPNC (which had been frozen since its introduction) in line with inflation, commissioning the Sutherland Review, and then giving a patent pledge to implement its recommendations, including a commitment to boost funding to local authorities by £40 million.

Funding issues have been central to problems in implementing policy on FPNC from the outset. They have had a number of dimensions:

- *Achieving clarity about what is 'free' in FPNC.* There are widespread misperceptions that all costs of residential care are covered by the policy. While nursing care and (subject to assessment) personal care are, so-called 'hotel costs' are not, and remain subject to co-funding by state and individual, the latter according to means. In fact what was covered by the policy was £65 per week for nursing care and £145 per week for personal care (before the commitment to adjust for inflation) for those resident in a care home, and no specified contribution – that is fully free FPNC – for those receiving care in their own homes.
- *Ensuring that free elements of care remain free.* FPNC contributions were limited to £145 + £65 until the SNP's commitment to adjust for inflation and its £40 million funding boost to local authorities. At the same time care home charges have increased significantly, leaving individuals to cover a bigger proportion of care costs over time. The notion of 'free' is clearly relative and fragile, and needs to be related in some way to the wider costs of being in residential care.
- *Achieving clarity about the balance of UK and Scottish contributions to funding the policy.* Both the Sutherland Review and the SNP Government argue that the UK government was wrong to withdraw Attendance Allowance for those receiving FPNC in residential care. The Sutherland Review made this argument on equity grounds: that those receiving care in their own home in Scotland still qualify for the allowance, as do those in residential care in England.⁴⁵ These inequities do appear to lack logic, though the extent to which cross-border equity should continue to apply after devolution is increasingly unclear amid Scotland's evolving constitutional debate. Sutherland's call for a review of how UK-level benefits are applied is sensible, but may be overstating the extent to which a single UK-wide approach is now appropriate. FPNC is, in effect, a guarantee of policy provision in Scotland which exceeds the norm set at Westminster for England (and those currently applied in Wales and Northern Ireland). There may be sense in a more general review of the UK-devolved interface in social security matters that accepts that devolved administrations may wish to vary policy from a UK-wide standard, and, where such variations end eligibility for UK-wide benefits exist, that devolved block grants should be adjusted accordingly.
- *Defining what constitutes 'personal care' has been a contentious issue, especially on the question of meals preparation for those receiving personal care.* This is one of the issues which has been dealt with differently by different local authorities, and on which Scottish central government guidance has

been ambiguous. It is one of the matters on which there has been discussion of a postcode lottery in operation *within* Scotland. Through a statutory instrument passed in April 2009, the Scottish government embedded in law the understanding that food preparation is a personal care service. In turn this raised the question of refunds of past charges, which the Scottish Government did not choose to require councils to pay. Though some councils have begun to do so, and others had already made refunds before the change in the law, some councils are still refusing to pay back money. Following a May 2009 decision of the Court of Session upholding the claim of a care recipient for a refund of past meals preparation charges from Perth and Kinross Council, it looks as if all councils may have to follow.

- *The notion of postcode lottery has been applied most, though, to practices of local authorities 'managing demand'.* That is in some way delaying access to FPNC for those eligible for it through de facto waiting lists, or in some cases refusing to provide FPNC by claiming that insufficient funding is available. These are issues which fall directly within the central-local intergovernmental relationship in Scotland. It is clear enough that insufficient funding has been made available (in part because of demand, especially for FPNC at home, which was higher than expected), and both the Auditor General and the Sutherland Review called for more funding to be provided. While the SNP government has agreed to provide additional funding to local authorities (plus an annual inflation adjustment), it is not clear that this has resolved the issue. On the one side, that funding

does not appear to be ring-fenced; as such it may get diverted into other local services, as is entirely possible under the SOA approach, and as the Public Audit Committee of the Scottish Parliament evidently feared in its 2008 Report on FPNC.⁴⁶ On the other, it is not clear that local authorities *in all cases* have been under-funded. Much appears to depend on the effectiveness with which any individual authority delivers policy, but also on what its policies were before FPNC was introduced. If these were more generous, or delivered in areas where many were in any case eligible after means-testing for free care, then there has been less difficulty in adapting spending patterns to FPNC.⁴⁷ Current effectiveness and past policy intervene to prevent the playing field across Scotland from being level.

It is worth dwelling for a moment on the unanticipated demand for FPNC. This applies in part to residential FPNC. But it applies significantly more to FPNC at home: 'It appears that local authorities have reversed the decline in their overall provision of care at home and focused it towards personal care as a result of the introduction of free personal care'.⁴⁸ This growth in home care – one of the original aims of the policy – is very significant. It responds to the concern of most people to retain the independence of living in their own home, and would seem central to a rights-based rather than a service-based approach to policies for older people.

But there may be downsides to the shift to home care under FPNC. One concern is whether other community care services are being cut back as a response to budgetary pressures. This was a trend highlighted in both the Auditor General's and the Scottish Parliament's Public Audit Committee's recent reports on FPNC. So while over 60 per cent of the total home care services

were provided outside of FPNC in 2002–3, the figure had dropped to just 30 per cent by 2005–6, with services such as shopping and cleaning reduced.⁴⁹ It may be that informal care by family members and others has filled that particular gap. Research suggests that informal care at home has not simply been substituted by the growth of FPNC at home, but has shifted from personal care into other forms of informal care.⁵⁰ But in none of these respects is the evidence especially clear or the spillover effects between different types of care well understood. Additional investigation is needed to explore how the balance of care support received by older people is shifting between non-personal home care provided by local authorities, FPNC and informal care.

There are two final notes of concern about FPNC. One is that it is age-discriminatory in being restricted to over-65s. The choice of the age-point of 65 appears arbitrary, and excludes many who have at least equal care needs. The second is that as a flat-rate benefit available to all who are assessed as needing it, whatever their means, it may be considered ‘regressive’, significantly benefiting wealthier citizens who were ineligible for means-tested support before FPNC, and offering little new to poorer citizens who did receive extensive support beforehand. This issue is a normative one, which is perhaps why it plays out differently in England (where means-testing of personal care remains) than Scotland, where there is a more social-democratic consensus in the policy community that is more favourable to universal benefits.

If that is the case then we may be seeing an adaptation of this form of Scottish ‘social democracy’ to one of the features of an ageing population: as the population ages, more people will require personal care for longer; in Scotland there appears to be political will to ensure older people can count on the solidarity of fellow citizens, with the support of the state in Scotland, to get it.

3.4. At-Home Services

The linkage, and apparent spillovers, between FPNC and other ‘at-home’ services points to a characteristic feature of policies on ageing and for older people: they cut across established policy fields and require coordination across them in order to be effective. A successful policy on FPNC does not mean a successful policy for older people if it has negative ‘spillovers’ into other areas. This section explores that possibility of spillover, while also examining other aspects of policies designed to help older people stay, if they so wish, in their own homes.

The starting point is that, typically, ‘older people want to stay in their own home’;⁵¹ ‘older people’s self-respect and feelings of independence can be significantly improved by a feeling that they are in control of their home and housework.’⁵² But for many older people, it can be difficult to remain at home both for reasons of declining health (which can make it difficult for people to care for themselves) and low income (because maintaining and adapting housing may take a disproportionate part of older people’s income). These difficulties can be expected to increase as the population ages and in particular as the numbers of the ‘older elderly’ increases.

Support services can be designed to enable older people to stay at home even with chronic ill-health. FPNC delivered at home is one example. There is also a wide range of other at-home support services. Though local-level services vary, the main Scotland-wide framework for housing-related services has been ‘Supporting People’. This is a UK-wide policy which replaced a number of measures previously available through social security benefits. The Scottish Government administers (and receives UK funding for) the programme in Scotland, and in turn requires local authorities to deliver services on the ground, including assistance with budgeting and benefits, maintaining safety within the home,

support with shopping and accessing other local services, and cleaning.

Supporting People is not restricted to older people, but older people constitute almost half of those receiving services (alongside the homeless, people with physical difficulties, people with mental health needs and others). Eligibility for support is by local authority assessment, and criteria, and therefore the scope of services differs from area to area. Support is means-tested, with local variation in the income threshold at which charges are made (generally, the income from charging is very low). Under the 2007 Concordat with local government, funding for Supporting People was rolled up into the wider local government settlement, and is no longer ring-fenced at the local level. Prior to that, funding allocations were falling, with a rebalancing from support for older people to homeless people and those with learning difficulties.⁵³

This is not an especially positive story, especially when taken together with the evidence reported under the discussion of FPNC that local-level support for non-personal care in the home has fallen back. The removal of ring-fencing in the area since 2007 may accentuate this trend, especially as there is no National Outcome or National Indicator focused on at-home support services. There is clearly a need to monitor the scope and funding for programmes at the local level, not least in view of the Scottish Government's own finding that 'investment in housing support services more than pays for itself by the savings generated elsewhere, notably on community care and NHS budgets.'⁵⁴ There is perhaps a danger that the priority given to FPNC as a policy flagship has negative spillovers for policies and funding elsewhere.

A rather more positive recent and related development is the emergence of 'telecare' technology, that is the use of 'assistive technologies' in the home, including personal alarms, smoke and flood detectors,

temperature gauges and intruder alarms, managed through a home alert console which can be programmed to contact support services or, at a lower level, neighbours or carers. There have been a number of local level initiatives, notably in West Lothian, which has made 'telecare' available to anyone over 60 assessed as needing it due to illness, vulnerability or other risk factors.⁵⁵ User evaluations suggest that older people are generally satisfied with the service, and that users have made fewer calls on home care, residential care or NHS services, whether through hospital admission or GP visits.⁵⁶

A Scottish Telecare Strategy for 2008-10⁵⁷ proposed to build on these experiments and to move forward to a general availability of telecare services for those who can benefit from them. As yet, though, only modest funding has been allocated. A much more significant investment would appear to be needed to reap the benefits, both for individuals with more personalised care packages, and in reducing the level of demand for other, in the long run, more expensive services.

There is a wider question about the 'fitness for purpose' of the housing stock for the particular needs of older people. Telecare is one approach to adapting housing for older people to purpose. Another, more fundamental one, is sheltered or extra-care housing. There are around 1,200 sheltered housing schemes in Scotland with around 36,000 dwellings, and 145 extra care housing schemes (which have more extensive support packages) with over 3,700 dwellings.⁵⁸ The central purpose of these schemes is to enable older people to have physical infrastructure and domestic support services general purpose housing cannot deliver, so that they can keep an independent home rather than moving into residential care. Sheltered and extra care housing is provided mainly by local authorities and housing associations, with some private sector schemes.

Sheltered and extra care housing stock has accumulated fairly erratically since the 1970s.⁵⁹ Some of it appears ill-suited to older people's needs, particularly older couples, especially for reasons of small size of units and difficulties of access for people with reduced mobility. There are often, as a result, difficulties in letting available sheltered housing. There are also diverse approaches to, and scales of, charging.

Despite these problems, demographic change suggests that demand for sheltered housing is likely to grow, with survey evidence suggesting that those who decide to live in sheltered housing schemes like to do so.⁶⁰ This suggests a need for a more strategic approach to the provision and funding of, and managing the demand for, sheltered housing, whether at a Scotland-wide level (which the Scottish Government's review of sheltered housing rejected⁶¹) or at local level, where integration of sheltered housing provision with other social care and health services might more easily be achieved.

Other aspects of at-home services are those to do with building adaptation and maintenance of general purpose housing. Some of these services – especially those to do with heating – are addressed in the next section on fuel poverty. The issue at stake is typically one of cost. If older people need to adapt their houses to make them age-proof, the cost may be prohibitive given the low income levels many of them have. More routine maintenance may also carry prohibitive costs. Without financial support, people may feel constrained to move out of their home, even if they would rather remain.

The main policy instruments for offering such support are 'Care and Repair' services, which are funded through the Private Sector Housing Grant made by the Scottish Government to local authorities. The services – available across almost all of Scotland – help arrange repairs and improvements, installation of equipment

and adaptations (including home security measures) and provide registers of reliable tradespeople. Again there is evidence of positive spillovers, for example in reducing delayed discharge or preventing hospital admission in the first place, and enabling people to stay in their homes rather than move to residential care.⁶²

But once again, the level of ring-fencing attached to Care and Repair funding has been reduced. Though allocations through the Private Sector Housing Grant have in this case risen significantly, Care and Repair services are no longer directly ring-fenced, though local authorities still have a 'duty' to adequately fund them.⁶³ It is not clear how stringent that 'duty' is. Funding for at-home services would appear, again, to be vulnerable to other competing local-level demands. Since various studies suggest that the provision of at home services repays through fewer demands elsewhere on the public purse, this (alongside evidence that Supporting People and other community care funding is being reduced) would appear an odd situation.

This situation certainly seems to suggest a need for a more holistic view across Scottish Government, local authority and NHS budgets capable of modeling 'spillover' effects more fully, and informing policy on that basis. That holistic view appears all the more urgent given the additional demand for at-home services that is likely to accompany the growth of 'older elderly' age groups; it is not clear from the current direction of policy that these needs are likely to be addressed, or that the older individual more likely to need at-home services at higher intensities, is being foregrounded in policy thinking.

3.5 Fuel Poverty

After FPNC, measures to tackle fuel poverty have been perhaps the highest profile policy targeted on older people in Scotland. That

profile reflects two generic factors and one Scotland-specific one: older people are more vulnerable to ill-health related to cold; older people often spend large proportions of their income on heating; and Scotland is, on average, colder than the rest of the UK, compounding the first two points. These factors lay behind an ambitious commitment made by the then Scottish Executive in 2002 to eradicate fuel poverty (defined as spending more than 10 per cent of household income on fuel) by 2016.

By this measure, 756,000 Scottish households lived in fuel poverty in 1996. Though this figure had fallen to 293,000 households by 2002, it has risen consistently since. In 2007 586,000 households were estimated to be fuel poor.⁶⁴ Of the 190,000 single pensioner households, over 50 per cent were fuel poor, along with around two-fifths of pensioner couple households.⁶⁵

There is an additional issue which relates to the higher proportions of pensioners in rural than urban areas in Scotland. There is both a bigger proportion of detached residences in rural areas, which are harder to heat, and many rural areas are off the UK gas grid, and rely on more expensive heating fuels. 37 per cent of rural households were fuel poor in 2007, as compared with just over a fifth of urban households; and around 38 per cent of households not on the gas grid were fuel poor, compared to 24 per cent among those on the grid. Fuel poverty is one field in which rurality compounds the challenges facing older people, and links to themes discussed in the next section on transport.⁶⁶

These are disturbing figures, and show that the target of eradication of fuel poverty by 2016 is most likely not achievable (the SNP Government elected in 2007 has tellingly given prominence to the caveat attached to the initial target that this was something to 'pursue as far as reasonably practicable'⁶⁷). It is most likely not achievable because few of the means of addressing fuel poverty are within the responsibility of the Scottish

Parliament. The Scottish Government identifies three such means: improving the energy efficiency of housing in Scotland; regulating fuel prices; and influencing household incomes. Only the first of these lies with the Scottish Parliament. Fuel prices are a function of international market conditions, and in part influenced by UK-level taxation. And income levels are in part a function of the general economic situation and, for groups like pensioners, of UK-level social security decisions about pension and benefit levels.

Energy efficiency has consistently increased in recent years in Scotland, in principle reducing average energy usage. But at the same time energy costs have risen, easily outweighing energy efficiency gains. Even the most recent fall in energy prices – which was slow to work its way through to consumers – led to no significant reduction in fuel poverty. The Scottish Government's 2008 Review of Fuel Poverty estimated that an 80 per cent reduction of fuel prices from 2006 levels would be needed to reduce fuel poverty by 80 per cent. Equally, boosting the incomes of the fuel poor to eliminate fuel poverty, even if the Scottish Government had the power to do so, would consume 10 per cent of its budget, an unfeasible transfer of resources from other programmes.⁶⁸

Against this background the SNP Government decided to review its policies within the limits of what it can feasibly do. This meant in part a focus on ensuring uptake of relevant UK benefits, including – for older people – income-related benefits such as Income Support and Pension Credit, but also specific measures such as (means-tested) Cold-Weather and (general) Winter Fuel Payments. There was a supplementary focus on ensuring Scottish policies were better synchronised with UK-level policies to work with energy providers to address fuel poverty and improve energy efficiency.

But it also meant reviewing established energy efficiency programmes for their cost-effectiveness in terms of addressing

fuel poverty. These were the Central Heating Programme, targeted on pensioners to install or, increasingly, upgrade (to more fuel efficient) domestic central heating systems, and the Warm Deal Programme which offered grants, including to pensioners, to upgrade domestic insulation.

Though popular, both programmes were abolished by the review. The CHP was criticised as having become ‘in effect a programme to provide free central heating systems to pensioners, regardless of their fuel poverty status’.⁶⁹ It had been targeted on pensioners as the group of people most likely to suffer fuel poverty, but by being universal in its application among pensioners had effectively renewed the central heating of fuel rich and energy efficient pensioner households while excluding the non-pensioner fuel poor. Warm Deal, which offered grants of up to £500 for pensioners and other benefit recipients (and smaller grants for those not on benefits), was also not well-targeted on the fuel poor, with only around one third of recipients meeting the technical definition of fuel poverty.⁷⁰

These concerns were underlined by the way in which the inherited fuel poverty measure – spending more than 10 per cent of household income on fuel – mapped onto the SNP Government’s wider poverty

measure of household income at less than 60 per cent of median UK income. The Government’s concern was to focus fuel poverty measures more rigorously on those who were income poor, recognising that this would shift resources, for example to single parent households and away from pensioner households which may be fuel poor but are not income poor.

Following its reconvening in 2008, the Fuel Poverty Forum, which includes organisations focused on older people, produced a report⁷¹ which called for earlier programmes to be replaced by a new Energy Assistance Package from April 2009. This has four stages (Box 6), commencing with a one-stop-shop phone-line whose advice may lead, second, to a benefits check to ensure better take-up both of UK-level benefits and of measures to reduce bills (by accessing social tariffs, or switching providers or meter-type). Stage three is an equivalent to Warm Deal, but better synchronised with the UK Government’s mobilisation of energy companies to co-fund energy efficiency measures under the Carbon Emissions Reduction Target. Stage four is an equivalent to the Central Heating Programme, but now targeted at central heating installation (not renewal) and a wider range of groups than pensioners.⁷²

Box 6: The Energy Assistance Package

- Stage one offers free expert energy advice
- Stage two provides benefits and tax credit checks and advice on low cost energy tariffs to those at risk of fuel poverty.
- Stage three provides a package of standard insulation measures (cavity wall and loft insulation) to older households and those on one of a range of benefits.
- Stage four offers a package of enhanced energy efficiency measures to those who are most vulnerable to fuel poverty.

The effect of these measures is twofold. The first is to get better value and financial support from UK programmes, in particular by encouraging benefits take-up, and in that way to 'join up' fuel poverty strategy across jurisdictions. The second – in contrast to FPNC – to de-universalise the support pensioners previously had and to target support more effectively on a differently defined group of income-poor which overlaps only in part with those defined as 'fuel poor'. This may be justifiable if the Central Heating Programme and Warm Deal were in effect subsidising insulation and new heating systems for affluent older people. But careful attention will need to be paid to whether some older people facing particular disadvantages – for example those in rural areas – receive equivalent and adequate support under the new arrangements.

3.6. Transport

The question of different needs among different groups of older people is one which is especially clear in the field of transport. There are two transport policies focused on people in later life:

- The Concessionary Travel Scheme for elderly and disabled people introduced in April 2006 (and confirmed by the SNP Government in 2007), which offers free bus travel to those aged 60 or more at any time on any day across the whole of Scotland (and connecting to Carlisle and Berwick-upon-Tweed in England). The scheme is funded by payments by the Scottish Government to bus operators. It extended earlier schemes restricted to off-peak and local services. The equivalent English scheme is still restricted to off-peak and local services.
- Demand Responsive Transport Services focused on older people

who have difficulty in accessing the concessionary scheme because of location (in particular rural areas where the frequency or availability of bus services is limited) or of physical condition (where people are unable to walk to bus stops or use standard bus services because of frailty or disability). The scheme is delivered by local authorities from within the grant funding received from the Scottish Government.

The Concessionary Travel Scheme has generally been viewed positively, and despite it costing more than anticipated, the Scottish Government has committed to retaining it on the current basis for older people (and to extend it to armed forces veterans under 60). One of its key aims is to help combat social exclusion by enabling older people to maintain their independence (for example accessing shops, services and leisure facilities) and social networks (for example keeping in contact with family and friends).

At a general level the Concessionary Travel Scheme appears effective. It has high take-up; even at age 85, 75 per cent of people take up their concession (that is, apply for their concessionary pass). Studies have shown that lower income groups gain greater improvement in their quality of life from the concession, and use it frequently. By contrast higher income 60+ groups claim that the concession has virtually no effect on their quality of life. But this does not mean that lower income groups are the main beneficiaries of extending the concession in 2006: 'the larger effect has been one of stimulating pass take-up and thus bus use among wealthier pensioners, albeit at a lower number of trips per person than their poorer counterparts'.⁷³ Similar to FPNC, the Concessionary Travel Scheme might be criticised as extending a subsidy to those affluent enough to pay for services themselves.

There are two other dimensions of

differential use of the concession. The first has to do with rurality: there is a clear relationship of concession take-up and frequency of local bus services, with higher take-up at higher service frequencies.⁷⁴ To put this another way, the concession can be only of limited use to older people in rural areas with infrequent bus services.

The second has to do with the physical ability of those eligible for the concession to actually take it up. This ability – and therefore take-up – ‘declines markedly’⁷⁵ among the over-85s. As Rye and Mykura conclude, ‘there are large parts of the population for whom the concession is of very limited use since they face barriers to bus use other than cost ... the concession therefore does very little to increase their social inclusion’.⁷⁶

For both groups – the rural elderly and the older elderly – Demand Responsive Transport (DRT) schemes provide a limited alternative. Often run by voluntary groups, and subsidised by local authorities, DRT schemes are estimated by the Community Transport Association to supply 2.4 million journeys annually. The concern the Association has forcefully put is that these are fee-charging services.⁷⁷ So older and frailer people, and those living in rural areas often have to pay for their transport while other younger and urban elderly people do not. This can be an especially inequitable issue for those with lower incomes, who may need to restrict their usage of DRT to essential medical visits; in those circumstances such people do not get the same social inclusion benefits as those with access to free transport.⁷⁸

These equity issues are compounded by what the Mobility and Access Committee for Scotland calls a ‘postcode lottery’⁷⁹ in which the availability and cost of DRT services varies by local authority. The scope for variation has, again, been increased by the reduction of targeting and ring-fenced funding streams in the 2007 Concordat with local government. It is worth quoting the

responsible minister, Shona Robison MSP, on this point when asked by the Scottish Parliament Equal Opportunities Committee whether the Scottish Government was committed to retaining DRT services ‘particularly in rural areas’:

Although that has been rolled up as part of the concordat with local government, I am very much of the view that local authorities will want to deliver that service. Many of them already do so very well; others could learn from best practice elsewhere about how to develop those services. In many local authorities in rural areas, the services are already quite far developed, but it is up to local authorities to develop and maintain the services at a local level as part of the local government settlement.⁸⁰

This is something of a stock response. It may well be that local authorities wish to deliver particular services, but it is clear that they also have to deliver a range of services, and different places will reach different judgments on the right balance to strike. This is another field that will require monitoring, but – with the urban well-off receiving free travel and the rural poor having to pay – it seems badly set to deliver the aspiration of equality of citizenship which appears to underlie Scottish Government strategy on ageing and older people.

3.7. Employment

One of the themes flagged prominently in *All Our Futures* is the employment of older people, including a call for greater flexibility in the transition from employment to retirement and the extension of vocational learning to older people – a genuinely *lifelong* learning. Some of the concern for employment policies more attuned to older people reflects the economic imperatives of demographic change: as more people

get older, shortages of skills and experience in some areas may emerge; and as more people get older, the pensions gap grows, leading to adjustments of state pensionable age and the need for some people to work longer to maintain income levels.

There are also a range of other factors behind the attention given to older people’s employment that reflect understandings of equality of citizenship (employment counters social exclusion) and well-being

(working longer is associated with ‘longer life expectancy and better health in old age’). These policy drivers have some reflection in data on employment of older people. The average age of retirement has increased in Scotland since the mid-1990s, and older people’s activity rates in Scotland have risen and are significantly above the EU average (though less than the UK average).⁸² There is, though, a significant drop-off at state pensionable age (see Table 5).

Table 5: Economic Activity Status of Older Workers

Age	% in employment	
	Men	Women
25-49	87.6	78.0
50-state pensionable age	71.3	69.9
60-64		27.8
65-69	15.8	9.8
70+	6.5	2.6

Source: Wendy Loretto and Phil White, *Older Workers in Scotland: A Review of Policy and Practice*, Age Concern Scotland (2008), p. 2.

What there does not appear to be is a consistent policy strategy to maximise the benefits of later and more flexible economic activity among older people, both for their own and wider social benefit. This may be in part because many of the policy levers in employment policy and on the pensions and benefit issues that intersect with employment policy are held at UK level. But neither is there an especially consistent or focused approach in Scotland. *All Our Futures* may have had a high-level vision on the benefits of older people’s employment, but it presented little of substance to add to the vision in its implementation plan.

Indeed, most employment-related policies since devolution have focused on younger people (e.g. the 2003 Lifelong Learning Strategy for Scotland), the recruitment of migrants to the Scottish

labour market (Fresh Talent), or policies focused on increasing the employability of disadvantaged groups (Workforce Plus: An Employability Framework for Scotland). In some of these, older people are among the target groups but are in no cases central to the policy concerned: ‘there was much less emphasis on policies for the employability of older people’.⁸³

Equally, employer perspectives too seem to be focused on other groups, in particular younger and migrant workers, even though there are complaints in the private sector that specialist skills are lost as older workers retire. Scottish employers are less likely than their counterparts elsewhere in the UK to have strategies focused on recruiting or retaining older workers.⁸⁴ Nor do they appear to have clear and consistent policies on retirement and flexible working.⁸⁵

This is not a terribly encouraging picture, and though the Scottish Government itself has introduced new practices on retirement and flexible working for its own employees, and similar examples exist elsewhere in the Scottish public sector, there appears to be little systematic attempt to use these examples as a lever for change in the private sector or for them to be mainstreamed across Scotland's local authorities.⁸⁶ In this field at least, there appears to be a striking gap between vision and implementation.

4. Implications for Scottish Public Policy

The discussion above of policies for older people in post-devolution Scotland presents a mixed picture. On the one hand there has been a concerted attempt, set out forcefully in All Our Futures, to reconceptualise policy as enabling older people to enjoy equality of citizenship rather than simply delivering services to them, or portraying them as a burden to be managed. In some fields – notably FPNC, but also aspects of at-home services and public transport – policy developments have had real enabling effects, often of a scope wider than that available elsewhere in the UK. In others, progress has been less far-reaching, either because of budget or inter-governmental coordination issues, or – as on employment – because policy action has lagged some way behind policy rhetoric.

There are a number of implications, looking across these cases, that can be drawn out, and that may be useful in shaping future policy directions.

The first concerns the UK-devolved interface that arises from overlaps of functions at UK and devolved levels. In general that interface works well enough, perhaps rather better than media headlines on intergovernmental disputes would suggest. This report has pointed to three ways in which it might be improved:

1. The framework for Scottish policy on equality under development by the SCHR and FPNC points to possibilities of providing additional services or benefits above the provision made by the UK Parliament for England (and sometimes England and Wales). These examples suggest a model that might, resources

allowing, be replicated in other policy fields, either within the bounds of the current devolution settlement or (as suggested by the Scottish Government's White Paper *Choosing Scotland's Future*) in areas currently reserved to Westminster, like social security benefits.

2. There is an onus on the Scottish Government to ensure that Scottish citizens take up the UK-level benefits due to them. The new fuel poverty strategy is perhaps a test case for this approach, which has seen a 'made in Scotland' policy explicitly recast so it meshes better with UK policies, and brings to Scotland more benefit from them.
3. There needs to be a more nuanced and less politicised debate on the funding implications of Scottish

policies which shift the interface in Scotland with UK-wide social security benefits. As the Sutherland Review of FPNC suggested – and as now appears to be a consensus view across the political parties in Scotland – if changes in policy remove eligibility in Scotland for UK benefits, common sense suggests that consequent savings to the UK Treasury should be re-allocated to the Scottish block grant.

A second set of implications has to do with Scottish Government-local government relationships. This report has set out concerns in a number of fields – social care/ at home services outside of FPNC, care and repair services, demand responsive public transport – that what is delivered to citizens varies (too much) from place to place. The 2007 concordat has dramatically widened the scope for such variations. There is a clear need in the coming years to monitor how the concordat and Community Planning Partnership SOAs in practice deliver outcomes for older people. It may be that policies for older people require greater protection in the Concordat or a successor agreement. That need may grow as public sector funding flowing from the UK Government to Scotland, and then to local authorities, is likely to be significantly tighter in the coming years than in the first post-devolution decade.

A third set of issues has to do with the SNP Government elected in 2007. The constitutional issue aside, the SNP has not brought a substantially different ideological approach to government in Scotland. It has generally taken forward and changed only incrementally earlier policies, including the former government's *All Our Futures* strategy. And, of course, it has to work within the constraints of parliamentary arithmetic. But in some respects it has acted more purposefully to review and change policy than its predecessor, especially on FPNC, but also on fuel poverty, the area which has seen perhaps the most

substantive policy change. There is a question mark, though, about how policies for older people 'rank' alongside competing policy fields in the Government's Strategic Objectives. There is a strong case for arguing that policies for older people should have unambiguous priority towards the top of the Government's hierarchy of objectives.

A final set of issues has to do with the commitment to an enabling, individualised approach to older people, which recognises and underpins their equal citizenship. That approach is clearly enough expressed at a strategic level in *All Our Futures*. But there appear to be some implementation gaps that should be addressed:

1. One concerns the implementation roles of local authorities, some of which too easily slip into the language and mentality of delivering services to passive recipients, rather than emphasising the empowerment of individuals.
2. A second has to do with 'spillovers': there may be a clear policy thrust on independent living and social inclusion in FPNC, at-home services, and public transport, but this may be hedged by trade-offs in what local authorities feel able to prioritise and fund and may lead to cutbacks in other policies that have benefited older people. Those trade-offs may become more acute in an era of lower public spending.
3. A third issue concerns the diversity of 'older people'. This report has drawn attention to differences in context and need between older people in urban and rural settings, between the younger old and the older old, and more generally between wealthier and less wealthy older people. A commitment to equality needs to address diversity; one-size-fits-all policies are not always appropriate. There is perhaps

a challenge here – or at least a greater need – to justify universalist policies. Is it right that all people over 60 – including wealthy ones – get concessionary bus travel when people who may need transport services more (for example, frail older people, people in rural areas) have to pay for demand responsive transport? Is it right that all income groups should have access on the same terms to FPNC? If it is legitimate to target policies in some areas, like fuel poverty, onto the most disadvantaged, why is it not in other areas?

The latter set of issues – crudely, universalism versus targeting or means-testing – is likely to take on a higher profile as public sector resources become squeezed following the recession. The choices made between them may come to require better justifications than they have had so far.

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